

January 2007

The following report is the Task Force's report to the Coordinating Board.

The Coordinating Board used this study as the basis for its own report to the 80th Texas Legislature.

The report submitted to the Legislature was a more consolidated version of the Task Force's study, excluding much of the background information and including a small number of substantive differences

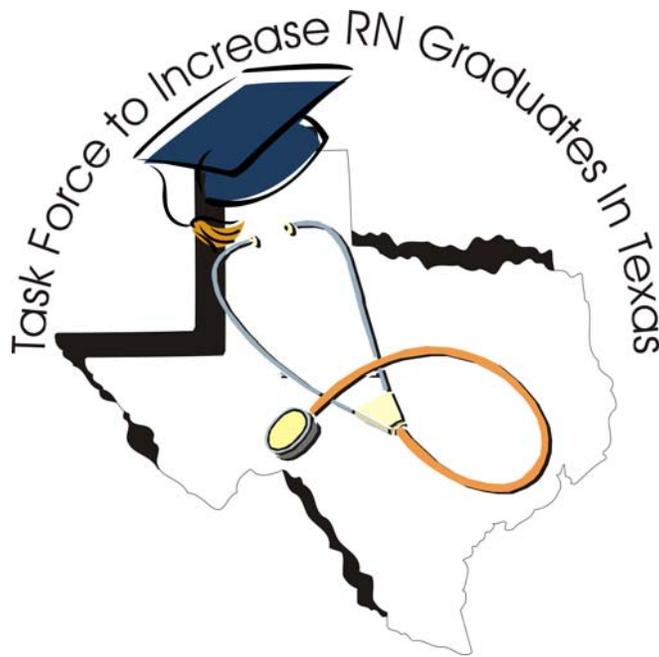
A reader may wish to review both reports in order to fully understand the work of the Task Force and the focus of the recommendations presented to the Texas Legislature on nursing student retention issues.

INCREASING RN GRADUATES IN TEXAS

A Report to the 79th Legislature

by

The Task Force to Increase RN Graduates in Texas



October 2006

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Executive Summary

The 79th Legislature directed the Texas Higher Education Coordinating Board (THECB) to identify, develop, and study strategies for increasing graduation rates from initial licensure registered nurse (RN) programs in the state and determine which of those strategies are effective. This report is the THECB's response to that directive.

The THECB formed a nine-member Task Force to study the issue and examine data available from the THECB, the Board of Nurse Examiners for the State of Texas, the Texas Center for Workforce Studies, nursing programs in Texas, and published literature. The Task Force's major findings are:

1. To meet the increased demand for new RNs means that nursing programs need to increase the total number of full-time-equivalent (FTE) faculty positions by 54% by 2010.
2. 70% of faculty currently employed in nursing programs (about 1,250 faculty) will reach retirement age within the next 3 to 15 years.
3. Only about 31 of the 634 nurses who annually complete graduate degree programs (master's or doctoral) are prepared to assume faculty roles in nursing programs. The majority of graduates are prepared to assume advanced practice roles
4. Compensation packages (primarily salaries) in clinical and private-sector settings lure current and potential nurse educators away from teaching.
5. To maintain enrollments, nursing programs are employing advanced practice nurses. These nurses have no formal preparation in the instructional competencies needed by faculty and typically teach part-time.
6. During the past 5 years, full-time faculty positions have decreased by 9.5% while part-time positions increased 32%. To maintain program quality, full-time faculty have taken on the additional work of updating the curriculum, integrating technology, and ensuring that students receive the academic services they need to be successful. As they can, they mentor part-time faculty.
7. To meet the projected demand for RNs, the number of graduates from initial RN licensure programs must increase by 50% by 2010.
8. The pool of qualified applications for admission into nursing programs is three to four times larger than the number of seats available in nursing programs

9. In 2005, nursing programs graduated 6,399 students eligible for initial licensure as RNs. This was a 13% increase over the number graduating in 2004.
10. In 2005, the graduation and persistence rate for nursing programs was 69%.
11. The major barrier to successful completion for students in nursing programs is financial.
12. Even though the majority of students receive some form of financial aid (to cover tuition and fee costs), most need to be employed to cover living expenses, transportation, child care costs and to have health benefits for themselves and their families.

Conclusions

A substantial investment in preparing, recruiting, and retaining faculty in nursing programs is needed **NOW**. Without large and significant increases in the number of faculty to teach in nursing programs the shortage of new RNs will sharply increase. Without adequate numbers of nurses to care for healthy, ill, and recovering Texans the consequences are predictable. More Texans will die, more will suffer unnecessarily, more will go without care, more will seek expensive medical interventions and the cost of care will continue to escalate.

Nursing programs can probably make small increases in the number of graduates by streamlining administrative processes (regionalizing admission processes); formalizing assessment and referral programs (screening students early and often to identify those at risk for not completing the program, and providing or referring to appropriate help); providing resources to expand instructional capabilities (simulation centers; on-line courses); and creating financial aid packages that meet students' monetary needs (developing cooperative "learn-earn" programs with healthcare employers). Each of these strategies requires investment of funds and faculty time and effort with a relatively low return on investment. Individually and collectively, they are insufficient to achieve the 50% increase in graduates from RN initial licensure programs needed to meet demand.

STRATEGIES (High priority strategies are shaded)	ACTION TO BE TAKEN BY					
	Legislature	THECB	Educational Institutions	BNE	TCNWS	Health Care Industry
1. Increase the number of Nursing Faculty						
A. Increase salaries of nursing program faculty so that they are competitive with those in the healthcare industry.						
1) For all newly appointed nursing faculty set starting salaries for Master's prepared faculty at a minimum of \$50,000.00 and faculty with a PhD a starting salary of \$65,000.00 for a 9-month contract.	X	X	X			
2) For all faculty currently employed in nursing programs who are not making the above minimums, increase their salary to the above minimum.	X	X	X			
B. Fund stipend programs for graduate study in nursing education to students who agree to full-time study and a post-graduation 3 year commitment to be employed as a faculty member in a nursing program in Texas. 1 st year stipend level will be \$40,000.00 with a 3% increase for each subsequent year up to 3 years. Fund 50 during the Biennium.	X	X	X			
C. For faculty who are not prepared in the Nurse Educator Role, fund 15 semester credit hours of coursework in: Teaching, Evaluation, Curriculum Design, Methodologies, and related courses. These courses may be taken through regular academic programs or online programs through such courses provided by the National League of Nurses (NLN) and the Southern Regional Education Board (SREB). With an approximate fee of \$700.00 per course (3 semester credit hours). For the biennium fund 400 persons.	X	X	X			
D. In addition to the Professional Nursing Shortage Reduction Program, fund programs for increases in graduates with preparation in the nurse educator role	X	X	X			

STRATEGIES (High priority strategies are shaded)	ACTION TO BE TAKEN BY					
	Legislature	THECB	Educational Institutions	BNE	TCNWS	Health Care Industry
2. Increase the number of Graduates						
A. Streamline administrative processes:						
1) Ensure that every nursing program seat is filled with the most qualified student.			X			X
2) Establish a regional admission center(s)		X	X	X		
3) Develop a standardized minimum data set for admission variables for application to all nursing programs in Texas.		X	X	X		
4) Establish a standardized minimum data set that supports evaluation and best practices in nursing programs.		X	X	X		
5) Establish a standardized program completion formula.		X	X	X		
B. Target as the benchmark for excellence in nursing programs, a program completion rate of 85%						
1) Identify best practices for identifying students at-risk for not completing the program.			X			
2) Identify best practices for helping those who have been identified for being at-risk to stay in the program and to graduate.			X			
3) Conduct an annual student success conference to showcase and highlight best practices.		X		X		
4) Publicly recognize nursing programs that achieve the standard of excellence.				X		
5) Establish a mechanism for funding education studies on interventions that enhance student success.		X				

STRATEGIES (High priority strategies are shaded)	ACTION TO BE TAKEN BY					
	Legislature	THECB	Educational Institutions	BNE	TCNWS	Health Care Industry
2. Increase the number of Graduates						
C. Provide resources to expand instructional capabilities						
1) Have yearly regional workshops to highlight innovative instructional strategies in nursing education.		X		X		
2) Continue to develop new, accelerated, and alternate entry degree options.		X	X	X		
3) Promote innovation in nursing education through the regionalization of common instructional functions, interdisciplinary instruction, pooled or shared faculty, and new clinical instruction models to maximize the use of existing resources and faculty.		X	X	X		
4) Establish a task force to study ways in which the healthcare industry can partner with nursing programs to increase the number of RN Graduates in the workforce.		X	X	X	X	X
D. Enhance and expand financial aid packages						
1) Establish a task force to develop financial aid packages that cover tuition and fees, living expenses, and healthcare coverage for students.		X	X	X	X	X
2) Develop cooperative “learn-earn” programs between nursing programs and the healthcare industry.			X	X		X

Background

Nurses are frequently the most visible health care practitioners in a hospital, school, home, or long-term care facility. Registered nurses (RNs) constitute the largest health care occupation, holding 2.3 million jobs in the United States. According to the Board of Nurse Examiners (BNE) Texas has 149,948 RNs residing and practicing in the state as of September 2006. Texas RNs are mostly female (91%) and white (75%). They have a median age of 47 and the median age is increasing at a rate reported to be more than twice that of all other occupations. Approximately 64% of the state's RNs work in hospitals, home health care settings (5%), or physicians' offices (5%).

In recent years, Texas, like many states, has experienced a well-publicized nursing shortage. Contributing factors impacting the nursing shortage (both state and nationally) include:

- Enrollment in nursing programs is not growing fast enough to meet the projected demand for nurses over the next ten years.

According to a 2002 report by the Bureau of Health Professions (BHP), to meet projected demand, the current supply of nurses in the United States would have to increase by 57% by 2010.

The same report projects that by the year 2010, Texas will be short 25,000 nurses. By the year 2020, Texas will be short 52,000 nurses. Supply is expected to grow by 26% (from 2000 to 2020).

Based on BHP figures, in 2010 Texas will need to graduate 10,072 new RNs to keep up with demand; a 57% growth.

- A shortage of nursing school faculty is restricting nursing program enrollments.

According to the American Association of Colleges of Nursing's (AACN) report on *2005-2006 Enrollment and Graduations in Baccalaureate and Graduate Programs in Nursing*, 32,617 qualified applicants to entry level baccalaureate programs were not accepted in 2005 (based on responses from 432 schools). Almost three quarters (73.5%) of the nursing schools responding to the 2005 survey pointed to faculty shortages as a reason for not accepting all qualified applicants into entry-level nursing programs.

According to a BNE report, data for years 2001 through 2005 indicate, on average, 1 faculty member for every 3 to 4 graduates. To graduate 9,717 new RNs by 2010, Texas will need to increase faculty positions by 54%.

- With fewer new nurses entering the profession, the average age of the RN is climbing.
- The total population of registered nurses is growing at a slow rate.
- Changing demographics signal a need for more nurses to care for our aging population.
- Job burnout and dissatisfaction are driving nurses to leave the profession.

In response to the current and projected need for RNs, the THECB has determined that increasing the number of RN graduates is of sufficient importance to make it a specific target for success in *Closing the Gaps by 2015: The Texas Higher Education Plan*. It also published the report, *Increasing Capacity and Efficiency in Programs Leading to Initial RN Licensure in Texas* in July 2004 which examined the state's ability to produce enough nurses to respond to the state's nursing shortage. From that report and others produced by Texas Center for Nurse Workforce Studies (TCNWS), public officials obtained more information about the complex issues surrounding the supply of, and demand for, nurses in Texas.

In recent years, several legislative initiatives such as the Dramatic Enrollment Growth Fund and the Professional Nursing Shortage Reduction Program have provided incentives for nursing programs to increase their enrollment capacity. In the short-term, nursing programs have responded to this new source of funding by increasing total enrollments by 28% in the last four years. However, evidence now shows that programs have reached capacity given the limited number of new and replacement faculty available to teach in initial licensure program.

To meet the projected demand for RNs to care for the citizens of Texas, not only must enrollment capacity continue to expand, but efforts must also be directed to insure that qualified students admitted to nursing programs across the state, complete these programs in a timely, efficient manner, and are prepared to pass the state licensing exam so they may enter the RN workforce.

Origin and Scope of the Study

Senate Bill 132 (79th Legislature) directed the THECB to identify, develop, and study strategies for increasing graduation rates from initial RN licensure programs, and to recommend strategies for increasing graduation rates in these programs. The charge is included as Appendix A.

To defray the costs of that effort, the Board committed Nursing Innovation Grant Program (NIGP) funds to support the study. As part of that commitment, the Board sought to employ through a grant competition one nursing faculty member from each of five regions of the state (Appendix B) and one data director, to conduct the study and to

coordinate and lead data collection efforts, analyses, and implementation of recommendations. The Task Force to Increase RN Graduates in Texas (Task Force), as it came to be known, also included representatives of the Texas State Department of Health's Texas Center for Nursing Workforce Studies (TCNWS), the Board of Nurse Examiners for the State of Texas (BNE), Texas Nurses Association (TNA), and the THECB. Appendix C lists the members of the Task Force.

The scope of the study was limited to "initial licensure nursing programs" which are defined as "Diploma, Associate degree (ADN), and Baccalaureate degree (BSN) programs that prepare students to take the national licensure exam to become registered nurses." Because there are only two diploma programs in the state, both of which are private programs, they were not included in this study.

Study Methodology

The Task Force's work encompassed three major activities. The first activity was to update the 2004 report, *Increasing Capacity and Efficiency in Programs Leading to Initial RN Licensure in Texas*, to make it more relevant to the objective of this study.

The second activity was to answer the question: "What are 'program completion' rates of initial RN licensure nursing programs?" To answer the question, the Task Force collected student enrollment data from the nursing programs and compared the data against THECB student records to calculate "on-time" program completion rates and persistence rates. The student data were also used to look at the impact of financial aid on student success and other student demographics. The results of that activity are included in the section "Graduation Rates of Nursing Programs" (p.24).

The third activity was an attempt to answer the question: "What are the characteristics and practices of students, faculty and administrators in initial RN licensure programs that affect student success?" To answer the question, the Task Force collected data from questionnaires distributed to program administrators, faculty teaching in, and students graduating from, initial licensure programs. The survey instruments and summaries of responses from each surveyed group are included in Appendices D, E, and F. The results of that activity are included in the section "Practices that Affect Student Success" (p. 27).

As a result of these activities, the Task Force formed conclusions and recommendations for implementing strategies to improve student success in initial RN licensure programs. That information is included in the section, "Conclusions and Recommendations" (p. 33).

An Overview of Nursing Education in Texas

The majority of initial licensure programs consist of two "tiers" in that a student takes a minimum of one to two years of general academic or non-professional courses, and during that time completes a separate application to the "nursing program." It then

takes a minimum of two years to complete the nursing course sequence required for graduation and initial licensure. Because of the sequential nature of nursing courses, students can only begin the nursing program in a certain term, and must complete the courses as scheduled in subsequent semesters. This leaves virtually no opportunity for part-time study, and if a student has to drop out of the sequence due to academic, personal, or family-related reasons, it usually takes a minimum of one year to be “readmitted” to the sequence, and that is usually on a “space available” basis.

The large majority of initial licensure programs also incorporate a “mobility” track for Licensed Vocational Nurses (LVNs) seeking initial RN licensure. These “tracks” usually include a “bridge” course which upon completion, gives “credit” for a specified number of initial licensure courses, and then the LVN-transition student becomes a part of the initial licensure student cohort completing the remaining courses. With an estimated 61,581 LVNs residing in the state, LVN-RN transition options would appear to be a significant way to increase the number of RN graduates. However, this mobility option has been limited, in large part due to the lack of qualified faculty.

Another mobility option has recently become available in a number of universities and academic health science centers. This normally “accelerated” option targets baccalaureate graduates in another discipline who are interested in obtaining initial RN licensure. Again, this seems an optimum cohort from which to increase the number of RNs in the state, however the expansion of these accelerated tracks is limited due to the lack of qualified faculty.

Types and Locations of Initial RN Licensure Programs

Texas has three major types of educational programs leading to initial RN licensure. They are:

1. Diploma Programs – traditionally require three years of study at a single-purpose school. In Texas, the state’s two diploma programs are administered by hospitals. Diploma programs were not included in this study.
2. Associate Degree Programs (ADN) – previously referred to as “two year nursing programs” now traditionally require one year of academics (non-professional courses) and two years of nursing courses. The vast majority of the state’s associate degree programs are located in community colleges.
3. Baccalaureate Degree Programs (BSN) – traditionally require four years of study. The nursing curricula usually take place during the last two years at a university, or academic health science center.

Table 1 gives information about the number of each type of program and the percentage of students enrolled and graduating from them. Figure 1 shows the distribution of these initial RN licensure programs in Texas as of May, 2006.

Table 1: Initial RN Licensure Programs* by Type of Nursing Degree

Type of Degree	Number of Programs*	% of Total 2005 Enrollment	% of Total 2005 Graduates
Diploma	2	2%	3%
ADN	56	55%	62%
BSN	26	43%	36%
Universities	22	35%	26%
Health-related Institutions	4	8%	10%
TOTAL	84	100%	100%

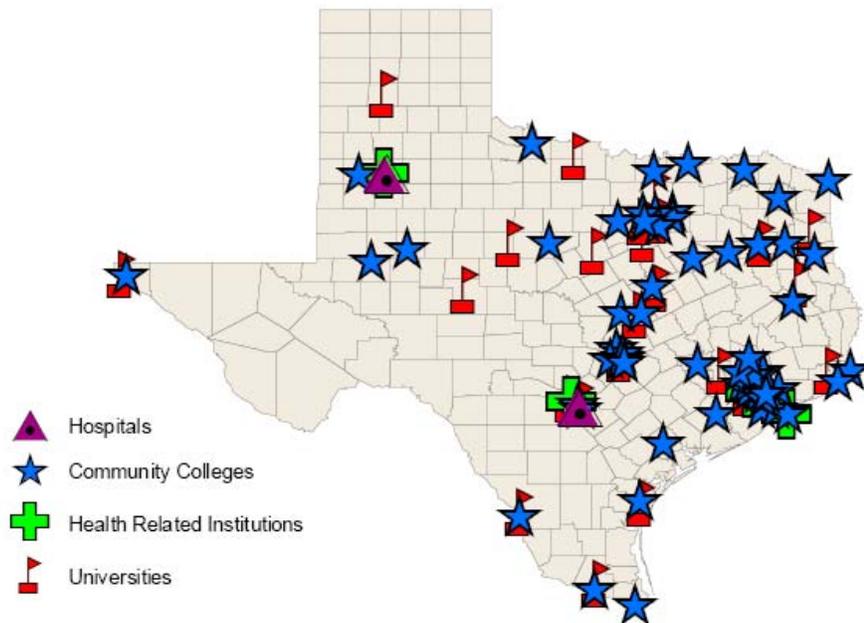
Source: Board of Nurse Examiners for the State of Texas

*Number of programs – represents higher education institutions or hospitals that are approved by the BNE to offer a program leading to initial RN licensure as of May 2006

Of the 84 programs included in Table 1, 72 represent nursing programs offered at public institutions. Of these programs offered at public institutions, 54 are ADN programs; 18 are BSN programs; and none are Diploma programs. Appendix H lists the institutions offering the nursing programs.

Figure 1: Public and Independent Institutions in Texas

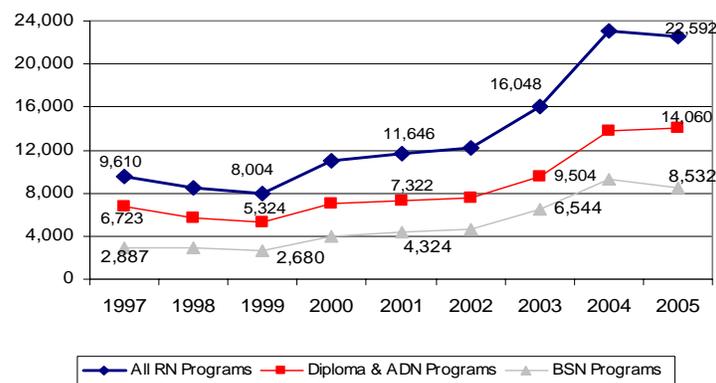
Initial RN Licensure Programs in Texas



Applications

The state's nursing programs have been successful in attracting qualified applicants. As shown in Figure 2, applications increased by 135% from 1997 to 2005 and increased by 94% since 2001. While it is uncertain how many of the applications reported in 2005 are duplicates (multiple applications from the same person), a statewide study of 2003 application records found that most nursing applicants are likely to apply to one or more programs in their immediate area. This trend is consistent with other demographic information that shows that nursing students are significantly older than the average college student and often have family and work commitments that tie them to a specific geographic area.

Figure 2: Qualified Applications to RN Licensure Programs* in Texas (1997-2005)

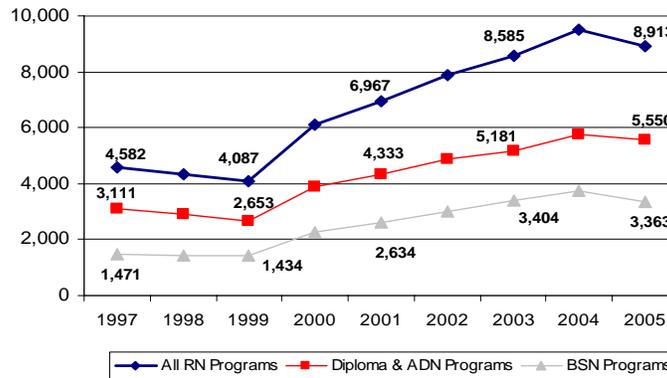


Admissions

The number of students admitted to, and enrolled in, the nursing course sequence of an initial licensure program increased 94% from 1997 to 2005. Diploma and ADN programs, which represent 62% of the state's first-year enrollments, increased by 78% while BSN programs increased by 128%.

Enrollments have increased as the number of qualified applications have increased but not at the same rate. Nursing programs enrolled a greater percentage of enrollees to applications each year until 2003, when the percentage began to decline. By 2005, only 39% of applicants were enrolled – a ten-year low. While the 2005 figure may be affected by the increasing number of duplicate applications, the trend suggests that factors other than the applicant pool are restricting enrollments.

Figure 3: Total First-Year Entering Enrollment in RN Licensure Programs (1997-2005)



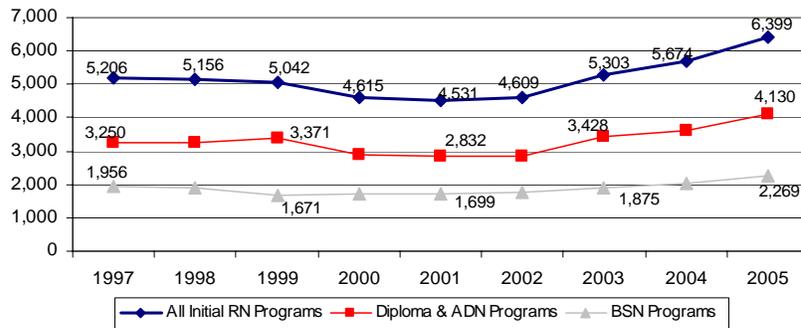
Source: Board of Nurse Examiners for the State of Texas

Despite large increases in the number of persons applying for admission, nursing programs have limited capacity to admit them. For the vast majority of initial licensure programs, the number of clinical groups that can be accommodated, determines how many students can be admitted because of the BNE-mandated ratio of a maximum of 10 students per faculty member in a clinical group. For example, if a program sets an admission limit of 100, they will have, at a minimum, 10 clinical groups, each of which must be supervised by a faculty member. In 2005, lack of budgeted faculty and lack of qualified faculty were the most frequently stated reasons that nursing programs were unable to admit more qualified applicants. Another problem that has been identified by directors of initial licensure programs, is when a program fills all available seats, there is no way to “refer” qualified applicants that were unable to be admitted, to other initial licensure programs that may have openings as there is no “centralized” data base to obtain this information. To complicate the situation, a qualified student who could not be admitted to a specific program because of seat unavailability may be able to find another program with openings, and yet may not meet the admission requirements of that program in a timely manner. As a result, there were a total of 260 vacant seats across nursing programs in 2005. While representing only 3% of the total number of available seats in programs, having access to a centralized data base of vacancies and admission requirements of the various programs, could decrease the number of vacant seats.

Graduates

After a decline in nursing graduates (program completers) from 1997 to 2001, nursing programs began showing an increase in graduates beginning in 2002. The number of graduates has increased by 41% from 2001 to 2005. Diploma and ADN program graduates increased 46% from 2001 to 2005 as compared to BSN program graduates that increased 34%.

Figure 4: Total Graduates from Initial RN Licensure Programs (1997-2005)



Source: Board of Nurse Examiners for the State of Texas

The ethnic composition of ADN and BSN graduates mirrors that of all 2005 baccalaureate graduates in the state. Despite efforts to attract men to nursing, the vast majority of nursing students continue to be female.

Table 2: 2005 ADN and BSN Graduates, State Population, and Total Baccalaureate Graduates

	2005 ADN and BSN Graduates	2005 State Population	2005 Baccalaureate Graduates
Male	14%	50%	42%
Female	86%	50%	58%
White	61%	48%	61%
Hispanic	21%	35%	21%
Black	10%	12%	8%
Asian	5%	1%	6%
Other / Unknown	3%	4%	4%

Sources:

- 1) Graduates: Texas Higher Education Coordinating Board;
 - 2) Population: U.S. Census Bureau;
 - 3) Baccalaureate Graduates: Texas Higher Education Coordinating Board
- Source: Texas Higher Education Coordinating Board

The state's nursing programs have shown steady increases in the ethnic diversity of its graduates at a time when many other health care professions have seen declines in

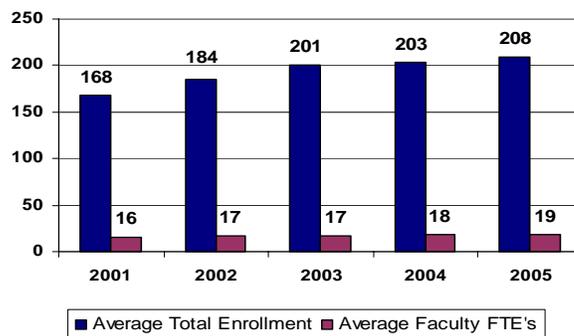
enrollments and graduations from under-represented groups. From 1997 to 2005, Hispanic graduates increased 62%.

Nursing Faculty Characteristics

The number and characteristics of faculty teaching in nursing programs is a major factor in determining enrollment capacity and may also be an indication of the quality of instruction. In 2005, there were 1,579 FTE faculty employed in initial licensure programs, a 13% increase from 2004.

Over a five-year period, the average class size of initial RN licensure programs has increased by 22% while faculty FTEs have increased by 19%. These disparities probably cannot continue to increase without affecting educational quality.

Figure 5: Average Total Enrollment and Average Faculty FTEs in All Initial RN Licensure Programs in Texas (2001-2005)

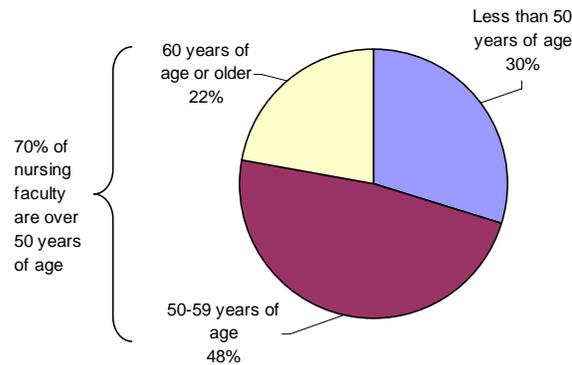


Source: Board of Nurse Examiners for the State of Texas

The percentage of full-time faculty positions has decreased 9.5% in the last five years while the percentage of part-time faculty positions has increased by 31.8% during the same period. According to a National League for Nursing study (2006), the majority of baccalaureate and higher degree programs and almost half of associate degree programs reported hiring part-timers as their primary strategy to compensate for unfilled, budgeted, full-time positions. While this approach allows for greater flexibility, often part-time faculty are not an integral part of the design, implementation, and evaluation of the overall program. And, because they typically hold other positions, they are not as available to students as full-time faculty are, and frequently have conflicts between the time commitments required by their teaching and other positions. This trend raises concerns about ensuring the quality of instruction in these programs.

As indicated in Figure 6, in 2004, 70% of 1,800 nursing faculty were 50 years of age or older.

Figure 6: All Nursing Faculty* by Age (2004)



*Includes faculty participating in all levels of nursing education, including those in initial RN licensure programs.

Source: Texas Center for Nursing Workforce Studies

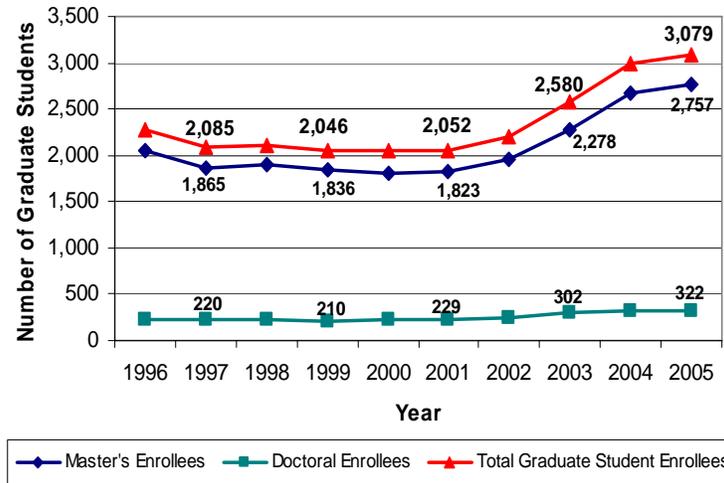
With approximately 1,250 faculty expected to retire within the next 5-15 years, the nursing programs will have a significant challenge to replace these faculty and continue to *maintain* existing capacity. Losing these veteran faculty members also suggests that nursing programs will have an even more difficult challenge in meeting targets for *increasing* capacity in these programs unless incentives are in place to recruit faculty and streamline the hiring and training processes. To meet the increased demand for new RNs means that nursing programs need to increase the total number of FTE faculty positions by 54% by 2010.

Potential Faculty

In anticipation of the need for approximately 1,250 new faculty to replace retiring faculty in initial RN licensure programs, the Task Force examined the state's potential to produce them from its own graduate programs.

The number of students in graduate nursing programs has increased by 35% from 1996 to 2005, with the 2005 totals representing a 10-year high. Enrollments in master's level programs increased 34% and doctoral programs increased 46% during this ten-year period.

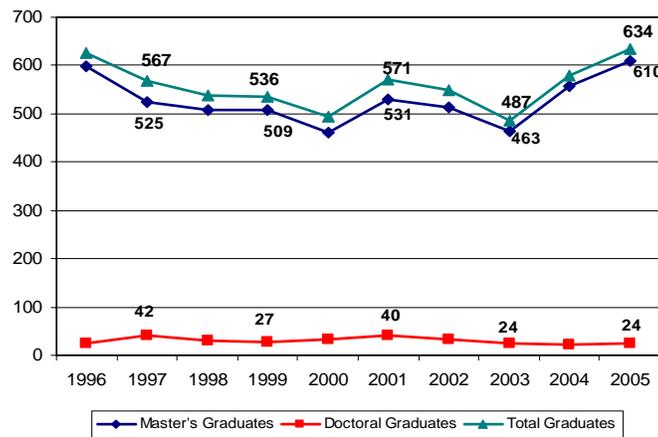
Figure 7: Number of Students Enrolled in Graduate Nursing Programs at Public Institutions (1996-2005)



Nursing education, a specialization that could more directly indicate student interest in becoming nursing faculty, represented only 5% of students enrolled in master's level programs in 2005. In contrast, advanced practice-based specialists, including clinical nurse specialists, nurse practitioners, nurse midwives and nurse anesthetists, represented 95% (583 students) of the students enrolled in master's level programs in 2005. Student interest in these other specializations most likely reflects the perceived status of those practitioners within nursing, the demand for advanced practice nurses, and the salaries they are paid.

The number of graduates from master's and doctoral degree programs has increased 11% from 2001 to 2005. The number of graduates from master's degree programs has *increased* by only 15% from 2001 to 2005 and the number of graduates from doctoral programs has *decreased* 67% during that period.

Figure 8: Number of Graduates from Master's and Doctoral Nursing Programs at Public Institutions (1996-2005)



Source: Texas Higher Education Coordinating Board

The trend data suggest that nursing programs will have a difficult time recruiting potential faculty from the large percentage of master's degree graduates who are choosing advanced practice-based specialties. Furthermore, if programs are successful in finding faculty from those graduates in advanced practice-based specialties, the new hires are less likely to have the instructional skills needed to teach students. Providing those basic skills will most likely add to the cost of the programs.

Faculty Salaries

As stated earlier in this report, only 5% of students enrolled in master's level programs in 2005 were pursuing the nurse educator option. 95% of graduate master's level students were pursuing an advanced practice based specialty, with the majority being nurse practitioner tracks. Student interest in this specialization most likely reflects the perceived status, demand, and salaries.

Data from the Labor Department and other sources show the average annual salaries of nurse practitioners in Texas ranging from \$69,745 to \$78,784 with a mean salary of \$73,150.

It is difficult to compare a 12 month salary of a nurse practitioner with a 9 month nurse educator salary. In particular because of the varying ranks in universities and the fact that the large majority of nurse educators are employed by community colleges. Table 3 shows the average budgeted faculty salary by assistant professor at public universities in Texas.

Table 3
2005 Median Salaries for Full-time Nursing Faculty
At Public Institutions

Rank	Number of Faculty	9-month Salaries	12-month Salaries (Adjusted)*
Community Colleges			
Professor	13	\$40,592	\$54,123
Associate Professor	25	\$43,261	\$57,681
Assistant Professor	38	\$37,009	\$49,345
Instructor	212	\$41,089	\$54,785
Lecturer	19	\$39,263	\$52,351
No Ranking System	253	\$41,552	\$55,402
All Ranks	560	\$41,129	\$54,839
Universities			
Professor	34	\$79,391	\$105,854
Associate Professor	68	\$61,749	\$82,332
Assistant Professor	78	\$54,038	\$72,051
Instructor	1	\$50,000	\$66,666
Other Faculty	345	\$45,500	\$60,666
All Ranks	526	\$50,000	\$66,666
Rank	Number of Faculty	9- and 12-month Salaries **	
Health-Related Institutions			
Professor	25	\$105,019	
Associate Professor	30	\$84,985	
Assistant Professor	11	\$71,500	
Other Faculty	74	\$69,398	
Teaching Assistant	1	\$48,000	
All Ranks	141	\$81,200	

*9-month salaries are adjusted to 12-month salaries for purposes of comparing them to practice salaries.

**Health-related institutions have both 9-month and 12-month salaries for nursing faculty.

Source: Institutional data reported to the Texas Higher Education Coordinating Board

Source: Texas Higher Education Coordinating Board

Based on the assumption that a beginning nursing faculty member would most likely start at the bottom of a salary schedule (assistant professor) the mean 9 month salary would be \$37,660.

Summary of Key Findings

1. In recent years, the state's nursing programs have substantially increased interest in nursing, enrolled more students, and graduated more of them. Despite these increases, the number of new graduates does not meet the current demand for new nurses.
2. The pool of qualified applications for admission into nursing programs is three to four times larger than the number of seats available in the nursing programs.
3. The number of faculty available to teach in nursing programs determines enrollment capacity.
4. Despite the increasing competitiveness for admission to nursing programs, in the Fall of 2005, 3% of available seats were unfilled suggesting that schools could do a better job of coordinating the admission process.
5. Over the past five years, the average class size of initial RN licensure programs has increased by 24% while faculty FTEs have increased by 19%. These disparities probably cannot continue to increase without affecting education quality and graduation rates.
6. The percentage of part-time faculty has increased in the last five years. As the number of part-time faculty has increased the number of full-time faculty has decreased. This trend raises potential problems with controlling the quality of instruction.
7. Approximately 1,250 faculty are over the age of 50 (70% percent): 22% are expected to retire within the next five years; 48%, within the next 5-15 years. The large number of retirees presents significant challenges for nursing programs to maintain their current capacity for initial RN licensure students let alone meet projected increases to meet workforce demand.
8. While the number of students in graduate nursing programs represents a 10-year high, only 5% are choosing nursing education as a specialty.
9. To meet the projected demand for new RNs the total number of FTE nurse faculty must be increased by 54% by 2010.
10. A beginning nursing faculty member would most likely start at the bottom of a salary schedule (assistant professor) the mean 9 month salary would be \$37,660 compared to that of annual nurse practitioner salary of \$73,150.

Graduation Rates of Nursing Programs

In January 2006, the THECB asked the state's nursing programs to provide a list of the new students who enrolled in initial RN licensure programs in Spring 2003, Summer 2003, or Fall 2003. The list excluded any students who transferred from another nursing program or were readmitted to a program after earning nursing course credits prior to spring 2003. The lists submitted by the programs also excluded enrollees in part-time or alternate entry tracks. The THECB received student data from 68 of the 76 institutions (89% response rate) that admitted students during one or more of those three semesters in 2003. The two diploma programs and several programs at independent institutions were not included in the analysis because the THECB did not collect student records for those institutions in 2003.

Once submitted, the names and Social Security numbers of the students were matched against the THECB's database of student records and then tracked through academic year 2005. Through this process, the Board could generate program completion and persistence rates for this cohort of students for each of the five data collection regions, by type of degree program, by ethnicity of the student, and by students' financial aid status. The cohort was also used to determine the median age of entering nursing students in these initial RN licensure programs.

Table 3 summarizes the graduation and persistence rates by data collection region, type of degree program, student ethnicity, and financial aid status.

From this cohort of students admitted to initial RN licensure programs in 2003, the Task Force determined:

- Approximately 56% of full-time students completed the nursing program on-time (within four to five semesters).
- Approximately 13% of the original 2003 student cohort that did not complete the program by summer 2005, were enrolled in the nursing programs in Fall 2005. Data were not available at the time of publication to determine how many of those students would eventually complete their nursing programs.
- About 31% of the original 2003 student cohort did not complete the nursing program, and were no longer enrolled in the programs in Fall 2005.
- Programs in the South Texas region had a slightly better "on-time" completion and persistence rate than programs in the other regions; however, overall, completion and persistence rates were fairly consistent across all regions of the state.
- Health-related institutions had significantly higher completion rates. Community colleges had a higher "on-time" completion rate than universities, but the lowest persistence rate of the three types of institutions.

**Table 4: Statewide Graduation and Persistence Rates
For Initial RN Licensure Programs**

	2003 Nursing Enrollees*	Graduates as of Summer 2005	"On-time" Graduation Rate**	Non- Grads Enrolled in Fall 2005	"On-time" Graduation & Persistence Rate ***
By Data Collection Region					
Region 1: West Texas	1,176	631	54%	186	69%
Region 2: South Texas	1,922	1,212	63%	205	74%
Region 3: Gulf Coast	1,657	864	52%	202	64%
Region 4: East Texas	1,059	566	53%	167	69%
Region 5: North Texas	1,880	1,070	57%	241	70%
Statewide	7,694	4,343	56%	1,001	69%
By Type of Institution					
Community College	4,500	2,549	57%	386	65%
Health-related Institution	665	496	75%	54	83%
University	2,529	1,298	51%	561	74%
Total	7,694	4,343	56%	1,001	69%
By Ethnicity and Financial Status					
White	3,995	2,701	68%	481	80%
Black	854	399	47%	156	65%
Hispanic	1,492	917	61%	200	75%
Asian	286	163	57%	54	76%
American Indian	48	33	69%	6	81%
International	148	86	58%	26	76%
Unknown	61	44	72%	8	85%
No Financial Aid	3,109	1,704	55%	328	65%
Received Financial Aid ****	4,344	2,639	61%	617	75%
Total	7,453	4,343	58%	945	71%

* "2003 Nursing Enrollees" are new students enrolled in the program for the first time in the spring, summer or fall semester of 2003.

** "On-time" Graduation Rate is the number of students in the original 2003 cohort who are reported as graduates by summer 2005, divided by the original "2003 Nursing Enrollees" cohort.

*** "On-time" Graduation & Persistence Rate *** is the number of students in the original 2003 cohort who are reported as graduates by summer 2005 plus the number of students who are reported as enrolled in the program in Fall 2005, divided by the original "2003 Nursing Enrollees" cohort.

**** "Received Financial Aid" represents students in the original 2003 cohort who received state financial aid during any one or more semesters in which they were enrolled in the nursing program.

- “On-time” completion and persistence rates for White, Black, Hispanic, and Asian nursing students, varied by 15%: White students had the highest graduation and persistence rate at 80%; Black students, the lowest rate at 65%.
- Students who received state financial aid were more likely to complete on-time or persist in the programs than students who did not receive state financial aid. Further analysis showed that students who received aid for two or more years were more likely to complete on-time or persist in the program (83%) than students who received aid for one year (62%).

In 2005, 24% of nursing programs included in the study had combined graduate/persistence rate of at least 85%. A further breakdown is shown in table 4.

Table 5: 2005 Graduation and Persistence Rate of Programs Surveyed

	Total Type of Institutions Surveyed	Number of programs with at least an 85% graduation/persistence rate	Total Percent of Graduates
Community Colleges	43	8	19%
Universities	21	5	24%
Health Related Institutions	4	3	75%

From this data, the Task Force also found that the median age of a new nursing student was significantly older (26 years old) than the average freshman at a community college (20 years old), junior at a university (21 years old) or health-related institution (24 years old). ADN program students were significantly older than BSN program students. The median age of a new ADN program student in most regions of the state was between 28 and 30 years.

Summary of Key Findings

- Despite growing competitiveness for admission, it is estimated that only 70% of admitted students are likely to complete a nursing degree.
- Students who received financial aid over a period of more than one year had a significantly greater probability of completing the program than did students with one year of financial support.
- Nursing students are significantly older than their counterparts in other associate degree and baccalaureate degree programs. The age difference suggests that these students may have more family commitments and work-related issues than the average college student. It also suggests that there may be more financial demands, including child care, health care benefits, etc.

Practices that Affect Student Success

To identify practices that affect student success in nursing programs, the Task Force designed surveys to be completed by program administrators, faculty teaching in initial licensure programs, and students graduating from initial licensure programs in Spring 2006. Copies of the surveys are included as Appendices D, E, and F.

Two questions asked of all respondents were: the degree of emphasis the program places on graduating on time, and the strategies they would advocate to increase graduation rates. Information was sought from both faculty and students on obstacles to completing the nursing program, helpfulness of services to students in completing the nursing program, and demographic information about themselves. Faculty and administrators provided information on approaches to identifying students at risk for not completing the program, obstacles to faculty in helping students complete the program, and success of interventions for students at risk for not graduating. Other information requested from program administrators included admission criteria most predictive of program completion, selection processes, use of exit interviews, support from local healthcare agencies, and program statistics. Other information requested from students included the importance of various people in helping them complete the program and reasons why they were successful when others were not.

In February and March 2006, the Task Force distributed administrator, faculty and student surveys to each ADN and BSN program in the state (See Appendix H) for names of the programs). All but 3 programs (2 community colleges and 1 university) provided student and faculty responses for a 96% program response rate. Administrators from 65 programs responded (83% response rate). Administrator, faculty and student responses to each item on the surveys are detailed in Appendix G.

The number of program administrators, faculty and students who provided survey responses are indicated in Table 6. Demographically, they mirror the characteristics of students and faculty presented earlier in the report.

Table 6. Number of Survey Respondents

Type of Institution	Number of Programs	Administrators	Faculty	Students
Community College	47	43	774	2208
University	24	20	253	760
Health Science Center	4	2	35	168
Total	75	65	1062	3136

The Task force grouped the data from the responses of program administrators, faculty, and students into nine broad categories. Illustrative data associated with each category are described below.

Admission Practices

Although nursing programs differ in the admission criteria that they think predict success in the program, almost all request the same information from applicants. Most use Grade Point Averages (overall and pre-requisite courses) and some type of standardized pre-entrance examination. BSN programs, and programs with graduation plus persistence rates of 85% or higher, are more likely than are ADN programs and programs with lower graduation plus persistence rates to think that applicant interviews are predictive of success.

Most nursing programs have a 2-tier applicant review/admission process: institutional and discipline/program. The discipline/program specific processes tend to be intensive and extensive and require both faculty and staff time and effort. Most use some form of point/weighting system to rank and select the best qualified applicants. Because of a lack of standardization of admission criteria between programs (e.g. some programs requiring interviews, entrance exams, etc. while others do not) qualified students who are not admitted to one program due to lack of seat availability may be unable to complete admission requirements to another program in a timely manner.

Program administrators and faculty suggested regionalized and/or shared admission “centers” so as to place “the best qualified students” into nursing programs.

Financial support for students

Most students in nursing programs depend on scholarships and loan programs to finance their studies. Nursing students incur many more expenses than just tuition and fees. Nursing programs require a large number of specialized textbooks, uniforms, liability insurance, fees for criminal background checks, achievement testing, etc. Most students enrolled in nursing programs are employed to help finance their personal and family needs including living expenses, child care, and health benefits for themselves and their families.

Program administrators, faculty, and students agreed that students need an increase in financial support including more scholarships, grants, and loans and help in paying living expenses. The requirements for eligibility for financial aid often prevent needy students from getting it. For a large and growing number of students, the major barrier to staying in the program and graduating is the students’ need to work to finance their personal and family needs. A major reason for students dropping out of programs was not poor grades but the need to provide for their families, to deal with family issues and or illnesses. When a student drops out of a program for academic reasons, the root cause is often working too much which does not allow enough time for studying.

Academic Support for Students

Most nursing programs have advising and academic services that use both staff and faculty time and effort.

Although there was some agreement across program administrators and faculty on factors that place students at risk for not graduating, almost no program claims to have a system to identify those at risk.

For students at risk, nursing programs provide different academic services. For example, program administrators and faculty identified working with a faculty or nurse mentor and participation in study groups as interventions helpful to students at risk for not graduating. Faculty also identified supplementary classes/tutoring. However, programs tend not to have information about which of the offered services best help students to succeed.

All respondents agreed that faculty had workloads and student-to-teacher ratios that prevented faculty from being able to offer academic services much less evaluate them to see which worked best. Student-to-teacher ratios were higher among programs with graduation rates less than 85% as compared with that in programs with 85% or better graduation rates.

Program administrators and faculty suggested funding of academic support services (including test taking and time management programs), the development of programs to identify those at risk and provide services to those identified, and funding for teaching assistants/tutors as possible strategies for increasing student success.

Faculty Complement

Program administrators, faculty and students spoke to the need for more faculty to meet the current and projected need for more nurses in the workforce. Students spoke to the need for faculty who have the competencies needed for effective teaching. Students also recognized the need for higher salaries for teachers.

A second suggestion to increase the number of faculty was to give incentives for nurses to get master's degrees. Administrators and faculty said that hiring advanced practice RN's as faculty generally increases the number of part-time faculty (placing the burden of course responsibilities on full-time faculty) and requires that full-time and seasoned faculty provide extensive support in the roles and responsibilities of faculty (classroom teaching, clinical teaching, testing and evaluation, and other teaching competencies). They suggest that master's degree programs do more to prepare educators and that financial incentives be paid to those getting master's degrees from programs that prepare nurse educators.

A third strategy for meeting the increasing need for faculty was to use nurses holding the BSN as "faculty extenders".

Program Characteristics/Administration

Over 60% of all respondents indicated that there is only a moderate emphasis on students graduating on time. Program administrators and faculty at programs with an 85% or higher graduation plus persistence rate placed heavier emphasis on completing the nursing program on time than did faculty at programs with lower rates.

Nursing programs with an 85% or better graduation plus persistence rate were significantly less likely than schools with less than 85% graduation plus persistence rates to use local healthcare organization nurses as clinical preceptors.

Over 60% of nursing programs conduct exit interviews with students permanently leaving the school.

Students recommended smaller student to faculty ratios as “one method to increase student success.”

Each group of respondents pointed to some form of lengthening or shortening nursing programs. Examples of these suggestions include “more part-time study options,” greater flexibility in course sequencing, “fast-track programs for second degree students”, “week-end only study”, and “eliminating programs with small numbers of graduates with redistribution of their funds to programs with larger numbers.”

Infrastructure needs

Program administrators, faculty, and students spoke to the need for expanding facilities and improving the kind and amount of teaching equipment. Funding of simulation centers and regional learning labs was suggested as one way to overcome the facilities and equipment problems as well as the shortage of clinical placement sites.

Public disclosure

Most graduating seniors thought that having information about a school of nursing’s NCLEX-RN pass rate would have influenced their decision on choice of program.

Faculty and students suggested that information about nursing, its challenges and rewards, be given to students in elementary school so that they could plan to develop the critical thinking and science and math skills needed for success in nursing programs. As one faculty member pointed out “Fix/finalize School Finance Plan. Our students are ill prepared in critical thinking, math, science...Fix it.”

Definition of outcome/program performance measures

When asked how the program computed completion rates, program administrators gave very different answers. Their answers reveal that there is no standard or uniform formula for calculating completion rates.

Program administrators and faculty identified the need to use a standardized formula for computing this rate so that programs can be evaluated on how well they are responding to the need for more RNs. Not having such a formula makes it impossible to know where to look for best practices.

Teaching and Testing Strategies

Program administrators, faculty, and students suggested that smaller student to faculty ratios would increase the number of RNs graduates in Texas. Many suggested smaller ratios for clinical or field learning experiences and for classroom courses. They thought the best ratio for clinical learning experiences where a faculty member supervises students as they take care of patients should be limited to 6 to 1 rather than the current 10 to 1 ratio. Patients are sicker and their care more complex. Students need more time with the faculty member so that they can put into practice what they learned in the classroom. So that they can learn what they need to learn in the classroom, there should be only 30 students to each faculty member. Students pointed out that keeping student to faculty ratio smaller was “one method to increase student success.”

Simulation centers and use of simulation technology were identified as one way to help students develop the clinical competencies needed for safe practice and to ease the problem of finding adequate numbers and types of clinical learning experiences for students. Both faculty and students found nursing skills labs a good way to learn clinical skills but having more equipment and technology would help make it even better.

Faculty and students thought that computers and computer technology to support teaching helped students be successful. They thought that on-line and internet classes were helpful to their learning and could ease scheduling burdens.

Students suggested that fairer and more uniform performance/evaluation criteria would increase the number of RNs entering the workforce. The most frequently cited example dealt with students being required to pass the Heath Education Systems Incorporated (HESI) exit exam in order to graduate.

Summary of Key Findings

1. Persons entering nursing programs do not know how hard the programs are or how much study time is needed to pass the courses. They tend not to know differences between the types of programs nor how or where to get information about program quality.

2. Each nursing program makes a substantial investment of faculty and staff time and effort to recruit applicants, to review applications, and to select applicants for admission.
3. Other than GPA and performance on a standardized pre-entrance examination, there is little agreement among nursing programs about admission criteria that predict success in the program.
4. Nursing programs do not have or use screening devices or programs to help identify students at risk for poor academic performance while they are early in the program.
5. Nursing programs offer various academic services to students at risk for poor academic performance but have little to no evidence about which of those services are effective.
6. Most students in nursing programs depend on scholarships and loan programs to go to school. However, due to eligibility requirements and limits on the amount of financial aid they can receive; the large majority of students have to work while going to school. Doing so, increases their risk for not graduating and/or not graduating on time.
7. Heavy teaching workloads (classroom and clinical teaching) and large student-to-teacher ratios limit the time that faculty members have for working with individual or small groups of students who need help to pass or do well in a course.
8. To increase the number of RN graduates in Texas, the number of nurses willing, able, and prepared to teach must be increased. To do so requires that faculty members' salaries be increased and that there are programs and incentives for them to gain competencies in teaching.
9. Nursing programs dependence on traditional ways of structuring programs and teaching classroom and clinical knowledge and skills contributes to shortages of space (physical facilities such as size of classrooms) and placements for student clinical learning. Even though computer and simulation technology are recognized as aids to both teaching and learning, funds for technology are limited.
10. There is no standard or uniform formula for computing program completion rate. Such a formula is needed in order to evaluate the success of the strategies used by nursing programs to increase the number of RNs entering the workforce.

Conclusions and Recommendations

A substantial investment in preparing, recruiting, and retaining faculty in nursing programs is needed **NOW**. Without large and significant increases in the number of faculty to teach in nursing programs the shortage of new RNs will sharply increase. Without adequate numbers of nurses to care for healthy, ill, and recovering Texans the consequences are predicable. More Texans will die, more will suffer unnecessarily, more will go without care, more will seek expensive medical interventions and the cost of care will continue to escalate.

Nursing programs can probably make small increases in the number of graduates by streamlining administrative processes (regionalizing admission processes); formalizing assessment and referral programs (screening students early and often to identify those at risk for not completing the program and providing referring to appropriate help); providing resources to expand instructional capabilities (simulation centers; on-line courses); and creating financial aid packages that meet students' monetary needs (developing cooperative learn-earn programs with healthcare employers). Each of these strategies requires investment of funds and faculty time and effort with a relatively low return on investment. Individually and collectively, they are insufficient to achieve the 57% increase in graduates from RN initial licensure programs needed to meet demand.

Recommendations and Strategies

The following recommendations and strategies have been identified as important in addressing ways to increase nursing programs' capacity to graduate more pre-RN licensure students in Texas.

2. Increase the number of Nursing Faculty
 - A. Increase salaries of nursing program faculty so that they are competitive with those in the healthcare industry.
 - 1) For all newly appointed nursing faculty set starting salaries for Master's prepared faculty at a minimum of \$50,000.00 and faculty with a PhD a starting salary of \$65,000.00 for a 9-month contract.
 - 2) For all faculty currently employed in nursing programs who are not making the above minimums, increase their salary to the above minimum.
 - B. Fund stipend programs for graduate study in nursing education to students who agree to full-time study and a post-graduation 3 year commitment to be employed as a faculty member in a nursing program in

Texas. 1st year stipend level will be \$40,000.00 with a 3% increase for each subsequent year up to 3 years. Fund 50 during the Biennium.

- C. For faculty who are not prepared in the Nurse Educator Role, fund 15 semester credit hours of coursework in: Teaching, Evaluation, Curriculum Design, Methodologies, and related courses. These courses may be taken through regular academic programs or online programs through such courses provided by the National League of Nurses (NLN) and the Southern Regional Education Board (SREB). With an approximate fee of \$700.00 per course (3 semester credit hours). For the biennium fund 400 persons.
 - D. In addition to the current dramatic growth fund, fund programs for increases in graduates with preparation in the nurse educator role.
3. Increase the number of graduates
- A. Streamline administrative processes:
 - 1) Ensure that every nursing program seat is filled with the most qualified student.
 - 2) Establish a regional admission center(s)
 - 3) Develop a standardized minimum data set for admission variables for application to all nursing programs in Texas.
 - 4) Establish a standardized minimum data set that supports evaluation and best practices in nursing programs.
 - 5) Establish a standardized program completion formula.
 - B. Target as the benchmark for excellence in nursing programs, a program completion rate of 85%
 - 1) Identify best practices for identifying students at-risk for not completing the program.
 - 2) Identify best practices for helping those who have been identified for being at-risk to stay in the program and to graduate.
 - 3) Conduct an annual student success conference to showcase and highlight best practices.

- 4) Publicly recognize nursing programs that achieve the standard of excellence.
- 5) Establish a mechanism for funding education studies on interventions that enhance student success.

C. Provide resources to expand instructional capabilities

- 1) Have yearly regional workshops to highlight innovative instructional strategies in nursing education.
- 2) Continue to develop new, accelerated, and alternate entry degree options.
- 3) Promote innovation in nursing education through the regionalization of common instructional functions, interdisciplinary instruction, pooled or shared faculty, and new clinical instruction models to maximize the use of existing resources and faculty.
- 4) Establish a task force to study ways in which the healthcare industry can partner with nursing programs to increase the number of RN Graduates in the workforce.

D. Enhance and expand financial aid packages

- 1) Establish a task force to develop financial aid packages that cover tuition and fees, living expenses, and healthcare coverage for students.
- 2) Develop cooperative “learn-earn” programs between nursing programs and the healthcare industry.

Areas for Future Study

1. The Board of Nurse Examiners (BNE), and the Texas Center for Nursing Workforce Studies (TCNWS) should review processes that educational programs utilize to evaluate nursing faculty members' competencies for teaching and preparing students to function in an enriched healthcare information technology environment.
2. The Texas Higher Education Coordinating Board (THECB), the BNE and professional nursing programs should collaborate in developing a model to identify at-risk students and a process to help these students.

3. THECB should study the impact of nursing formula funding differences across sectors, present findings and make recommendations to the Legislature.

List of Sources

American Association of Colleges of Nursing (AACN)

Board of Nurse Examiners for the State of Texas (BNE)

United States Department of Labor-Bureau of Labor Statistics (BLS)

Health Resources Service Administration (HRSA)-Bureau of Health Professions (BHP)

National League for Nursing (NLN)

Texas Higher Education Coordinating Board (THECB)

Texas State Department of Health's Texas Center for Nurse Workforce Studies (TCNWS)

United States Census Bureau

Appendix A Legislative Charge

Sec. 61.96261. STRATEGIES FOR INCREASING GRADUATION RATES.

(a) The board shall:

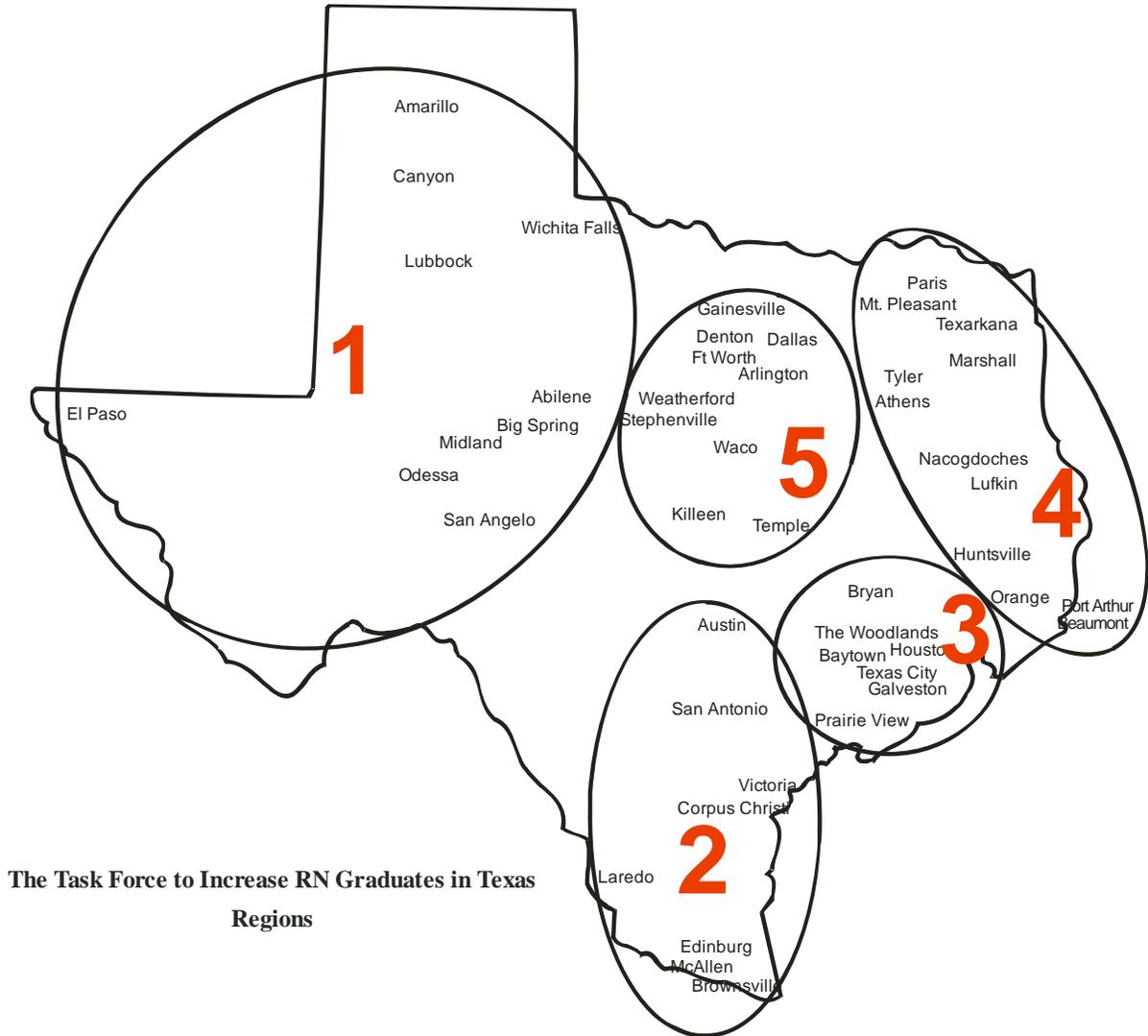
- (1) identify, develop, and study strategies for increasing graduation rates from professional nursing programs in this state; and
- (2) determine which of those strategies are likely to be effective.

(b) Not later than January 1, 2007, the board shall report to the legislature concerning the results of the study conducted under Subsection (a). The report must include the board's recommendations for implementing effective strategies for increasing graduation rates from professional nursing programs.

(c) The board shall use existing resources to perform duties imposed under this section.

(d) This section expires June 1, 2007.

Appendix B Regional Map



**The Task Force to Increase RN Graduates in Texas
Regions**

Appendix C Task Force Membership

West Texas	Leslie Mayrand, PhD, RN, CNS Region 1 Project Director, Task Force Chair Professor and Head Department of Nursing Angelo State University Justin Louder, MA Region 1 Project Coordinator Part-Time Lecturer Department of Nursing Angelo State University
South Texas	Cheryl Ross Staats, MSN, RN, APRN, BC Region 2 Project Director Associate Professor/Clinical Department of Acute Nursing Care University of Texas Health Science Center at San Antonio
North Texas	Ann Powers-Prather, PhD, RN Region 5 Project Director Coordinator of Research and Evaluation A.D. Nursing Program El Centro College
Houston/Galveston	Mary Yoho, PhD, RN (served through August 31, 2006) Region 3 Project Director Director of Nursing Tomball College
East Texas	Glenda Walker, DSN, RN Region 4 Project Director Director School of Nursing Stephen F. Austin State University
Data Director	Carolyn L. Cason, PhD, RN Project Data Director Professor Associate Dean and Director, Center for Nursing Research Associate, Center for Hispanic Studies in Nursing and Health School of Nursing University of Texas at Arlington

Members At-Large

Texas Nurses Association

Wanda Douglas, MSN, RN (served through August 31, 2006)
Education Director
Texas Nurses Association

Board of Nurse Examiners

Mary Beth Thomas MSN, RN
Director of Nursing Practice/Education
Texas Board of Nurse Examiners

Janice I. Hooper, PhD, RN
Nursing Consultant for Education
Texas Board of Nurse Examiners

Texas Center for Nursing Workforce Studies Department of State Health Services, Center for Health Statistics

Aileen Kishi, PhD, RN
Program Director
Texas Center for Nursing Workforce Studies
Department of State Health Services, Center for Health Statistics

Nora E. Douglas, PhD(c), MA
Program Specialist
Texas Center for Nursing Workforce Studies
Department of State Health Services, Center for Health Statistics

Texas Higher Education Coordinating Board

Chris Fowler
Program Director
Academic Affairs and Research Division
Texas Higher Education Coordinating Board

Camille Pridgen, EdD, MT(ASCP)SBB
Program Director
Graduate and Professional Education
Health Professions Specialist
Division of Academic Affairs and Research
Texas Higher Education Coordinating Board

Appendix D Program Administrator Survey

NURSING PROGRAM ADMINISTRATOR SURVEY

School Code:

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I. Admission Criteria

1. Generally speaking, of the admission criteria that you use, which are the most predictive of a student's ability to complete the nursing program?

	Not Used	Never Predictive	Sometimes Predictive	Often Predictive	Always Predictive
Minimum ACT or SAT score	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Minimum GPA	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Overall GPA in degree plan	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
GPA of pre-requisite courses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
GPA of science courses completed in degree plan	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pre-Entrance Exams	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
HESI	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NET	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
TSI (Texas Success Initiative)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Specific grades in science and/or math courses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
High school advanced placement courses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pre-requisite courses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Number of courses completed in the degree	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Number of hours completed at institution offering the nursing program	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Letters of recommendation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Essay	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Interview	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Prior work experience (LVN-RN applicants)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Prior work experience (EMT applicants)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Number of times applicant has applied and met minimum requirements	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

2. Of the admission selection processes, which best describes the one used by your program (Please check **ONLY** one)?

- All applicants that meet minimum standards are offered admission.
- Use a point/weighting system to rank and select most qualified applicants.
- Use a random/lottery system to select from applicants that meet admission standards.
- Use date application was submitted to select from applicants that meet admission standards.
- Other: _____

3. Do you think that your program should be more selective in choosing applicants for your nursing program?

Yes No

Comments:

School Code:

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II. Students who are at-risk for not graduating from the program

4. Generally speaking, how does your program identify students who are at risk for not graduating from the nursing program? (Mark all that apply)

- Fail a **nursing** course and repeat it
- Perform poorly on tests
- Repeatedly miss class (absenteeism)
- Have an overall GPA that is below an acceptable level
- Are readmitted to the program
- Fail key course requirements (e.g. dosage calculation or pharmacology exam)
- Receive a low rating on one or more clinical days
- Have a high level of financial need
- Have a marginal family support system
- Have a demographic profile similar to other students at-risk
- Have underdeveloped English language skills
- Are non-traditional students (students returning to school later in life; first generation college student)
- Have no systematic way to identify students at-risk

Other factors that contribute to "at-risk"

5. How successful do you believe the following interventions are for students who are at-risk for not graduating from the program?

	Not Used	Not Successful	A little Successful	Very Successful	Extremely Successful
Additional academic advising	<input type="radio"/>				
Participation in study groups	<input type="radio"/>				
Working with faculty or nurse mentor	<input type="radio"/>				
Working with a peer	<input type="radio"/>				
Supplementary classes/tutoring	<input type="radio"/>				
Personal counseling	<input type="radio"/>				
Counseling for family members	<input type="radio"/>				
On-campus employment	<input type="radio"/>				
Other:	<input type="radio"/>				

III. Other

6. Does the nursing program conduct exit interviews with students who are withdrawing permanently from the program?

- Yes No

Comments:

School Code:

□ □ □ □ □ □ □ □

7. Please indicate how local hospitals/other healthcare organizations participate in the nursing program (Check all that apply):

Local hospitals/healthcare organizations provide...

- financial support to operate my program..... Yes No
- qualified nurses as adjunct faculty..... Yes No
- qualified nurses as clinical preceptors..... Yes No
- financial support for my students..... Yes No
- additional instruction/training opportunities for my students..... Yes No
- additional opportunities for their employees to become nurses through my program..... Yes No
- Other: _____ Yes No

8. How challenging are these potential obstacles for faculty in helping students complete the nursing program?

	Not a challenge	A small challenge	A moderate challenge	A large challenge
Having adequate resources to refer students with academic problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ease of referral process to resources for students with academic problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having adequate resources to refer students with personal problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ease of referral process to resources for students with personal problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having workloads that allow time to help students	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having adequate faculty to student ratios	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having the support of the Dean/Director for retention efforts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having the support of University/College administration for retention efforts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lack of incentives (e.g. release time, financial) for retention efforts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

9. Have you had to cut programs that were beneficial to student success?

Yes No

If yes, what programs?

School Code:

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10. How much emphasis does your nursing program place on students graduating on time? Choose the number closest to your answer.

- | | | | | |
|-------------------------|-------------------------|------------------------------------|-------------------------|---------------------------|
| No
emphasis | | Somewhat of
an emphasis | | Major
emphasis |
| <input type="radio"/> 0 | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 |
| | | <input type="radio"/> 5 | | |

11. Given the opportunity to talk with members of the Texas Legislature, what strategies to increase nursing graduates would you advocate?

12. Initial RN licensure program statistics:

	ADN	BSN
Number of full-time faculty in program - Fall 2004		
Number of part-time faculty in program - Fall 2004		
Filled FTE faculty positions in the program - Fall 2004		
Vacant FTE faculty positions in the program - Fall 2004		
FTE students enrolled - Fall 2004		
Graduates between 9/1/2004 and 8/31/2005		
Percentage of graduates passing the NCLEX on the first attempt between 9/1/2004 and 8/31/2005		
FTE faculty exclusively dedicated to providing support services - Fall 2004		
FTE staff exclusively dedicated to providing support services - Fall 2004		
Average monthly full-time program faculty salary of faculty teaching prelicensure students (including stipends and other incentives) - Fall 2004		

Appendix E Faculty Survey

Nursing Faculty Survey

school

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1. Generally speaking, how challenging are these potential obstacles **for students** in completing the nursing program at your institution?

Passing	Not a challenge	A small challenge	A moderate challenge	A large challenge
pre-requisite science/math courses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
nursing lecture courses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
clinical courses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Accessing				
nursing faculty	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
instructional materials & study aids	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Developing study skills				
study skills (generally)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
library skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
test-taking skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
time management skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
computer skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Finding				
financial support to go to school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
transportation to school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
child care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
time to study	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Managing				
ethnic/racial differences	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
gender differences	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
age differences between fellow students	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
age differences between faculty and students	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Juggling work schedules around coursework	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dealing with family conflict/crises	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Juggling coursework with family obligations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Responsibilities related to social activities				
band/cheerleader	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
fraternity/sorority	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
professional club (e.g. SNA)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
athletics	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
ROTC	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

school

2. How challenging are these potential obstacles **for faculty** in helping students complete the nursing program?

	Not a challenge	A small challenge	A moderate challenge	A large challenge
Having adequate resources to refer students with academic problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ease of referral process to resources for students with academic problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having adequate resources to refer students with personal problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ease of referral process to resources for students with personal problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having workloads that allow time to help students	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having adequate faculty to student ratios	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having the support of the Dean/Director for retention efforts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having the support of University/College administration for retention efforts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lack of incentives (e.g. release time, financial) for retention efforts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3. How helpful are these services to **students** in completing the nursing program?

	Not available/applicable	Not helpful	Somewhat helpful	Very helpful	Extremely helpful
Orientation program/workshop prior to starting nursing course sequence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Developmental (remedial) education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
English as a Second Language	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Specialized developmental courses:					
test taking skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
time management skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
study skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
library skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Specialized laboratories:					
math lab	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
reading lab	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
nursing skills lab	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
computer lab	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
writing lab	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Library	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

school

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3. How helpful were these services to **students** in completing the nursing program? (continued)

	Not available/applicable	Not helpful	Somewhat helpful	Very helpful	Extremely helpful
Academic Assistance:					
learning style assessment testing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
teaching assistants	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
academic advising	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
tutoring by faculty/staff	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
peer mentoring	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
organized study groups	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
mentor program	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Computer based aids (generally):					
lecture notes published	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
audio-visual support in lectures and laboratories	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
access to lectures on the internet	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
discussion chat rooms	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Personal/Family support:					
mental health counseling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
student organizations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
child care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
job placement assistance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
ombudsman	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
disabled student support	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
big sister/brother program	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
transportation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Financial Aid					
scholarship	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
student loans	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
employment tuition reimbursement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
other financial aid:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If other financial aid used, please specify:					

school

4. Generally speaking, how does your program identify students who are at risk for not graduating from the nursing program? (Mark all that apply)

- Fail a **nursing** course and repeat it
 - Perform poorly on tests
 - Repeatedly miss class (absenteeism)
 - Have an overall GPA that is below an acceptable level
 - Are readmitted to the program
 - Fail key course requirements (e.g. dosage calculation or pharmacology exam)
 - Receive a low rating on one or more clinical days
 - Have a high level of financial need
 - Have a marginal family support system
 - Have a demographic profile similar to other students at-risk
 - Have underdeveloped English language skills
 - Are non-traditional students (students returning to school later in life; first generation college student)
 - Have no systematic way to identify students at-risk
- Other factors that contribute to "at-risk"

5. Of the following interventions for students who are at-risk for not graduating, which are the most successful in helping them complete the program?

	Not used	Not successful	A little successful	Very successful	Extremely successful
Additional academic advising	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Participation in study groups	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Working with faculty or nurse mentor	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Working with a peer	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Supplementary classes/tutoring	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Personal counseling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Counseling for family members	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
On-campus employment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other interventions	<input style="width: 500px; height: 20px;" type="text"/>				

6. What other strategies could be used to better help students who are at-risk for not graduating, including students who repeat a course, to succeed in the nursing program?

school

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7. Are there any programs or services not available at your nursing program that you wish were available?

Yes No

8. If yes, what services?

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9. How much emphasis does your nursing program place on students graduating on time? Choose the number closest to your answer.

No
emphasis

Somewhat of
an emphasis

Major
emphasis

0

1

2

3

4

5

10. Given the opportunity to talk with members of the Texas Legislature, what strategies to increase nursing graduates would you advocate?

--

11. Finally, please tell us about yourself:

Age: under 25 26-30 31-35 36-40 41-45 46-50 51-55 56-60 60+

Gender: female male

Ethnicity: White (not hispanic) African-American Hispanic Asian Other

Years of teaching experience

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Clinical faculty only

Teaching Role Lecturer only

Clinical faculty and lecturer

Thank you for completing the survey. You've been a great help to us!

Appendix F Student Survey

Nursing Student Survey

school

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1. Generally speaking, how challenging are these potential obstacles **for you** in completing the nursing program at your institution?

Passing	Not a challenge	A small challenge	A moderate challenge	A large challenge
pre-requisite science/math courses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
nursing lecture courses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
clinical courses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Accessing				
nursing faculty	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
instructional materials & study aids	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Developing study skills				
study skills (generally)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
library skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
test-taking skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
time management skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
computer skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Finding				
financial support to go to school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
transportation to school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
child care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
time to study	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Managing				
ethnic/racial differences	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
gender differences	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
age differences between fellow students	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
age differences between faculty and students	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Juggling work schedules around coursework	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dealing with family conflict/crises	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Juggling coursework with family obligations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Responsibilities related to social activities				
band/cheerleader	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
fraternity/sorority	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
professional club (e.g. SNA)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
athletics	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
ROTC	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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school

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2. Generally speaking, how important were these people in helping **you** complete the nursing program?

	Not important	Somewhat important	Very important	Extremely important
Classroom faculty	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Clinical faculty	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Clinical preceptors/ Nurse mentors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dean/Director of program	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Academic advisor	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mental Health Counselor	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Teaching assistants	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other nursing students	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Spouse/Partner	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parent/Guardian	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other family member	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Friends	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3. How helpful were these services to **you** in completing the nursing program?

	Not available/applicable	Not helpful	Somewhat helpful	Very helpful	Extremely helpful
Orientation program/workshop prior to starting nursing course sequence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Developmental (remedial) education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
English as a Second Language	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Specialized developmental courses:					
Test taking skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Time management skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Study skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Library skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Specialized laboratories:					
Math lab	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reading lab	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Nursing skills lab	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Computer lab	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Writing lab	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Library	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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school

3. How helpful were these services to **you** in completing the nursing program? (continued)

	Not available/applicable	Not helpful	Somewhat helpful	Very helpful	Extremely helpful
Academic Assistance:					
Learning style assessment testing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Teaching assistants	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Academic advising	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tutoring by faculty/staff	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Peer mentoring	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Organized study groups	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mentor program	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Computer based aids (generally):					
Lecture notes published	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Audio-visual support in lectures and laboratories	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Access to lectures on the internet	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Discussion chat rooms	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Personal/Family support:					
Student organizations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Child care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Job placement assistance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ombudsman	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Disabled student support	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Big Sister/Brother program	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Transportation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Financial Aid					
Scholarship	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Student loans	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Employment tuition reimbursement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other financial aid:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

If financial aid used, please specify:

4. When comparing yourself to students who dropped out of the program, why do you think you completed the nursing program while others did not? Answer by indicating your agreement/disagreement with the following statements

	Not Applicable	Strongly Disagree	Disagree	Agree	Strongly Agree
I had better academic preparation.	<input type="radio"/>				
I had natural strengths in nursing-related subjects.	<input type="radio"/>				
I had more self-confidence.	<input type="radio"/>				
I was more persistent in asking for help.	<input type="radio"/>				

school

4. When comparing yourself to students who dropped out of the program, why do you think you completed the nursing program while others did not? Answer by indicating your agreement/disagreement with the following statements

	Not Applicable	Strongly Disagree	Disagree	Agree	Strongly Agree
I had more personal financial resources.	<input type="radio"/>				
I had more financial support from my family.	<input type="radio"/>				
I had more financial support from the school.	<input type="radio"/>				
My family supported me more while I went to school.	<input type="radio"/>				
My spouse/significant other supported me more while I went to school.	<input type="radio"/>				
My life is not as complicated as other people's lives.	<input type="radio"/>				
Nursing faculty supported me more.	<input type="radio"/>				
People at the college supported me more.	<input type="radio"/>				
I was more willing to ask for help	<input type="radio"/>				
I was more assertive than others	<input type="radio"/>				
I had a special person in my life who was my role model/confidante.	<input type="radio"/>				
I worked harder to learn and to get good grades.	<input type="radio"/>				
I was more able to develop a support network.	<input type="radio"/>				
I dealt with stress better.	<input type="radio"/>				

5. Finally, please tell us about yourself:

Age: under 25 26-30 31-35 36-40 41+

Gender: female male

Ethnicity: White (not hispanic) African-American Hispanic Asian Other

Marital status Single Married Divorced Widowed

Do you have children? Yes No

Are you an LVN? Yes No

Are you a paramedic or EMT? Yes No

Were you working while attending school? Yes No

If yes, which statement best describes your workload while completing the nursing program?

I worked the entire time I was in the nursing program.

I worked 1 to 2 semesters while I was in the nursing program.

I worked 3 to 4 semesters while I was in the nursing program.

Other Please specify:

And, how many hours per week (on average) did you work?

less than 10 hours per week

11-20 hours per week

21-40 hours per week

more than 40 hours of work per week

school

6. Finally, please tell us about yourself: (continued)

Is this your first college degree? Yes No

Are you the first person in your immediate family to graduate from college? Yes No

How many semesters did it take you to complete the nursing program (after you were admitted into the nursing program)?

- less than 4 semesters
- 4 semesters
- 5 semesters
- 6 semesters
- more than 6 semesters

How much emphasis does your nursing program place on students graduating on time? Choose the number closest to your answer.

- | | | | | | |
|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| No emphasis | | Somewhat of an emphasis | | Major emphasis | |
| <input type="radio"/> 0 | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 |

When selecting your nursing program, would knowing the graduation rate have influenced your decision? Yes No

When selecting your nursing program, would knowing the NCLEX pass rate have influenced your decision? Yes No

7. Given the opportunity to talk with members of the Texas Legislature, what strategies to increase nursing graduates would you advocate?

Thank you for completing the survey. You've been a great help to us!

Appendix G Survey Results

Summary of Responses from Deans/Directors of Nursing Programs in Texas

Report Prepared by Carolyn L. Cason, RN, PhD, Data Director

March 31, 2006; updated June 2006

1. Generally speaking, of the admission criteria that you use, which are the most predictive of a student's ability to complete the nursing program?

Criterion	Program Type	Not used	Never	Sometimes	Often	Always
Minimum ACT or SAT score	ADN	67	2	11	15	2
	BSN	67	6	22	0	0
Minimum GPA	ADN	13	4	43	35	2
	BSN	22	6	17	39	11
Overall GPA in degree plan*	ADN	15	0	41	33	6
	BSN	11	11	22	50	0
GPA: pre-requisite courses	ADN	6	0	30	59	2
	BSN	11	0	17	61	6
GPA: Science courses	ADN	13	0	28	43	13
	BSN	17	0	6	50	22
Pre-Entrance exam	ADN	50	0	11	26	2
	BSN	56	0	6	28	6
HESI	ADN	67	0	4	17	6
	BSN	50	0	0	22	11
NET	ADN	67	0	6	20	0
	BSN	39	0	6	39	6
TSI*	ADN	54	6	24	9	2
	BSN	83	0	0	0	0
Specific grades in science/math courses	ADN	17	2	33	43	4
	BSN	50	0	6	11	0
High school advanced placement courses	ADN	74	2	17	2	0
	BSN	67	6	17	6	0
Pre-requisite courses	ADN	4	0	50	39	4
	BSN	17	6	17	56	0
Number of courses completed in the degree	ADN	15	9	39	35	0
	BSN	33	6	28	22	0
Number of hours completed at institution	ADN	41	20	20	20	0
	BSN	39	6	17	22	6
Letters of recommendation	ADN	83	11	6	0	0
	BSN	67	11	17	0	0
Essay	ADN	91	2	6	0	0
	BSN	67	11	11	6	0

Interview*	ADN	96	2	2	0	0
	BSN	61	6	28	0	0
Prior work experience (LVN-RN)*	ADN	26	15	35	24	0
	BSN	61	6	28	0	0
Prior work experience (EMT)	ADN	50	9	28	13	0
	BSN	67	11	17	0	0
Number of times applicant has applied and met minimum requirements	ADN	50	6	30	11	0
	BSN	61	0	28	6	0

ADN Programs = 46; BSN programs = 18

2. Of the admission selection processes, which best describes the one used by your program?

Process	Program Type	Percent
All applicants that meet minimum standards are offered admission.	ADN	4
	BSN	11
Use a point/weighting system to rank and select most qualified applicants.	ADN	91
	BSN	56
Use a random/lottery system to select from applicants that meet admission standards.	ADN	0
	BSN	0
Use date application was submitted to select from applicants that meet admission standards.	ADN	0
	BSN	0

3. Do you think that your program should be more selective in choosing applicants for your nursing program?

Response	Program Type	Percent
Yes	ADN	39
	BSN	44

4. Generally speaking, how does your program identify students who are at risk for not graduating from the nursing program?

Risk	Program Type	Percent
Fail a nursing course and repeat it*	ADN	85
	BSN	100
Perform poorly on tests	ADN	96
	BSN	83
Repeatedly miss class (absenteeism)	ADN	54
	BSN	44
Have an overall GPA that is below an acceptable level	ADN	24
	BSN	39

Are readmitted to the program	ADN BSN	67 44
Fail key course requirements (e.g., dosage calculation or pharmacology exam)	ADN BSN	52 67
Receive a low rating on one or more clinical days	ADN BSN	30 61
Have a high level of financial need	ADN BSN	48 39
Have a marginal family support system	ADN BSN	48 50
Have a demographic profile similar to other students at risk	ADN BSN	20 39
Have underdeveloped English language skills	ADN BSN	61 78
Are non-traditional students (students returning to school later in life; first generation college student)	ADN BSN	17 28
Have no systematic way to identify students at risk	ADN BSN	9 6

5. How successful do you believe the following interventions are for students who are at risk for not graduating from the program.

Intervention	Program Type	Not Used	Not Successful	A little Successful	Very Successful	Extremely Successful
Additional academic advising	ADN	4	13	48	24	6
	BSN	0	6	39	44	6
Participation in study groups	ADN	0	2	37	54	4
	BSN	6	6	33	44	6
Working with faculty or nurse mentor	ADN	2	0	33	61	4
	BSN	11	0	33	33	22
Working with a peer*	ADN	6	0	59	30	0
	BSN	6	6	44	33	11
Supplementary classes/tutoring	ADN	2	2	48	35	9
	BSN	11	11	28	28	22
Personal counseling	ADN	15	2	46	26	4
	BSN	6	0	28	56	6
Counseling for family members*	ADN	87	2	2	2	0
	BSN	72	11	11	0	0
On-campus employment	ADN	72	9	6	2	0
	BSN	44	22	28	0	0

*Results found to be statistically significant

6. Does your program conduct exit interviews with students who are withdrawing permanently from the program?

Response	Program Type	Percent
Yes	ADN	72
	BSN	61

7. Please indicate how local hospitals/other healthcare organizations participate in the nursing program.

Response	Program Type	Percent Yes
Financial support to operate my program	ADN	33
	BSN	61
Qualified nurses as adjunct faculty*	ADN	54
	BSN	83
Qualified nurses as clinical preceptors	ADN	85
	BSN	100
Financial support for my students	ADN	83
	BSN	61
Additional instruction/training opportunities for my students*	ADN	41
	BSN	67
Additional opportunities for their employees to become nurses through my program	ADN	74
	BSN	67

8. How challenging are these potential obstacles for faculty in helping students complete the nursing program?

Obstacle	Program Type	Not a Challenge	A small Challenge	A moderate Challenge	A large Challenge
Having adequate resources to refer students with academic problems	ADN	30	22	37	11
	BSN	22	17	50	11
Ease of referral to resources for students with academic problems	ADN	43	22	33	2
	BSN	50	6	39	0
Having adequate resources to refer students with personal problems*	ADN	24	22	39	15
	BSN	50	33	11	6
Ease of referral process to resources for students with personal problems	ADN	30	30	24	15
	BSN	56	22	11	11
Having workloads that	ADN	11	22	3	33

allow time to help students	BSN	6	17	28	50
Having adequate faculty to student ratios	ADN	20	28	24	28
	BSN	6	44	40	11
Having the support of the of the Dean/Director for retention efforts	ADN	65	22	13	0
	BSN	89	6	6	0
Having the support of University/College administration for retention efforts	ADN	43	26	24	6
	BSN	44	17	39	0
Lack of incentives (e.g., release time, financial) for retention efforts	ADN	15	15	35	35
	BSN	17	28	33	17

9. Have you had to cut programs that were beneficial to student success?

Response	Program Type	Percent
Yes	ADN	20
	BSN	6

10. How much emphasis does your nursing program place on students graduating on time?

Degree of emphasis	Program Type	percent
None	ADN	6
	BSN	6
1	ADN	2
	BSN	11
2	ADN	15
	BSN	22
3	ADN	30
	BSN	33
4	ADN	28
	BSN	11
Major	ADN	17
	BSN	17

12. Initial RN licensure program statistics

Statistic	ADN Programs	BSN Programs
Student to faculty ratio		
Range	5 to 29.43	5 to 22.8
Mean	13.8	11.2

Standard Deviation	4.4	4.2
Vacant FTE faculty positions		
Range	0 to 6	0 to 4
Mean	1	0.75
Standard Deviation	1.4	1.4
Graduates 9/04 through 8/05		
Range	30 to 556	23 to 318
Mean	73	98
Standard Deviation	55	71
Graduates passing NCLEX		
Range	13 to 100	78 to 100
Mean	89	89
Standard Deviation	13	6
Faculty FTE providing support services		
Range	0 to 7	0 to 3
Mean	0.6	0.6
Standard Deviation	1.3	.85
Staff FTE providing support services		
Range	0 to 6	0 to 6
Mean	1.1	1.3
Standard Deviation	1.2	1.6

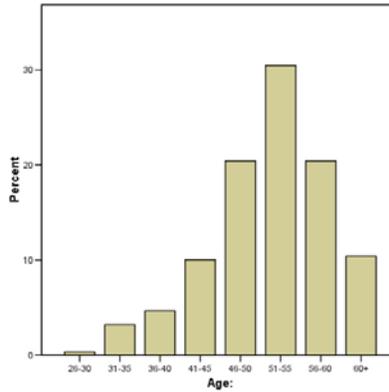
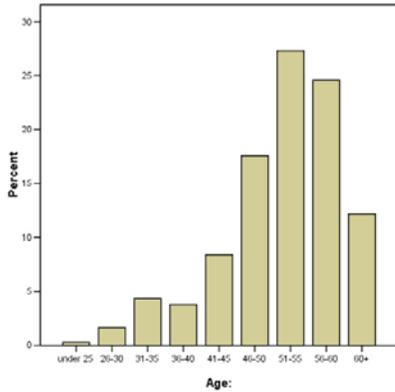
21 or 46% of ADN programs had no vacant FTE faculty positions.
12 or 67% of BSN programs had no vacant FTE faculty positions.
30 or 65% of ADN programs had no FTE faculty exclusively providing support services.
9 or 50% of BSN programs had no FTE faculty exclusively providing support services

Summary of Responses from Faculty of Schools of Nursing
 Report Prepared by Carolyn L. Cason, RN, PhD, Data Director
 March 31, 2006

Demographics
Faculty :

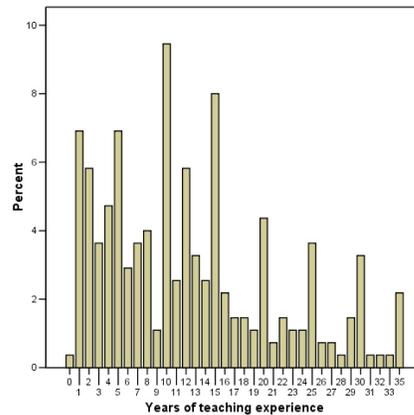
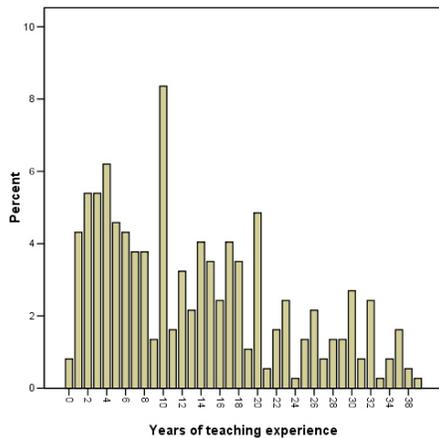
ADN (n=387)

BSN (n = 288)



Age of ADN faculty

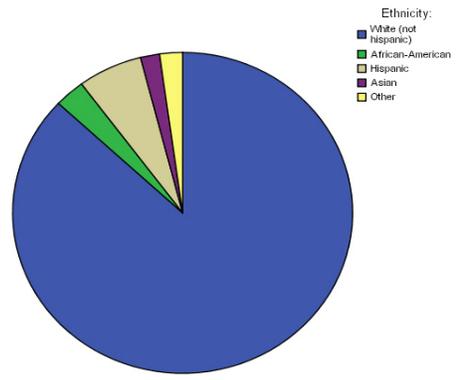
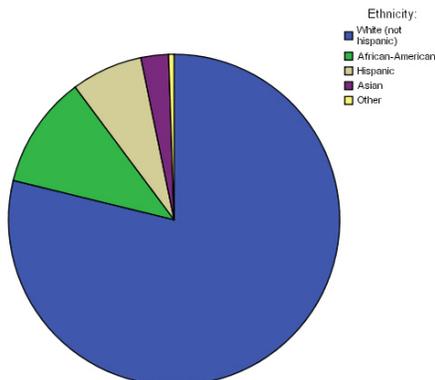
Age of BSN faculty



ADN

BSN

Ethnicity



1. Generally speaking, how challenging are these potential obstacles for students in completing the nursing program at your institution?

Obstacle	Program Type	Not a challenge	A small challenge	A moderate challenge	A large challenge
Passing					
Pre- requisite science math courses	ADN	7	27	52	12
	BSN	7	27	51	11
Nursing lecture courses*	ADN	1	8	54	37
	BSN	1	16	62	18
Clinical courses	ADN	4	24	57	14
	BSN	4	24	26	12
Accessing					
Nursing faculty	ADN	55	32	9	3
	BSN	52	35	8	2
Instructional materials& study aids*	ADN	45	39	12	3
	BSN	51	37	10	0
Developing study skills					
Study skills generally	ADN	3	17	50	30
	BSN	4	23	49	23
Library skills	ADN	8	39	37	15
	BSN	9	35	37	16
Test-taking skills*	ADN	1	12	43	44
	BSN	2	16	49	32
Time management skills	ADN	1	9	41	49
	BSN	2	11	43	41
Computer skills*	ADN	11	54	28	7
	BSN	23	51	20	3
Finding					
Financial support to go to school	ADN	3	23	45	29
	BSN	5	20	48	23
Transportation to school	ADN	17	54	25	3
	BSN	20	51	23	4
Child care	ADN	5	35	46	13
	BSN	7	42	39	9
Time to study*	ADN	1	11	43	4
	BSN	1	13	56	28
Managing					
Ethnic/racial differences	ADN	41	45	1	3
	BSN	36	42	16	3
Gender	ADN	53	41	4	1

differences*	BSN	44	42	10	1
Age differences between fellow students	ADN	53	40	5	1
	BSN	45	42	8	1
Age difference between faculty and students	ADN	53	35	9	1
	BSN	45	42	9	1
Juggling work schedules around coursework*	ADN	1	10	41	47
	BSN	1	20	43	35
Dealing with family conflict/crises*	ADN	0	16	49	34
	BSN	2	26	45	24
Juggling coursework with family obligations*	ADN	0	11	40	46
	BSN	3	18	45	31
Responsibilities related to social activities					
Band/cheerleader*	ADN	79	6	2	2
	BSN	55	25	6	6
Fraternity/sorority*	ADN	79	7	2	2
	BSN	47	31	9	5
Professional club (e.g., SNA)*	ADN	46	36	10	3
	BSN	30	50	11	2
Athletics*	ADN	77	7	2	3
	BSN	42	27	14	8
ROTC*	ADN	79	5	2	3
	BSN	48	24	16	5

2. How challenging are these potential obstacles for faculty in helping students complete the nursing program?

Obstacle	Program Type	Not a Challenge	A small Challenge	A moderate Challenge	A large Challenge
Having adequate resources to refer students with academic problems	ADN	22	33	32	11
	BSN	23	34	28	14
Ease of referral to resources for students with academic problems	ADN	28	37	23	10
	BSN	27	37	21	13
Having adequate resources to refer students with personal problems*	ADN	18	30	34	15
	BSN	26	40	24	8

Ease of referral process to resources for students with personal problems*	ADN BSN	21 28	36 39	27 21	1 8
Having workloads that allow time to help students	ADN BSN	8 6	28 24	33 41	28 26
Having adequate faculty to student ratios*	ADN BSN	13 7	21 23	30 36	34 31
Having the support of the of the Dean/Director for retention efforts	ADN BSN	51 50	26 24	13 16	8 8
Having the support of University/College administration for retention efforts	ADN BSN	32 30	34 32	20 20	11 14
Lack of incentives (e.g., release time, financial) for retention efforts	ADN BSN	12 15	20 21	27 29	38 33

3. How helpful were these services to students in completing the nursing program?

Services	Program Type	Not available Not applicable	Not helpful	Somewhat helpful	Very helpful	Extremely helpful
Orientation program prior to starting nursing course sequence	ADN	5	3	30	47	17
	BSN	7	1	32	40	16
Developmental (remedial) education*	ADN	6	9	43	31	8
	BSN	13	3	40	30	9
English as a second language*	ADN	16	20	32	18	8
	BSN	26	10	28	19	9
Specialized developmental courses						
Test taking skills*	ADN	13	7	36	25	15
	BSN	9	3	38	31	15
Time management*	ADN	14	11	34	21	14
	BSN	11	4	38	26	14
Study skills*	ADN	12	11	35	25	14
	BSN	10	3	39	29	13
Library skills*	ADN	11	10	40	24	11
	BSN	7	2	41	31	13

Specialized laboratories						
Math lab*	ADN	30	9	28	17	11
	BSN	38	3	22	19	8
Reading lab	ADN	37	10	26	15	8
	BSN	39	3	24	16	8
Nursing skills lab	ADN	4	2	15	40	37
	BSN	1	1	14	37	43
Computer lab	ADN	8	3	26	37	23
	BSN	7	3	19	42	23
Writing lab*	ADN	33	10	26	14	8
	BSN	24	6	28	25	10
Library*	ADN	4	5	37	32	16
	BSN	2	2	24	38	23
Academic assistance						
Learning style assessment testing	ADN	31	7	34	19	5
	BSN	32	8	33	15	4
Teaching assistants*	ADN	59	3	1	12	8
	BSN	44	5	18	21	4
Academic advising*	ADN	5	8	45	28	10
	BSN	1	4	30	43	17
Tutoring by faculty/staff	ADN	14	3	24	40	17
	BSN	12	2	22	42	17
Peer mentoring*	ADN	29	5	30	24	8
	BSN	19	3	29	33	10
Organized study groups	ADN	18	3	31	36	10
	BSN	19	1	28	33	12
Mentor program*	ADN	53	3	20	14	4
	BSN	43	1	20	21	8
Computer based aids (generally)						
Lecture notes published	ADN	13	3	24	38	20
	BSN	7	3	25	37	23
Audio-visual support in lectures and laboratories	ADN	1	1	25	47	24
	BSN	0	2	19	48	26
Access to lectures on the internet*	ADN	30	2	18	29	18
	BSN	19	2	18	35	21
Discussion chat rooms*	ADN	46	6	27	13	5
	BSN	32	9	33	14	7

Personal/Family Support						
Mental health counselor*	ADN	41	6	30	14	5
	BSN	11	3	44	26	9
Student organizations*	ADN	11	14	54	14	4
	BSN	3	12	44	27	7
Child care*	ADN	39	5	25	18	10
	BSN	53	4	15	13	8
Job placement assistance*	ADN	46	7	23	16	4
	BSN	32	5	26	22	6
Ombudsman*	ADN	70	5	11	6	1
	BSN	59	4	17	6	3
Disabled student support	ADN	27	6	33	22	8
	BSN	18	6	35	26	6
Big sister/brother program*	ADN	82	3	5	3	1
	BSN	70	2	11	6	0
Transportation*	ADN	67	5	10	7	5
	BSN	53	6	17	8	7
Financial Aid						
Scholarship	ADN	1	2	24	38	33
	BSN	0	0	19	37	38
Student loans*	ADN	3	3	23	41	27
	BSN	1	0	16	40	37
Employment tuition reimbursement	ADN	14	2	20	35	24
	BSN	14	2	15	31	31

4. Generally speaking, how does your program identify students who are at risk for not graduating from the nursing program?

Risk	Program Type	Percent
Fail a nursing course and repeat it	ADN	90
	BSN	91
Perform poorly on tests	ADN	93
	BSN	92
Repeatedly miss class (absenteeism)	ADN	74
	BSN	66
Have an overall GPA that is below an acceptable level	ADN	52
	BSN	65
Are readmitted to the program	ADN	70
	BSN	49
Fail key course requirements (e.g., dosage calculation or pharmacology exam)	ADN	75
	BSN	83
Receive a low rating on one or more clinical days	ADN	52

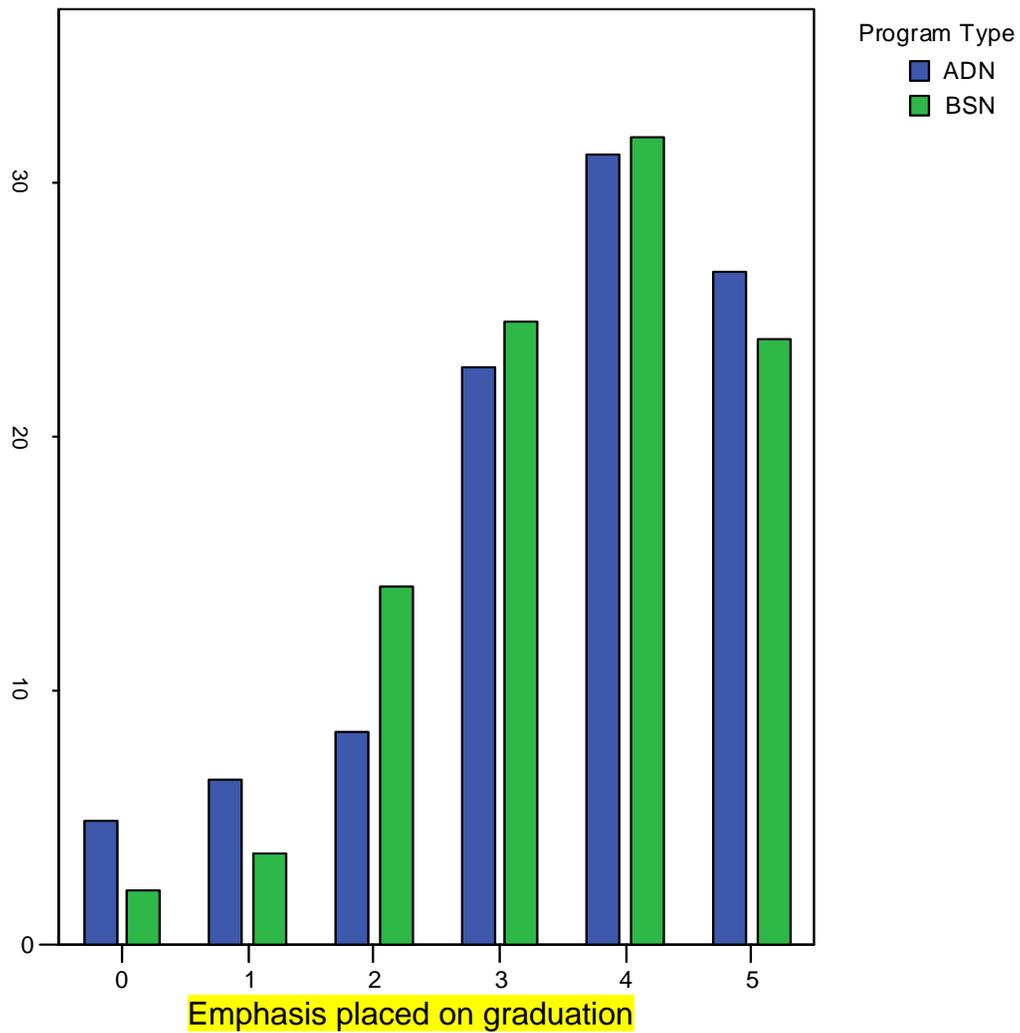
	BSN	57
Have a high level of financial need	ADN	28
	BSN	23
Have a marginal family support system	ADN	41
	BSN	32
Have a demographic profile similar to other students at risk	ADN	16
	BSN	18
Have underdeveloped English language skills	ADN	66
	BSN	61
Are non-traditional students (students returning to school later in life; first generation college student)	ADN	20
	BSN	18
Have no systematic way to identify students at risk	ADN	9
	BSN	10

5. Of the following interventions for students who are at risk for not graduating, which are the most successful in helping them complete the program?

Intervention	Program Type	Not Used	Not Successful	A little Successful	Very Successful	Extremely Successful
Additional academic advising	ADN	13	3	38	30	8
	BSN	8	2	40	31	10
Participation in study groups	ADN	7	2	32	42	11
	BSN	11	2	36	32	9
Working with faculty or nurse mentor*	ADN	16	2	26	37	14
	BSN	9	1	25	45	15
Working with a peer	ADN	13	4	34	33	7
	BSN	13	2	40	31	6
Supplementary classes/tutoring*	ADN	23	2	27	29	11
	BSN	13	1	28	38	13
Personal counseling*	ADN	18	3	41	26	5
	BSN	9	1	42	28	9
Counseling for family members*	ADN	76	2	8	3	1
	BSN	65	4	13	3	1
On-campus employment*	ADN	59	7	17	4	1
	BSN	41	7	31	7	2

*Results found to be statistically significant

9. How much emphasis does your nursing program place on students graduating on time?*



Summary of Responses from Students of Schools of Nursing

Report Prepared by Carolyn L. Cason, RN, PhD, Data Director

May 2006

Region: State of Texas

Student Respondents: ADN = 2208

BSN = 928

Age	Under 25	26-30	31-35	36-40	Over 40
% of ADN students	28	25	17	13	15
% of BSN students	56	21	10	4	6

Gender	Female	Male
% of ADN students	81	16
% of BSN students	85	12

Ethnicity	White (non-Hispanic)	African-American	Hispanic	Asian	Other
% of ADN students					
% of BSN students	60	9	18	7	4
	62	8	18	6	3

Marital Status	Single	Married	Divorced	Widowed
% of ADN students	34	52	10	1
% of BSN students	59	34	5	

Characteristic	% of ADN students	% of BSN students
Do you have children?*	58	30
Is this your first college degree?*	65	70
Are you the first person in your immediate family to graduate from college?*	38	32
Are you an LVN?*	22	5
Are you a paramedic or EMT?	4	4
Were you working while attending school?	67	70

If **working** while attending school, statement that best describes your workload while completing the nursing program.

Statement	% ADN students	% BSN students
Entire time I was in the program	42	31
I worked 1 to 2 semesters while I was in the nursing program	16	21
I worked 3 to 4 semesters while I was in the nursing program.	10	17
Other	6	7

Number of hours per week (on average) did you work?

Hours/week	% ADN students	% BSN students
Less than 10	11	21
11-20	24	33
21-40	33	19
More than 40	5	2

How many semesters did it take you to complete the nursing program (after you were admitted into the nursing program)?*

Number of Semesters	% of ADN students	% BSN students
Less than 4	15	5
4	47	49
5	23	28
6	5	10
More than 6	4	6

How much emphasis does your nursing program place on students graduating on time?*

Degree of emphasis	% of ADN students	% BSN students
None	8	10
1	5	8
2	11	14
3	15	21
4	18	21
Major	37	24

1. Generally speaking, how challenging are these potential obstacles for you in completing the nursing program at your institution?

Obstacle	Program Type	Not a challenge	A small challenge	A moderate challenge	A large challenge
Passing					
Pre- requisite science math courses*	ADN	29	33	32	6
	BSN	36	30	28	4
Nursing lecture courses*	ADN	6	15	41	36
	BSN	12	21	44	21
Clinical courses*	ADN	14	27	44	13
	BSN	18	27	41	12
Accessing					
Nursing faculty*	ADN	34	31	24	9
	BSN	37	36	18	7
Instructional materials & study aids*	ADN	29	34	27	8
	BSN	37	37	20	4
Developing study skills					
Study skills generally*	ADN	14	35	36	14
	BSN	20	35	33	10
Library skills*	ADN	39	36	19	5
	BSN	31	43	19	6
Test-taking skills*	ADN	11	29	35	23
	BSN	15	31	34	18
Time management skills	ADN	10	28	36	24
	BSN	11	28	37	21
Computer skills*	ADN	49	30	15	4
	BSN	54	31	11	2
Finding					
Financial support to go to school	ADN	23	24	25	26
	BSN	24	25	25	25
Transportation to school	ADN	64	19	9	6
	BSN	67	19	8	5
Child care*	ADN	61	15	11	11
	BSN	74	7	7	8
Time to study*	ADN	9	20	35	34
	BSN	8	24	38	27
Managing					
Ethnic/racial differences	ADN	79	11	5	3
	BSN	80	12	4	3
Gender differences	ADN	83	10	4	2
	BSN	85	9	3	1
Age differences between fellow students*	ADN	79	14	4	1
	BSN	75	18	3	2
Age difference between faculty and students*	ADN	80	12	5	2
	BSN	74	17	6	2

Juggling work schedules around coursework*	ADN	22	21	28	27
	BSN	23	24	29	22
Dealing with family conflict/crises*	ADN	18	30	29	21
	BSN	21	31	28	18
Juggling coursework with family obligations*	ADN	12	26	34	27
	BSN	17	30	29	22
Responsibilities related to social activities					
Band/cheerleader	ADN	85	2	2	2
	BSN	85	2	1	2
Fraternity/sorority*	ADN	85	2	2	2
	BSN	81	4	2	3
Professional club (e.g., SNA)*	ADN	78	7	4	2
	BSN	71	13	6	3
Athletics	ADN	81	4	3	2
	BSN	79	5	3	3
ROTC	ADN	84	2	2	2
	BSN	85	1	1	2

2. Generally speaking, how important were these people in helping you complete the nursing program?

People	Program Type	Not important	Somewhat important	Very important	Extremely important
Class room faculty*	ADN	5	20	43	30
	BSN	4	25	45	24
Clinical faculty*	ADN	2	13	45	38
	BSN	2	16	47	33
Clinical preceptors/Nurse mentors	ADN	7	20	42	28
	BSN	5	19	43	30
Dean/ Director of program*	ADN	33	33	20	12
	BSN	44	33	15	6
Academic advisor	ADN	40	32	16	8
	BSN	38	34	16	9
Mental health counselor*	ADN	67	15	9	5
	BSN	72	14	6	4
Teaching assistants*	ADN	55	21	14	7
	BSN	59	25	10	3
Other nursing students	ADN	5	19	37	37
	BSN	5	20	36	38
Spouse/partner*	ADN	21	11	23	41
	BSN	26	13	21	37
Parent/Guardian*	ADN	26	17	25	29
	BSN	18	20	25	35

Other family member*	ADN	25	18	26	28
	BSN	25	21	23	27
Friends*	ADN	17	24	29	27
	BSN	12	24	33	29

3. How helpful were these services to you in completing the nursing program?

Services	Program Type	Not available Not applicable	Not helpful	Somewhat helpful	Very helpful	Extremely helpful
Orientation program prior to starting nursing course sequence*	ADN	13	14	39	22	9
	BSN	15	21	39	17	6
Developmental (remedial) education*	ADN	48	12	22	12	4
	BSN	56	12	19	7	2
English as a second language*	ADN	79	4	4	5	3
	BSN	84	4	3	2	2
Specialized developmental courses						
Test taking skills	ADN	40	10	25	15	8
	BSN	41	11	26	14	5
Time management*	ADN	39	10	23	16	8
	BSN	44	10	26	14	6
Study skills*	ADN	39	9	22	17	9
	BSN	42	12	23	14	6
Library skills*	ADN	40	13	26	12	5
	BSN	39	16	28	11	3
Specialized laboratories						
Math lab*	ADN	59	10	15	8	5
	BSN	69	10	10	6	2
Reading lab*	ADN	70	10	9	5	3
	BSN	75	10	6	3	1
Nursing skills lab*	ADN	11	6	28	29	22
	BSN	9	6	33	32	17
Computer lab*	ADN	23	9	28	22	14
	BSN	23	8	24	26	16
Writing lab*	ADN	66	9	10	7	4
	BSN	62	11	13	7	7
Library*	ADN	19	10	35	18	11
	BSN	13	9	35	24	13
Academic assistance						
Learning style assessment testing*	ADN	46	13	23	10	5
	BSN	45	19	23	7	4

Teaching assistants	ADN	54	10	18	9	5
	BSN	48	16	24	7	2
Academic advising*	ADN	34	19	30	10	4
	BSN	19	27	35	12	5
Tutoring by faculty/staff*	ADN	40	10	22	15	9
	BSN	34	11	26	19	8
Peer mentoring*	ADN	38	8	21	19	11
	BSN	35	10	22	20	10
Organized study groups*	ADN	22	11	25	22	17
	BSN	19	12	28	24	14
Mentor program*	ADN	66	9	11	6	4
	BSN	57	12	14	9	5
Computer based aids (generally)						
Lecture notes published*	ADN	5	4	22	32	34
	BSN	3	3	17	34	40
Audio-visual support in lectures and laboratories	ADN	6	6	27	32	26
	BSN	5	7	26	31	28
Access to lectures on the internet*	ADN	23	5	14	26	29
	BSN	14	3	13	27	42
Discussion chat rooms*	ADN	51	15	14	9	7
	BSN	34	25	19	11	8
Personal/Family Support						
Student organizations*	ADN	49	20	18	7	4
	BSN	37	22	26	8	5
Child care*	ADN	63	5	5	9	14
	BSN	76	5	3	4	9
Job placement assistance*	ADN	69	7	9	7	4
	BSN	64	8	13	7	5
Ombudsman	ADN	84	4	4	2	1
	BSN	84	5	4	2	1
Disabled student support	ADN	86	4	3	2	1
	BSN	89	3	2	2	1
Big sister/brother program	ADN	88	3	3	2	1
	BSN	89	4	2	1	1
Transportation*	ADN	68	4	6	7	11
	BSN	61	5	9	8	10
Financial Aid						
Scholarship*	ADN	48	5	7	9	27
	BSN	32	5	13	12	34
Student loans*	ADN	51	4	6	9	26
	BSN	29	2	10	14	42
Employment tuition reimbursement	ADN	67	5	4	7	14
	BSN	68	4	5	5	15

4. When comparing yourself to students who dropped out of the program, why do you think you completed the nursing program while others did not? Answer by indicating your agreement/disagreement with the following statements

Statement	Program Type	Not applicable	Strongly disagree	Disagree	Agree	Strongly Agree
I had better academic preparation.*	ADN	8	7	29	41	12
	BSN	3	7	31	41	16
I had natural strengths in nursing related subjects.*	ADN	6	6	26	44	14
	BSN	3	7	26	47	15
I had more self confidence.*	ADN	5	6	26	46	14
	BSN	2	5	28	44	17
I had more personal financial resources.*	ADN	8	18	35	28	7
	BSN	6	23	37	25	7
I have more financial support from my family.*	ADN	9	16	28	33	11
	BSN	7	21	27	33	10
I had more financial support from the school.*	ADN	21	20	34	15	5
	BSN	12	23	39	20	4
My family supported me more while I went to school.	ADN	8	8	17	38	25
	BSN	7	8	18	39	25
My spouse/significant other supported me more while I went to school.*	ADN	20	7	14	29	26
	BSN	30	6	13	27	21
My life is not as complicated as other people's lives.*	ADN	6	33	32	19	7
	BSN	4	32	32	22	7
Nursing faculty supported me more.*	ADN	10	24	41	17	3
	BSN	5	25	47	18	2
People at the college supported me more.*	ADN	11	22	42	18	3
	BSN	7	21	43	23	4
I was more willing to ask for help.*	ADN	7	9	29	43	9
	BSN	4	10	31	43	10
I was more assertive than others.*	ADN	6	9	34	38	9
	BSN	3	8	37	39	10
I had a special person in my life who was my role model/confidant.*	ADN	15	9	29	28	15
	BSN	12	7	28	33	16
I worked harder to learn and to get good grades.	ADN	5	5	23	45	19
	BSN	2	3	21	46	25
I was more able to develop a support network.*	ADN	8	7	29	41	12
	BSN	5	5	27	47	14
I dealt with stress better.*	ADN	4	11	30	39	11
	BSN	2	10	28	43	13

	% ADN students	% BSN students
When selecting your nursing program, would knowing the graduation rate have influenced your decision?	59	61
When selecting your nursing program, would knowing the NCLEX pass rate have influenced your decision?*	67	72

*Results found to be statistically significant

Increasing RN Graduates in Texas

Strategies for increasing RN Graduates in Texas

Report prepared by Carolyn L. Cason, RN, PhD, Data Director

March 31, 2006

Question: Given the opportunity to talk with members of the Texas Legislature, what strategies to increase nursing graduates would you advocate?

Responses to the above open-ended question by faculty and administrators were analyzed to reflect common themes. Six (6) themes emerged from the analysis and represented the widest number of responses. Themes identified were:

1. Financial support for faculty
2. Incentives for faculty
3. Financial support for students
4. Financial support for schools
5. The creation of a Regional Admission Center
6. Non-Legislative Issues

The six themes above are further broken down to include subsections, as follows:

1. Financial support for Faculty:
 - A. Salaries
2. Incentives for Faculty
 - A. Increase time available for faculty to get advanced degrees
 - B. Tuition support to return to school
3. Financial support for students
 - A. Scholarships
 - B. Loans
 - C. Stipends
4. Financial support for schools
 - A. Simulation labs
 - B. Increased space
 - C. At risk programs
 - D. Money for Graduate Teaching Assistants
 - D. ESL program
 - E. Stipend to college for each student passing boards
 - F. Money to improve labs
5. Regional Admission Center
 - A. Standardized test in science courses
 - B. Better prepare pre-nursing
 - C. Admissions more selective
6. Non-legislative issues
 - A. Student faculty ratio change
 - B. Improve workplace environment

The frequency of citation of these themes in the analysis includes two hundred sixty-six (266) citations for faculty support, which includes salaries and incentives. Respondents cited funds for student support one hundred twenty-two (122) times. Respondents cited funds to schools for development one hundred (100) times. Finally, respondents listed system changes such as creation of a Regional Admission Center and several non-legislative issues one hundred eighty-five (185) times.

Faculty support – salaries: The theme of salaries for faculty is a topic of great interest to the responding faculty and administrators. Faculty indicated that they would like to see increased funding, including pay increases at intervals. Additionally, faculty mentioned that their salaries are not commensurate with nurses working in practice or service settings. Because of low pay, respondents indicated that it was difficult to recruit faculty, who must take a reduction in salary if they desired to teach. Faculty respondents reported their salaries were approximately equivalent to that of a new graduate nurse. In order to recruit and retain quality faculty, the belief is that salaries must increase. Administrators concurred with the faculty report regarding salary. One administrator responded that nurses at local hospitals had declined to take an almost fifty (50%) pay cut to accept a faculty position. Other administrators cite the need to make faculty salaries commensurate with pay in practice settings.

Incentives for faculty: Incentives for faculty include primarily assistance to obtain advanced educational degrees to further their careers. Faculty report an existing need to provide tuition support or tuition reimbursement, in order to allow faculty to continue their education in the educator role, and to obtain doctoral degrees. Faculty cited a need for programs which provide tuition payment in exchange for an agreement to teach a designated number of years. These programs are in place, but there may not be widespread awareness by some faculty of their existence. Administrators also cited a need to provide financial assistance, as well as administrative support, for faculty to seek doctoral degrees. Some faculty reported a need for stipends or funds to help retain faculty, as well as incentives to be “equalize disparity between service salaries and faculty salaries”. One administrator proposed incentives such as lost cost mortgages, more educational loans, and decreased or free tuition for the faculty or their children.

Financial support for students: Both faculty and administrators identified the need to assist students financially in order to promote increased success and graduation by funding for scholarships, stipends and loans. Additionally, a common theme identified was financial support or stipends to defray living expenses in order that students would not need to work as many hours, in order to devote more time to study. One administrator proposed financial incentive for students to “graduate, pass NCLEX, and then join the nursing workforce.” This suggestion included money for tuition, fees, books, nursing supplies, transportation, and other fees. Faculty suggested loans and grants, as well as assistance for child care. Some faculty suggested a form of tuition incentive in the form of “loan forgiveness”, calculated based on years of employment in nursing following licensure.

Financial support for schools: Financial support for schools is a broad theme that encompasses funding for a variety of programs and resources. One innovative strategy proposed by faculty included a stipend to the college for each student passing boards. Resources identified as facility needs included more or larger space; new buildings; lecture auditoriums and classrooms; simulation labs; updating of current lab space; library resources; simulation manikins; faculty offices in closer proximity to classrooms and labs; computers, including computers for electronic documentation,

computer software, PDA's, and laptop computers for students.

Resources for services mentioned by administrators and faculty include money for programs for at-risk students, including tutoring and mentoring; programs for students with learning disabilities and to improve reading; funding for "retention specialists" and remediation programs; and psychological services for at risk students. Other services include services for ESL students, including retention after they are admitted to nursing programs. Resources needed for personnel include lab coordinators to assist students with practice time and graduate teaching assistants.

Regional admission centers: Both administrators and faculty identified a need for a regional admission center, where students could access information regarding openings for programs, including a generalized set of admission criteria to be determined. These centralized admission centers would relieve faculty involved in the admission process.

Along these lines faculty and administrators both identify a need to strengthen admission criteria and be selective in students being admitted to nursing programs. Administrators and faculty recommend use of a standardized state exam for all science courses in order to demonstrate a specified minimal level of competency. Both groups identify a need to encourage better preparation of students in grade school and high school, including the need for stronger math and science foundation, critical thinking, reading comprehension writing, study skills, and skills to transition to college. Some advocate for funding to grade and high schools to accomplish this goal.

Non-Legislative Issues: The final category contains issues that were identified and cited numerous times by both administrators and faculty, but which are not issues requiring legislative action. These include statements about the need to decrease clinical ratios of nursing faculty to students from the current number of 1 faculty to 10 students, citing improved individualized attention and safety. Finally, both groups cite the need for improvements in the general nursing workplace, which would serve to make nursing more attractive as a profession. These suggestions include workplace staffing. "Students get discouraged to see staff nurses working short, yet knowing the legal implications". These observations may cause students to re-evaluate their career decisions. The respondents cite that there is a negative public opinion of nursing, in conjunction with low salaries, which make it a less attractive career alternative.

Thanks to Fran Martin, RN, MSN, Kathy Daniel, RN, MSN, and Tamara Wright, RN, MSN for assistance with the analysis of these data.

Increasing RN Graduates in Texas

Strategies for increasing RN Graduates in Texas

Report prepared by Carolyn L. Cason, RN, PhD, Data Director

May 12, 2006

Question: Given the opportunity to talk with members of the Texas Legislature, what strategies to increase nursing graduates would you advocate?

Responses to the above open-ended question by students were analyzed to reflect common themes. Six (6) themes emerged from the analysis and represented the widest number of responses. Themes identified were:

1. Educational strategies
2. Financial aid for students
3. Issues surrounding faculty
4. Admission practices
5. Student support
6. Miscellaneous issues

The six themes above are further broken down to include subsections, as follows:

1. Educational Strategies
 - A. Concerns about HESI
 - B. Length of nursing program
 - C. Standardized passing scores
 - D. Better test preparation and test-taking strategies
 - E. Alternate evaluation methods vs. exams
2. Financial aid for students
 - A. Money for loans, scholarships, grants
 - B. Money for child care
 - C. Money for students not meeting economic criteria
 - D. Money for non-minority students
 - E. Money for international students
3. Issues Surrounding Faculty:
 - A. Increased number of faculty
 - B. Better pay for faculty
 - C. Supportive faculty
 - D. Qualified faculty
4. Admission Practices
 - A. More stringent criteria
 - B. Less stringent criteria
 - C. Increased numbers of students accepted
 - D. Emphasis on program intensity so students better prepared
5. Student Support
 - A. Need for tutoring and mentoring
 - B. Stress reduction strategies
 - C. Counseling services
 - D. Job placement services

- E. Culturally sensitive support
6. Miscellaneous Issues
- A. Improved RN salaries and workplace conditions
 - B. Student complaints re: faculty, programs
 - C. Student qualities for success
 - D. Recruiting, introducing nursing in grade school, high school
 - E. Increased funding for facilities

The frequency of citation of these themes in the analysis includes three hundred sixty-four (364) citations related to educational strategies. Respondents cited financial support two hundred eighty-one (281) times. Issues surrounding faculty were mentioned two hundred fifty-five (255) times. Respondents cited recommendations regarding admission practices seventy-two (72) times. Students mentioned the need for tutoring, mentoring, and student support sixty-seven (67) times. Finally, respondents listed miscellaneous issues, ideas, and complaints about the program one hundred thirteen (113) times.

Recommendations Regarding Educational Strategies: Educational strategies cited by respondents included numerous suggestions they believed would increase RN graduates. Some students suggested condensing the program, while a greater number of students recommended lengthening the program. Students suggested a number of options including lengthening the program by one to two semesters, providing part-time options so students could individualize the program to meet their needs, flexible scheduling to accommodate working students, and availability of courses offered twice yearly. Respondents also provided recommendations ranging from spending less clinical time and more classroom time, to more time in the clinical setting. Respondents recommended specific methods, including case studies, clinical preceptors, greater emphasis on critical thinking skills, “hands-on learning”, and application based teaching. Students cited concerns about inconsistent standard passing scores among nursing schools (70 vs. 75), and recommended all nursing schools adopt a single standardized score. One central issue cited by forty-eight (48) students concerned the HESI exam. Students suggested the HESI not be used as a graduation requirement, but as a learning tool. Respondents recommended that nursing courses include specific preparation for both the HESI and the NCLEX, and that the curriculum should include general test-taking strategies. Finally, students recommended alternate evaluation methods, using strategies other than tests as outcome measures.

Financial support for students: Financial support was a central theme from a large number of student respondents. Students reported a need for more financial assistance, including, scholarships, grants, and loans. Many students cited a need for specific assistance to pay for child care while attending nursing school. Several students responded that financial assistance needed to be available to students who did not meet typical economic criteria, yet who still have a sufficient need for financial resources to attend school. An interesting suggestion was made for funding for financial assistance specific to nursing students. Specific students expressed concern that financial assistance was not available for non-minority students or for international students. Additionally, respondents indicated a need for increased knowledge and awareness about available financial resources

Issues Surrounding Faculty: Student respondents listed a number of items, categorized by an overall theme of faculty issues. Students remarked on the need for more teachers, and recognized that higher salaries would attract more faculty. Additionally, students commented on the need to hire

faculty who are more competent, particularly those who are better qualified in effective educational methods. One of the most frequently cited responses was the need for faculty to be caring and supportive of students. Specifically, students requested faculty to be available to help and offer individual assistance, and to encourage student success. Students recommended lower faculty to student ratios as another method to improve student success.

Recommendations Regarding Admission Practices: Admission practices generated a number of responses from students. Again, students' responses varied diversely. Many respondents recommended making admission criteria less stringent, such as less emphasis placed on grade point average, while others encouraged schools not to lower admission standards, and to utilize interviews and background checks. Respondents believed that admission committees consider a candidate's prior experience in a healthcare field as a positive factor influencing admission to a nursing program. Student respondents also cited the need to increase the number of students admitted to nursing programs. This might be accomplished by adding nursing programs, resulting in more available spaces, and shorter waiting lists. Students recognized that increasing the number of faculty might also result in ability of schools to accept more students.

Student Support: A need for general student support was a frequent theme identified by students. Support included a need for more tutors and mentors. Respondents often requested that faculty serve as mentors and tutors. Students' indicated that faculty mentoring was as valuable as clinical nurse preceptors. Respondents identified a need for funding in order that tutoring is made available to all students without cost. Additionally, students identified a need for advising and counseling services and job placement services, particularly as they neared completion of the program. Stress was cited by a number of respondents as being an obstacle to completion of the program. Numerous respondents recommended schools consider ways to decrease the amount of stress associated with the nursing program or to assist students to manage stress. Respondents recommended that culturally competent educators be available in nursing programs to provide assistance to minority students. Finally, students recommended that schools provide specific information to students emphasizing the intense nature of the nursing program, in order that students make necessary preparations, and recognize the commitment needed to succeed.

Miscellaneous issues: Remaining issues identified by students include miscellaneous ideas as well as complaints. Ideas included suggestions to improve the nursing workplace, increase salaries, and decrease nurse-patient ratios to increase satisfaction. Respondents believed this would further serve to encourage practicing nurses to be willing to precept and supervise students. A number of respondents cited dissatisfaction with various aspects of their program, including faculty qualities, testing, and teaching methods. Mention was made by respondents that nursing programs need to begin introducing the idea of nursing as a profession to students in elementary, junior high and high schools, to market the program earlier. Respondents cited the need for additional funding for facilities and equipment. Finally respondents identified qualities of students necessary to succeed in the program including making a commitment to hard work, not working during the program, and perseverance.

Thanks to Tamara Wright, RN, MSN and Kathy Daniel, RN, MSN, and for assistance with the analysis of these data.

Appendix H Institutions in Texas that offer an Initial Licensure Program

Initial Licensure Nursing Programs:

Universities:	Health Science Centers:	Community College Programs:
1. TWU – Houston	1. Texas Tech University Health Science Center	1. Alvin College
2. TWU – Dallas	2. University of Texas Health Science Center San Antonio	2. Blinn College
3. TWU - Denton	3. University of Texas Health Science Center - Houston	3. College of the Mainland
4. Houston Baptist University	4. University of Texas Medical Branch	4. Cy Fair College (NHMCCD)
5. Baylor University, Dallas		5. Galveston College
6. Tarleton State		6. Houston Community College
7. East Texas Baptist University		7. Kingwood College (NHMCCD)
8. Lamar University at Beaumont		8. Lee College
9. Stephen F. Austin State University		9. Montgomery College (NHMCCD)
10. UT – Tyler		10. North Harris College (NHMCCD)
11. Angelo State University (ADN Program)		11. San Jacinto College Central
12. Patty Hanks Shelton School of Nursing (formerly Abilene Intercollegiate)		12. San Jacinto College South*
13. Midwestern State University – Wilson School of Nursing		13. Tomball College (NHMCCD)
14. University of Texas at El Paso		14. Wharton County Junior College
15. West Texas A&M University		15. Angelina College
16. Texas A&M International University		16. Kilgore College
17. Texas A&M University-Corpus Christi		17. Lamar State College – Orange*
18. UT at Austin School of Nursing		18. Lamar State College – Port Arthur
19. UT at Brownsville/Texas Southmost College		19. Northeast Texas Community College
20. UT - Pan American		20. Panola College
21. UT at Arlington		21. Paris Junior College
22. Texas Christian University		22. Texarkana College
23. University of Mary Hardin Baylor		23. Trinity Valley Community College
		24. Tyler Junior College
		25. Amarillo College
		26. Cisco Junior College
		27. El Paso Community College
		28. Howard College
		29. Midland College
		30. Odessa College

<p>24. Prairie View A&M^a 25. University of the Incarnate Word</p> <p>^aShipping problems precluded participation.</p>		<p>31. South Plains College 32. Vernon College 33. Austin Community College 34. Laredo Community College 35. San Antonio College 36. St. Phillips College 37. Del Mar College 38. South Texas College 39. Victoria College 40. Central Texas College 41. Collin County 42. El Centro College 43. Grayson College 44. McLennan College 45. Weatherford College 46. Navarro College 47. North Central College 48. TCC 49. Temple</p> <p>*These institutions did not participate in the survey</p>
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Appendix I Acknowledgements

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