



California Newly Licensed RN Employment Survey January 2018

INTRODUCTION

The employment landscape for newly licensed Registered Nurses in California has been building momentum since 2013, as evidenced by increased hiring trends and greater opportunities for new graduates to work in various settings and roles. In the few years prior to 2013, challenges faced by newly licensed RNs in finding employment had been a workforce concern in California and nationally. Economic recovery and ongoing change in the delivery of health care services in recent years have fueled demand for more nurses in specific specialties and areas. This is occurring as the nursing workforce continues to age, with retirements on the rise, while the state's population also ages and grows, with health care needs becoming more complex.

Forecasts for the RN workforce in California from 2017 through 2035 indicate that supply and demand for RNs are fairly well-balanced over the next 10 years if current nursing school enrollment and state-to-state migration patterns remain stable and future demand does not increase, according to data from the 2016 California Board of Registered Nursing (BRN) Survey of Registered Nurses, the 2015-2016 BRN Annual Schools Report, data extracted from the BRN license records, and other state and national data sources.¹ Projections by the Health Resources and Services Administration (HRSA)'s National Center for Health Workforce Analysis indicate California's RN supply will be 11.5% (44,500 RNs) lower than demand in 2030.² California will need to maintain and perhaps increase the present number of nursing graduates in order to meet long-term health care needs.

Employers report escalating need for RNs to be prepared in specialty areas, emerging new practice settings and roles, and indicate preference in hiring RNs with a minimum of a BSN degree.³ Trends in healthcare delivery and payment models are also shifting focus of care and resources toward health maintenance and prevention, providing further opportunity for nurses to impact value-based outcomes. These factors will continue to influence future demand for nurses prepared to provide care in a wide range of employment settings. Tracking employment paths of newly licensed nursing graduates filling open positions as experienced nurses continue to retire, and new roles emerge in varied settings will help inform workforce planning. Enrollment trends in California nursing schools and programs and course content provided need to be aligned with changes in local labor market conditions to meet evolving workforce needs.

¹ Spetz, J. 2017. Forecasts of the Registered Nurse Workforce in California, June 2017. California Board of Registered Nursing, June 2017.

² U.S. Department of Health and Human Services, Health Resources and Services Administration, National Center for Health Workforce Analysis. The Future of the Nursing Workforce: National- and State-Level Projections, 2014-2030. Rockville, Maryland, 2017.

³ Chu, L., Bates, T., Spetz, J. 2017. Survey of Nursing Employers in California, Fall 2016. San Francisco, CA: Philip R. Lee Institute for Health Policy Studies, University of California, San Francisco.

KEY FINDINGS - EMPLOYMENT EXPERIENCES OF NEWLY LICENSED RNS

To better understand the employment experiences of newly licensed RNs in California, an annual statewide study conducted by *HealthImpact* (formerly the California Institute for Nursing and Health Care) since 2010 was replicated again in fall 2017. A random sample of 50% (4,549) of RNs newly licensed in the 12-month period between September 2016 and August 2017 were invited to participate in the fall 2017 study, with 1,262 nurses completing the survey for a 27.9% survey response rate overall.

- 81.1% of RNs reported working in their first registered nursing job
- 96.4% of those employed found jobs within 6 months (75.0% within 3 months, 21.4% between 3 to 6 months)
- Employment rate reported was 3.6% less than the prior year (margin of error rate 2.56% indicates slight change from prior year)
- Percent employed by nursing degree: 80.2% ADN, 83.2% BSN, 73.3% Masters Entry
- Regional differences in rural and metropolitan area employment rates are reported, ranging from the highest percent employed in the Central Coast (94.0%) and San Joaquin Valley (93.2%) areas, to the lowest percent employed in the San Francisco Bay Area (70.5%)
- Most frequent employment settings reported include: hospital inpatient (64.9%), Emergency Department (10.8%), Nursing Home/Extended Care/Skilled Nursing/Group Home (3.5%), and Rehabilitation/Long-Term Acute Care (3.4%), Other types of hospital departments (2.9%), Home Health/Hospice (1.9%), and Correctional Facility/Prison/Jail (1.4%)
- 58.9% report participating in a new graduate transition to practice residency program

DESIGN AND SAMPLE

A random sample of 4,549 (50%) of RNs newly licensed by exam in California between September 2016 and August 2017 was identified by the BRN to be included in this study, and invited to participate in the survey. Each nurse received an invitation email from the BRN in October 2017 requesting they participate in the study by completing an online survey. Of the 4,549 surveys sent, 18 were undelivered, and a total of 1,262 nurses completed the survey, for a 27.9% survey response rate. No personal identification information was gathered and results are reported only in aggregate. The margin of error rate calculated for questions for which the expected responses are evenly split was 2.56 percentage points, with 95% confidence. This should be kept in mind when interpreting findings throughout this report as applicable to the state overall.

RESPONDENT PROFILE

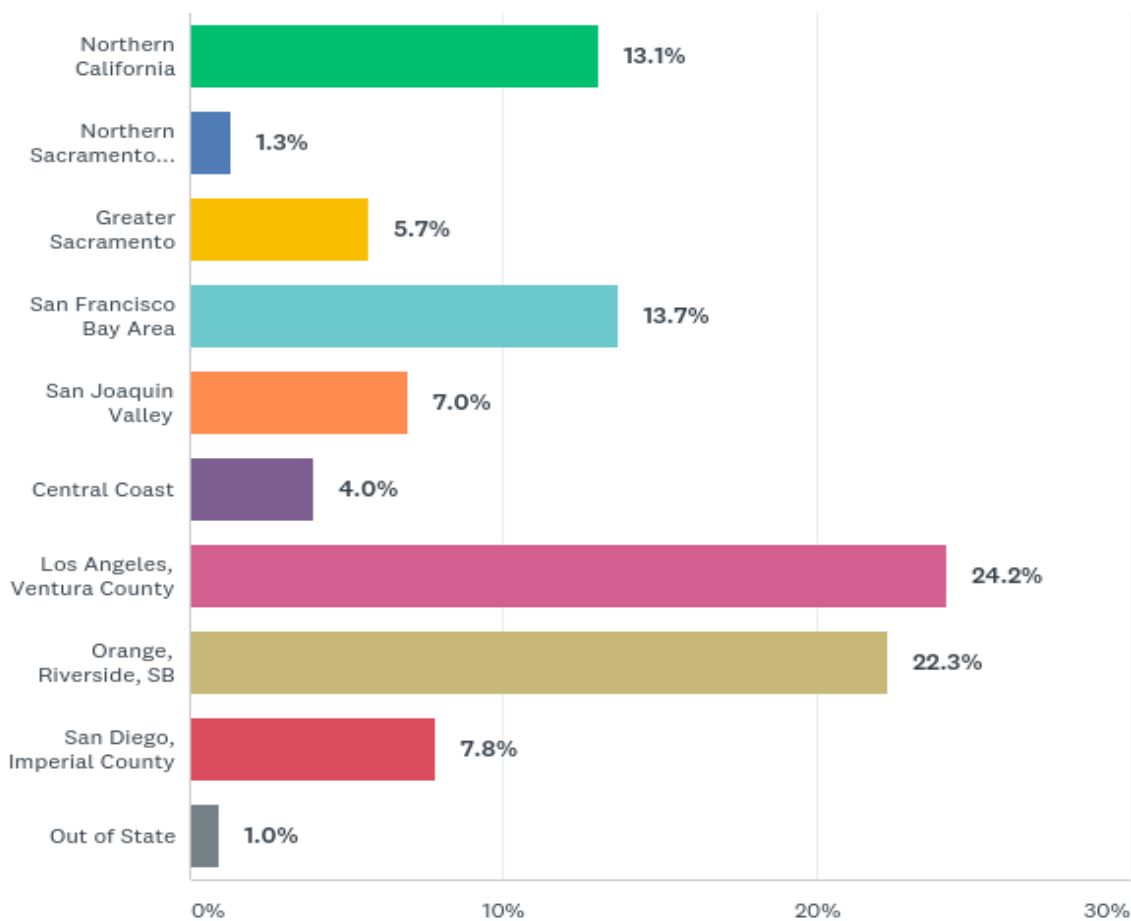
The profile of newly licensed RNs participating in this sample survey included 99.0% (1,249) RNs who completed their nursing program in California, and 1.0% (13) from another state. All were newly licensed by exam as RNs in California within the 12-month period between August 2016 and September 2017 prior to the survey. Peak months when RN licenses were obtained were reported following graduation twice a year in summer between July (18.9%) and August 2017 (23.4%), followed next in frequency in spring between

February (9.8%) and March 2017 (10.1%). The balance of nurses responding to the survey, 37.8%, reported obtaining their RN license distributed across each of the remaining 8 months included in the survey.

Of the 1,262 RNs completing the survey, 48.8% (616) graduated with an associate degree in nursing (ADN), 44.7% (564) with a baccalaureate degree in nursing (BSN), and 5.9% (75) from an entry level master’s program in nursing (ELM or MEPN). A few respondents 0.6% (7) indicated “other” type of degree, specifying LVN to RN program, or LVN to BSN program. This distribution of respondents closely approximates the distribution of students reported to have completed an RN program by type of degree reported in the most recent 2015-2016 California BRN Annual School Report, with 50.7% ADN, 43.5% BSN, and 5.8% ELM respectively.⁴

Geographic distribution of survey respondents also reflects the density of population in each area, with 24.2% residing in the Los Angeles/Ventura area; 22.3% in Orange, Riverside, and San Bernardino counties; 13.7% in the San Francisco Bay Area; 13.1% in Northern California; 7.8% in the San Diego/Imperial County area; 7.0% in the San Joaquin Valley; 5.7% in the Greater Sacramento area; 4.0% in the Central Coast, and 1.3% in the Northern Sacramento Valley. While larger numbers of new graduates participated from the more densely populated areas, influencing the aggregate statewide survey results by heavily representing the employment experiences within these large metropolitan regions, there are notable employment differences unique to each of the 9 regions, as discussed in the employment section later in this report.

REGIONAL DISTRIBUTION OF SURVEY PARTICIPANTS



⁴ Waneka, R., Bates, T., Spetz, J. 2015-2016 Annual School Report: Data Summary and Historical Trend Analysis. Sacramento, CA: California Board of Registered Nursing, June 2017

The age distribution of survey participants indicate 37.6% were between 25-30 years of age; 23.3% were less than 25 years of age; 18.4% between 31-35; 9.7% age 36-40; 5.9% age 41-45; 3.3% age 46-50; and 2.0% over 50 years old. The age range for entry into nursing practice is consistent with historical and national trends in nursing as a younger, career-oriented profession. Survey respondents were 83.2% female and 16.8% male.

California’s nursing workforce diversity is evident by the wide range of ethnicities represented including: 44.5% Caucasian/White, followed by 20.1% Latino/Hispanic, 11.3% Asian, 10.3% Native Hawaiian/Pacific Islander, 5.4% African American/Black/African, and 0.2% American Indian/Native American/Alaskan Native. A detailed listing of specific ethnic groups included within each category is provided.

ETHNIC DISTRIBUTION

Ethnic/Racial Category	Percent	Ethnic Groups Included
Caucasian	44.5%	Caucasian, White, European, Middle Eastern
Latino/Hispanic	20.1%	Central American, South American, Cuban, Mexican, Other Hispanic
Asian	11.3%	Cambodian, Chinese, Indian, Indonesian, Japanese, Korean, Laotian/Hmong, Pakistani, Thai, Vietnamese
Native Hawaiian/ Pacific Islander	10.3%	Fijian, Filipino, Guamanian, Hawaiian, Samoan, Tongan
African American	5.4%	African American, African, Black
Native American	0.2%	American Indian, Alaskan Native
Other/Mixed	8.3%	Other/Mixed

The survey obtained information on languages other than English that were spoken fluently, with 9 primary categories listed for participants to select from, along with an open answer text box for other languages to be written in. A total of 60 languages were reported to be spoken fluently.

LANGUAGES SPOKEN FLUENTLY

Language	Percent
English only	57.7%
Spanish	20.8%
Tagalog/Other Filipino dialect	5.5%
Vietnamese	2.5%
Cantonese	1.8%
Mandarin	1.7%
Korean	1.2%
Hindu/Urdu/Punjabi/other South Asian language	1.2%
French	1.0%

Other Chinese dialect	0.7%
Other languages: American Sign Language, Arabic, Armenian, Assyrian, Bamba, Bosnian, Bulgarian, Burmese, Cambodian, Croatian, Danish, Dutch, Efik, Fanti, Farsi, Fukienese, German, Romanian, Hakka, Hebrew, Hmong, Icelandic, Igbo, Indonesian, Japanese, Lao, Mien, Nigerian, Moldovan, Ndebele, Nyanja, Persian, Polish, Portuguese, Punjabi, Russian, Siswati, Swahili, Swedish, Taiwanese, Tamil, Tibetan, Turkish, Twi, Ukrainian, Yoruba, Zulu	<1% each

EMPLOYMENT AND TYPE OF RN JOBS OBTAINED

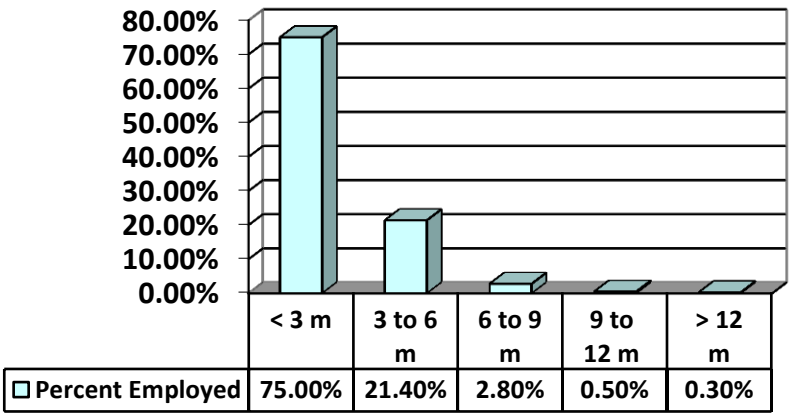
The majority of newly licensed RNs responding to the survey reported being employed as an RN, with 81.1% working in their first registered nursing job, and 18.9% not yet working as a registered nurse. These results indicate a strong employment landscape for newly licensed nurses for the fourth consecutive year. The 3.6% decline in employment rate reported in this study compared with the prior year was small, although still concerning and bears close monitoring, when considering the 2.56% margin of error rate calculated in this study.

EMPLOYMENT OF NEWLY LICENSED RNs WITHIN 12 MONTHS OF LICENSURE

Survey Year	2011	2012	2013	2014	2015	2016	2017
Percent RNs Employed	57.0%	54.0%	59.3%	65.1%	74.2%	84.7%	81.1%

New graduates who found employment were asked how long it took to find their first nursing job, with 75.0% of respondents indicating fewer than three months; 21.4% in 3-6 months, 2.8% in 6-9 months, 0.5% in 9-12 months, and 0.3% taking more than 12 months. Of the nurses who were employed in their first RN job, a majority found employment within the first 6 months after licensure, with 96.4% reporting being employed, an increase of 0.7% compared with the prior year.

Length of Time Between Licensure and Employment in an RN Role



Survey results indicate a greater employment rate reported by newly licensed RNs when compared with the 2015-2016 California Board of Registered Nursing’s Annual School Report, where nursing school deans and directors reported 76% of new graduates from pre-licensure programs in the prior academic year were

employed.⁵ While various factors impact results between studies, including differences in sampling, type of survey questions, number of responses by region, and availability of local employment, the employment picture for newly licensed RNs compared over time remains strong for the fourth consecutive year.

Employment pattern by type of nursing degree is one indicator of employer needs and preferences. Of the nurses reported to be employed, 80.2% (N=494) of ADN nurses were working in their first RN job, 83.2% (N=469) of BSN nurses, and 73.3% (N=55) of nurses graduating from a Masters Entry Program in Nursing. Differences found in the percent of pre-licensure RNs employed fall slightly beyond the 2.56% margin of error rate in this study, indicating a slight difference in employment found between ADN and BSN graduates. The lower employment rate reported for ELM nurses may be influenced by the small sample size, and some California ELM programs are structured for students to complete pre-licensure coursework and take the NCLEX licensing exam prior to graduation. In these cases, some ELM RNs licensed prior to graduation may choose not to seek employment until they complete their ELM program.

EMPLOYMENT OF RNs BY TYPE OF NURSING DEGREE			
	ADN 48.8% (N=616)	BSN 44.7% (N=564)	ELM 5.9% (N=75)
Employed as RN	80.2% (N=494)	83.2% (N=469)	73.3% (N=55)
Not Employed as RN	19.8% (N=122)	16.8% (N=95)	26.7% (N=20)

Notable differences in new graduate employment rates are found in specific areas of the state as reported by newly licensed RNs in the sample study residing in different regions, from a low of 70.5% in the San Francisco Bay Area to a high of 94.0% in the Central Coast, followed closely by the San Joaquin Valley with 93.2%. Employer demand is also reported to be greater in rural versus urban areas, which is consistent with higher employment rates for newly licensed nurses in this statewide study.

Consistent with prior years, these employment patterns also reflect supply and demand along with hiring for new RN graduates reported by California hospital chief nursing officers in the fall 2016 Survey of Nurse Employers.⁶ Differences in regional demand for new RN graduates indicated that with the exception of the Central California region, hospitals reported demand for new RN graduates was less than the available supply. Central California, the San Francisco Bay Area, Los Angeles, and the Sacramento and Northern California regions indicated the labor market for new graduates has improved compared with previous years, with early indications that shortages of new graduates may be emerging in some regions. It is important to note that such data related to hiring demand for new graduates is impacted in part by the need for some open positions to be filled by RNs with prior experience that remain challenging to fill for hospitals across the state.

⁵ Waneka, R., Bates, T., Spetz, J. 2015-2016 Annual School Report: Data Summary and Historical Trend Analysis. Sacramento, CA: California Board of Registered Nursing, June 2017.

⁶ Bates, T., Chu, L., Keane, D., Spetz, J. Survey of Nursing Employers in California, Fall 2016. San Francisco, CA: Philip R. Lee Institute for Health Policy Studies, University of California, San Francisco. July 2017.

EMPLOYMENT RATES OF NEWLY LICENSED RNS BY AREA OF CALIFORNIA

Geographic Area	Employed as an RN	Not Employed as an RN	Number of Respondents
Northern California	80.6% (133)	19.4% (32)	165
Northern Sacramento Valley*	76.5% (13)	23.5% (4)	17
Greater Sacramento*	76.4% (55)	23.6% (17)	72
San Francisco Bay Area	70.5% (122)	29.5% (51)	173
San Joaquin Valley*	93.2% (82)	6.8% (6)	88
Central Coast*	94.0% (47)	6.0% (3)	50
Los Angeles/Ventura Counties	79.0% (241)	21.0% (64)	305
Orange/Riverside/San Bernardino Counties	85.8% (241)	14.2% (40)	281
San Diego/Imperial County*	81.8% (81)	18.2% (18)	99

* Regional results are provided as these are of particular interest to local communities; however, as such data exhibit small sample sizes per region, these may not be representative of the region overall.

Employment patterns across various types of facilities, clinical practice areas, and specialties were reported by newly licensed nurses hired during the 12-month period surveyed. Results reflect a broad range of organizations, with a majority of 81.2% working in their first job as an RN in an acute care hospital, predominantly in an inpatient care setting (64.9%) or emergency/urgent care department (10.8%), indicating these settings continue to attract newly licensed nurses in their first job, and hospitals typically hire them. When employment patterns for newly licensed RNs are compared with the distribution of hospital-based employment settings in the overall population of RNs employed statewide, 66.3% of the existing RN workforce was reported to be working in hospitals in 2016.⁷ Small but consistent trends year to year continue to reflect the ongoing shift in new graduate employment from acute care hospitals to a broader range of non-acute and community health settings.

The majority of newly licensed RNs working report doing so full time or a minimum of 32 hours per week (89.8%), with 4.2% working part time or fewer than 32 hours per week, and 6.0% working in occasional positions, per diem, or on call. There continues to be a slight shift over the past three years toward a greater number of new graduates working full time. Most survey respondents (80.8%) indicated they were working in a “job of choice” this past year, which has remained relatively high for two consecutive years compared with employment preferences reported in prior years: 83.0% reported working in a job of choice in 2016, 73.9% in 2015, 70.2% in 2014, 61.6% in 2013, 64.5% in 2012, and 62% in 2011. These combined trends are key indications the job market for new graduate nurses has recovered, is favorable and strong.

TYPES OF FACILITIES WHERE NEW GRADUATE NURSES REPORT BEING EMPLOYED

Hospital	81.2% (811)
• Inpatient Care	64.9% (651)
• Emergency/Urgent Care	10.8% (105)
• Other Type of Department	2.9% (29)
• Ambulatory Care (Outpatient Surgery, Clinic etc.)	1.8% (18)
• Home Health	0.3% (3)

⁷ Spetz, J., Chu, L., Jura, M., Miller, J. 2016 Survey of Registered Nurses. (biannual) Sacramento, CA: California Board of Registered Nursing, September 2017.

• Ancillary Unit	0.3% (3)
• Nursing Home Unit	0.2% (2)
Nursing Home/Extended Care/Skilled Nursing/Group Home	3.5% (35)
Rehabilitation Facility/Long-Term Acute Care	3.4% (34)
Home Health Agency (including hospice)	1.9% (19)
Correctional Facility/Prison/Jail	1.4% (14)
Private Medical Practice, Physician Office, Clinic	1.2% (12)
Inpatient Mental Health/Sub Acute Abuse	1.1% (11)
Ambulatory Surgery Center (free-standing)	1.1% (11)
School Health (K-12 or college)	0.9% (9)
Outpatient Dialysis Center	0.8% (8)
Public Clinic, Rural Health Center	0.7% (7)
Public Health or Community Health Agency (not a clinic)	0.7% (7)
Outpatient Mental Health/Substance Abuse	0.5% (5)
Occupational Health or Employee Health Service	0.5% (5)
Government Agency (other than public/community health or corrections)	0.4% (4)
Case Management/Disease Management	0.3% (3)
Urgent Care (non-hospital)	0.2% (2)
Self-Employed	0.2% (2)
Call Center/Telemedicine	0.2% (2)
Inpatient Hospice (not hospital-based)	0.1% (1)
University/College Academic Department	0.1% (1)

CLINICAL SPECIALTY OR POPULATION

General Medical-Surgical	22.6% (226)	Rehabilitation	2.0% (20)
Telemetry	11.5% (115)	Orthopedics	1.8% (18)
Critical Care/Intensive Care	10.0% (100)	Home Health	1.7% (17)
Emergency Care/Trauma	8.9% (89)	Work in Multiple Areas	1.6% (16)
Pediatrics	4.9% (49)	Cardiology	1.5% (15)
Oncology	3.6% (36)	Dialysis	1.1% (11)
Surgery/Pre-Op/Post-Op/PACU	3.3% (33)	School Health K-12, Post-Secondary Education	1.0% (10)
Geriatrics	3.0% (30)	Ambulatory/Primary Care	0.8% (8)
Psychiatry/Mental Health	2.6% (26)	Community/Public Health	0.7% (7)
Step-Down or Transitional Care	2.4% (24)	Hospice	0.7% (7)
Labor and Delivery	2.2% (22)	Corrections	0.7% (7)
Mother-Baby/Normal Newborn	2.2% (22)	Obstetrics/Gynecology	0.5% (5)
Neonatal Care	2.2% (22)	Ambulatory Care/Specialty	0.4% (4)

Newly licensed nurses reported finding jobs in a variety of ways, including: 40.0% obtained using a hospital or health facility website; 26.7% had clinical education experience at the health facility where they were hired; 21.6% knew someone at the hospital or health facility where they went to work; 21.0% found employment through a referral; 10.0% were hired through a job fair; 5.6% through social media, and 2.8% through volunteering. While respondents were able to select more than one category in answering this question, the

majority of those employed indicating having some type of prior relationship with the employer who hired them, consistent with prior years. Review of open-ended responses indicated that jobs were also found through networking, academic career placement services, military placement, general job advertisements, and through participation in a new graduate program.

Among the 18.9% (N=239) of respondents who indicated that they were not yet working as an RN, 43.1% had been looking for fewer than 3 months, 35.4% for 3-6 months; 8.7% for 6-9 months; 2.3% for 9-12 months and 0.5% for longer than 12 months.

REASONS FOR DIFFICULTY IN FINDING EMPLOYMENT REPORTED BY RNs

	2013	2014	2015	2016	2017
Lack of experience needed for position	92.1%	83.3%	85.0%	79.1%	72.9%
No position available	46.5%	41.3%	36.6%	26.7%	31.0%
Lack of a (minimum) of a BSN degree	37.8%	38.5%	30.1%	39.5%	21.1%
California hospital employers who prefer or require a minimum of a BSN degree upon hire ⁸	80.4%	80.5%	85.3%	57.6%	

Respondents not yet employed as an RN reported three main reasons given by potential employers for not extending a job offer. These included lack of experience for the position (72.9%); no positions available (31.0%) and BSN degree preferred or required (21.1%). While the issue of RNs having no prior experience remains the primary barrier to hire, this seems to be declining over time as reported by RNs. This can also reflect that more employers are hiring newly licensed RNs. RNs reporting lack of a BSN to be a barrier in finding employment in this study is noted to be lower than reported by the annual Survey of Nurse Employers in California conducted by UCSF in collaboration with the Hospital Council of Southern California (HASC) and *HealthImpact* in 2016. This may indicate that an employer preference or expectation that RNs have a minimum of a BSN degree upon hire may not always be evident or known to applicants. A smaller share of hospitals in 2017 indicated having a preference or requirement for hiring RNs with a minimum of a BSN degree compared with prior years. This is unusual given the increased importance academic progression has had in recent years. With more newly licensed ADN RNs dually enrolled and starting BSN coursework while enrolled in an ADN program or enrolling in RN to BSN programs upon completion of their ADN, it is possible that more employers are open to hiring newly licensed ADN RNs who are known to be in the process of completing a BSN degree.

Additionally, 13.8% of RNs not yet employed indicated their resume was weak with regard to volunteering in health care or extracurricular activities that might have enhanced their experience or skills to strengthen options for employment, 4.8% were told their academic preparation was insufficient for the position scope or specialty; 1.4% reported being told they'd been out of school too long; and 0.5% reported not getting a job offer related to having a low GPA.

Nurses who were not working as RNs were asked what they were doing at this time. Data indicated 26.5% were working in non-nursing/non-health-care jobs (21.8% working part time, and 4.7% full time), and 26.1% indicated working in health care although not as an RN. Thirty-six percent (36.5%) of nurses reported they were currently continuing their education, which was slightly lower than the prior two years (41.0%) yet

⁸ Bates, T., Chu, L., Keane, D., Spetz, J. Survey of Nursing Employers in California, Fall 2016. San Francisco, CA: Philip R. Lee Institute for Health Policy Studies, University of California, San Francisco. July 2017.

remained up from 20.5% in 2014. RNs also indicated they were volunteering in a health-related service (15.6%) while looking for a job. Beyond these primary response categories, 26.1% of respondents indicated they were doing something other than working as an RN, categorized in the survey tool as “other” with 55 open-ended narrative responses describing activities they are currently involved in while looking for employment. These optional open-ended responses provided qualitative evidence that many newly graduated nurses are motivated and eager to begin professional practice, staying engaged in career-enhancing activities. Typical categories reported with the greatest frequency and often in combination comparable to activities reported in prior years include: volunteering, continuing their nursing education to obtain a BSN, MSN or Advanced Practice degree, taking CE courses to increase skills, working in a temporary RN role or position, working in the healthcare field but not as an RN, working in a non-health-care job, continuing in a prior job, continuing to work as an LVN, and participating in an RN Transition program or unpaid internship.

PARTICIPATION IN TRANSITION TO PRACTICE PROGRAMS FOR NEWLY LICENSED RNs

Transition to practice programs were identified in the survey questionnaire as programs provided for newly licensed graduate nurses, conducted either by a school of nursing prior to employment, or by an employer, upon hire. Of those employed, 52.7% (N=521) indicated participating in an employer-provided program following graduation upon hire, 4.2% (N=41) participated in a program provided by a school of nursing after licensure and graduation and prior to hire; and 2.0% (N=20) reported participating in both types of programs. Participation in any or all types of transition to practice programs were reported to have been completed by 56.9% (N=582) of newly licensed RNs prior to or upon employment in their first RN position.

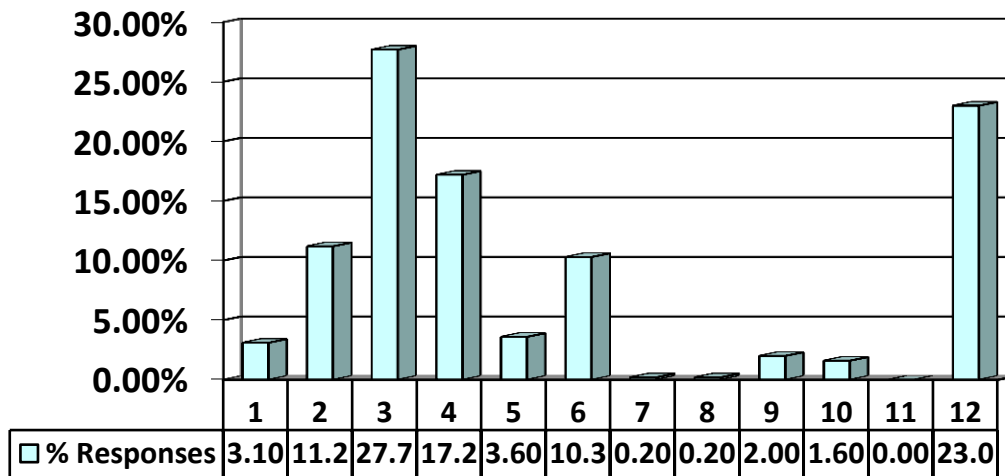
PARTICIPATION IN TRANSITION TO PRACTICE PROGRAMS

EMPLOYED RNs THAT REPORTED PARTICIPATING IN A TRANSITION TO PRACTICE PROGRAM	Fall 2015	Fall 2016	Fall 2017
Participated only in program provided by a school of nursing	2.8% (N=14)	5.2% (N=57)	4.2% (N=41)
Participated only in program provided by their employer	40.9% (N=203)	41.6%(N=460)	52.7% (N=521)
Participated in both school-based and employer-provided programs	1.8% (N=9)	0.8% (N=9)	2.0% (N=20)
Total participation in employer-provided programs	42.7% (N=212)	42.4% (N=469)	54.7% (N=541)
Total participation in any type of transition to practice program	45.6% (N=226)	47.6% (N=526)	58.9% (N=582)

These results provide evidence of the current baseline of transition to practice programs completed in the prior year by newly licensed RNs in California, helping illuminate progress in meeting the 2020 IOM Future of Nursing Report goal that all newly licensed RNs complete a transition to practice program as they enter practice. A significant increase of 12.3% participation in employer-provided transition to practice programs was reported by newly licensed RNs, compared with the prior year.

Nurses reported the length of employer-provided programs (including both classroom and supervised clinical components) which varied significantly, from one to twelve months. Program lengths most frequently reported were clustered, ranging from two to four months reported by 73.2% (N=310) of respondents, six months reported by 10.3% (N=57), or twelve months as reported by 23.0% (N=127) of working nurses. This pattern indicates the prevalence of distinctly different types of practices or program models, anticipated to have varied design, content and curricular components, with both directly supervised and mentored experiences over time. Programs conducted based on national standards and those that are also nationally accredited are anticipated to be twelve months in length. Further examination of the scope and composition of various types of employer-provided transition to practice programs and evidence-based outcomes remains a priority to guide further adoption and expansion.

Length (# months) of New Graduate RN Transition to Practice Programs Provided by Employers



One third of the nurses, 30.7%(N=35) who participated in a transition to practice program prior to employment provided by a school of nursing reported the program helped them to obtain employment, while 25.4% (N=29) indicated it did not. A large number of respondents, 43.9% (N=50) did not reply either yes or no, but provided specific comments indicating some believed participation in the program may have influenced hiring but were uncertain, or they did not know. This may indicate an opportunity to more directly and deliberately connect available academic programs and their newly licensed RN participants with potential employers, to strengthen these programs as intended pipelines to employment.

Participants were asked if they paid fees to participate in the transition to practice program being conducted prior to employment, or if they were paid in some way to participate. Nurses that participated in a transition to practice program prior to employment indicating they paid tuition or enrollment fees to participate were reported by 41.8% (N=41) of the respondents. No fees were paid by 19.4% (N=19) of those enrolled in a program. While 28.6% (N=28) reported they did not receive any payment for participation, a small number of respondents 13.8% (N=13) indicated receiving a stipend or payment for participation in a program. The survey question regarding fees or payment allowed respondents to select more than one answer to this question.

COST PAID OR PAYMENT RECEIVED AS REPORTED BY NEWLY LICENSED NURSES THAT PARTICIPATED IN A TRANSITION TO PRACTICE PROGRAM PRIOR TO EMPLOYMENT (N=98*)

Tuition or enrollment fees were paid by participants	41.8% (N=41)
No fees were paid by participants	19.4% (N=19)
Participants did not receive any payment for participation	28.6% (N=28)
Nurses received a stipend or payment for participation	13.8% (N=13)

*Total answer choices exceed the number of respondents, as more than one answer was allowed.

All respondents, regardless of employment status or participation in a transition to practice program, were asked what program incentives did or would engage their participation. The opportunity to gain experience as a licensed RN, increase skills, competencies, build confidence, and the opportunity for potential employment in a specific practice area or specialty were reported most often as primary incentives:

- Opportunity to gain experience as a licensed RN (76.5%)
- Opportunity to increase skills, competencies, and confidence (73.0%)
- Opportunity for potential employment in specific practice area or specialty (62.0%)
- Improving resume and employability (57.4%)
- Opportunity for potential employment where clinical education was scheduled (53.3%)
- Obtaining college credit applicable to BSN or MSN degree (40.4%)
- Deferment of student loans (36.5%)

ATTITUDES AND INTEREST REGARDING TRANSITION TO PRACTICE PROGRAMS

Newly licensed RNs were asked about their interest in participating in a transition to practice or new graduate residency program following graduation and prior to being hired, whether they had participated in a program or not. Declining interest in unpaid programs or those that required tuition to be paid was reported compared with prior years. This change in interest may be influenced in part by greater job opportunities and increased employer demand for hiring newly licensed RNs in recent years. The growing importance of maintaining health and preventing illness through care provided in ambulatory care settings is driving the need for more RNs to practice in primary care and other types of non-acute settings. There is further opportunity to support newly licensed RNs to work in non-acute or specialty practice areas through transition to practice programs.

RN INTEREST IN A TRANSITION TO PRACTICE PROGRAM	FALL 2014	FALL 2015	FALL 2016	FALL 2017
Interest in a program if it was an unpaid internship	66.1%	47.8%	32.4%	33.5%
Interest in a program if payment of tuition was required	33.5%	30.8%	20.5%	19.4%
Interest in a program to gain experience in a non-acute health care setting	51.0%	56.7%	44.8%	47.6%

STATEWIDE SURVEY SUMMARY

This sample survey provides a snapshot of the hiring experiences of newly licensed RNs in California in the prior 12-month period, with comparison of trends noted in recent years. Such evidence-based findings of these employment patterns provides valuable information for nurse leaders and educators working together to align academic programs with emerging workforce needs by supporting the development and integration of competencies in specialty areas and with emerging roles. Caution is advised in interpreting the results from this statewide study due to the moderate survey response rate of 27.9%, as findings may not be representative of the population of all newly licensed graduates in distinct regions of the state. This is particularly important when overall results are analyzed and reported by region due to the small number of respondents in each area. It is possible that nurses who have not found employment may have been more motivated to answer the survey, and if so, the actual employment rate in the overall population of newly licensed nurses may be higher than reported. The survey methods have been consistent each of the eight years the study has been conducted, and the survey instrument has included standard questions to inform progress and trends over time.

These results reflect the demographic pattern and regional distribution of new graduates reported in the annual BRN school survey, and also mirror data obtained from other sources including employer surveys of nurses, and surveys fielded by schools of nursing. Data from this current California survey indicates a high and stable employment rate as reported by newly licensed RNs for the fifth consecutive year within the past eight years the survey has been conducted.

California trends reported in this survey indicate that of newly licensed, employed RNs, 96.4% are employed within 6 months. This finding is consistent with findings reported by the American Association of Colleges of Nursing (AACN)⁹ in conducting its eighth survey of nursing schools offering baccalaureate and graduate programs in the U.S. to assess the experience of new graduates in finding employment. The national AACN survey found 94% of entry-level BSN and 95% of entry level MSN graduates had been offered a job within 4-6 months of graduation. Employment rates were noted to vary across the country by region, with the lowest rates reported to be in the West with 86% BSN and 95% MSN respectively.

California employment trends are relatively consistent with findings reported by the National Student Nurses' Association (NSNA) study of new graduate employment trends through a post-graduate RN survey conducted annually since 2008. Their national fall 2016 survey findings reported in summer 2017 indicated employment rates continue to trend up with 88% of new graduates employed four months following graduation and 94% by six months.¹⁰ The NSNA analysis of new graduate RN employment data continues to indicate regional differences across the country from a low of 85% in the Western Region to 88% in the Northeast, 92% in the South, and 94% in the Central region. Differences in national employment rates by type of RN degree were also reported, with 84% ADN, 92% BSN, and 93% Masters Entry Program RNs that graduated in spring 2016 reported to be employed within 6 months at the time of the study in fall 2016. (Mancino, D., Dean's Notes, 38 (4-5) summer 2017).

⁹ American Association of Colleges of Nursing, AACN Research Brief (December, 2017). Employment of New Nurse Graduates and Employer Preferences for Baccalaureate-Prepared Nurses Report.

¹⁰ V. Feeg, D. Mancino, National Student Nurses' Association, Dean's Notes Volume 38, No. 4-5 (Summer, 2017). Upward Peak in Employment Suggests a Changing Future Landscape of Workforce Issues.

While various state and national surveys have some notable differences in survey populations, questions, and measures than this California New Graduate Employment Survey, there are consistencies in findings and trends comparing employment experiences supported with evidence-based results across various studies. National, statewide, and regional trends across the past eight years reflect workforce needs and the emergence of a progressive and dynamic job market for newly licensed RNs.

CONCLUSIONS

California needs to prepare newly licensed RNs to practice in traditional acute care settings as well as emerging new roles and settings to meet evolving healthcare trends and demand, ensuring the state has the supply of nurses needed to provide health care in diverse settings and services. Interest in nursing as a career and enrollment of new students in RN programs remains strong with slight increases in the number of RN program completions annually. With 11,191 new graduates in California completing RN programs in the 2015-2016 academic year, current workforce demand and nursing education supply are said to be in balance. The Health Resources and Services Administration (HRSA) National Center for Health Workforce Analysis projects that RN supply in California in 2030 will be 11.5% less than demand. The California Employment Development Department forecasts there will be 300,300 registered nurse jobs in California by 2024 (California Employment Development Department, 2016). These indications are reminders of the importance for California to continue monitoring workforce changes, and position to support future growth in nursing pre-licensure programs. The nursing workforce needs to also be prepared to fill more diverse roles, respond to employer expectations for RNs to be prepared with at least a BSN degree, and the growing demand for nurses to be prepared to practice in specialty areas.

It is evident from the survey that newly licensed nurses are eager to obtain employment, often working a combination of temporary or part-time jobs, with further engagement and interest in career options outside traditional acute care hospital settings. With the improved economy and as an increased exodus of experienced nurses is now retiring, the demand for new nurses is anticipated to remain strong and continue to rise. This trend is further impacted by increasing demand resulting from an aging population, a greater proportion of insured individuals having more access to care, and growth in services resulting from these trends. Hospitals have historically been the largest employer of nurses and new graduates. California's hospital RN vacancy rates reported to be relatively low in prior years have been increasing, with average vacancy rates of 3.2% (2014), 4.9% (2015), and 5.9% (2016) reported.¹¹ Hospitals indicate a growing need for open positions to be filled with RN applicants experienced in specialty areas. Nurse leaders from both academia and practice should continue to share best practices and innovative strategies to ensure that new RNs maintain, gain, and expand essential competencies needed to meet emerging health care needs in multiple practice settings.

This survey also indicates transition to practice programs and residencies have been important and effective ways for new nurses to obtain further skills and competencies needed to increase employability. Lack of experience as an RN continues to be reported as the number one reason new graduates are not offered available jobs. Transition to practice programs have and will continue to provide options for specialty training and guided experience as newly licensed RNs enter the workforce.

The research team wishes to thank all of the newly licensed RNs who took time to share their hiring experiences with us. These results will be reviewed by nursing leaders, employers, schools of nursing and others concerned about the challenges new graduates have in finding RN jobs, the importance of preparing

¹¹ Healthcare Workforce Survey Report, Fourth Quarter 2016, Hospital Association of Southern California.

future nurses consistent with hiring needs, and the value of establishing effective transition to practice programs. Results from this annual survey continue to inform strategies that support and improve collaborative academic practice pathways to employment for newly licensed nurses.

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The complete report is available on the *HealthImpact* website: www.healthimpact.org

