Mapping the Landscape of Nursing in New Mexico, Part 2

Presentation Prepared For
The New Mexico Nursing Education Consortium
Statewide Meeting
October 18, 2013

Part 1 presented at the June 2013 Statewide NMNEC Meeting

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Data... Insight... Impact
Overview

Part 1: Key Questions
• What is the Current Status of the Health of New Mexicans?
• What Factors are Changing the State’s Health Care Needs?
• Do We Have Enough Nurses Now?
• Will We Have Enough Nurses In The Future?

Part 2: Key Questions
• Who are New Mexico’s Existing Nurses?
• Who are New Mexico’s Future Nurses?
• Who is Educating New Mexico’s Future Nurses?
• What is the Current Employment Picture for Nurses in New Mexico?
• How Is New Mexico Responding To The Need For Nurses?
• Going Forward
Some Background First
New Mexico Nursing Education Consortium

The New Mexico Nursing Education Consortium (NMNEC) is committed to improving the health care of all New Mexicans, now and in the future. In order to meet that commitment, NMNEC has focused on three critical goals:

1. Increase the number of nurses with BSN and graduate degrees in New Mexico.

2. Improve efficiency, quality, and educational outcomes of nursing education through cooperation among community colleges and universities.

3. Increase workforce diversity by improving nursing education for minorities, particularly in rural areas.
This Report

This purpose of this report is to inform and support NNNEC’s effort by examining the following questions:

• What are the potential benefits of the NMNEC initiative for the health and well-being of New Mexicans, and for New Mexico’s nurses themselves?

• What is the state of the current pipeline for nursing preparation programs in the state?

• What are the current and projected landscapes for nursing careers in New Mexico?

• How can the initiative be strengthened to best meet the needs of all key stakeholders?

• As NMNEC partners monitor implementation of the initiative, what data should be gathered to ensure that the positive effects of the initiative are maximized?
The majority of New Mexico’s population of 2,059,179 is located in a few counties. Even in those counties, however, New Mexico is often rural and spacious.

Racial/Ethnic Distribution, By New Mexico Counties, 2007-2011

Counties where the White/Non-Hispanic population exceeds the statewide average of 40.5%

Counties where the Hispanic population exceeds the statewide average of 46.3%

Counties where the Native American population exceeds the statewide average of 8.5%

Mapping The Landscape Of Nursing In New Mexico - Part 1: Key Questions
What Is The Current Status Of The Health Of New Mexicans?
Distribution of Health Challenges Across Counties

Just as population and racial/ethnic groups are unevenly distributed across New Mexico’s diverse geographies, so are the health needs of the state. The disparate needs of the state are seen in the following county-by-county comparison across nine key indicators of health status:

- **Heart deaths** per 100,000 pop.
- **Cancer deaths** per 100,000 pop.
- **Unintentional injury deaths** per 100,000 pop.
- **Premature Deaths** (years of potential life lost) per 100,000 pop.
- **Life expectancy** from age 65
- **Adult diabetes** prevalence
- **% Adults obese**
- **% of population over age 65**
- **% of population uninsured**

Counties are colored on the following map according to how many bottom eight rankings they had across all nine indicators.
# Health Status Indicators, by County

*yellow indicates a ranking in the bottom 8 of 33 NM counties

<table>
<thead>
<tr>
<th>County</th>
<th>Heart Deaths per 100,000 Pop.</th>
<th>Years of Potential Life Lost per 100,000 Pop.</th>
<th>Life Expectancy After Age 65</th>
<th>Cancer Deaths per 100,000 Pop.</th>
<th>% of Adult Pop. With Diabetes</th>
<th>Unintentional Injury Deaths per 100,000 Pop.</th>
<th>% of Adults Obese</th>
<th>% Pop. over 65 (2010)</th>
<th>% of Pop. Uninsured</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bernalillo</td>
<td>191.5</td>
<td>12,496</td>
<td>19.1</td>
<td>151.9</td>
<td>6</td>
<td>60.7</td>
<td>19.9</td>
<td>0.122</td>
<td>17.1%</td>
</tr>
<tr>
<td>Catron</td>
<td>127.3</td>
<td>15,126</td>
<td>19.8</td>
<td>160.1</td>
<td>6.3</td>
<td>84</td>
<td>23.7</td>
<td>0.279</td>
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<tr>
<td>Chaves</td>
<td>218.4</td>
<td>15,320</td>
<td>18.2</td>
<td>185.1</td>
<td>7.5</td>
<td>66.5</td>
<td>29.3</td>
<td>0.142</td>
<td>20.5%</td>
</tr>
<tr>
<td>Cibola</td>
<td>176.7</td>
<td>16,321</td>
<td>18.3</td>
<td>164.9</td>
<td>11.2</td>
<td>78.6</td>
<td>32</td>
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</tr>
<tr>
<td>Colfax</td>
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<td>6.2</td>
<td>58.7</td>
<td>20.7</td>
<td>0.201</td>
<td></td>
</tr>
<tr>
<td>Curry</td>
<td>292.6</td>
<td>11,823</td>
<td>18</td>
<td>146.2</td>
<td>8.6</td>
<td>46.9</td>
<td>27</td>
<td>0.114</td>
<td>17.1%</td>
</tr>
<tr>
<td>De Baca</td>
<td>192.5</td>
<td>16,920</td>
<td>19.7</td>
<td>149.6</td>
<td>6.7</td>
<td>118.7</td>
<td>22</td>
<td>0.229</td>
<td></td>
</tr>
<tr>
<td>Doña Ana</td>
<td>174</td>
<td>10,761</td>
<td>18.9</td>
<td>154.6</td>
<td>6.9</td>
<td>45.2</td>
<td>25.6</td>
<td>0.124</td>
<td>21.3%</td>
</tr>
<tr>
<td>Eddy</td>
<td>252.2</td>
<td>15,163</td>
<td>18.1</td>
<td>181.4</td>
<td>9.9</td>
<td>63.9</td>
<td>30.8</td>
<td>0.14</td>
<td>14.2%</td>
</tr>
<tr>
<td>Grant</td>
<td>210.8</td>
<td>16,393</td>
<td>18.6</td>
<td>166</td>
<td>6</td>
<td>61.6</td>
<td>23.1</td>
<td>0.213</td>
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<tr>
<td>Guadalupe</td>
<td>384.4</td>
<td>14,120</td>
<td>17.9</td>
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<td>88.6</td>
<td>24.7</td>
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<td></td>
</tr>
<tr>
<td>Harding</td>
<td>101.1</td>
<td>12,024</td>
<td>22.1</td>
<td>95.7</td>
<td>6.2</td>
<td>86.9</td>
<td>27.2</td>
<td>0.292</td>
<td></td>
</tr>
<tr>
<td>Hidalgo</td>
<td>192.9</td>
<td>15,554</td>
<td>18.3</td>
<td>123.6</td>
<td>6.1</td>
<td>38.6</td>
<td>23.7</td>
<td>0.167</td>
<td></td>
</tr>
<tr>
<td>Lea</td>
<td>206.1</td>
<td>12,807</td>
<td>18.1</td>
<td>159.2</td>
<td>7.8</td>
<td>63.8</td>
<td>31.7</td>
<td>0.108</td>
<td>23.3%</td>
</tr>
<tr>
<td>Lincoln</td>
<td>141</td>
<td>14,200</td>
<td>20.1</td>
<td>137.6</td>
<td>5.5</td>
<td>62</td>
<td>20.3</td>
<td>0.22</td>
<td>17.6%</td>
</tr>
<tr>
<td>Los Alamos</td>
<td>123.6</td>
<td>8,316</td>
<td>21.2</td>
<td>114.4</td>
<td>5.3</td>
<td>30.4</td>
<td>18.7</td>
<td>0.15</td>
<td></td>
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<tr>
<td>NM average</td>
<td>203.8</td>
<td>13,175</td>
<td>18.7</td>
<td>160.9</td>
<td>6.2</td>
<td>62.3</td>
<td>19.7</td>
<td>0.132</td>
<td></td>
</tr>
<tr>
<td>US average</td>
<td>190.9</td>
<td>17.7</td>
<td>18</td>
<td>140.9</td>
<td>6.2</td>
<td>78</td>
<td>23.1</td>
<td>0.15</td>
<td>15.2%</td>
</tr>
</tbody>
</table>

Sources: New Mexico Death Certificate Database, Bureau of Vital Records and Health Statistics, New Mexico Department of Health; Centers for Disease Control, Diagnosed Diabetes Percentage, 2009, New Mexico by County; New Mexico Department of Health, Indicator-Based Information System, [http://ibis.health.state.nm.us/indicator/view_numbers/NMPopDemoAge_65Cnty.html](http://ibis.health.state.nm.us/indicator/view_numbers/NMPopDemoAge_65Cnty.html); U.S. Census Bureau, Health Insurance Coverage Status, American Community Survey, 3-Year Estimates, 2009-2011.
## Health Status Indicators, by County (cont’d)

*yellow indicates a ranking in the bottom 8 of 33 NM counties*

<table>
<thead>
<tr>
<th>County</th>
<th>Heart Deaths per 100,000 Pop.</th>
<th>Years of Potential Life Lost per 100,000 Pop.</th>
<th>Life Expectancy After Age 65</th>
<th>Cancer Deaths per 100,000 Pop.</th>
<th>% of Adult Pop. With Diabetes</th>
<th>Unintentional Injury Deaths per 100,000 Pop.</th>
<th>% of Adults Obese</th>
<th>% Pop. over 65 (2010)</th>
<th>% of Pop. Uninsured</th>
</tr>
</thead>
<tbody>
<tr>
<td>Luna</td>
<td>325.8</td>
<td>16,481</td>
<td>18</td>
<td>184.4</td>
<td>7.1</td>
<td>58.4</td>
<td>26.8</td>
<td>0.196</td>
<td>22.9%</td>
</tr>
<tr>
<td>McKinley</td>
<td>212.2</td>
<td>15,456</td>
<td>17.8</td>
<td>175.6</td>
<td>12.4</td>
<td>100.3</td>
<td>36.2</td>
<td>0.095</td>
<td>38.0%</td>
</tr>
<tr>
<td>Mora</td>
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<td>19</td>
<td>136.2</td>
<td>6.7</td>
<td>84</td>
<td>21.4</td>
<td>0.187</td>
<td></td>
</tr>
<tr>
<td>Otero</td>
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<td>13,777</td>
<td>18</td>
<td>171.2</td>
<td>7.8</td>
<td>40.6</td>
<td>25.7</td>
<td>0.15</td>
<td>19.9%</td>
</tr>
<tr>
<td>Quay</td>
<td>192.7</td>
<td>20,221</td>
<td>18.8</td>
<td>159.1</td>
<td>6.1</td>
<td>54.8</td>
<td>24.1</td>
<td>0.206</td>
<td></td>
</tr>
<tr>
<td>Rio Arriba</td>
<td>219.1</td>
<td>18,608</td>
<td>18.2</td>
<td>179.1</td>
<td>6.3</td>
<td>105.3</td>
<td>24.5</td>
<td>0.141</td>
<td>18.8%</td>
</tr>
<tr>
<td>Roosevelt</td>
<td>257.9</td>
<td>12,113</td>
<td>18</td>
<td>197.3</td>
<td>5.9</td>
<td>50.72</td>
<td>27.2</td>
<td>0.119</td>
<td>21.6%</td>
</tr>
<tr>
<td>Sandoval</td>
<td>211.6</td>
<td>11,086</td>
<td>18.7</td>
<td>169.2</td>
<td>6.4</td>
<td>48.7</td>
<td>24.3</td>
<td>0.121</td>
<td>15.5%</td>
</tr>
<tr>
<td>San Juan</td>
<td>168.4</td>
<td>13,817</td>
<td>18.5</td>
<td>146.4</td>
<td>8.5</td>
<td>78.43</td>
<td>29.8</td>
<td>0.108</td>
<td>30.1%</td>
</tr>
<tr>
<td>San Miguel</td>
<td>221.8</td>
<td>16,259</td>
<td>17.8</td>
<td>183.6</td>
<td>6.4</td>
<td>77.3</td>
<td>22.5</td>
<td>0.152</td>
<td>14.4%</td>
</tr>
<tr>
<td>Santa Fe</td>
<td>180.3</td>
<td>11,589</td>
<td>19.6</td>
<td>158</td>
<td>3.9</td>
<td>60.8</td>
<td>14</td>
<td>0.151</td>
<td>19.9%</td>
</tr>
<tr>
<td>Sierra</td>
<td>266.6</td>
<td>25,793</td>
<td>17.7</td>
<td>204.8</td>
<td>6.1</td>
<td>63</td>
<td>25.1</td>
<td>0.306</td>
<td></td>
</tr>
<tr>
<td>Socorro</td>
<td>247.1</td>
<td>16,847</td>
<td>17.4</td>
<td>223.9</td>
<td>7.3</td>
<td>79.6</td>
<td>26.7</td>
<td>0.142</td>
<td></td>
</tr>
<tr>
<td>Taos</td>
<td>180</td>
<td>13,656</td>
<td>19.3</td>
<td>164.6</td>
<td>5.9</td>
<td>76.4</td>
<td>18.7</td>
<td>0.171</td>
<td>20.4%</td>
</tr>
<tr>
<td>Torrance</td>
<td>312.4</td>
<td>15,331</td>
<td>16.5</td>
<td>248.4</td>
<td>6.5</td>
<td>87.8</td>
<td>25.3</td>
<td>0.142</td>
<td></td>
</tr>
<tr>
<td>Union</td>
<td>123.8</td>
<td>12,690</td>
<td>18</td>
<td>123.5</td>
<td>5.9</td>
<td>64</td>
<td>23.8</td>
<td>0.179</td>
<td></td>
</tr>
<tr>
<td>Valencia</td>
<td>277.5</td>
<td>14,236</td>
<td>17.1</td>
<td>211.5</td>
<td>7</td>
<td>70.1</td>
<td>27.6</td>
<td>0.127</td>
<td>15.8</td>
</tr>
<tr>
<td>NM</td>
<td>203.8</td>
<td>13,175</td>
<td>18.7</td>
<td>160.9</td>
<td>62.3</td>
<td>0.132</td>
<td>19.7</td>
<td>15.2</td>
<td></td>
</tr>
<tr>
<td>US</td>
<td>190.9</td>
<td>17.7</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

This map depicts the frequency with which counties ranked in the bottom 8 of 33 counties for the following health status indicators:

- **Heart deaths** per 100,000 pop.
- **Cancer deaths** per 100,000 pop.
- **Unintentional injury deaths** per 100,000 pop.
- **Premature Deaths** (years of potential life lost) per 100,000 pop.
- **Life expectancy** from age 65
- **Adult diabetes** prevalence
- **% Adults obese**
- **% of population over age 65**
- **% of population uninsured**

What Factors Are Changing The State’s Health Care Needs?
The U.S. Census Bureau projects dramatic growth in the proportion of New Mexico’s population age 65 and over, in the coming decade.

65% in this group will manage more than one chronic condition by 2030.

Percentage Of Adults Age 65 And Over, By County, 2010

Estimated Number Of Adults Newly Eligible for Medicaid, By County

Uninsured Adults, Ages 18-64, Living Below 140% FPL, 2011

<table>
<thead>
<tr>
<th>Category</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1,216 - 2,940</td>
<td>1,216 - 2,940</td>
</tr>
<tr>
<td>2,941 - 9,329</td>
<td>2,941 - 9,329</td>
</tr>
<tr>
<td>9,330 - 21,081</td>
<td>9,330 - 21,081</td>
</tr>
<tr>
<td>21,082 - 42,455</td>
<td>21,082 - 42,455</td>
</tr>
<tr>
<td>No data available</td>
<td>No data available</td>
</tr>
</tbody>
</table>

Total for Counties Reported = 145,862

New Mexico’s Growing Primary Care Provider Shortage

- The vast majority of the projected 170,000 adults in NM newly eligible for Medicaid in 2014 and beyond have not previously had primary care health homes.
- NM has already struggled to maintain an adequate primary care network (primary care physicians, nurse practitioners, and physician assistants.)
- Already, 32 of 33 NM counties are designated as Health Professional Shortage Areas, or medically underserved.
- 40.5% of NM’s population lives in a Primary Care Health Professional Shortage Area. Nationally, the rate is 19.1%.

Percentage Of Population Living In A Primary Care Health Professional Shortage Area, 2012, By State

The number shown represents the number of county residents to each primary care physician working in the county. For example, a ratio of 1,914:1 means that there are 1,914 people for every 1 primary care physician working in the county.

The 2013 County Health Rankings and Roadmaps sets a national benchmark ratio at 1,067:1.

The statewide average ratio is 1,409:1.

The number shown represents the number of county residents to each Nurse Practitioner working in the county. For example, a ratio of 1,423:1 means that there are 1,423 people for every 1 Nurse Practitioner working in the county.

The statewide average ratio is 2,100:1.

Source: New Mexico Board of Nursing Annual Report for FY 2012
The number shown represents the number of county residents to primary care providers working in the county. For example, a ratio of 1,423:1 means that there are 1,423 people for every 1 Primary Care Physician or Nurse Practitioner working in the county.

The statewide average ratio is 836:1.

Map colors depict the frequency with which counties ranked in the bottom 8 of 33 counties for the seven major health status indicators.

The number shown represents the number of county residents to each Nurse Practitioner working in the county. For example, a ratio of 2,439:1 means that there are 2,439 people for every 1 nurse practitioner.

The statewide average ratio is 836:1.

Do We Have Enough Nurses Now?
RNs as Frontline Service Providers

Though health needs and disparities in care provision vary for populations across the state, all rely heavily on health care services provided by the largest group of health care professionals—Registered Nurses.

RNs provide the bulk of health care services to the state’s residents, whether relatively healthy, suffering from chronic disease, aging, or newly insured.

The health care needs of New Mexico’s population in 2012 were met in part by the following:

<table>
<thead>
<tr>
<th>Provider Type</th>
<th>Number</th>
<th>Ratio of Pop:Provider</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary Care Physicians:</td>
<td>1,467</td>
<td>1,409:1</td>
</tr>
<tr>
<td>Nurse Practitioners (primary care):</td>
<td>970</td>
<td>2,100:1</td>
</tr>
<tr>
<td>Registered Nurses:</td>
<td>19,403</td>
<td>105:1</td>
</tr>
</tbody>
</table>

Registered Nurses per 100,000 Population, All States

The national average for RNs per 100,000 population is 874. At 740 per 100,000, NM is ranked 44th of the 50 states.

Source: Henry J. Kaiser Foundation, http://www.statehealthfacts.org/profileind.jsp?ind=439&cat=8&rgn=33. RNs here include advance practice nurses such as nurse practitioners, clinical nurse specialists, certified nurse midwives, and certified registered nurse anesthetists; both full- and part-time nurses are counted.
The number shown represents the number of county residents to each Registered Nurse working in the county. For example, a ratio of 131:1 means that there are 131 people for every 1 Registered Nurse working in the county.

The statewide average ratio is 105:1.

Total Registered Nurses = 19,403

Source: New Mexico Board of Nursing Annual Report for FY 2012
Map colors depict the frequency with which counties ranked in the bottom 8 of 33 counties for the seven major health status indicators. The number shown represents the number of county residents to each Registered Nurse working in the county. For example, a ratio of 98:1 means that there are 98 residents in the county for each Registered Nurse. The statewide average ratio is 105:1.

### Number of Times County Appears in Lowest Rankings By Health Status Indicator

<table>
<thead>
<tr>
<th>Color</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Green</td>
<td>0</td>
</tr>
<tr>
<td>Yellow</td>
<td>1</td>
</tr>
<tr>
<td>Orange</td>
<td>2</td>
</tr>
<tr>
<td>Red</td>
<td>3</td>
</tr>
<tr>
<td>Brown</td>
<td>4-5</td>
</tr>
</tbody>
</table>

Sources: NM Board of Nursing 2012 Annual Report; New Mexico Death Certificate Database, Bureau of Vital Records and Health Statistics, NM Department of Health; Centers for Disease Control, Diagnosed Diabetes Percentage, 2009, New Mexico by County; U.S. Census Bureau, Health Insurance Coverage Status, American Community Survey, 3-Year Estimates, 2009-2011.
Will We Have Enough Nurses In The Future?
Will We Have The Nurses We Need To Take Care Of New Mexicans? What Do Changing Health Demand Factors Tell Us?

• Existing shortages of health care providers – including RNs -- in New Mexico already leave many health demands inadequately addressed. In the several decades ahead, demand is expected to increase due to the growing mean age of the state’s population and expanded access to care through health reform measures set to take place in 2014.

• Researchers forecast that RN shortages will grow across the country by 2030, with New Mexico projected to face the largest shortage ratio in the nation.

• Current data reported in the October 2013 Annual Report of the New Mexico Health Workforce Committee indicates a current shortage of 2,306 RNs in the state.

• Clearly, New Mexico will need more nurses to meet increased demand.

Will We Have The Nurses We Need To Take Care Of New Mexicans? What Do Changing Health Demand Factors Tell Us?

- Advanced practice nurses may increasingly be looked to in order to provide primary care services, which are in short supply in New Mexico. Only RNs who hold a BSN degree meet entry requirements for advanced practice nurse education programs.

Mapping The Landscape Of Nursing In New Mexico - Part 2: Key Questions
Caveat Emptor & Tempus Fugit

• These reports are based on those data available as of June 2013, through the New Mexico Board of Nursing Governor’s Report and NMNEC’s 2013 survey of nursing programs in the state.

• Since our initial report, released in June 2013, much important activity involving health policy and workforce analysis has taken place, including:
  • Implementation progress for the statewide NMNEC curriculum
  • Rollout of the Affordable Care Act
  • The New Mexico Health Workforce Commission’s first Annual Report (released Oct. 1, 2013)

• These important developments have added some more current and complete data to what served as the basis for our June report, but we believe the data and analyses we present are consistent with what new data exist – and still important to consider.
Who Are New Mexico’s Existing Nurses?
The Workforce Data Set:
NM Board of Nursing Annual Report 2012

Information on New Mexico’s nursing workforce comes primarily through state licensure data, reported annually in the New Mexico Board of Nursing (BON)’s Governor’s Reports. The 2012 BON report includes:

- Total number of active nursing license holders in the state, by type

These totals, however, do not differentiate between those license holders currently working as nurses and those not currently working as nurses.

More detailed information is collected when new licenses are issued or existing licenses are renewed (every 2 years). This data set provides a more complete snapshot of the makeup of the state’s nursing workforce, based on roughly half of NM’s license holders. This set provides data on nurses by:

- County of residence, license type, gender, age, degree held, employment status, work setting, and employment position.
- Race/ethnicity of nurses will be reported beginning in 2013.

A Profile of New Mexico’s Nurses, 2012

In New Mexico:
• 83% of all nurses are licensed as RNs
• 19,403 RNs hold active licenses
• 58% of RNs are educated below a BSN level
• 48% of RNs are age 50 or older

Total Number of Active Registered Nurse Licenses, By County, 2012

Total for RNs residing in NM = 19,403.

Source: New Mexico Board of Nursing 2012 Annual Report for Fiscal Year 2012.
New Mexico Registered Nurse License Holders, By Age, 2012

Total is all RNs who hold active licenses in FY12. This includes currently working nurses, retired nurses with active licenses, and licensed nurses not currently employed.

Source: New Mexico Board of Nursing 2012 Annual Report for Fiscal Year 2012.
Percentage Of RNs Who Are ADN-Prepared, By County, 2012  
New And Renewed Licenses Only

Associate of Nursing Degree-prepared RNs make up **46.4%** of the state’s RN workforce, based on new licenses and license renewals issued FY11-12. Percentages are based on data collected from approximately half of the state’s population of RNs.

Source: New Mexico Board of Nursing 2012 Annual Report for Fiscal Year 2012.
Percentage Of RNs Who Are BSN-Prepared, By County, 2012
New And Renewed Licenses Only

Bachelor of Science in Nursing Degree-prepared RNs make up 28.1% of the state’s RN workforce, based on new licenses and license renewals issued FY11-12. Percentages are based on data collected from approximately half of the state’s population of RNs.

Source: New Mexico Board of Nursing 2012 Annual Report for Fiscal Year 2012.
Masters in Nursing and PhD in Nursing Degree-prepared RNs make up 10.9% of the state’s RN workforce, based on new licenses and license renewals issued FY11-12. Percentages are based on data collected from approximately half of the state’s population of RNs.
Percentage of County Nurses by Highest Degree Held

Each polygon shows the percentage of all Registered Nurses in that county practicing by highest degree held.

Source: New Mexico Board of Nursing Annual Report for Fiscal Year 2012
Change in Highest Degree Held by New Mexico RNs, 2010 to 2012, New and Renewed Licenses Only

Source: New Mexico Board of Nursing 2010 and 2012 Annual Reports. Totals include only nurses holding degrees listed.
Will We Have The Nurses We Need To Take Care Of New Mexicans? What Do Data About Our Current Supply of Nurses Tell Us?

• 48% of current RNs are age 50 or older, meaning that almost half of New Mexico’s nurses are within 20 years of retirement. With an aging RN workforce, we are likely to face a dwindling supply.

• New Mexico’s Center for Nursing Excellence reports that 2012 new nurse licenses (1,936) were not enough to replace newly inactive licenses (2,685), indicating that the existing supply is indeed dwindling.

• With nearly 60% of RNs educated below the BSN level in 2012, the bulk of New Mexico’s nursing workforce is not yet qualified to undertake training for advanced nursing practice.

Who Are New Mexico’s Future Nurses?
The Data Set: NMNEC Academic Survey

• In 2012, NMNEC solicited survey responses from all public and several private institutions that offer academic nursing degrees.

• The survey asked for data about programs offered, the student pipeline through those programs, and faculty.

• Responses were returned from 15 of NMNEC’s 25 nursing education programs in the state, including:
  • 11 of NMNEC’s 18 ADN-granting institutions;
  • 4 of its 5 BSN-granting institutions; and
  • 6 of its 7 RN-BSN degree completion programs.
  • All of the responding institutions were public.

• All NMNEC member and associate schools and all survey respondent schools are listed on the following two slides.
## NMNEC Membership 2013

### Full Members

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<thead>
<tr>
<th>Institution</th>
<th>City</th>
<th>ADN</th>
<th>BSN</th>
<th>RN-BSN</th>
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PRE-LICENSURE RN PROGRAMS (ADN & BSN)
The ADN Pipeline
Snapshot AY11-12 (11 Surveyed NMNEC Schools)

1,320 Applicants

735 Admitted

585 qualified ADN applicants were not admitted

480 ADN Graduates
The BSN Pipeline
Snapshot AY11-12 (4 Surveyed NMNEC Schools)

350 Applicants

202 Admitted

169 BSN Graduates

148 qualified BSN applicants were not admitted
The Pre-Licensure RN Pipeline
Snapshot AY11-12 (15 NMNEC ADN & BSN Programs)

1,670 Applicants

937 Admitted

649 New RN Graduates

733 qualified new RN applicants were not admitted
Pre-Licensure RN Graduates by Degree Program, All Surveyed NMNEC Schools, AY2011-12

74% of the 649 new RN graduates in NMNEC schools were ADN-educated.

Nationally, 66% of all new RN graduates are ADN-educated.

Source: All respondents to 2012 NMNEC Academic Survey question that asks for “Total number of graduates from your program in AY2011-12 by term/semester” (Summer 2011, Fall 2011 and Spring 2012 combined). National figure for ADN graduates is from the Institute of Medicine’s 2011 Future of Nursing report.
2011-2012 ADN Graduates and Attrition
By Surveyed NMNEC College

Graduates (total=480)
Attrition (total=92)

*0 6 10 16 6 3 13 22 7 5 7 9 7

Source: Respondents to 2012 NMNEC Academic Survey question that asked for “Total number of graduates from your associate degree nursing program in AY 2011-12 by term/semester. (Summer 2011, Fall 2011, Spring 2012).”
2011-2012 Pre-Licensure BSN Graduates & Attrition by Surveyed NMNEC College

Graduates (total=169)

Source: Respondents to 2012 NMNEC Academic Survey question that asked for “Total number of graduates from your bachelor degree nursing program in AY 2011-12 by term/semester. (Summer 2011, Fall 2011, Spring 2012).”
Degree Program Graduates by Race/Ethnicity
All Surveyed NMNEC Schools, AY2011-2012

Source: All respondents to 2012 NMNEC Academic Survey question that asks for “Total number of graduates from your program in AY2011-12 by term/semester” (Summer 2011, Fall 2011 and Spring 2012 combined). Two ADN programs did not report race/ethnicity of their graduates.
RN TO BSN PROGRAMS
Who Are Candidates for the RN to BSN Program?

- Candidates for the RN-BSN Programs are already licensed RNs who have yet to earn a BSN degree.
- 46.4% of actively licensed RNs in NM currently hold an ADN degree. *(New Mexico Board of Nursing Governor’s Report 2012)*
- 85% of the 2012 RN nursing graduates in NM were ADN-prepared. *(2013 Annual Report, New Mexico Health Workforce Committee, October 2013)*
The RN-BSN Pipeline
Snapshot AY11-12 (6 Surveyed NMNEC Schools)

355* Applicants

308 Admitted

112 RN-BSN Graduates

47* qualified RN-BSN applicants were not admitted

*When a school did not report number of qualified applicants, the number admitted was used instead; actual number of applicants and applicants not admitted may be higher.
2011-2012 RN-BSN Graduates & Attrition, by Surveyed NMNEC Program

Source: Respondents to 2012 NMNEC Academic Survey question that asked for “Total number of graduates from your RN-BSN degree nursing program in AY 2011-12 by term/semester. (Summer 2011, Fall 2011, Spring 2012).”
Will We Have The Nurses We Need To Take Care Of New Mexicans? What Does Statewide Data About Our Nursing Students Tell Us?

It looks unlikely that, at current rates, the numbers of graduates from our nursing programs will be adequate to replace our diminishing supply of RNs. Statewide data reports that:

• The number of new RNs produced by the state, according to a May 2013 Legislative Finance Committee report, decreased from 1,062 in 2007 to 932 in 2011.

• The Center for Nursing Excellence estimates that a total enrollment of 3,025 students needs to be maintained each year through 2020 to meet New Mexico’s nursing needs. That would require an additional 469 students enrolled each year statewide to meet future demand for nurses in NM.

Will We Have The Nurses We Need To Take Care Of New Mexicans? What Does the NMNEC Program Survey Data Tell Us?

- Only 56% of qualified ADN applicants and 58% of qualified BSN applicants were admitted to the NMNEC programs surveyed.
- All programs reported admitting students at or above their current capacity levels.
- A total of 733 potential RN students (585 qualified ADN student applicants and 148 pre-licensure BSN qualified applicants) were not admitted by the 13 respondent programs, due to capacity limitations.
- Survey respondents do not represent all schools of nursing in the state (public and private), but the data they report suggests that program capacity is a serious limiting factor for aspiring students of nursing in the state.
- While survey responses provide only one snapshot of attrition, the data suggest that closer attention should be paid to variations in attrition rates between pre-licensure BSN students and ADN and RN-BSN students.

Source: 2012 NMNEC Academic Survey.
Who Is Educating New Mexico’s Future Nurses?
New Mexico RN Pre-Licensure Degree Programs 2013

Degree Type Offered
- Associate Degree in Nursing
- Bachelor of Science in Nursing

Source: New Mexico Board of Nursing Governor’s Report 2012.
Faculty By Highest Degree Earned, Surveyed NMNEC ADN Programs, 2012

Source: Respondents to 2012 NMNEC Academic Survey question that asked for “Number of faculty by degree (highest degree earned).”
Faculty By Highest Degree Earned, Surveyed ADN Programs, 2012

Source: Respondents to 2012 NMNEC Academic Survey question that asked for “Number of faculty by degree (highest degree earned).”
Faculty By Highest Degree Earned, Surveyed NMNEC BSN Programs, 2012

2.9% BSN
49.4% MSN
48.2% PhD

Source: Respondents to 2012 NMNEC Academic Survey question that asked for “Number of faculty by degree (highest degree earned).”
Faculty By Highest Degree Earned, Surveyed BSN Programs, 2012

Source: Respondents to 2012 NMNEC Academic Survey question that asked for “Number of faculty by degree (highest degree earned).”
Fulltime Faculty by Race, All Surveyed NMNEC Programs

- White (80.8%)
- Hispanic / Latino (12.2%)
- Two or more races (3.4%)
- American Indian/Alaska Native (1.2%)
- Black / African American (1.2%)
- Asian (<1%)
- Other / Unspecified <1%

Source: All respondents to 2012 NMNEC Academic Survey question that asked for “Number of full-time faculty by race/ethnicity.” Note: No Native Hawaiian/Pacific Islanders reported.
Faculty Vacancies, Surveyed ADN Programs

- **UNM-Taos**: 1 full-time vacancy
- **Santa Fe Community College**: 1 part-time vacancy
- **San Juan College**: 1 full-time vacancy
- **Northern New Mexico College**: 1 full-time vacancy
- **New Mexico State University Carlsbad**: 1 full-time vacancy
- **New Mexico Junior College**: 1 full-time vacancy
- **Luna Community College**: 1 full-time vacancy
- **Eastern New Mexico University-Roswell**: No full-time or part-time vacancies
- **Clovis Community College**: No full-time or part-time vacancies
- **Central New Mexico Community College**: 2 full-time vacancies, 4 part-time vacancies

Source: Respondents to 2012 NMNEC Academic Survey question that asked, “As of today, how many faculty vacancies does your school have?”
Faculty Vacancies, Surveyed Pre-Licensure BSN Programs

- University of New Mexico: 3 full-time vacancies
- New Mexico State University: 8 full-time vacancies
- Grand Canyon University: 1 full-time vacancy, 2 part-time vacancies

Source: Respondents to 2012 NMNEC Academic Survey question that asked, “As of today, how many faculty vacancies does your school have?”
### ADN Program Faculty Salaries Compared to NM Practicing RN Salaries

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<td>Mean RN Wage 2011</td>
<td>$68,107</td>
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<tr>
<td>Average Experienced RN Wage 2011</td>
<td>$76,597</td>
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Source: Respondents to 2012 NMNEC Academic Survey question that asked, “What is the average salary of your full-time nursing faculty (tenured and non-tenured)?”
Will We Have the Nurses We Need To Take Care Of New Mexico?  
What Do The Data Tell Us About Challenges That Programs Face?

• Efforts to increase nursing program capacity are hampered by the lack of nurses trained at the graduate degree levels required to serve as program faculty and clinical preceptors.
• A healthy educational pipeline requires that a significant portion of students pursue graduate degrees in nursing. (NM Center for Nursing Excellence, 2009)
• The nearly 60% of NM RNs trained below the BSN level, however, are currently unprepared to pursue graduate education, and so are unprepared to move into these roles that are key to increasing nursing program capacity in the state.
• Students who enter the profession through a BSN are four times more likely to pursue graduate degrees than students who enter through an ADN - 16.8% versus 4.3% nationally (Joynt & Kimball, 2008).
• With many nursing professors approaching retirement, there may not be enough in the nurse faculty “pipeline” to replace even the existing faculty workforce.
• Faculty salaries among surveyed schools also highlights the challenge of recruiting and retaining nursing faculty within a competitive nursing marketplace. Faculty positions are demanding yet offer low salaries when compared to clinical practice salaries.

Sources: NMNEC 2012 Academic Survey, House Joint Memorial 40,; Center for Nursing Excellence; Joynt and Kimball, Blowing Open the Bottleneck, 2008.
What is the Current Employment Picture for Nurses in New Mexico?
RN Wages, For Middle 50% Of Workers, By NM Region, 2011

Source: New Mexico Department of Workforce Solutions, Economic Research and Analysis Bureau, 2011 Wage Information for Job Seekers, www.dws.state.nm.us/eds
RNs Employed By Industry Type In New Mexico, 2011 (DWS)

Online Advertised Jobs Data for Registered Nurses, March 2013

Source: New Mexico Workforce Solutions, online advertised jobs data, www.jobs.state.nm.us
Long-Term Employment Projections for RNs in New Mexico, Department of Workforce Solutions

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<tbody>
<tr>
<td>Registered Nurses</td>
<td>15,146</td>
<td>19,065</td>
<td>3,919</td>
<td>2.30%</td>
<td>666</td>
<td>392</td>
<td>274</td>
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<tr>
<td>Total All occupations</td>
<td>855,296</td>
<td>991,600</td>
<td>136,304</td>
<td>1.50%</td>
<td>34,094</td>
<td>13,936</td>
<td>20,158</td>
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Will We Have the Nurses We Need To Take Care Of New Mexico?
What Does The Employment Data Suggest?

• Job projections for nurses in New Mexico in the next ten years remain strong.
• About 60% of projected job openings by 2020 may be due to the creation of new nursing positions.
• Employment opportunities for nurses are distributed across the various regions of the state.
• No data exists, however, to indicate whether employers of RNs require or prefer BSN- to ADN-educated nurses.

Sources: NMNEC 2012 Academic Survey, House Joint Memorial 40,; Center for Nursing Excellence; Joynt and Kimball, Blowing Open the Bottleneck, 2008.
How is New Mexico Responding To The Need For Nurses?
The New Mexico Nursing Education Consortium (NMNEC)

- NMNEC has developed a collaboration of nearly every nursing program across the state to create a common core curriculum in nursing education, transforming the current structure into a resource-efficient and easily-accessible baccalaureate program for students.

- The goals are to encourage, support, and provide advanced nursing education (bachelor degree and above) in communities through partnerships between community colleges and universities, provide a seamless transition through nursing education for students, and to maximize efficiencies through a common curriculum, sharing of faculty, technology, and other resources.

Source: http://www.nm nec.org/
Going Forward: What We Don’t Know Yet

FROM EMPLOYERS:
• What is New Mexico employer preference for BSN vs. ADN nurses?
• Does employer preference vary by job type, facility type, or geographical setting?
• Are there pay differentials for RNs trained by ADN programs, BSN programs, or nationally accredited programs?
• What is New Mexico employer need for entry-level nurses versus experienced nurses?

FROM STUDENTS:
• What reasons do nursing students have for choosing ADN vs. BSN programs?
• What incentives do students perceive for choosing the BSN versus ADN degree?
• What barriers to entry do potential nursing students face, for each degree program?
• What barriers to completion do nursing students face, in each degree program?
• How readily do new RN graduates (entry-level nurses) find employment?
Going Forward: What We Don’t Know Yet

FROM SURVEYS TO DATE:

• What is the racial/ethnic make-up and distribution of the state’s nursing workforce (not previously collected in the Board of Nursing licensing surveys)?

• What information are we missing from the schools NOT represented in the NMNEC survey responses – particularly private institutions – to fill out the picture of nursing education in the state?
As implementation of Phase 1, the new NMNEC nursing curriculum moves forward, and Phase 2, alignment of 2-year and 4-year programs begins, it will be important to track:

- What actual nursing employment opportunities will the ACA health care expansion open?
- What effects will economic recovery or continued economic downturn have on nursing employment opportunities?
- What impact will nurse retirement rates have on nursing employment opportunities?
- Where will newly graduated nurses find entry-level employment opportunities?
- What impact will implementation of the new statewide nursing curriculum have on program capacities, enrollment numbers, attrition, graduation rates, and NCLEX licensing test pass rates?
- How will faculty retirements or other turnover continue to affect program capacity?
- How are faculty shortages, more demanding licensure passage rates, and other factors key to accreditation continuing to impact availability of quality nursing education in the state?