Data from the Texas Department of State Health Services (DSHS) Texas Center for Nursing Workforce Studies (TCNWS) confirms what many in nursing have known — there is, and will continue to be, a shortage of nurses in Texas. TCNWS estimates that by 2030, the shortage will more than triple, and Texas will be 60,000 nurses short of what is needed to meet health care demands.¹

More than 50% of Texas baby boomers will be eligible for retirement by 2020 and waves of retirement have already begun. Since 2015, the number of nurses planning to retire in one to three years has gone up, while the number planning to retire in four years has gone down. Alarmingly, 73% of Baby-Boomer nurses are planning to retire in the next three years.² In 2015, roughly 40% of Texas RNs and APRNs were over the age of 50.³ The aging of our population will create an increased demand for health care services at the same time we face a huge exodus of nurses from the workforce.

Texas cannot afford to relax its efforts to ensure an adequate nursing workforce. Schools of nursing made considerable progress in addressing existing demand; however, lack of clinical training capacity and faculty shortage issues pose significant challenges to meeting projected demands. To increase capacity, the Texas Higher Education Coordinating Board administers innovative grant awards, which enable schools of nursing to develop alternative approaches to clinical training.

Additionally, incentives are needed to attract and retain nursing faculty to educate students to become nurses. According to the American Academy of Colleges of Nursing, higher compensation in clinical and private-sector settings lures current and potential nurse educators away from academic faculty positions.⁴ In addition, nurse faculty range from an age of 50.9 to 62.2 years old, while the average age of nursing faculty at retirement is 62.5 years old. This greatly limits the number of years they spend educating students.

³ Nursing Workforce in Texas: Demographics and Trends Report, Texas Center for Nursing Workforce Studies
The Texas Nurses Association works closely with nurse educators, university and community college systems, and legislative and regulatory staff to identify concrete solutions to issues in nursing workforce supply and demand.

PROFESSIONAL NURSING SHORTAGE REDUCTION PROGRAM (61.9621, EDUCATION CODE)

ISSUE BACKGROUND

The Professional Nursing Shortage Reduction Program (PNSRP) was passed into law in 2001, giving the Texas Higher Education Coordinating Board (THECB) the ability to provide dedicated funds to nursing education programs that demonstrate an ability to increase enrollment and graduates. The program has been funded every year since 2004.

The current program consists of three “pots of funds” distributed by the THECB to nursing programs within public and private independent colleges and universities that are able to increase their nursing graduates.

1. Regular Program

All nursing programs are eligible to participate. Pro-rata funds are distributed after the fact based on the number of increased graduates over the previous year.

2. Over 70 Program

Only prelicensure nursing programs with graduation rates of 70% or higher are eligible to participate. Funds are distributed each biennium in advance, based on projected increases in prelicensure enrollments of 12% for the first year and an additional 18% for the second year. If the targets are not met, the school repays the pro-rata share of the money advanced.

3. Under 70 Program

Eligible prelicensure nursing programs are 1) programs with a graduation rate below 70% and 2) new programs that do not have a previous year graduation rate. Funds are distributed in advance based on the programs agreeing to increase prelicensure graduates by a specific number set by the program.

WHY IT MATTERS TO TEXAS NURSES

The program has worked very well, increasing the annual number of pre-licensure nurse graduates (new nurses) from 4,500 in 2001 to 16,204 in 2015. Due to Texas’ ability to withstand the recession that began in 2008, the high number of people moving to Texas each day, and the looming retirement of baby boomers, nurses continue to be in high demand. In fact, a preliminary report from the Texas Center for Nursing Workforce It is more critical than ever that Texas maintain its PNSRP and keep it adequately funded to meet future demands.
Studies this year reveals that the current nurse workforce shortage is expected to more than triple to 66,000 nurses short of demand by 2030 if nothing is done.

**TNA POSITION**

In the 84th legislative session, the Legislature appropriated $33.75 million to the Professional Nursing Shortage Reduction Program. In the 85th, that appropriation dropped to $20 million.

The Texas Nurses Association supports full funding of the Nursing Shortage Reduction Program at a level sufficient enough to address the growing shortage of registered nurses. The program should effectively prioritize incentives for increasing pre-licensure graduates while also supporting education to achieve a more educated workforce, additional faculty and advanced practice registered nurses. As shortages in clinical training sites and faculty challenge prelicensure program growth, greater flexibility in growth projection requirements should be implemented to enable schools to access NSRP funds for realistic growth projections while maintaining accountability for outcomes.

**Legislative History**

- 2017: $20 million appropriated for 2018-2019
- 2015: $33.75 million appropriated for 2016-2017
- 2013: $33.75 million appropriated for 2014-2015
- 2011: $30 million appropriated for 2012-2013
- 2009: $47.2 million appropriated for 2010-2011 (following Governor’s Task Force and large coalition of diverse stakeholders). Funding was restructured into the “three pots” described earlier to enable high performing nursing schools to receive funds up front.

**HB 3126 (2003)**

- Established the Texas Center for Nursing Workforce Studies within the Department of State Health Services to create a mechanism for the ongoing collection and analysis of data regarding the nursing workforce to inform the state.
- $5.8 million appropriated for 2004-2005

**SB 572 (2001)**

- Senate Bill 572 amended the Education Code and established the professional nursing shortage reduction program (program) to increase the number and preparation of professional nurses in public, private or independent institutions of higher education if the legislature appropriates money for the program.
COMMUNITY COLLEGE BACCALAUREATE PROGRAMS

ISSUE BACKGROUND

Graduates of associate degree (ADN), diploma, or baccalaureate degree nursing (BSN) programs are eligible to sit for the same professional nursing licensure exam (NCLEX-RN), which is designed to test the knowledge, skills and abilities essential for the safe and effective practice newly licensed nurses.

Community colleges have provided an entry point for students from traditionally underrepresented groups and have play a key role in strengthening the nursing workforce.

However, research over the past 15 years has consistently demonstrated that nurses prepared at the BSN level achieve better patient outcomes than those prepared with an ADN or diploma. In its landmark Future of Nursing: Leading Change, Advancing Health report, the Institutes of Medicine recommended that 80% of RNs have a BSN by 2020. This is no small goal — in 2007 only 45.6% of Texas RNs were BSN prepared. However, following the report, nurse educators launched several initiatives to facilitate the articulation of ADN and diploma graduates into BSN programs.

In 2011, Trinity Valley Community College was awarded a Perkins Leadership Grant from the Higher Education Coordinating Board to reduce duplication in BSN completion programs (RN-to-BSN) and ADN curricula. The Consortium for Advancing Baccalaureate Education in Texas (CABNET) emerged from this work, establishing affiliation agreements between community colleges and universities to enable seamless transition for students who first complete an ADN and then BSN.

Additionally, following the IOM’s challenge, several universities in Texas and other states launched online BSN completion programs that accommodate the working nurse’s schedule and facilitate achievement of a BSN. The Robert Wood Johnson Foundation choose nine states to receive grants through its Academic Progression in Nursing program. In Texas, the grant—through the Consortium for Advancing Baccalaureate Nursing Education in Texas—helped expand The Texas Concept-Based Curriculum project, originally started through the work of a Perkins Leadership grant.

These cumulative efforts successfully increased BSN preparation of the RN workforce from 45.6% in 2007 to 55.4% in 2015. There are no reports that BSN completion programs are at or near capacity. However, 23

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Fact: 57% of nurses in Texas begin their education in nursing with an associate degree.¹

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states now allow community colleges to award nursing bachelor’s degrees which are targeted to meet local workforce needs and expand access to four-year degrees to a broad range of students. In 2017, Texas became one of those states.

**WHY IT MATTERS TO TEXAS NURSES**

In 2017, the Texas Legislature considered several proposals to allow community colleges to offer baccalaureate degree programs or RN-to-BSN completion programs; SB 2118 passed (detailed below).

The legislation included many requirements for community colleges to fulfill in order to offer a baccalaureate program. Several schools have been approved to offer such programs and others are currently in development. Community colleges face many of the same challenges as four-year universities in developing a BSN program — including recruiting faculty and clinical space availability — but may offer a lower cost degree option for students. Now that the option will become available in Texas, cohesive data collection and benchmarking will ensure this is an effective education option for Texas nursing students.

**TNA POSITION**

The legislature should focus its resources on developing and championing the current proven pipeline between the community colleges and universities through articulation agreements like CABNET.

Texas should become a leader in the establishment of consistent outcomes measures and competencies that all BSN graduates should have, specifically RN-BSN graduates, establishing how they should be practicing differently after completion of their programs.

TNA should work with the Board of Nursing and Texas Center for Nursing Workforce Studies to outline specific criteria by which the success of the community college BSN initiative in Texas can be accurately measured, including evaluating practice outcomes, successful completion rates for the programs, tuition rates, tracking of students from completion of the program into employment and further higher education, and impact on faculty and clinical site availability.

**LEGISLATIVE HISTORY**

**SB 2118 (2017)**

Authorized the THECB to allow community colleges with a large enough tax base to offer bachelor’s degrees in nursing and other fields

- Community colleges are only allowed to offer bachelor’s degrees in the following disciplines:
  - Applied science with emphasis on early childhood education
  - Applied technology
  - Nursing
• Community colleges may not have more than three bachelor programs at any given time and must demonstrate a workforce need.

• In order to be approved by the THECB, the community college must demonstrate:
  • The workforce need for the degree programs in the region served by the college.
  • How those programs would complement the other programs and course offerings of the college, and whether the associate degree program offered by the college in the same field has been successful.
  • Whether those programs would unnecessarily duplicate the degree programs offered by other institutions of higher education.
  • The ability of the college to support the degree program with student enrollment and the adequacy of facilities, faculty, admin, libraries, etc.

• Only community colleges in districts with a taxable property valuation of $6 billion or more may apply.

• Once approved, the community college must report to the THECB
  • Long term financial plan for receiving accreditation of the program
  • Long term plan for faculty recruitment that
    • Indicates an ability to pay increased doctoral faculty salaries.
    • Identifies recruitment strategies for new faculty.
    • Ensures that the program will no draw faculty employed by a neighboring institution offering a similar program.
  • Detailed information on the manner of the program and course delivery, and
  • Detailed information regarding existing articulation agreements and dual enrollment agreements:
    • Must have at least three existing articulation agreements with general academic institutions or medical and dental units, or reasons as to why not.
    • Must show that the articulation agreements are at capacity.
    • THECB may not authorize if the articulation agreements are sufficient to meet the needs of that field.

• There may not be additional legislative appropriations to fund the BSN program and students may not be charged more for BSN tuition than ADN tuition.

• Current ADN enrollment must remain the same until the 2021-2022 academic year — cannot replace enrollment in favor of the BSN program.

HB 1384 (2015 – Left pending in Calendars Committee)
• Would have authorized the THECB to allow certain community colleges to offer bachelor’s degrees.

SB 414 (2013)
• Mandated a study to consider giving community colleges the authority to grant bachelor’s degrees in the fields of applied science and nursing.
NURSING FACULTY LOAN REPAYMENT ASSISTANCE PROGRAM

ISSUE BACKGROUND

Addressing the established nursing shortage remains difficult due to an ongoing faculty shortage. In 2016, the National League for Nursing reported that on average, 30% of students in the US were denied admittance to surveyed colleges of nursing due to a lack of faculty. And almost 12,000 qualified applicants to master’s and doctoral programs (faculty-track diplomas) were turned away due to lack of faculty.

Experienced, qualified faculty members for nursing schools are extremely difficult to attract due to the vast differences in pay scales in academic settings versus clinical settings. A 2015 study found that key challenges to hiring faculty members are insufficient funds and noncompetitive salaries. Additionally, research indicates most nurses don’t enter academia until later in their career, which shortens their faculty lifespan — on average, nurse faculty members are between 50 and 65 years of age.

The national vacancy rate for nursing faculty positions has remained between 7-8% since 2010. In Texas, the nursing faculty vacancy rate has grown from 7.8% in 2011 to 10.9% in 2015, and faculty turnover rates in Texas nursing programs are now at 32%.

The Nursing Faculty Loan Repayment Assistance Program (NFRLP) was funded in 2013 in response to the continued lag in nursing workforce supply over the last decade and the need to provide an incentive to bring qualified instructors into higher education faculty.

In the past, the NFLRP could access excess funds in the Physician Education Loan Repayment Program (PELRP), which is currently funded at $33 million per biennium. However, over the past several years, funds left over from the PELRP dwindled to zero, and the NFLRP was left without any source of funding.

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WHY IT MATTERS TO TEXAS NURSES

The NFLRP was originally intended to provide an incentive for practicing nurses to go into faculty positions and increase capacity for nursing school expansion, which would in turn help reduce the overall nursing shortage in Texas. However, the previous funding setup through PELRP provided no guarantee of funds, and the THECB was unable to market the program to nurses or provide any kind of incentive for funds since there may be differing amounts from year to year, or simply none available.

Fortunately, in the 85th legislative session, the Texas Legislature dedicated $3 million to the program in addition to any leftover PELRP funds that may be available. However, the program requires a few adjustments to ensure nurses are adequately incentivized to leave the private market for faculty positions.

TNA POSITION

TNA recommends that the Texas Legislature remove the single-year award amount maximum of $7,000 currently in law and allow the THECB to set the award maximum through rulemaking.

Currently the NFLRP is only available for nurses that have been employed full time for at least one year as a faculty member of an eligible institution. TNA believes that this fund should be available for part-time faculty members as well and should be updated to allow part-time faculty to apply for loan repayment funds.

LEGISLATIVE HISTORY

SB 1 (2017)

- General Appropriations bill, dedicated $3 million to the program.

HB 7 (2015)

- General taxation bill, amended funding formula for PELRP to add Tax Code Sec. 155.2415(a)(3)(B) and 155.2415(b) to allow the proceeds to direct to the General Fund if the Comptroller determines that the PELRP appropriated amount ($33.8M) is sufficient to continue the program.
- The balance in General Revenue may be appropriated “only for health care purposes.”

SB 1258 (2013)

- Provided funding mechanism for the Nursing Loan Repayment Program established in 2004. Provided loan repayment assistance for nurses if money is left over from PELRP at the end of the fiscal year.

HB 4583 (2009)

- Budget Consolidation bill — set up revenue for the Physician Education Loan Repayment Program so that a percentage of tax receipts from smokeless tobacco are dedicated to the property tax relief fund with the remainder going to the PELRP.