



Policy Brief National Nursing Shortage



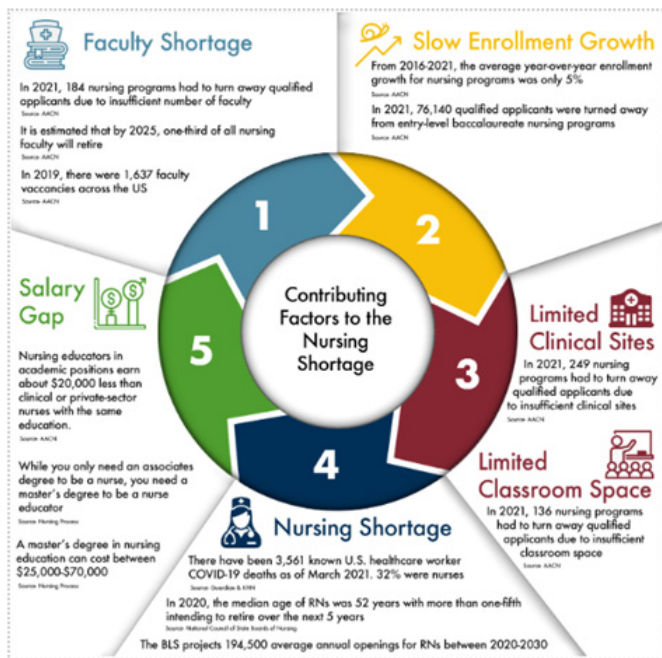
Even before COVID-19, statisticians predicted that there would not be enough trained nurses to meet demand. This has been exacerbated by the pandemic, causing a **nursing shortage** close to 13 million workers across the world.¹ In the United States, about 1.1 million nurses need to be replaced by 2024.²

Factors that impact the current staffing shortage among nurses include an aging population, aging workforce, nurse burnout, wage disparities, family obligations, lack of nursing faculty,³ and infection rates and death.⁴ However, one of the major factors contributing to the shortage is **limited access to nursing education** and training. Even though student applications surged in fall 2020 programs, there were 80,521 qualified applicants who could not be admitted due to a shortage of teaching faculty.⁵ For 40% of schools, the sole reason for not accepting all qualified applicants was the **insufficient availability of clinical sites**.⁶

Nurses with a **baccalaureate degree** have better skills in critical thinking, leadership, communication, and problem solving, and they also produce better patient outcomes and lower mortality rates.⁷ However, only 64.2% of registered nurses have a baccalaureate or graduate-level degree; the Institute of Medicine Committee recommends increasing baccalaureate-prepared nurses to 80%.⁸

States like California are experiencing an urgent need for nurses to have baccalaureate degrees to maintain a robust medical system that meets current population demands. For example, California has three times the deficit of the next shortest state for registered nurses.⁹ About 70% of nurses in California had at least an associate degree, but only 16% of those nurses returned for their bachelor's.¹⁰ States with the most severe shortages include California, New Jersey, South Carolina, Alaska, Texas, and Florida.

Areas with high retirement populations are greatly impacted by the shortage,¹¹ and special attention should be considered in **healthcare deserts**,¹² where nearly 80% of rural communities are medically underserved.¹³ Students who train in **rural areas** are more likely to stay there.¹⁴



Policy Recommendations

Policy makers on the state and federal levels can combat the nationwide nursing shortage by increasing access to competency-based nursing education. The prioritization and investment in education would offset current healthcare costs, which are approximately 18% of the U.S. GDP.¹⁸

The following are specific policy recommendations that would address the nursing shortage.

- Policy makers can advocate for more synergy between the Department of Education and state federal reimbursement for nursing boards to decrease licensure barriers for nurses nationwide.
- Investing in programs that help nurses with **associate degrees** obtain bachelor's degrees can boost the career trajectories of those ready to advance their degree.¹⁹
- **Licensure reciprocity** would allow healthcare workers to move their licenses across state lines as long as they are in good standing in their home state. The boldest example of licensure reform is in Arizona, which adopted universal licensure to permit licensed individuals relocating from other states to practice within Arizona if they meet certain safeguards (e.g., practicing at least a year, in good standing in their original state of license).²⁰
- In January 2014, the University of Wisconsin (UW) announced the \$3.2 million Nurses for Wisconsin initiative to provide **fellowships and loan forgiveness** for future nurse faculty who agree to teach in the state after graduation.
- NY S.8175A: Enacts the **RESPECT Nurses Act** to "recruit, empower, support, pay, educate, connect and train" current nurses and nursing students, thereby increasing the number of nurses within the state of New York.²¹
- H.B.2221: Appropriates funds to support Hawaii's nursing workforce and address the nursing workforce shortage by increasing University of Hawaii nursing faculty positions, providing **education grants** to qualified students who represent underrepresented persons in nursing, and providing greater training and development for nurses.²²

- The Center for Health Outcomes and Policy Research at University of Pennsylvania calls for adapting **federal funding mechanisms** (i.e., Title VIII and Medicare) to focus on preparing more nurses at the baccalaureate and higher degree levels. This policy emphasis is needed to adequately address the growing need for faculty and nurses to serve in primary care and other advanced practice roles.²³

Improving access to nursing education is vital to the nation's health and economy. WGU's School of Health is specifically designed to help working learners pursue their nursing degree on their own schedule. WGU's rigorous nursing programs are supported by instructors and mentors who equip students with the academic and professional skills they need to succeed in their career.

About WGU

Established in 1997 by 19 U.S. governors with a mission to expand access to high-quality, affordable higher education, online, nonprofit WGU now serves more than 130,000 students nationwide and has more than 277,000 graduates in all 50 states. Driving innovation as the nation's leading competency-based university, WGU has been recognized by the White House, state leaders, employers, and students as a model that works in postsecondary education. In just 25 years, the university has become a leading influence in changing the lives of individuals and families and preparing the workforce needed in today's rapidly evolving economy. WGU is accredited by the Northwest Commission on Colleges and Universities, has been named one of Fast Company's Most Innovative Companies, and has been featured on NPR, NBC Nightly News, and CNN, and in The New York Times. Learn more at wgu.edu and wgu.edu/impact.

Please contact the WGU Public Policy Office at PublicPolicy@wgu.edu for more information.

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