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COUNTING NURSES

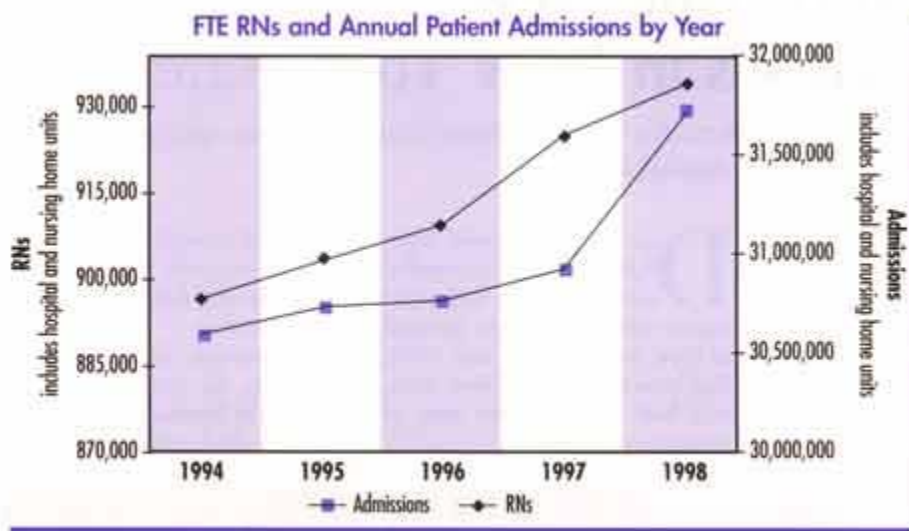
Though you probably don't look forward to paying taxes, it may help to know that your tax dollars fund valuable data collection activities at the U.S. Department of Labor's Bureau of Labor Statistics (BLS).

Both the Current Population Survey (CPS) and the Current Employment Statistics Survey (CESS) are used to gather information about people's work patterns, including employment and unemployment. The CPS, which is conducted by the Bureau of the Census for the BLS, surveys approximately 60,000 households monthly, while the CESS gathers data from surveys of nonfarm "establishments" (employers), including government entities. By analyzing data from these surveys in conjunction with data from other sources such as the National Sample Survey of Registered Nurses, we can learn more about where RNs stand in the workforce.

Using data from the CPS, for example, the BLS reported that in February 1999, 4.4% of the civilian labor force was unemployed, compared to 4.1% in February 2000. From previous analyses (Buerhaus, 1984), we know that as the overall unemployment rate drops (as it did from 1998 to 1999), the supply of RNs willing to work tends to decrease. Thus, hospitals can expect to have more difficulty hiring RNs in 2000 than they did in 1998.

Using the CESS data, the BLS reported that hospitals had 3,984,600 positions in November 1999, compared to 3,952,600 positions in November 1998 or an increase of just 32,000 jobs. It would seem that hospital employment has remained at about the same level during the last year. For the latest data about the U.S. labor force, go to www.bls.gov.

---Christine Kovner, PhD, RN, FAAN



Source: American Hospital Association. *Hospital Statistics*. 2000 ed. Chicago: Healthcare Info Source; 2000.

Sources: Bureau of Labor Statistics. Labor force statistics from the current population survey (online). Available from : URL: www.bls.gov/cpshome.htm Moses EB. The registered nurse population: March 1996, findings from the National Sample Survey of Registered Nurses. Rockville (MD): Dept. of Health & Human Services Administration, Bureau of Health Professions, Division of Nursing; 1996. Buerhaus PI. Capitalizing on the recession's effects on hospital RN shortages. Hosp

EAST FACTS

- ▼ 4.4 million full- and part-time workers were employed in U.S. hospitals (including non-federal, short-term general, and other specialty hospitals) in 1998.
- ▼ Registered nurses and licensed practical nurses represented 23% and 4%, respectively, of the 4.4 million hospital personnel in 1998.
- ▼ Labor accounted for 54% of all hospital expenses in 1998.
- ▼ Inpatient services were 66% of gross hospital revenue, while outpatient services accounted for 33% in 1998.
- ▼ People aged 65 and older represented 38% of hospital admissions in 1997.
- ▼ The average length of stay in 1997 for patients aged 65 and older was 6.5 days, compared to 4.7 days for those under age 65.

Sources: American Hospital Association. *Hospital statistics*. 2000 ed. Chicago: Healthcare InfoSource; 2000; Health Care Financing Administration. *Health care indicators: Table 1. Selected community hospital statistics* [online]. 1999. Available from: URL: <http://www.hcfa.gov/stats/indicatr/tables/t01.htm>.

SURVEYING NEWLY LICENSED NURSES IN NEW YORK STATE

RNs would work additional hours if higher salary were available.

Data was analyzed from 1,929 responses to a mailed survey of all registered nurses who were newly licensed in New York in 1997 and 1998, had been educated in New York, and had less than one year of nursing experience.

Seventy percent of newly licensed nurses with a bachelor of science in nursing, 57% of those with an associate's degree, and 64% of those with a diploma worked in a hospital (including inpatient and ambulatory care positions in acute care and psychiatric hospitals). Thus, while hospital use may be declining somewhat, the hospital is still the major location of practice.

Although a smaller percentage of new associate's degree RNs took positions in hospitals than did new bachelor's degree RNs, a majority of all new RNs (58%) employed in hospitals 1998 held associate's degrees. In fact, associate's degree RNs composed the largest subgroup of new RNs.

The average age of all new RNs was 32 years; for those working in hospitals, the average age was 31.1 years. Statewide, newly licensed bachelor's degree RNs tended to be younger (average age 28.6 years) than newly licensed associate's degree RNs (average age 34 years).

Most new RNs indicated a willingness to work additional hours in return for higher pay, greater scheduling flexibility, or both. Many would be willing to work extra hours under certain other conditions. Respondents had the option of checking more than one response. - Edward Salsberg, MPA; Haven Battles, PhD; Paul Wing PhD; and Christine Kovner, PhD, RN, FAAN

Conditions Under Which New RNs Would Be Willing to Work Additional Hours

If higher salary were available	35%
If flexible hours or different shifts were available	28%
If I could work in the specialty of my choice	9%
If more or better child care were available	3%
Other condition	9%
Not willing to work additional hours under any condition	15%

n = 1,554

Source: The Center for Health Workforce Studies, School of Public Health, State University of New York at Albany. Unpublished data.

RESEARCH BRIEF

Is California Facing An RN Shortage in Y2K?

In a recent study, researchers Janet Coffman and Joanne Spetz used data from a variety of sources (such as the 1996 National Sample Survey of Registered Nurses) to answer a pressing question: Will California have an adequate supply of RNs in the near future? They found that the demand for RNs is likely to increase rapidly over the next two decades. Unless there is a huge migration of RNs into California, the state won't be able to meet the nursing needs of its growing and diverse population.

As a solution to the nursing shortage, Coffman and Spetz propose an increase in state funding of public nursing education programs. By analyzing existing data, they estimate the number of new graduates from RN programs will have to increase by 3,600 (68%) to maintain California's current nurse-patient ratio through 2010, and an additional 1,400 will be needed between 2010 and 2020.

Factors such as improvements in personal circumstances, working conditions, wages, and medical technology could contribute to a more favorable supply-demand ratio. On the other hand, the shortage may be so great that these factors won't be sufficient to

counterbalance the increasing demand.

Additional funding will allow nursing education programs to admit a greater number of qualified applicants, many of whom are now being denied acceptance simply because the programs lack funds.

-----Tammy Fisher, MPH

(Source: Image J Nurs Sch 1999;
31(4):389-93)

Credits:

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