THE NATIONAL FORUM OF STATE NURSING WORKFORCE CENTERS
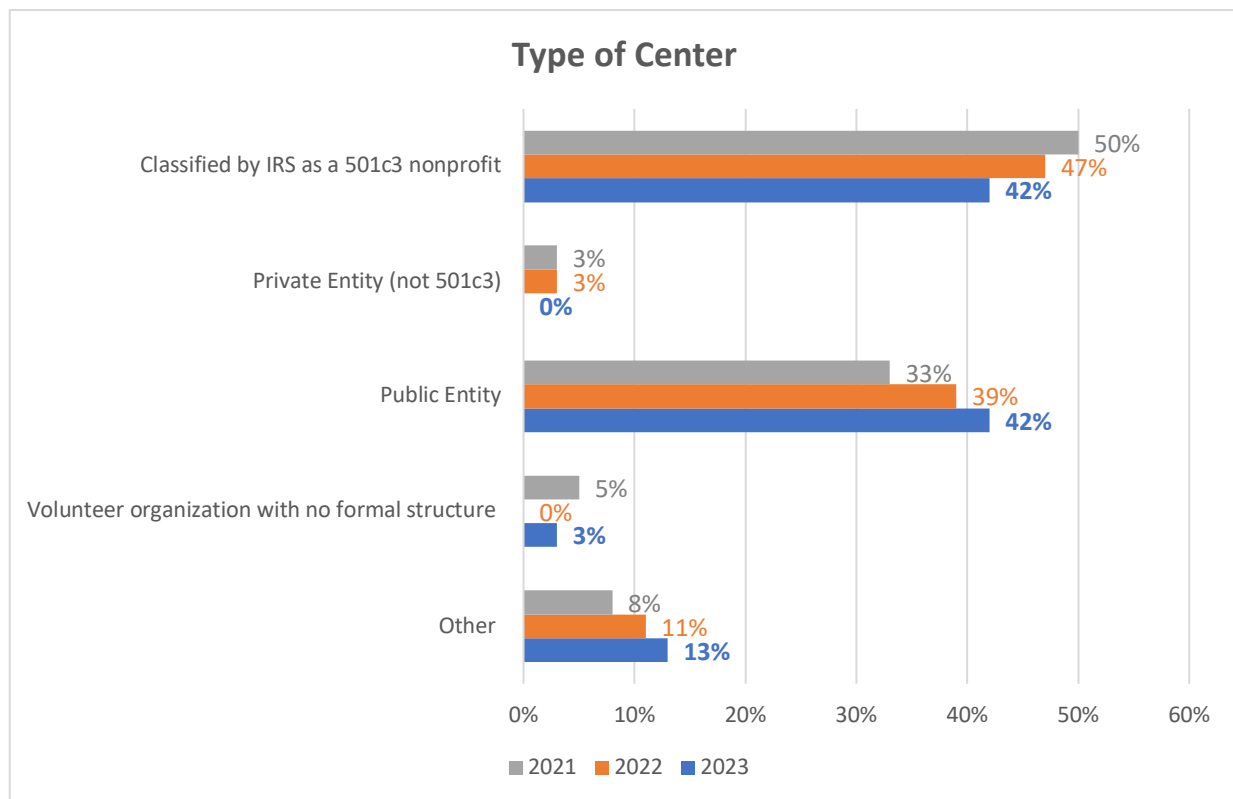
Results of the 2023 Annual State Subscriber Survey

The survey was completed by 31 of 40 centers in the Spring of 2023. Response rate in 2022 was 36 of 39 and in 2021 was 35 of 39 members. Questions were not required, so response rate by question varies.

Please note that this information was not intended for public distribution but rather for use by the Forum and its members to share with their governing entities.
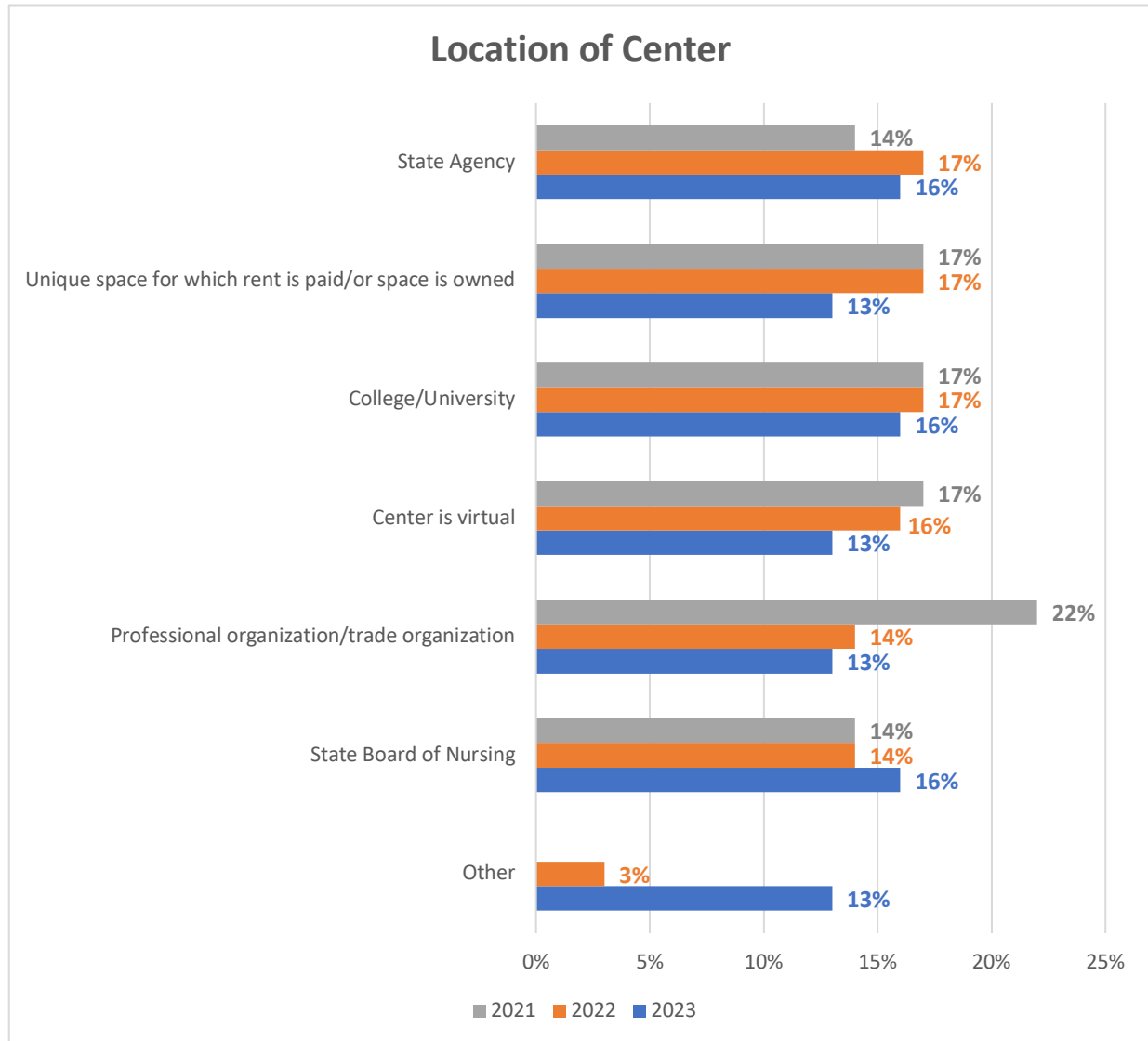
Structure of Nursing Workforce Centers

Most nursing workforce centers are 501c3 nonprofit organizations or public entities. Other responses included that the organization is a 501c6, located within a university or a program of a medical council.

Type of Center

Category	2021	2022	2023
Classified by IRS as a 501c3 nonprofit	50%	47%	42%
Private Entity (not 501c3)	3%	3%	0%
Public Entity	33%	39%	42%
Volunteer organization with no formal structure	5%	0%	3%
Other	8%	11%	13%

Location of Nursing Workforce Centers

In 2023, Centers are housed in a variety of locations including state agencies, a unique space, a college/university, or the center is virtual. Other responses included that they are managed through an association management company, are part of a larger non-profit, are part of a medical council or that they are virtual and housed within a university.

Location of Center

Location	2021	2022	2023
State Agency	14%	17%	16%
Unique space for which rent is paid/or space is owned	17%	17%	13%
College/University	17%	17%	16%
Center is virtual	17%	16%	13%
Professional organization/trade organization	22%	14%	13%
State Board of Nursing	14%	14%	16%
Other		3%	13%

Nursing Workforce Center Funding

In 2023, average core funding increased and special project funding along with total funding decreased. The 2023 sample only included 31 reporting Centers. Note the wide range of funding among centers.

	Core Funding (Infrastructure)	Special Project Funding	Total Funding
Mean			
2021	440,451	161,252	485,529
2022	252,947	647,420	919,458
2023	290,677	259,555	653,639
Median			
2021	217,000	58,204	229,500
2022	647,420	45,000	254,000
2023	239,000	55,000	333,061
Range			
2021	$500- $3,700,000	$10,000-$159,750	$500 - $3,700,000
2022	$0 - $1,000,000	$0 - $10,000,000	$0 - $11,000,000
2023	$0- $1,000,000	$0 - $1,600,000	$0 - $5,000,000

In 2023, Nurse Licensure fees provided an average of 32% of total funding followed by State or Local grants at 24%. Nineteen percent of centers were unfunded.

Center Funding by Source
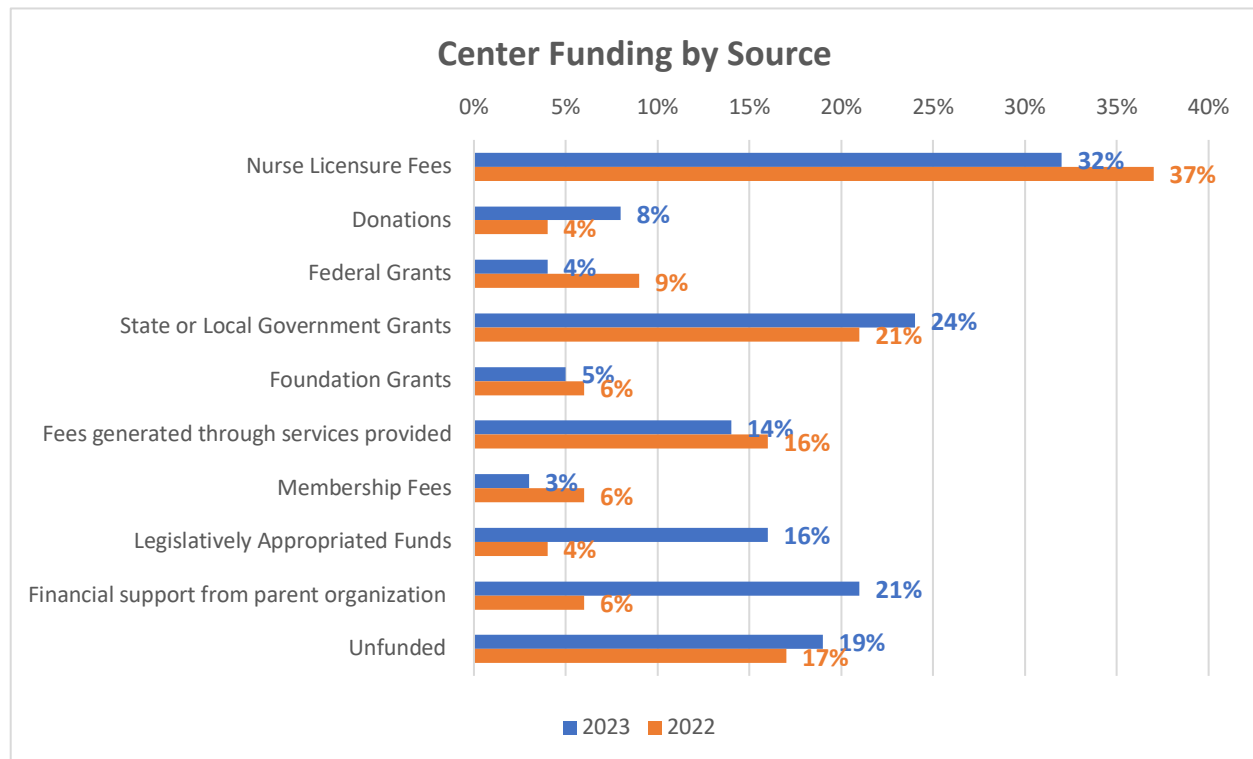
Average FTE of Executive Directors

The average FTE for Executive Directors in 2023 was .69 FTE with a range of 0 (2 volunteer directors) to 1.0 FTE.

Average Salary of Full-time (1.0 FTE) Executive Directors

The average salary for full-time Executive Directors for 2023 is $129,881 with a range of $76,605 to $240,000.

	2023	2022	2021	2021
Number of Full-time Eds	13	16	12	16
Mean	129,881	$121,276	$125,030	$116,872

Nursing Workforce Center Activities

In 2023, most centers worked to develop collaborations among stakeholders (77%), communication including websites, newsletters, magazines, and social media (77%) and conducting workforce research data collection and dissemination (74%).
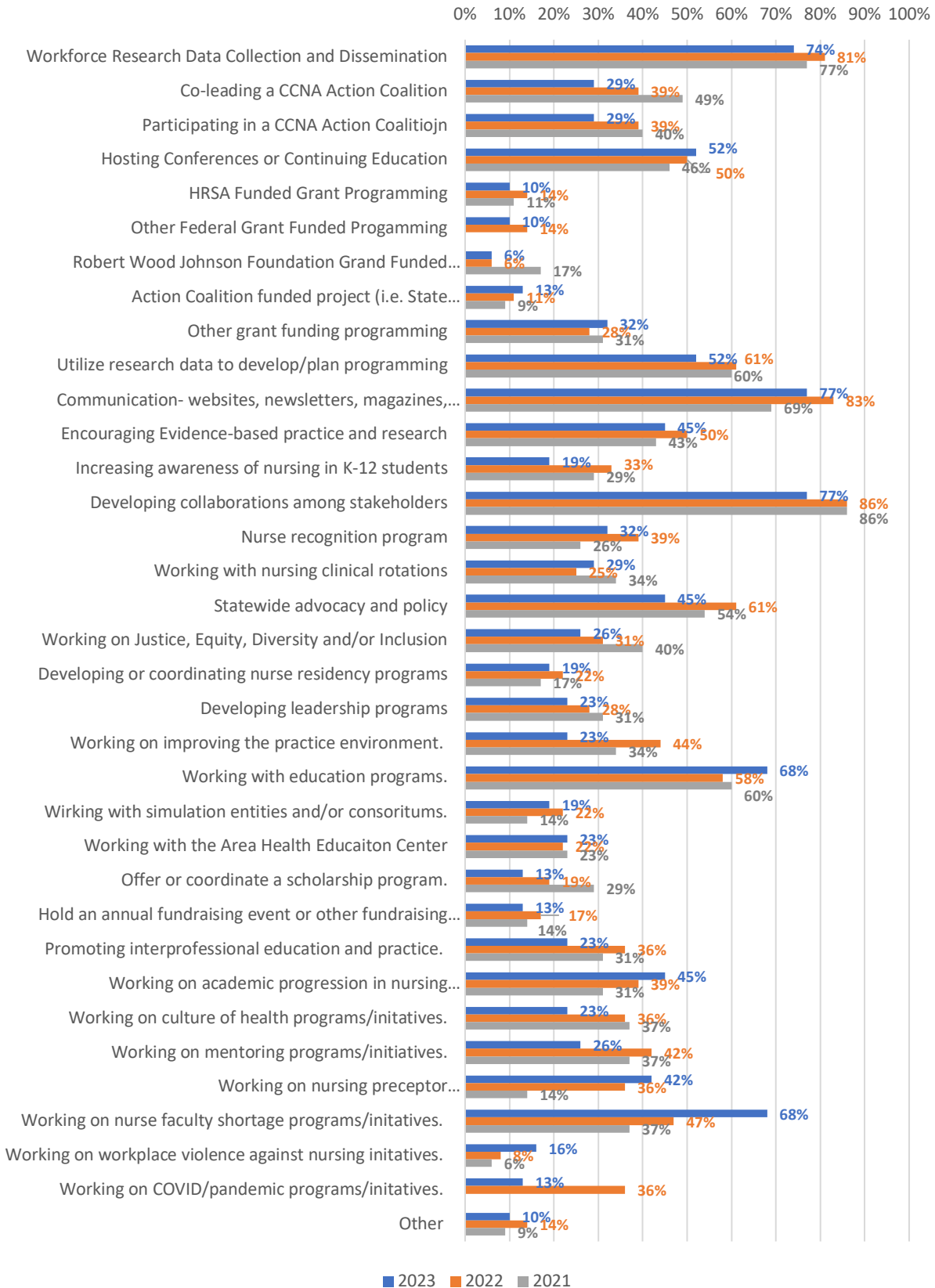
The second set of most frequent activities included working with education programs (68%), and working on nurse faculty shortage programs/initiatives (68%).

There was a large increase in the percentage of centers working on nurse faculty shortage programs and initiatives.

Other activities included:
- Supporting continuing education for Nurse Leaders.
- Preserving the history of nursing through archives.
- Provide data and analytics to external stakeholders working on some of the initiatives/activities listed here

Workforce Center Activities

Activity	2023	2022	2021
Workforce Research Data Collection and Dissemination	74%	81%	77%
Co-leading a CCNA Action Coalition	29%	39%	49%
Participating in a CCNA Action Coalitiojn	29%	39%	40%
Hosting Conferences or Continuing Education	52%	50%	46%
HRSA Funded Grant Programming	10%	4%	11%
Other Federal Grant Funded Progamming	10%	14%	
Robert Wood Johnson Foundation Grand Funded...	6%	6%	17%
Action Coalition funded project (i.e. State...	13%	11%	9%
Other grant funding programming	32%	28%	31%
Utilize research data to develop/plan programming	52%	61%	60%
Communication- websites, newsletters, magazines,...	77%	83%	69%
Encouraging Evidence-based practice and research	45%	50%	43%
Increasing awareness of nursing in K-12 students	19%	33%	29%
Developing collaborations among stakeholders	77%	86%	86%
Nurse recognition program	32%	39%	26%
Working with nursing clinical rotations	29%	25%	34%
Statewide advocacy and policy	45%	61%	54%
Working on Justice, Equity, Diversity and/or Inclusion	26%	31%	40%
Developing or coordinating nurse residency programs	19%	22%	17%
Developing leadership programs	23%	28%	31%
Working on improving the practice environment.	23%	44%	34%
Working with education programs.	68%	58%	60%
Wirking with simulation entities and/or consoritums.	19%	22%	14%
Working with the Area Health Educaiton Center	23%	22%	23%
Offer or coordinate a scholarship program.	13%	19%	29%
Hold an annual fundraising event or other fundraising...	13%	17%	14%
Promoting interprofessional education and practice.	23%	36%	31%
Working on academic progression in nursing...	45%	39%	31%
Working on culture of health programs/initatives.	23%	36%	37%
Working on mentoring programs/initiatives.	26%	42%	37%
Working on nursing preceptor...	42%	36%	14%
Working on nurse faculty shortage programs/initatives.	68%	47%	37%
Working on workplace violence against nursing initatives.	16%	8%	6%
Working on COVID/pandemic programs/initatives.	13%	36%	
Other	10%	14%	9%

Minimum Data Set Collection

In 2023, centers indicated that 26 states are colllecting supply data, 14 states demand data and 20 states collecting education data.

Number of States Collecting Nursing Data (2023 N= 31)

	2023	2022	2021
Supply	26	30	32
Demand	14	16	20
Education	20	26	31

2023 Entity Collecting Workforce Data (2023 N=31)

	Collected by Nursing Workforce Center	Collected by Board of Nursing	Collected by Other Organization	Not Collected in my State
Supply	10	21	4	1
Demand	13	1	9	4
Education	17	14	8	2

National Forum Evaluation

For the National Forum Board evaluation, Centers were asked to rate several statements from 1 (Strongly Disagree) to 5 (Strongly Agree).

The statement receiving the lowest rating was regarding a three-to-five-year strategic plan or a set of long-range goals and priorities.

Comments included:
- We are currently in a reinvention standpoint.
- I think the board, and Patricia as staff, are doing phenomenal job. Where I feel there is some decrease in overall board communication to the board, I think there is overall increased communication among all members, and so I recognize some of the loss of board conversation is because there is improved overall communication (so I still feel satisfied and supported by the board's performance)
- I'm too biased to answer this question.
- Communication with members has improved greatly in the past few years, fiscal management has also improved
- Good job

2023 National Forum Board Evaluation Weighted Average Likert Scale- 1(Strongly Disagree) to 5 (Strongly Agree)

There is good two-way communication between the board and the Members of the FORUM. — **4.07**

The board ensures that the organization's accomplishments and challenges are communicated to members and stakeholders. — **4.23**

Our organization has a three to five-year strategic plan or a set of clear long-range goals and priorities. — **3.9**

3.7 3.8 3.9 4 4.1 4.2 4.3

Centers were asked which National Forum Committees they have served on. The committee with the greatest participation is the research committee followed by the conference committee.

Comments included:
- Serve on some specific subcommittees as well. Just volunteered to serve on the JEDI committee
- NCSBN/NF MDS Research
- Data workforce toolkit subcommittee- Hannah
- Was unable to attend research committee meetings-N/A

2023 National Forum Committee Participation

Committee	Percentage
Research Committee	44.00%
Governance Committee	24.00%
Development Committee	16.00%
Conference Committee	32.00%
Finance Committee	16.00%
Justice, Equity, Diversity and Inclusion Committee	20.00%
Advocacy Committee	12.00%
Other Special Committee	16.00%

For the committee evaluation, Centers were asked to rate several statements from 1 (Strongly Disagree) to 5 (Strongly Agree). The question related to how the committee is linked to the strategic plan received the highest rating.

2023 National Forum Committee Evaluation Weighted Average
Likert Scale 1(Strongly Disagree) to 5 (Strongly Agree)

Statement	Weighted Average
The committee's work is linked with the Forum's strategic plan.	4.35
I am aware of what is expected of me as a committee member.	4.12
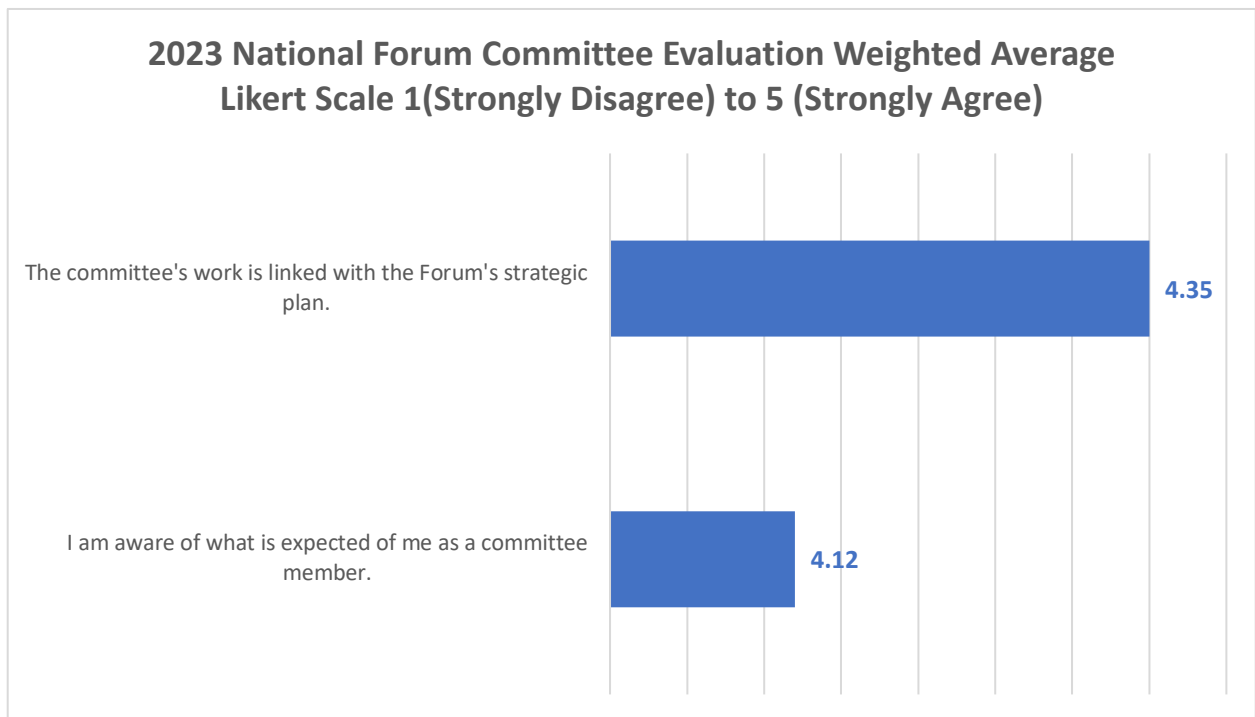
Centers were asked to indicate the benefit of their membership with the National Forum. Comments included:

- Resource sharing what other states are doing is very helpful. The information from the conference and the subscriber monthly calls is very informative.
- We greatly appreciate being a part of the National Forum's network and having the opportunity to collaborate and share best practices with colleagues who have similar goals from across the country. We always learn a lot from connecting with other Forum members and hearing updates on their projects and initiatives. It is really great to think creatively with stakeholders from across the nation on how we can collectively address nursing workforce issues that are priorities in all of our states.
- National perspective, networking, data sharing, best practices
- The networking and best practices sharing.
- Research and benchmark standards
- This is the best organization for nursing workforce centers. We are so niche so having colleagues to contextualize and support is so fantastic.
- Learning what others are doing
- Information, communication, support for initiatives
- Connection with other administrators and leaders of workforce centers.
- Networking ability
- Networking
- Support for the work we do and the feeling that our state is not alone in the challenges we face.
- Networking, mentorship from more experienced centers and the Forum's executive director
- National networking and sharing of information; learning about other state initiatives
- Improved peer communication
- Connection to national issues, adds legitimacy to our state work with local influencers, connection to other center directors is a HUGE benefit, sparks innovation
- Hearing of what the other states are doing.
- Sharing and learning from colleagues
- I feel like we have a fantastic network of smart, creative, kind people that help collaborate and support each other, which is invaluable. It has helped the research conducted in my state evolve rapidly and has helped inform our own strategic plans on how we want to approach research. It has also been wonderful to have opportunities to present on the work being done in Utah regarding nursing workforce research.
- Collaborating with other workforce centers, knowledge of nursing issues across the country, collaboration on projects, networking
- Connection to others doing similar work.

- 1. Networking contacts. 2. Data sets 3. limited access to other state workforce information
- Bridge to NCSBN. Sharing of workforce issues across jurisdictions.
- Networking - ideas - collaboration
- Education and support of programs and goals, Growth and Development of the Forum
- Best practices.
- Resources and collaboration from other states
- Access to state data, reports, resources, and activities

Centers were also asked what could be improved.

- It would be great to continue some of the smaller group discussions that are generated at annual meetings and conferences in a more formal sense.
- Increased funding for staff and the work the Forum can do
- The reach of the organization
- I wish we had a committee for folks who do recruitment and retention support (clinical placements, nurse residency, ebp, etc) like we have for research.
- Greater participation of states
- More collaboration between state programs and projects
- More influence with national organizations, which is hard because of limited Forum resources.
- I can't think of any.
- I have no complaints at all. I believe that you get out of an organization what you put into it, and I have not put as much in as I should have.
- This survey has improved this year. Communication needs to continue to grow as it did this year.

The Justice, Equity, Diversity and Inclusion Committee included several questions on the survey to guide their work. They have started to utilize this information to develop resources. Below are the open-ended answers to the questions.

What are you currently doing on this topic in your state?

- Sub-recipient of a Nursing Workforce Diversity grant/ NMCNE does education related to JEDI concepts at annual nurse educators conference
- The Nurse Diversity Council (NDC) of the Pennsylvania Action Coalition is a volunteer council dedicated to promoting diversity and cultural humility in nursing to increase access to high-quality, patient-centered care in a health care system where nurses contribute as essential partners in achieving success. The NDC aims to enhance nurses' knowledge, attitudes, and skills regarding diversity, foster culturally humble care and promote inclusion in the nursing workforce. One initiative that came out of the NDC is the PA Action Coalition Cohort of Exchanged Learning (PA-ACCEL)

Mentorship program, which is a mentorship program for nursing students at Lincoln University (an HBCU) and will soon be expanded to other schools.
- Working on health equity with hospitals
- There is a division looking at these issues that represents the state level initiatives
- We are improving our data collection and reporting. We are starting questioning our partners about needs related to wellness, which includes DEI/JEDI considerations.
- we partner with other state agencies on certain initiatives, and DEI is a state requirement for initiatives
- Committee on education looking at this area for data
- We have a D.E.I. Committee, policy and statements. We have a $2.2M HRSA grant for increasing the nursing workforce diversity
- Currently we do not have any JEDI projects.
- Our center is implementing a prelicensure group mentorship program with goals to initiate academic-practice partnerships and to increase diversity of the nursing workforce.
- Mostly, having a weekly call to facilitate tough conversations about equity and inclusion. Also, being intentional about our data reporting, being intentional in our language and constantly communicating the importance of JEDI principles.
- The center is not focused on this but there may be work being done by the nursing organizations.
- The CT Nurses' Association has become the "professional organization" in CT to lead these initiatives. They coordinate and send us programming, etc,. that we pass along to our network of supporters. Plus the Schools of Nursing are active in this space to support efforts within their community.
- Analyzing and contributing to discussions on demographic data collection methods/survey tools. Data (and some analytics produced by these survey tools) can be utilized by other groups in our state that are interested in JEDI research among the health workforce
- Presenting data on race/ethnicities or gender that are under-represented in different workforce
- Implicit Bias Training: Action Coalition subgroup
- This is not currently a priority for our work. We do watch what is happening in the Legislature specific to these issues, but in an ultra-conservative state that is 94% white, it is difficult.
- Collaboration with Louisiana State Nurses Association, Healthworks Commission, and Nurse Supply and Demand Council on DEI initiatives.
- Action Coalition has taken the lead and provided several presentations and open forum discussions; updated the Diversity Tool Kit; conducting surveys/assessments of DEI improvements/compliance/deficits in various settings; and exploring ways to increase the pipeline into nursing from diverse populations
- We ask some questions about what efforts nursing education programs have to recruit diverse students and faculty. We provide race/ethnicity and sex/gender data as needed.
- Working to improve the equity and inclusion of minority nurses in the pipeline and in post graduation employment of Nurses.

- We have members from the Black, Latinx, and Pilipino nurses Associations on our Council. We participate in DEI events.
- No specific initiatives on this topic at this time.
- Diverse Faculty Mentoring Program: The program was designed to assist diverse nurse faculty members in navigating the challenges of the nursing education field by pairing them with experienced mentors who could provide support, guidance, and advice. 2022 pilot cohort had 5 mentors and Mentee pairs. 2023 cohort includes 7 pairs of mentee/mentors with more support for mentees, group coaching, bias training, and IDI coaching. WCN and NCQAC collaborating to assess bias in the rulemaking process, reporting/disciplinary system, and rule review. Background: WCN and NCQAC collaborating to assess bias in the rulemaking process, reporting/disciplinary system, and rule review, as a result of the FON group outcome. Proposed Equity Models to use: Proposed different models including OR, Temple University, Racial Equity Alliance, Racial Equity Project, and Liberatory Design. SANE Nursing: Collaborate with the Colorado Center for Excellence to implement DEI in the SANE nurse program and application. BIPOC Nurse Convening: WCN hosts a monthly affinity group for BIPOC nurses to address inclusion in Education, Workforce, and Leadership development for BIPOC nurses. WCN hosts a yearly in person panel to address DEI from a BIPOC lens. The first one was on April 1, 2023.
- Louisiana received an Innovation grant and are working on a diversity project.

What are major opportunities and challenges related to this work?

- Challenge: I think K-12 education is a challenge related to this work as we are finding more diverse students are not adequately prepared for nursing programs. Opportunity: continued development of formal and informal mentorship for diverse nurses at all stages- school, precepts, throughout career.
- Major opportunities include that we are expanding the mentorship program with Lincoln University to include other schools in Southeastern Pennsylvania. Through the Nurse Diversity Council, we have the opportunity to promote initiatives like the SEPABNA mini nurses' academy, which aims to support and encourage Black and Brown middle school students to become nurses. Challenges include that we do not have access to current nursing workforce data to be able to assess the diversity of the nursing workforce in Pennsylvania. Additionally, since its inception the program has required a significant amount of in-kind and financial support, but as the program has been a priority of ours, we have been dedicated to its sustainability and growth. We have secured our funding for this program for next year which we are excited about.
- Lack of knowledge on how to meet and measure equity.
- opportunity- decreasing barriers for minorities to enter into practice in the state challenges- lack of representation from minority groups
- Currently trying to determine sustainable funding source.

- Challenges: Lack of recognition of need (we are "diverse" but not equitable in career access, education access, educational advancement, etc). Opportunities: There is appetite with the younger generations (millennial and younger) to address needs and apply solutions
- Consistency
- Workforce shortages
- Time
- JEDI is viewed as a "divisive" issue by our state government. During the last legislative session many anti DEI legislation was introduced. Largely, most of these bills did not pass, but they did have a good bit of support. This makes it difficult to undertake any of these projects. When we do have to address anything DEI, we have to call it something else to avoid backlash. WV is a very homogenous state, so JEDI could be both an opportunity in the sense that projects might bring more diversity in the state, but a challenge because the existing diversity within the state is low.
- The major opportunity is to increase visibility of underrepresented populations in nursing.
- Quantifying outcomes as people are becoming more reluctant to self identify. Perhaps we need to re-frame how we ask what we want to learn
- Major opportunities: funding. Our state is committed to removing health inequities by 2030 and has allocated resources to make this happen. Major challenge: Our state doesn't have a lot of diversity and doesn't have a shared "language" for what are effective interventions.
- Summarizing the current workforce data.
- The "body of knowledge" moves so quickly, our board has established a lens of (JEDI) in what we as an organization. In 2022, our board contracted with the CT Health Equity Solutions non-profit organization for board development and guidance.
- One challenge is ensuring research methodologies adequately capture relevant information that can aid in decision-making. Another challenge is creating stakeholder collaborations that can develop and implement plans to address disparities over the long term. This work can hopefully have an impact on how people view the nursing workforce, both on individual and systemic levels, and help create workforces that are representative of the populations they care for
- Opportunities: people are open to listening. Challenges: It takes years to see impact of any changes made
- Implicit Bias training is required for licensure in MI. Many health systems/hospital associations are including this in strategic plans. Time/priorities. Resource allocation. Conservative political agendas (where you live matters)
- Lack of interest by the public, schools, nurses, etc.
- Opportunities: encourage policy and practice change across many sectors, not just nursing. Challenges: takes time, not easy to change personal biases
- Politics.

- Opportunities are endless, challenges are the time and finances to complete the above because of lack of solid nursing faculty and wages for the faculty.
- The engagement and participation of BIPOC nurses has been a huge opportunity in centering the voices of underrepresented experiences in nursing. Normalizing the discussion around DEI is critical step in the process and at WCN we see it in all the work we do and not a standalone initiative. There are opportunities to reflecting on solutions in other disciplines and relating it to nursing. Challenges in DEI work in general are around the perception of DEI work as a destination vs a journey. It will take some time, building trust, unlearn and redesign equitable systems, and decenter the narratives that are baked into the current education and healthcare systems.

What do you see as opportunities for states to collaborate/share resources to address this topic?
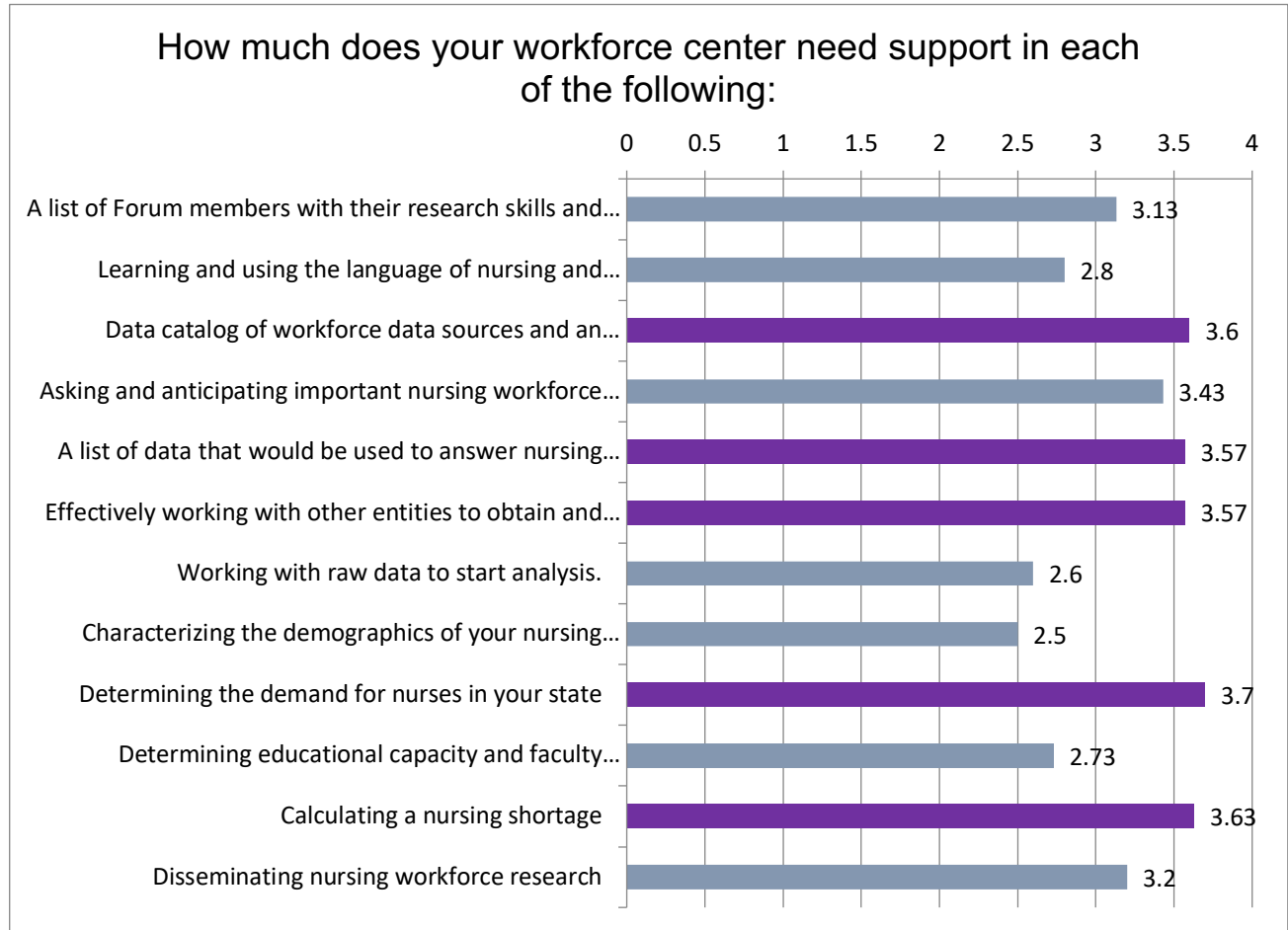
- States can collaborate and share resources on creating and sustaining mentorship programs for nursing students from underserved backgrounds and mini nurse academies for grade school children from Black and Brown communities. States can also share strategies on accessing nursing workforce data with Depts of Health, Labor, and SBONs. Specifically, it would be helpful to know which legislative actions have been successful to ensure that data is collected and shared with the state nursing workforce center.
- Sharing best practices.
- Sharing of information regarding initiatives to decrease barriers for minorities to enter the healthcare workforce.
- Strategic planning and understanding sustainability
- For states with similarities (rural and remote; coastal; high AAPI populations) it would be nice to share strategies, and also collaborate on strategies/solutions. Also using other states' statements of need/background lit review / etc could be nice.
- sharing information, successful willing partners
- Education session
- Conference devoted to this topic
- I would love to learn about what other states have done with this topic. We do not have much to share from WV, but I would love to learn how other states have tackled it.
- Share best practices
- To share initiatives which have strong outcomes. Recently saw an article in Chronicle of Higher Education that most DEI programs do not have tangible outcomes and do not seem to be making a difference
- I would like to collaborate with other states that have less diverse populations to articulate the nuances related to diverse workforce.
- I think creating space for discussion and brainstorming on these topics to understand diverse perspectives, as well as learning from other state's JEDI efforts, is really important and essential work
- What is working in other states

- This is a hot topic and could bring in some funding to the right organizations, but Idaho would not benefit currently.
- We can always learn from one another, what worked in one state may work in another. Having all states speak with one voice around the many issues related to JEDI consistently and on a frequent basis can have a lasting impact
- Would be outside of workforce center as we are in a state agency.
- I believe that states need to work together on projects to achieve positive outcomes that will benefit all states
- We see opportunities to extend our collaboration in the mentoring program and the SANE program, and we look forward to learning about effective strategies that are working in other states.

Is there a joint project or outcome for the Forum that can result out of discussion related to this topic?
- We could develop a national toolkit for nursing student mentorship programs and collect resources on an ongoing basis for both mentors and nursing student mentees.
- Education for the front-line worker
- Research to see what the barriers are to minorities in nursing education.
- Understanding how we might increase Native American nurses.
- Look at by state as some are less diverse
- Perhaps finding different ways to measure outcomes rather than depending on the federal designations for race, ethnicity, etc
- I think it would be valuable if the Forum could have a statement/description of how we define each letter in JEDI, and intentionally communicate state's work related to the definition. I.e., rural populations with less equitable access to nursing/health services.
- Maybe track diversity in the nursing workforce over time by state and learn what has helped in states that have made significant progress.
- develop and present research/data on why it matters.
- Highlight best practice examples of impacts from states who are making progress in the area of JEDI. Publish/promote the realities of injustice with a unified voice Collect data and publish the current diversity (or lack thereof) in the nursing workforce with imperatives to change paradigm
- Colorado is an excellent example of a state that is working with other states in the Rocky Mountain region to improve healthcare in rural areas.

The Research Committee is also working on developing resources. A survey question asked members how much their workforce center need support for several research topics.

How much does your workforce center need support in each of the following:

Topic	Value
A list of Forum members with their research skills and…	3.13
Learning and using the language of nursing and…	2.8
Data catalog of workforce data sources and an…	3.6
Asking and anticipating important nursing workforce…	3.43
A list of data that would be used to answer nursing…	3.57
Effectively working with other entities to obtain and…	3.57
Working with raw data to start analysis.	2.6
Characterizing the demographics of your nursing…	2.5
Determining the demand for nurses in your state	3.7
Determining educational capacity and faculty…	2.73
Calculating a nursing shortage	3.63
Disseminating nursing workforce research	3.2

Members were asked if they have additional comments. They are listed below:

- Thank you! We greatly appreciate being a part of the National Forum.
- Patricia has been ABSOLUTELY wonderful and if there are ways we can continue to support her please lets do that.
- Patricia you are doing a great job for the forum.
- I see so much potential in the Forum and its ability to make significant and innovative change in the nursing workforce/health landscape. It's exciting.
- Thanks for all you do!