NEW JERSEY COLLABORATING CENTER
NJCCN
for nursing

NEW JERSEY NURSING DATA & ANALYSIS

EDUCATIONAL CAPACITY DATA 2021-2022
WORKFORCE SUPPLY DATA 2022-2023
WORKFORCE DEMAND DATA 2022

Nursing Data and Analysis

New Jersey Collaborating Center for Nursing

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Vision

- To be the dominant voice on nursing workforce solutions for New Jersey residents.

Mission

- Ensure that competent, future-oriented, diverse nursing providers are available in sufficient numbers and preparation to meet the demand of the evolving healthcare system in New Jersey.

- Transform the healthcare system through research and innovative model programs.

- Create a central repository for education practice and research related to the nursing workforce.

- Engage academic/practice partners, inter-professional colleagues, government and legislative agencies, consumers, business, and industry.

- Promote a positive image for nursing.

The correct reference is as follows:
New Jersey Collaborating Center for Nursing. (2024). *Nursing data and analysis.* Newark, NJ; NJCCN.
https://www.njccn.org/nursing-workforce-supply-and-demand/

NOTE:

Any future modifications to this report will be published electronically.
For the most recent data on the New Jersey Nursing Workforce, visit www.njccn.org.

Contents

Introduction

The New Jersey Collaborating Center for Nursing (NJCCN) is the primary source for data on New Jersey's nursing workforce. NJCCN serves as a catalyst for the implementation of innovative education and practice models using data to create programs that address needs in the state. To that end, NJCCN conducts an annual survey of all nursing education programs on behalf of the New Jersey Board of Nursing (NJBON). This Educational Capacity Survey allows NJCCN to monitor enrollment and graduation trends as well as demographics of both students and faculty. These data contribute to the **supply** data.

Working collaboratively with NJBON, NJCCN also collects workforce data at time of licensure renewal for Registered Nurses (RNs), Licensed Practical Nurses (LPNs), and Advanced Practice Nurses (APNs). In 2018, NJBON transitioned its survey questions to the Nursys® Licensure and Workforce tool to align with national datasets. The Educational Capacity and Workforce data together create our understanding of the **supply** of nurses in New Jersey.

Based on the national trends and the need to monitor and prepare the workforce, NJCCN has determined that using real-time **demand data** is an important first step in evaluating demand for nursing in New Jersey. While survey data for a specific industry is important, the limited response rate of surveys and the delays in obtaining primary data in real-time do not make these methods a first-tier approach. Quality data are a prerequisite for effective workforce planning and policymaking for the nursing workforce. Healthcare workforce forecasting models provide a means for making future projections, which can be valuable in quantifying the supply, distribution, and demand of nurses and are critical to designing programs and policies that will ensure access to care and an effective healthcare system (Bienemy, 2015).

Forecasting nursing workforce supply and demand is complex. State-level data may be more detailed than national data, leading state-level projections to differ substantially from their national counterparts. Some variables, such as changes in healthcare or population shifts within New Jersey, may be too difficult to factor into the model. Though the goal is to provide current data on supply and demand, one must view this report in the context of volatility. Workforce data should be viewed with the following caveats:

- National estimates may differ from state data substantially

- Nurses work in teams and therefore other healthcare workforce members data are also important to consider (e.g. Certified Nursing Assistants, Home Health Aides, and MDs)

- Projections that are further out in years have a greater error rate

- Data are only as good as the information that is provided by the respondent

How to Use the Report

This report is broken up into the following chapters, with references and a glossary at the end:

- Chapter 1: Educational Capacity Report

- Chapter 2: Workforce Supply Data

- Chapter 3: Workforce Demand Data

Executive Summary

Multiple reports have been released nationally over the last 2-3 years which send the same message: We need to strategically rebuild the nursing workforce which has been severely impacted by the pandemic. These reports show 1) early retirements in nursing along with the anticipated projections, 2) pandemic burnout, and 3) interrupted work patterns and staffing shortages which creates high demand for nurses. The population is aging with more chronic condition while supply of nurses is falling behind. It is imperative that we ensure a robust healthcare system that results in positive health outcomes for our residents. This requires a multi-pronged approach of both major investments and innovative solutions.

These National and International Reports Include:

- International Council of Nurses (2023) *Recover to rebuild*
  https://www.icn.ch/sites/default/files/2023-07/ICN_Recover-to-Rebuild_report_EN.pdf

- AMN Healthcare (2023) *The Pandemic Consequences*
  https://www.amnhealthcare.com/siteassets/amn-insights/surveys/amn-rnsurvey-2023-final.pdf

- National Council of State Boards of Nursing and the National Forum of State Nursing Workforce Centers (2022). *The 2022 national nursing workforce center survey*
  https://www.journalofnursingregulation.com/article/S2155-8256(23)00047-9/fulltext

- ANF (2022) *Pulse on the nation's nurses COVID-19 survey series: workplace survey*
  https://www.nursingworld.org/practice-policy/work-environment/health-safety/disaster-preparedness/coronavirus/what-you-need-to-know/covid-19-survey-series-anf-2022-workplace-survey/

- ANA, AONL, HFMA, IHI, American Association of Critical-Care Nurses (2022). *Nurse staffing think tank: Priority topics and recommendations*
  https://www.nursingworld.org/ 49940b/globalassets/practiceandpolicy/nurse-staffing/nurse-staffing-think-tank-recommendation.pdf

- AONL (2022 and 2023) *Nursing leadership workforce compendium-3 sections*
  https://www.aonl.org/resources/Nurse-Leadership-Workforce-Compendium

- NASEM (2021) *The future of nursing 2020-2030 report*
  https://nap.nationalacademies.org/catalog/25982/the-future-of-nursing-2020-2030-charting-a-path-to

Key Drivers for Improving the Healthcare System:

Expanding the nursing education system through investments:

- Faculty

- Clinical Sites

- Equipment/Technology

Investing in retention

- Supporting the well-being of nurses and reframing from resilience of individuals to resilience as an organizational problem.

- Investing in the transition to practice for new graduates across settings

- Promoting career opportunities

- Ensuring adequate staffing

- Creating new models of care delivery using virtual platforms and other strategies

- Ensuring healthy work environments for all providers

Implementing policies to ensure all nurses work to the full extent of their licensure and education

- APN restrictions removed

- Re-evaluating the team-based approach to care

Utilizing technology and telehealth solutions

Engaging retired nurses to return to workforce

Reviewing outdated regulatory and legislative policies that impact healthcare

Strategic planning requires data that can be found nationally and at the state level through workforce centers. This NJ data report and previous reports provide the most current data available on the nursing workforce in NJ to assist state leaders and organizations in investing in creating a strategic direction with and for nurses.

New Jersey Supply and Demand Forecasts

Supply

Education Capacity

- Pre-Licensure RN enrollment down in 2022 despite the increase in admissions offered by RN programs.

- Full-time faculty vacancies: 10% in RN programs which have increased since last year.

- Full-time faculty vacancies: 20% in LPN programs.

- LPN NCLEX-PN pass rate continues to be below the national average and 17 schools identified that greater than 31% of the students were unsuccessful in completing the nursing program in the past academic year.

- Students in pre-licensure RN programs are primarily female, however, data shows diversity in race/ethnicity.

- Students in post-licensure nursing programs are primarily female with less than half white.

Workforce

- 4% of LPNs indicated a plans to retire by next renewal cycle

- 6% of RNs indicated a plan to retire by next renewal cycle

- 3% of APNs indicated a plan to retire by next renewal cycle

- 25% of the NPs who responded (N=11,878) have an active license in other surrounding states

- LPN workforce is primarily female and the majority from diverse racial/ethnic backgrounds, with a mean age of 49

- Workforce RNs and APNs are primarily female, white with a mean age of 49 and 48 respectively

Demand

Currently, the national RN turnover rate for RNs is 22.5% with a median of 21.7% in hospitals. (NSI, 2023). Each percent change in RN turnover will cost/save the average hospital $380,600/year.

NJ Data

- Turnover rates (2022)

  LPNs (46%)
  RNs (26%)
  Nurse Practitioners (24%)

- Median annual earnings increased for all 3 categories of nurses - LPNs, RNs, and NPs.

- There is an overall increase in the percent change of projected jobs over the next 10 years for nursing averaging 14%.

- New Jersey has a high posting concentration for RNs compared to the national comparison which places NJ as the 5th highest in the U.S.

New Jersey Initiatives

New Jersey Nursing Emotional Well-Being Institute (NJ-NEW)

- Funding of 1.2 million received from the state budget in 2023 to support health and well-being programs for NJ nurses.

- Total number of Nurse2Nurse contacts were 2,231 from July 1, 2021 through June 30, 2022.

- Stress First Aid Training completed for 99 trainers and 45 organizations (acute care, academia, schools, community, and long-term care settings).

- Programs from January 1 through December 31, 2022: 24 Virtual Schwartz Rounds were held with approximately 1,200 participants.

Nurse residency and educator program through NJDOL/USDOL

Nationally, first-year turnover outpaces all other tenure categories in hospitals. The first year turnover mean was 32.8%. (NSI, 2023).

NJCCN has 23 hospitals participating in the NJ Nurse Residency Collaborative. This 12-month transition into practice initiative began in 2020. Of those hospitals participating, 16 hospitals are receiving partial funding from NJDOL and Workforce Development. The return on investment is evident.

- Outcomes to date show 2,409 nurse residents hired since 2020.

- Overall turnover rate is 11.7% to date which is well below the national average.

Legislative Bills Pending

- S1522/A2286 eliminates practice restrictions for APNs

- S2825/A4325 workforce bill

- S3547/A4614 faculty loan redemption program

Chapter 1

Educational Capacity Report

This chapter presents program information and statistics on students and faculty in New Jersey's nursing education programs. These data were self-reported by schools in the 2021-2022 surveys. This survey is distributed annually by NJCCN and compliance is reported to the NJBON. To reduce duplication and survey fatigue, data were obtained from the American Association of Colleges of Nursing (AACN) and a shorter survey was provided to BSN and higher deans and directors.

The first section of this chapter presents program information and student data for pre-licensure and post-licensure programs for Registered Nurse (RN) education. The second section presents program information and student data for Practical Nurse (LPN) education programs. The third section describes faculty employment and demographic data.

> **NOTE: Data in this chapter only includes respondent programs/schools. The data in this chapter combines AACN data and NJCCN survey data.**

Educational Capacity Report - RN

Overview

Figure 1.1: Pre-Licensure and Post-Licensure RN Nursing Program Types
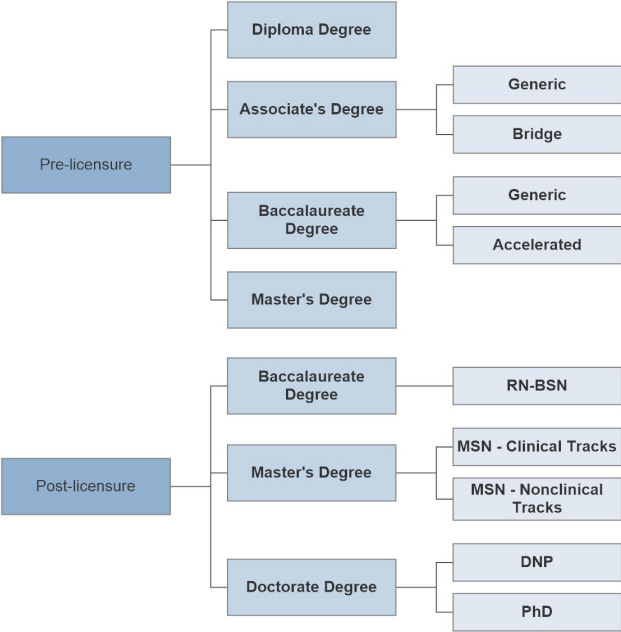
There were 48 schools in New Jersey that provide RN education (pre-licensure and post-licensure) during 2021 - 2022 survey period. **There were 48 schools provided data on their educational capacity to the 2021-2022 surveys**. At present, 49 schools are providing RN education in New Jersey.

Pre-licensure programs qualify graduates to sit for the National Council Licensure Examination for Registered Nurses (NCLEX-RN). These include Diploma in Nursing (DIP); Associate Degree in Nursing (ADN); Baccalaureate of Science in Nursing (BSN); and Pre-licensure Master's in Nursing (Pre-licensure MSN). Please note that although Associate Degree programs may be Associate Degree in Nursing (ADN), Associate of Science Degree in Nursing (ASN) or Associate of Applied Science in Nursing (AAS), for the purposes of this report, all Associate Degree Programs are abbreviated as ADN.

Post-licensure programs provide additional credentials for graduates who have already attained their RN licensure. These include RN-BSN Programs for Registered Nurses who obtained their degree at the Diploma or Associate level; Post-Licensure Master's Degrees (Post-licensure MSN); Doctorate of Nursing Practice (DNP); and Doctor of Philosophy in Nursing (PhD).

Table 1.1 shows the number of pre-licensure and post-licensure nursing schools and programs in New Jersey. Schools may have two or more campuses (See **Table 1.28** to check complete school list)

Table 1.1: New Jersey RN Programs

Pre-licensure Nursing Schools and Programs
5 Diploma Schools (Each school offers 1 program)
21 Associate Degree Schools/24 Campuses (33 Programs: 16 Generic; 17 ADN Bridge (LPN-RN))
22 Baccalaureate Degree Schools/26 Campuses (36 Programs: 20 Generic; 13 Accelerated; and 3 LPN-BSN)
2 Pre-licensure Masters schools (Each school offers 1 program)
Post-licensure Nursing Schools and Programs
18 RN-BSN Schools/21 Campuses (Each campus offers 1 program)
20 Post-licensure Master's Schools/21 Campuses (Each campus offers 1 program)
11 Doctorate of Nursing Practice (DNP) Schools (Each school offers 1 program)
3 Doctor of Philosophy (PhD) in Nursing Schools (Each school offers 1 program)

Table 1.2: Federal Tax Classification Status

	DIP	ADN	BSN and Higher Degree
	N=5	N=20	N=23
Public	3 (60%)	16 (80%)	11 (48%)
Private/Secular	0 (0%)	4 (20%)	6 (26%)
Private/Religious	2 (40%)	0 (0%)	6 (26%)

N is the number of respondent schools.

In the Educational Capacity Survey, NJCCN presented possible reasons for why respondents rejected qualified applicants. **Table 1.3** represents the reasons for rejection of qualified applicants.

Table 1.3: Reason For Rejection of Qualified Applicants

	DIP	ADN	BSN and Higher Degree
	N=5	N=20	N=23
No applications rejected	2 (40%)	10 (50%)	N/A*
Lack of qualified faculty	1 (20%)	5 (25%)	6 (26%)
Lack of clinical space	2 (40%)	0 (0%)	N/A*
Limited classroom space	2 (40%)	4 (20%)	4 (17%)
Lack of clinical sites	3 (60%)	7 (35%)	4 (17%)
Lack of clinical preceptors	0 (0%)	2 (10%)	3 (13%)
Insufficient budgets	0 (0%)	2 (10%)	2 (9%)
Other	0 (0%)	2 (10%)	2 (9%)

N is the number of respondent schools.

Note: 1. *Not available in AACN Data. 2. A school may select multiple reasons.

Pre-Licensure Programs

Program Characteristics

This section presents information about the format and content of New Jersey's pre-licensure education programs. Pre-licensure programs are those that prepare students for the **initial** National Council Licensure Exam for Registered Nurses (NCLEX-RN) that leads to licensure as a registered nurse.

Table 1.4 indicates the delivery format during this time period.

Table 1.4: Delivery Format of Pre-Licensure Programs

	DIP	ADN Generic	ADN Bridge	BSN Generic	BSN Accel.	Pre-MSN
	N=5	**N=15**	**N=13**	**N=18**	**N=12**	**N=2**
Face-to-Face	3	10	7	15	7	2
Hybrid	2	5	6	3	5	0

N is the number of respondent programs.

In NJCCN's Educational Capacity Survey, clinical practice time may be hands-on, or in skill labs, simulation labs, or other settings. As shown in **Table 1.5**, a majority of clinical practice time is hands-on across all levels of pre-licensure RN education.

Table 1.5: Format of Clinical Practice Time (%)

	DIP	ADN Generic	ADN Bridge	BSN Generic	BSN Accel.	Pre-MSN
	N=5	**N=16**	**N=16**	**N=18**	**N=12**	**N=2**
Skill Lab	16%	18%	13%	15%	14%	17%
Simulation Lab	9%	10%	12%	9%	10%	8%
Hands-On	75%	70%	71%	71%	73%	76%
Other	0%	2%	4%	5%	2%	0%

N is the number of respondent programs.

Table 1.6 represents the percentage of pre-licensure programs that cannot increase student enrollment.

Table 1.6: Pre-Licensure Programs That Cannot Increase Enrollment (%)

LPN	DIP	ADN Generic	ADN Bridge	BSN Generic	BSN Accel.	Pre-MSN
N=30	N=5	N=15	N=15	N=16	N=11	N=2
10 (33%)	2 (40%)	11 (73%)	7 (47%)	7 (44%)	4 (31%)	1 (50%)

N is the number of respondent schools.

Table 1.7 represents the time to employment after graduation.

Table 1.7: Time to Employment After Graduation (%)

	DIP	ADN Generic	ADN Bridge	BSN Generic	BSN Accel.	Pre-MSN
	N=5	N=16	N=16	N=18	N=12	N=2
0-3 Months	0%	13%	22%	40%	61%	12%
4-7 Months	5%	40%	31%	22%	18%	0%
8-11 Months	29%	14%	21%	5%	3%	0%
12+ Months	65%	22%	1%	1%	0%	0%
Unknown/Do not Track	1%	11%	25%	32%	18%	89%

N is the number of respondent programs.

Pre-Licensure Application, Admission, Enrollment, and Graduation

The number of Available Seats (Available) is a count of the total number of seats available for newly admitted students. Qualified Applicants (Qualified) are those who submitted complete applications on time and met all institutional requirements for formal admission to the nursing program. Completed Applicants (Completed) are those applications submitted to the school that has all required documents. Admitted Applicants (Admitted) are those who received official notice from the program that they were invited to begin the nursing program. Enrollees (Enrollees) are those who actually enrolled in the program.

Table **1.8** through **Table 1.11** provide the number of pre-licensure applicants, admitted students, enrollees, and graduates for the 2022 academic year and four-year trended data for 2019-2022. The data shows a sufficient number of seats for those enrolled. Schools have not used all available seats.

Table 1.8: Pre-Licensure Student Application, Admission, and Enrollment 2022

	DIP	ADN Generic	ADN Bridge	BSN
	N=5	N=15	N=13	N=18
Available	927	2,030	1,085	3,815
Qualified	1,151	2,549	1,260	9,186
Completed	1,366	5,204	1,403	19,387
Admitted	913 (79%)	1,854 (73%)	1,159 (92%)	8,152 (89%)
Enrollees	892 (98%)	1,687 (91%)	1,002 (86%)	2,565 (32%)

N is the number of respondent schools.
Note 1: The total number of applicants reported by each school may be greater than the raw number of applicants if an individual applied to more than one school.
Note 2: BSN data includes: BSN generic, accelerated, and LPN-BSN.

Table 1.9: Pre-Licensure Student Application, Admission, and Enrollment Trend 2019-2022

	2019 N=45	2020 N=48	2021 N=45	2022 N=47
Available	5,736	6,055	8,100	7,857
Qualified	12,056	13,051	13,633	14,146
Admitted	8,101 (67%)	9,285 (71%)	11,870 (87%)	12,078 (85%)
Enrollees	4,762 (59%)	5,423 (59%)	6,399 (54%)	6,146 (51%)

N is the number of respondent schools.
Note 1: AACN does not collect application data on pre-licensure MSN students, therefore MSN data is not included.

Table 1.10 shows the total number of students enrolled in pre-licensure programs each year, inclusive of all students from new enrollees through those in their final year.

Table 1.10: Pre-Licensure Total Student Enrollment Trend 2019-2022

	2019 N=45	2020 N=48	2021 N=45	2022 N=47
DIP	1,449 (13%)	1,584 (12%)	1,519 (12%)	1,499 (12%)
ADN	3,465 (31%)	4,478 (34%)	3,878 (29%)	4,198 (33%)
BSN	6,179 (56%)	7,190 (54%)	7,751 (59%)	6,971 (55%)
MSN	27 (0%)	47 (0%)	55 (0%)	51 (0%)
Total	**11,120**	**13,299**	**13,203**	**12,719**

N is the number of respondent schools.

Table 1.11 shows an increase in the number of pre-licensure graduates from 2019 to 2022. There was a total of 4,842 pre-licensure graduates from NJ pre-licensure nursing programs in 2022.

Table 1.11: Pre-Licensure Student Graduation Trend 2019-2022

	2019 N=45	2020 N=48	2021 N=45	2022 N=47
DIP	473	630	521	623
ADN Generic	977	1,303	1,313	1,221
ADN Bridge	490	466	406	493
BSN Generic	1,426	1,495	1,495	1,859
BSN Accelerated	498	588	547	646
MSN	25	14	12	ND
Total	**3,889**	**4,496**	**4,294**	**4,842**

N is the number of respondent schools.

Table 1.12 shows the responses to: What percentage (%) of students were unsuccessful in completing your program in the past academic year? For example, in the Diploma program, 2 schools identified between 0-10% of their students were unsuccessful.

Table 1.12: Students Unsuccessful in Completing the Program (Aug 1, 2021 - July 31, 2022)

	DIP N=5	ADN Generic N=15	ADN Bridge N=15	BSN Generic N=16	BSN Accel. N=13	Pre-MSN N=2
0-10%	2	3	7	9	9	2
11-20%	2	3	2	5	3	0
21-30%	0	4	1	2	1	0
31-40%	1	2	3	0	0	0
41-50%	0	2	1	0	0	0
51+%	0	1	1	0	0	0

N is the number of respondent programs.

Pre-Licensure Students NCLEX-RN Pass Rates

Nursing students must pass the National Council Licensure Exam (NCLEX-RN) to receive licensure as an RN. **Table 1.13** and **Table 1.14** show the pass rates for first-time, U.S. and NJ educated candidates who took the NCLEX-RN in 2022 (NCSBN, 2023). These data represent all NJ schools. NJ was 1% higher than the U.S. in pass rates for RNs.

Table 1.13: First-Time, NJ Educated Candidates Taking the NCLEX-RN® in 2022

	Candidates	Total Passed	Pass Rate (%)
Diploma	483	383	79%
ADN	1,651	1,385	84%
BSN	2,205	1,762	80%
Total	**4,339**	**3,530**	**81%**

Table 1.14: First-Time, U.S. Educated Candidates Taking the NCLEX-RN® in 2022

	Candidates	Total Passed	Pass Rate (%)
Diploma	2,191	1,717	78%
ADN	85,760	66,832	78%
BSN	98,909	81,425	82%
Total	**186,860**	**149,974**	**80%**

Pre-Licensure Student Demographics

Table 1.15 describes pre-licensure student demographics. This is inclusive of all students matriculating in the 2022 academic year, from new enrollees to those who are about to graduate. Any student data that was not known by respondent schools is marked DND for "Did Not Disclose".

Table 1.15: Pre-Licensure Student Demographics

	DIP N=1,499	ADN Generic N=2,908	ADN Bridge N=1,290	BSN N=7,289	Pre-MSN N=51
Gender					
Female	1,302 (87%)	2,559 (88%)	1,183 (91%)	6,337 (87%)	46 (90%)
Male	197 (13%)	320 (11%)	116 (9%)	931 (13%)	5 (10%)
Transgender	0 (0%)	1 (0%)	0 (0%)	0 (0%)	0 (0%)
DND	0 (0%)	28 (1%)	1 (0%)	21 (0%)	0 (0%)
Race/Ethnicity					
White	406 (27%)	1,311 (45%)	182 (14%)	2,826 (39%)	15 (29%)
Black/African Am.	445 (30%)	609 (21%)	767 (59%)	1274 (17%)	14 (27%)
Hispanic/Latino	349 (23%)	520 (18%)	143 (11%)	1,566 (21%)	2 (4%)
Asian	156 (10%)	253 (9%)	65 (5%)	998 (14%)	7 (14%)
Hawaiian/Pacific Isl.	25 (2%)	14 (0%)	13 (1%)	52 (1%)	0 (0%)
American Indian	4 (0%)	11 (0%)	3 (0%)	12 (0%)	0 (0%)
2 or more Races	45 (3%)	71 (2%)	41 (3%)	277 (4%)	10 (20%)
DND	69 (5%)	119 (4%)	86 (7%)	284 (4%)	3 (6%)
Age					
17-20	32 (2%)	145 (5%)	3 (0%)	1,895 (26%)	0 (0%)
21-25	443 (30%)	930 (32%)	65 (5%)	1,822 (25%)	20 (39%)
26-30	389 (26%)	669 (23%)	273 (21%)	947 (13%)	15 (29%)
31-40	442 (29%)	843 (29%)	533 (41%)	801 (11%)	10 (20%)
41-50	158 (11%)	232 (8%)	299 (23%)	219 (3%)	6 (12%)
51-60	34 (2%)	85 (3%)	104 (8%)	79 (1%)	0 (0%)
61+	1 (0%)	4 (0%)	6 (1%)	1 (0%)	0 (0%)
DND	0 (0%)	0 (0%)	17 (1%)	1,525 (21%)	0 (0%)
Mean Age	**31**	**30**	**37**	**20**	**30**

N is the number of students.

Note 1: BSN includes: BSN generic, accelerated, and LPN-BSN

Table 1.16 describes four-year trends in pre-licensure nursing student demographics. Pre-licensure nursing students are primarily female at 88%. Male students account for 12% of the student body. Most students across all levels of pre-licensure education are minorities (59%). Most students in the BSN Generic are in the lower age brackets compared to the other programs.

Table 1.16: Pre-Licensure Student Demographic Trend 2019-2022

	2019 N=45	2020 N=48	2021 N=45	2022 N=47
Gender				
Female	9,645 (87%)	11,240 (85%)	11,355 (86%)	11,427 (88%)
Male	1,448 (13%)	1,954 (15%)	1,823 (14%)	1,569 (12%)
Transgender	0 (0%)	10 (0%)	1 (0%)	1 (0%)
DND	28 (0%)	95 (1%)	24 (0%)	50 (0%)
Race/Ethnicity				
White	4,813 (43%)	5,575 (42%)	5,352 (41%)	4,740 (36%)
Black/African Am.	2,062 (19%)	2,461 (19%)	2,670 (20%)	3,109 (24%)
Hispanic/Latino	1,904 (17%)	2,444 (18%)	2,575 (20%)	2,580 (20%)
Asian	1,362 (12%)	1,543 (12%)	1,638 (12%)	1,479 (11%)
Hawaiian/Pacific Isl.	60 (1%)	95 (1%)	125 (1%)	104 (1%)
American Indian	29 (0%)	41 (0%)	36 (0%)	30 (0%)
2 or more Races	316 (3%)	446 (3%)	442 (3%)	444 (3%)
DND	479 (4%)	563 (4%)	257 (2%)	561 (4%)
Age				
17-20	2,810 (25%)	2,852 (21%)	3,240 (25%)	2,075 (16%)
21-25	3,570 (32%)	3,919 (29%)	4,037 (31%)	3,280 (25%)
26-30	1,841 (17%)	2,309 (17%)	2,417 (18%)	2,293 (18%)
31-40	1,782 (16%)	2,164 (16%)	2,311 (18%)	2,629 (20%)
41-50	761 (7%)	801 (6%)	800 (6%)	914 (7%)
51-60	181 (2%)	233 (2%)	214 (2%)	302 (2%)
61+	21 (0%)	11 (0%)	15 (0%)	12 (0%)
DND	154 (1%)	1,010 (8%)	169 (1%)	1,542 (12%)
Total Students	**11,120**	**13,299**	**13,203**	**13,047**

N is the number of respondent programs across all pre-licensure settings.

Post-Licensure Programs

Program Characteristics

Post-licensure programs provide additional credentials for graduates who have already attained their RN licensure. **Table 1.17** describes the delivery format of post-licensure programs. Except for PhD programs, post-licensure programs are delivered in a variety of online, face-to-face, and hybrid formats.

Table 1.17: Delivery Format of Post-Licensure Programs

	RN-BSN	MSN	DNP	PhD
	N=18	N=20	N=11	N=3
Exclusively Online	9	7	5	0
Face-to-Face	0	2	0	2
Hybrid	9	10	6	1
Missing	0	1	0	0

N is the number of respondent programs.

Table 1.18 describes the delivery format of clinical practice time.

Table 1.18: Format of Clinical Practice Time

	RN-BSN N=16	MSN N=19	DNP N=11
Skills Lab	10%	3%	1%
Simulation Lab	6%	6%	3%
Hands-on	48%	66%	68%
Other	35%	25%	28%

N is the number of respondent programs.

Table 1.19 represents the percentage of post-licensure programs that cannot increase student enrollment.

Table 1.19: Post-Licensure Programs That Cannot Increase Enrollment (%)

	BSN	MSN	DNP	PhD
	N=15	N=19	N=11	N=3
	0 (0%)	1 (5%)	1 (9%)	2 (67%)

N is the number of respondent programs.

Table 1.20 describes the time to employment after graduation.

Table 1.20: Time to Employment After Graduation

	RN-BSN	MSN	DNP	PhD
	N=16	N=19	N=11	N=3
0-3 months	62%	58%	90%	33%
4-7 months	7%	11%	1%	0%
8-11 months	0%	0%	0%	0%
12+	0%	0%	0%	0%
Unk/Not Track	31%	32%	9%	67%

N is the number of respondent programs.

Post-Licensure Application, Admission, Enrollment, and Graduation

The number of available seats (Available) is a count of the total number of seats available for newly admitted students. Qualified Applicants (Qualified) are those who submitted complete applications on time and who met all institutional requirements for formal admission to the nursing program during the reporting period. Admitted Applicants (Admitted) are those who received official notice from the program that they were invited to begin the nursing program during the reporting period. Enrollees (Enrollees) are those who actually enrolled in the program.

Table 1.21 through **Table 1.24** provide post-licensure application, admission, enrollment, and graduation rates for the 2022 academic year and four-year trended data for 2019-2022.

Table 1.21: Post-Licensure Student Application, Admission, and Enrollment in 2022

	RN-BSN N=18	MSN N=20	DNP N=11	PhD N=3
Available	1,086	1,298	456	20
Qualified	1,362	1,215	312	23
Admitted(%)	1,258 (92%)	1,132 (93%)	312 (100%)	23 (100%)
Enrollees(%)	781 (62%)	824 (73%)	209 (67%)	19 (83%)

N is the number of respondent programs.

Note 1: The total number of applicants reported by each school may be greater than the raw number of applicants if an individual applied to more than one school.

Note 2: 5 RN-BSN schools reported unlimited number of RN-BSN seats.

Table 1.22: Post-Licensure Student Application, Admission, and Enrollment Trend 2019-2022

	2019 N=21	2020 N=19	2021 N=20	2022 N=20
Available	7,875	1,567	2,776	2,860
Qualified	2,245	2,361	2,034	2,912
Admitted (%)	2,137 (95%)	2,239 (95%)	1,923 (95%)	2,725 (94%)
Enrollees (%)	1,427 (67%)	1,584 (71%)	1,066 (55%)	1,833 (67%)

N is the number of respondent schools.

Table 1.23: Post-Licensure Total Student Enrollment Trend 2019-2022

	2019 N=21	2020 N=19	2021 N=20	2022 N=20
RN-BSN	1,600 (38%)	1,544 (41%)	1,602 (38%)	1,462 (37%)
MSN	1,709 (41%)	1,333 (35%)	1,667 (40%)	1,670 (42%)
DNP	811 (19%)	868 (23%)	866 (21%)	749 (19%)
PhD	70 (2%)	60 (2%)	66 (2%)	68 (2%)
Total	**4,190**	**3,805**	**4,201**	**3,966**

N is the number of respondent schools.

The trend in **Table 1.24** shows a continued decline in the RN-BSN graduation rate, however, the data does not reflect those NJ nurses graduating from other states.

Table 1.24: Post-Licensure Graduation Trend 2019-2022

	2019 N=21	2020 N=19	2021 N=20	2022 N=20
RN-BSN	732	518	646	564
MSN	435	416	378	400
DNP	190	155	204	199
PhD	8	4	6	10
Total	**1,365**	**1,093**	**1,234**	**1,173**

N is the number of respondent schools.

Table 1.25 shows the responses to: What percentage (%) of students were unsuccessful in completing your program in the past academic year? For example, in the MSN program, 3 schools identified between 11-20% of their students were unsuccessful.

Table 1.25: Students Unsuccessful in Completing the Program (August 1, 2021 - July 31, 2022)

	RN-BSN N=15	MSN N=19	DNP N=11	PhD N=3
0-10%	11	19	11	3
11-20%	4	3	0	0
21-30%	0	0	1	0
31-40%	0	0	0	0
41-50%	0	0	0	0
51+%	0	0	0	0

N is the number of respondent programs.

Post-Licensure Student Demographics

Table 1.26 describes post-licensure student student demographics. This is inclusive of all students matriculating in the 2022 academic year, from new enrollees to those who are about to graduate. The mean age of post-licensure students is 39. The students are primarily female (86%) and white (45%).

Table 1.26: Post-licensure student demographics

	RN-BSN N=1,462	MSN N=1,670	DNP N=749	PhD N=68
Gender				
Female	1,212 (83%)	1,464 (88%)	643 (86%)	60 (88%)
Male	245 (17%)	201 (12%)	106 (14%)	8 (12%)
Transgender	0 (0%)	0 (0%)	0 (0%)	0 (0%)
DND	5 (0%)	5 (0%)	0 (0%)	0 (0%)
Race/Ethnicity				
White	622 (43%)	794 (48%)	313 (42%)	35 (51%)
Black/African Am.	245 (17%)	236 (14%)	168 (22%)	13 (19%)
Hispanic/Latino	263 (18%)	235 (14%)	104 (14%)	4 (6%)
Asian	186 (13%)	222 (13%)	126 (17%)	8 (12%)
Hawaiian/Pacific Isl.	5 (0%)	4 (0%)	0 (0%)	0 (0%)
American Indian/Alaska Native	1 (0%)	0 (0%)	0 (0%)	0 (0%)
Other	0 (0%)	0 (0%)	0 (0%)	0 (0%)
2 or more Races	50 (3%)	37 (2%)	9 (1%)	1 (1%)
DND	90 (6%)	142 (9%)	27 (4%)	7 (10%)
Age				
17-20	15 (1%)	0 (0%)	0 (0%)	0 (0%)
21-25	117 (8%)	37 (2%)	33 (4%)	0 (0%)
26-30	234 (16%)	278 (17%)	202 (27%)	6 (9%)
31-40	175 (12%)	402 (24%)	228 (30%)	27 (40%)
41-50	117 (8%)	169 (10%)	107 (14%)	18 (26%)
51-60	73 (5%)	40 (2%)	60 (8%)	12 (18%)
61+	15 (1%)	8 (0%)	12 (2%)	3 (4%)
DND	716 (49%)	736 (44%)	107 (14%)	2 (3%)
Mean Age	**35**	**36**	**37**	**44**

N is the number of students.

Table 1.27 describes post-licensure student demographic trends from 2019-2022.

Table 1.27: Post-Licensure Student Demographic Trend 2019-2022

	2019 N=21	2020 N=19	2021 N=20	2022 N=20
Gender				
Female	3,629 (87%)	3,255 (86%)	3,654 (87%)	3,379 (86%)
Male	550 (13%)	526 (14%)	543 (13%)	560 (14%)
Transgender	0 (0%)	1 (0%)	0 (0%)	0 (0%)
DND	11 (0%)	23 (1%)	4 (0%)	10 (0%)
Race/Ethnicity				
White	2,012 (48%)	1,785 (47%)	1,977 (47%)	1,764 (45%)
Black/African Am.	609 (15%)	547 (14%)	681 (16%)	662 (17%)
Hispanic/Latino	514 (12%)	540 (14%)	652 (16%)	606 (15%)
Asian	549 (13%)	477 (13%)	532 (13%)	542 (14%)
Hawaiian/Pacific Isl.	39 (1%)	26 (1%)	23 (1%)	9 (0%)
American Indian	7 (0%)	7 (0%)	7 (0%)	1 (0%)
Other	8 (0%)	28 (1%)	0 (0%)	0 (0%)
2 or more Races	58 (1%)	108 (3%)	89 (2%)	97 (2%)
DND	394 (9%)	287 (8%)	240 (6%)	268 (7%)
Age				
17-20	3 (0%)	8 (0%)	2 (0%)	15 (0%)
21-25	303 (7%)	414 (11%)	364 (9%)	187 (5%)
26-30	714 (17%)	733 (19%)	883 (21%)	720 (18%)
31-40	1,035 (25%)	1,107 (29%)	1,128 (27%)	832 (21%)
41-50	804 (19%)	723 (19%)	797 (19%)	411 (10%)
51-60	439 (10%)	311 (8%)	303 (7%)	185 (5%)
61+	58 (1%)	42 (1%)	42 (1%)	38 (1%)
DND	834 (20%)	467 (12%)	682 (16%)	1,561 (40%)
Total Students	**4,190**	**3,805**	**4,201**	**3,949**

N is the number of respondent schools.

Table 1.28: New Jersey's RN Education Programs

School & Campuses	County	Diploma	ADN Generic	ADN Bridge	BSN Generic	BSN Accel.	Pre MSN	RN-BSN	Post MSN	DNP	PhD	LPN-BSN
Atlantic Cape Community College	Atlantic		x	x								
Bergen Community College	Bergen		x									
Berkeley College - Woodland Park	Passaic											x
Best Care College	Essex			x								
Bloomfield College	Essex				x			x**				
Brookdale Community College	Monmouth		x	x								
Caldwell University	Essex				x	x			x			
Camden County College	Camden			x								
Capital Health School of Nursing (St. Francis)	Mercer	x		x*								
Centenary University (**New: Starting Fall 2023**)	Warren							x*				
Chamberlain University - North Brunswick	Middlesex				x							
County College of Morris	Morris		x	x								
Eastern International College - Belleville (**Closed**)	Essex											
Eastern International College - Jersey City	Hudson		x		x			x				
Eastwick College - Hackensack	Bergen			x								x*
Eastwick College - Ramsey	Bergen			x								x*
Essex County College	Essex		x	x								
Fairleigh Dickinson University	Bergen				x	x		x	x	x		
Felician University	Bergen				x	x		x	x	x		
Georgian Court University	Ocean				x	x	x	x	x			
Holy Name Medical Center	Bergen	x										
Hudson County Community College	Hudson		x	x								
Jersey College - Ewing Township	Mercer			x								
Jersey College - Teterboro	Bergen			x								
JFK Muhlenberg Snyder School of Nursing	Middlesex	x										
Kean University	Union							x	x		x	
Mercer County Community College	Mercer		x									
Middlesex College	Middlesex		x									
Monmouth University	Monmouth				x				x	x		
Montclair State University	Essex				x		x	x	x			
New Jersey City University	Hudson					x		x	x			
New Jersey City University - Fort Monmouth	Monmouth					x		x	x			
Ocean County College	Ocean		x									
Our Lady of Lourdes School of Nursing	Camden	x										
Passaic County Community College	Passaic		x	x								
Ramapo College of New Jersey	Bergen				x			x	x	x		
Raritan Valley Community College	Somerset		x	x								
Rider University	Mercer							x	x			
Rowan College at Burlington County	Burlington		x									
Rowan College of South Jersey - Cumberland	Cumberland		x	x								
Rowan College of South Jersey - Gloucester	Gloucester		x	x								
Rowan University	Gloucester							x	x			
Rutgers University - Blackwood	Camden				x			x				
Rutgers University - Camden	Camden				x	x		x	x	x		
Rutgers University - Newark	Essex				x	x		x	x	x	x	
Rutgers University - New Brunswick	Middlesex				x			x				
Saint Elizabeth University	Morris				x			x**	x**			
Saint Peter's University	Hudson				x	x		x	x	x		
Salem Community College	Salem			x								
Seton Hall University	Essex				x	x			x	x	x	
Stockton University	Atlantic				x	x			x	x		
The College of New Jersey	Mercer				x			x	x			
Thomas Edison State University	Mercer					x		x	x	x		
Trinitas School of Nursing	Union	x										
Warren County Community College	Warren		x									
William Paterson University	Passaic				x	x		x	x	x		

*Indicates schools did not provide program data. ** Indicates schools did not provide program data to NJCCN but to AACN.

17

Educational Capacity Report - LPN

Overview

There were 25 schools in New Jersey that provide LPN education, and 25 schools provided data on their educational capacity to the 2021-2022 surveys. Schools may have two or more campuses (See **Table 1.39** to check complete school list).

This report includes data for all 25 schools (30 campuses, and 31 programs) in New Jersey that provide LPN education. LPN programs prepare students for the National Council Licensure Examination for Practical Nurses (NCLEX-PN), which leads to licensure as a LPN. Of the 31 programs, 77% are currently accredited. Of the 30 LPN schools, 10 (33%), identified they could not increase enrollment.

Table 1.29: Federal Tax Classification

	LPN **N=31**
Public	15 (48%)
Private/For-Profit	14 (45%)
Private/Non-Profit	2 (6%)

N is the number of respondent programs.

Table 1.30: Accreditation Status

	LPN **N=31**
Accredited	24 (77%)
Not Accredited/In Progress	7 (23%)

N is the number of respondent programs.

In **Table 1.31**, reasons for rejection of qualified applicants are presented. Schools can select more than one reason for rejection of qualified applicants.

Table 1.31: Reason for Rejection of Qualified Applicants

	LPN **N=31**
No applications rejected	23 (74%)
Lack of qualified faculty	3 (10%)
Lack of clinical space	0 (0%)
Limited classroom space	5 (16%)
Lack of clinical sites	4 (13%)
Insufficient number of Preceptors	1 (3%)
Other	0 (0%)

N is the number of respondent programs.

Program Characteristics

This section presents information about the format and content of New Jersey's LPN education programs. **Table 1.32** indicates that programs are primarily face-to-face.

Table 1.32: Delivery Format of LPN programs

	LPN N=31
Face-to-Face	28 (90%)
Hybrid	3 (10%)
Online	0 (0%)

N is the number of respondent programs.

The clinical practice time may be hands-on or conducted in skill lab, simulation lab, or other settings. As shown in **Table 1.33**, 58% of clinical practice time is hands-on, which is 1% less than in previous years.

Table 1.33: Format of Clinical Practice Time (%)

	LPN N=31
Skill Lab	23%
Simulation Lab	15%
Hands-on	58%
Other	4%

N is the number of respondent programs.

As shown in **Table 1.34**, 52% of graduates secured their first job within 0-7 months of graduation.

Table 1.34: Time to Employment After Graduation (%)

	LPN N=31
0-3 Months Post Graduation	20%
4-7 Months Post Graduation	32%
8-11 Months Post Graduation	13%
12+ Months Post Graduation	5%
Unknown/ Do not Track	31%

N is the number of respondent programs.

LPN Application, Admission, Enrollment, and Graduation

The number of Available Seats (Available) is a count of the total number of seats available for newly admitted students. Qualified Applicants (Qualified) are those who submitted complete applications on time and met all institutional requirements for formal admission to the nursing program. Admitted Applicants (Admitted) are those who received official notice from the program that they were invited to begin the nursing program. Enrollees (Enrollees) are those who actually enrolled in the program.

The total number of applicants reported by each school may be greater than the raw number of applicants if an individual applied to more than one school. Our data do not provide unique identifiers for each applicant, and thus a student applying to two programs will be counted twice.

Table 1.35 provides four-year trended data for LPN student application, enrollment, and graduation rates.

Table 1.35: LPN Student Application, Admission, and Enrollment 2022

	2019 N=25	2020 N=25	2021 N=27	2022 N=31
Available	2,629	2,877	3,134	3,911
Qualified	3,017	3,459	3,132	3,042
Admitted	2,219 (74%)	2,436 (70%)	2,829 (90%)	2,933 (96%)
Enrollees	1,996 (90%)	2,188 (90%)	2,342 (83%)	2,295(78%)
Graduates	1,340	1,412	1,180	1,551

N is the number of respondent programs.

NCLEX-PN Pass Rates for LPN Students

LPN students must pass the National Council Licensure Exam (NCLEX-PN) to apply for licensure as an LPN. **Table 1.36** and **Table 1.37** shows the pass rates for first-time, U.S. and NJ educated candidates who took the NCLEX-PN in 2022 (NCSBN, 2023). NJ pass rate percentages for first-time candidates continue to be 5% lower than the national average.

Table 1.36: First-Time, NJ Educated Candidates Taking the NCLEX-PN in 2022

Candidates	Total Passed	Pass Rate (%)
1,661	1,238	75%

Table 1.37: First-Time, U.S. Educated Candidates Taking the NCLEX-PN in 2022

Candidates	Total Passed	Pass Rate (%)
47,636	38,076	80%

LPN Student Demographics

Table 1.38 shows four years of LPN student demographic data from 2019-2022. This is inclusive of all students matriculating in the 2022 academic year, from new enrollees to those who are about to graduate. Students are primarily female (92%) and Black/African American (54%). The mean age for LPN students in 2022 was 32.

Table 1.38: LPN Student Demographics Trend 2019-2022

	2019 N=2,672	2020 N=2,681	2021 N=2,947	2022 N=2,655
Gender				
Female	2,371 (89%)	2,351 (88%)	2,661 (90%)	2,442 (92%)
Male	300 (11%)	330 (12%)	286 (10%)	212 (8%)
Transgender	0 (0%)	0 (0%)	0 (0%)	0 (0%)
DND	1 (0%)	0 (0%)	0 (0%)	1 (0%)
Race/Ethnicity				
American Indian	6 (0%)	1 (0%)	4 (0%)	20 (1%)
Asian	130 (5%)	142 (5%)	99 (3%)	217 (8%)
Black/African American	1,322 (49%)	1,293 (48%)	1,497 (51%)	1,427(54%)
Hawaiian/Pacific Islander	4 (0%)	65 (2%)	10 (0%)	8 (0%)
White	404 (15%)	371 (14%)	462 (16%)	291 (11%)
Hispanic/Latino	530 (20%)	530 (20%)	539 (18%)	354 (13%)
Other	28 (1%)	15 (1%)	13 (0%)	0 (0%)
2+ Races	43 (2%)	54 (2%)	80 (3%)	88 (3%)
DND	205 (8%)	210 (8%)	243 (8%)	250 (9%)
Age				
17-20	105 (4%)	108 (4%)	118 (4%)	127 (5%)
21-25	554 (21%)	574 (21%)	478 (16%)	542 (20%)
26-30	635 (24%)	787 (29%)	685 (23%)	666 (25%)
31-40	831 (31%)	790 (29%)	985 (33%)	822 (31%)
41-50	305 (11%)	291 (11%)	481 (16%)	318 (12%)
51-60	151 (6%)	101 (4%)	145 (5%)	114 (4%)
61+	16 (1%)	9 (0%)	21 (1%)	56 (2%)
DND	75 (3%)	21 (1%)	34 (1%)	10 (0%)

N is the number of students.

Table 1.39: New Jersey's LPN Education Programs

School Name	County
Atlantic County Institute of Technology (Closed in 2022)	Atlantic
AVTECH Institute of Technology	Middlesex
Berkeley College	Passaic
Best Care College	Essex
Burlington County Institute of Technology	Burlington
Camden County College	Camden
Cape May County Technical School	Cape May
Eastwick College (Bi-lingual LPN), Hackensack	Bergen
Eastwick College (General LPN), Hackensack	Bergen
Eastwick College, Ramsey	Bergen
Essex County College	Essex
Holy Name Medical Center	Bergen
Hudson County Community College	Hudson
Jersey College, Ewing	Mercer
Jersey College, Teterboro	Bergen
Lincoln Technical Institute, Iselin	Middlesex
Lincoln Technical Institute, Moorestown	Burlington
Lincoln Technical Institute, Paramus	Bergen
Merit Technical Institute	Hudson
Middlesex County Magnet Schools	Middlesex
Monmouth County Vocational Technical School	Monmouth
Morris County School of Technology	Morris
Ocean County Vocational Technical School	Ocean
Passaic County Technical Institute	Passaic
Pinelands School of Practical Nursing & Allied Health	Ocean
Prism Career Institute, Cherry Hill	Camden
Prism Career Institute, Egg Harbor	Atlantic
Rowan College of South Jersey Cumberland	Cumberland
Salem Community College	Salem
Union County College	Union
Universal Training Institute	Middlesex
Warren County Technical School	Warren

Nursing Faculty Report

Faculty for Pre-licensure and Post-licensure RN Programs

Employment

This section describes the employment of full-time (FT) faculty across pre- and post-licensure nursing programs. In **Table 1.40** and **Table 1.41**, full-time vacancies only include those that are being actively recruited. "BSN & Higher" includes Baccalaureate, Master's, DNP, and PhD programs. Vacancy rate increased since last year.

Table 1.40: RN Faculty Positions and Vacancies

	DIP	ADN	BSN & Higher	Total
Full-time positions available	78	201	447	726
Full-time faculty employed	74	177	401	652
Full-time position vacancies	4(5%)	24(12%)	46(10%)	74(10%)

Table 1.41: RN Program Faculty Vacancy Trend 2019-2022

	2019 N=45	2020 N=48	2021 N=46	2022 N=45
DIP	1	2	4	4
ADN	15	18	13	24
BSN & Higher	54	29	14	46
Total	**70**	**49**	**31**	**74**

N is the number of respondent schools.

Table 1.42 shows the trend of full-time faculty employed since 2019.

Table 1.42: RN Program Faculty Employment Trend 2019-2022

	2019 N=45	2020 N=45	2021 N=46	2022 N=45
DIP	73	72	72	74
ADN	140	172	156	177
BSN & Higher	380	348	374	401
Total	**593**	**592**	**602**	**652**

N is the number of respondent schools.

Figure 1.2 shows the percentage of RN classes taught by adjuncts by program level. In 2022, the percentage of classes taught by adjuncts were 23% for BSN Accelerated and 21% for BSN Generic. This may account for how schools are covering their full-time vacancies.

Figure 1.2: Percentage of RN Classes Taught by Adjuncts in 2022
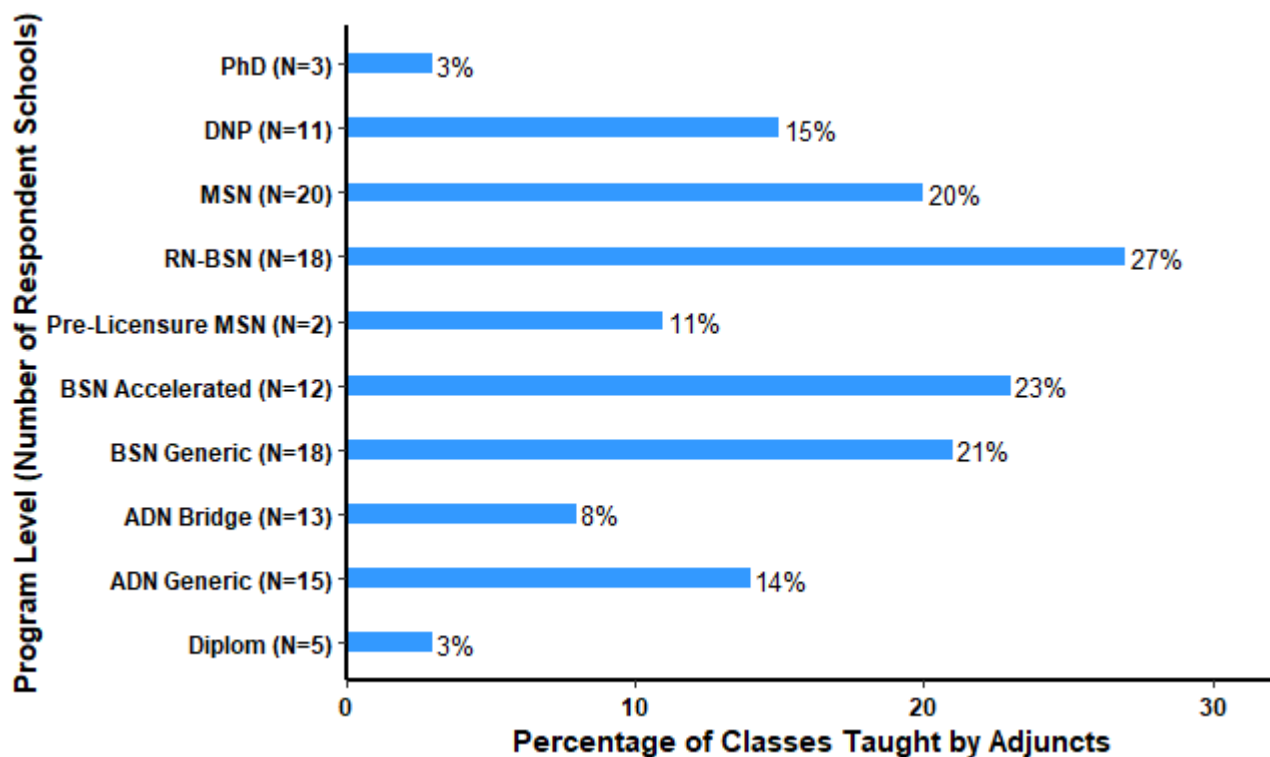
Demographics

Tables in this section show demographic data for full-time faculty at pre-licensure and post-licensure schools.

Table 1.43 shows that Diploma and ADN faculty are primarily prepared at the Master's level, and faculty for Baccalaureate and Higher programs are primarily prepared at the DNP or PhD level.

Table 1.43: Highest Level of Education of RN Program Faculty

	DIP N=75	ADN N=177	BSN & Higher N=375
MSN	56 (76%)	143 (81%)	17 (5%)
Non-Nursing Masters	0 (0%)	1 (1%)	0 (0%)
DNP	12 (16%)	24 (14%)	129 (34%)
PhD in Nursing	4 (5%)	2 (1%)	122(33%)
Non-Nursing PhD	2 (3%)	7 (4%)	46 (12%)
No PhD	0 (0%)	0 (0%)	60 (16%)
Missing/Unknown	1 (0%)	0 (0%)	1 (0%)

N is the number of faculty.

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Table 1.44 shows demographics for faculty teaching in pre- and post-licensure RN education programs. **Table 1.45** on the following page shows that faculty continue to be primarily White, female, and in the higher age brackets.

Table 1.44: RN Program Faculty Demographics

	DIP N=75	ADN N=177	BSN & Higher N=375
Gender			
Female	74 (100%)	167 (94%)	337 (90%)
Male	0 (0%)	9 (5%)	34 (9%)
Transgender	0 (0%)	0 (0%)	0 (0%)
DND	1 (0%)	1 (0%)	4 (1%)
Race/Ethnicity			
American Indian	1 (1%)	0 (0%)	0 (0%)
Asian	7 (9%)	15 (9%)	30 (8%)
Black/African Am.	19 (25%)	36 (20%)	37 (10%)
Hawaiian/Pacific Isl.	1 (1%)	1 (1%)	3 (1%)
White	44 (59%)	117 (66%)	259 (69%)
Hispanic/Latino	3 (4%)	6 (3%)	13 (3%)
Other	0 (0%)	0 (0%)	0 (0%)
2+ Races	0 (0%)	1 (1%)	23 (6%)
DND	0 (0%)	0 (0%)	10 (3%)
Age			
30 or younger	0 (0%)	0 (0%)	3 (1%)
31-40	14 (19%)	28 (16%)	27 (7%)
41-50	11 (15%)	42 (24%)	87 (23%)
51-55	13 (17%)	38 (21%)	51 (14%)
56-60	18 (24%)	23 (13%)	59 (16%)
61-65	16 (21%)	32 (18%)	68 (18%)
66-70	3 (4%)	9 (5%)	50 (13%)
71+	0 (0%)	5 (3%)	29 (8%)
DND	0 (0%)	0 (0%)	0 (0%)
Mean Age	**53**	**52**	**56**

N is the number of faculty.

Table 1.45: RN Program Faculty Demographics Trend 2019-2022

	2019 N (%)	2020 N (%)	2021 N (%)	2022 N (%)
Gender				
Female	560 (94)	481 (81)	565 (93)	578 (92)
Male	30 (5)	31 (5)	37 (6)	43 (7)
Transgender	0 (0)	0 (0)	0 (0)	0 (0)
DND	3 (1)	80 (14)	0 (0)	6 (1)
Race/ **Ethnicity**				
American Indian	0 (0)	0 (0)	0 (0)	1 (0)
Asian	39 (7)	60 (10)	52 (9)	52 (8)
Black/African Am.	67 (11)	76 (13)	72 (12)	92 (15)
Hawaiian/Pacific Isl.	6 (1)	3 (1)	3 (0)	5 (1)
White	432 (73)	327 (55)	430 (71)	420 (67)
Hispanic/Latino	21 (4)	51 (9)	18 (3)	22 (4)
Other	1 (0)	3 (1)	1 (0)	0 (0)
2 or more Races	9 (2)	25 (4)	22 (4)	24 (4)
DND	18 (3)	47 (8)	4 (1)	11 (2)
Age				
30 or younger	1 (0)	1 (0)	3 (0)	3 (0)
31-40	57 (10)	44 (7)	79 (13)	69 (11)
41-50	120 (20)	120 (20)	128 (21)	140 (22)
51-55	103 (17)	100 (18)	92 (15)	102 (16)
56-60	101 (17)	109 (18)	94 (16)	100 (16)
61-65	129 (22)	111 (19)	123 (21)	116 (19)
66-70	62 (10)	55 (9)	52 (9)	62 (10)
71+	20 (3)	29 (5)	29 (5)	34 (5)
DND	0 (0)	23 (4)	2 (0)	1 (0)
Total Faculty	**593**	**592**	**602**	**627**

Faculty for LPN Schools

Employment

This section describes the employment of full-time (FT) faculty for LPN programs. **Table 1.46** and **Table 1.47** reflects full-time vacancies only.

Table 1.46: Positions and Vacancies for Faculty in LPN schools

	LPN	(%)
Full-time positions available	135	
Full-time faculty employed	108	
Full-time position vacancies	27	(20%)

Table 1.47: Vacancy Trend for Faculty in LPN schools 2019-2022

2019 N=25	2020 N=25	2021 N=27	2022 N=31
12	13	23	27

N is the number of respondent schools.

Table 1.48 shows the number of full-time faculty employed.

Table 1.48: LPN Program Faculty Employment Trend 2019-2022

2019 N=25	2020 N=25	2021 N=27	2022 N=31
95	90	91	108

N is the number of respondent schools.

Demographics

This section shows demographic data for LPN programs for full-time faculty members. **Table 1.49** shows that faculty are primarily prepared at the Baccalaureate or Master's level in nursing.

Table 1.49: Highest Level of Education for Faculty in LPN Schools

	N=108
ADN	0 (0%)
BSN	43 (40%)
Non-Nursing Baccalaureate	1 (1%)
MSN	53 (49%)
Non-Nursing Masters	1 (1%)
DNP	8 (7%)
PhD	0 (0%)
Non-Nursing Doctorate	2 (2%)
Missing/Unknown	0 (0%)

N is the total number of faculty.

Table 1.50 shows four years of demographic data for faculty teaching in LPN programs. Data for 2022 shows that faculty are primarily female and White. The mean age for full-time faculty is 52.

Table 1.50: LPN Faculty Demographic Trend 2019-2022

	2019 N (%)	2020 N (%)	2021 N (%)	2022 N (%)	
Gender					
Female	89 (91)	78 (87)	84 (92)	95 (88)	
Male	9 (9)	11 (12)	7 (8)	13(12)	
Transgender	0 (0)	0 (0)	0 (0)	0(0)	
DND	0 (0)	1 (1)	0 (0)	0 (0)	
Race/ Ethnicity					
American Indian	0 (0)	0 (0)	0 (0)	0 (0)	
Asian	9 (9)	6 (7)	13 (14)	13 (12)	
Black/African Am.	30 (31)	25 (28)	23 (25)	35 (32)	
Hawaiian/Pacific Isl.	3 (3)	1 (1)	0 (0)	1 (1)	
White	49 (50)	53 (59)	47 (52)	47 (44)	
Hispanic/Latino	7 (7)	4 (4)	7 (8)	9 (8)	
Other	0 (0)	0 (0)	0 (0)	0 (0)	
2+ Races	0 (0)	1 (1)	1 (1)	3 (3)	
Missing/Unknown	0 (0)	0 (0)	0 (0)	0 (0)	
Age					
30 or younger	0 (0)	3 (3)	1 (1)	2 (2)	
31-40	12 (9)	9 (10)	16 (18)	18 (17)	
41-50	26 (24)	17 (19)	16 (18)	22 (20)	
51-55	18 (23)	17 (19)	16 (18)	18 (17)	
56-60	15 (9)	16 (18)	13 (14)	16 (15)	
61-65	20 (22)	22 (24)	21 (23)	23 (21)	
66-70	5 (7)	2 (2)	7 (8)	8 (7)	
71+	2 (3)	2 (2)	1 (1)	1 (1)	
DND	0 (0)	2 (2)	0 (0)	1 (1)	
Total Faculty	**98**	**90**	**91**	**108**	

Innovations

In 2022, the NJCCN Nursing Education Survey concluded with an important question: **What innovations have you integrated into your program as a result of the pandemic?** The insights gathered from nursing program leaders underscored two prevailing trends: a significant increase in simulation-based learning and a notable expansion of virtual activities. Below are the aggregated responses displaying the predominant categories with supporting quotations to What innovations have you integrated into your program as a result of the pandemic?

Program	Categories	Quotes
Practical Nurse Programs (N = 25)	Increased simulation	"We integrated technology such as virtual simulation to promote development of clinical judgment skills."
	Implemented learning management system	"We implemented: Online learning management system; Virtual simulations; Electronic documentation; and various virtual teaching strategies."
Diploma Programs (N = 4)	Increased simulation	"Increased the use of simulated leaning."
Associate Degree Programs (N = 21)	Increased simulation	"Integrating more of virtual simulations of complex patient care scenarios in the nursing lab...increased simulation and patient actors."
	More virtual activities	"...virtual office hours, virtual tutoring...voice over PowerPoints...virtual collaborative learning."

Baccalaureate and Post-licensure Programs (N = 25)	Increased simulation	"We do more online virtual experience simulations."
	Virtual reality	"Virtual reality programs like Sentinel City...Shadow Health Virtual Reality."
	More virtual activities	"...deliver curriculum content on synchronous and asynchronous online modalities to support student learning...virtual testing...remote office hours...Kaltura video capture for lectures."

N is the number of respondent schools.

Chapter 2

Workforce Supply Data

The data for this chapter were acquired from 2022 and 2023 New Jersey Board of Nursing (NJBON) Nursys® license renewal surveys. Nurses renew their licenses every two years, so this two-year survey period is representative of New Jersey's entire nursing workforce. Data are only reported if there were sufficient responses to be representative of the response pool. Percentage calculations are based on the total number of respondents to the specific survey question, not the total number of nurses in the workforce. The data in this chapter are inclusive of **active** and **inactive** licenses.

Figure 2.1 illustrates the relationship among total nurses in New Jersey, survey respondents, and specific question respondents. Note: the size of the circles do not reflect the actual number of nurses.

Figure 2.1: Structure of Survey Respondents
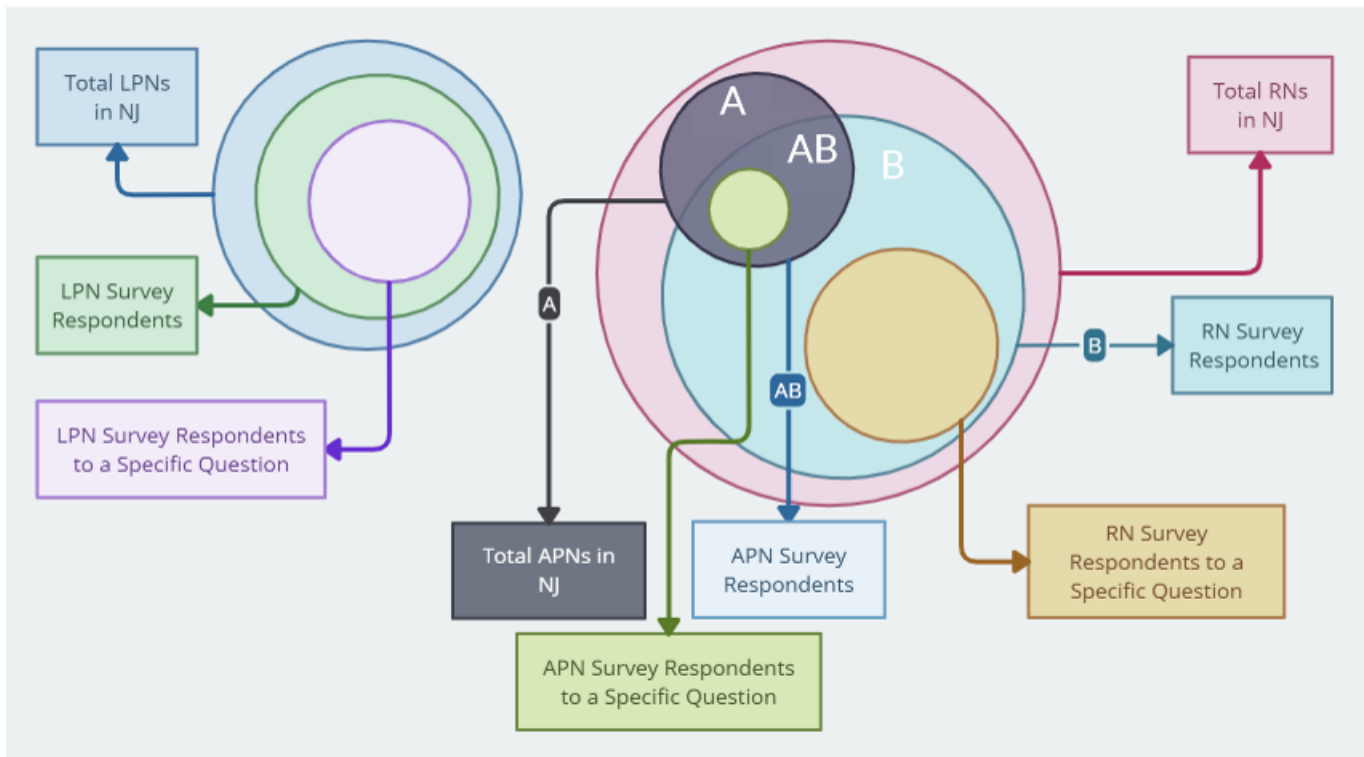
Note: 1. In New Jersey, an Advanced Practice Nurse (APN) must also be a Registered Nurse (RN); therefore, APNs are a subset of RNs. 2. AB: A ∩ B (the intersection of A and B)

Registered Nurse (RN) Profile

In the 2022-2023 survey period, 113,435 RNs responded out of New Jersey's 142,869 active licensed RNs and 32,036 inactive RNs. Of those 113,435 RN respondents, 108,371 were active while 5,064 were inactive. Respondents may have skipped questions, causing data in some tables and figures to add up to less than 113,435.

License Status

As shown in **Table 2.1**, 108,371 RN respondents have an active RN license, which renders them eligible to practice as a RN in New Jersey.

Table 2.1: RN License Status

	N=113,435	%
Active	108,371	96
Inactive	5,064	4

Table 2.2 describes the method by which 113,435 RN respondents attained their licensure. Those who attained their licensure via exam (66%) have graduated from an approved school of nursing and taken the NCLEX-RN examination in New Jersey. Those who attained their license via endorsement (31%) have first been licensed in another state.

Table 2.2: Basis for RN Licensure

	N=113,435	%
Exam	74,279	66
Endorsement	35,493	31
Missing/No Data	3,663	3

Demographics

Table 2.3 shows the demographic characteristics of 113,435 RN respondents. RN respondents are primarily female (91%) and White (62%). Sixty-one percent of the respondents are 55 years and under in age. The mean age of the RN respondents is 49.

Table 2.3: RN Demographic Characteristics

Gender		N=113,435	%
	Female	102,664	91
	Male	10,751	9
	Missing/No Data	20	0
Race/Ethnicity			
	White	69,907	62
	Asian	16,998	15
	Black/African American	12,107	11
	Hispanic/Latino	7,475	7
	Pacific Islander	763	<1
	American Indian	132	<1
	Other	4,355	4
	Missing/No Data	1,698	2
Age			
	19-25	2,764	2
	26-35	23,124	20
	36-45	21,701	19
	46-55	22,647	20
	56-65	26,178	23
	66-75	14,718	13
	76-85	2,172	2
	86+	131	<1

Education

Table 2.4 describes the highest level of nursing education held by 101,032 respondents. The National Academy of Medicine (formerly the Institute of Medicine) recommended that 80% of nurses be prepared at the Baccalaureate or higher level by 2020. In 2022-2023 survey period, of the 101,032 RN respondents, 28% have a Diploma in nursing or an Associate's Degree in nursing, and 71% have a Baccalaureate or higher degree in nursing.

Table 2.4: RN Highest Level of Nursing Education*

	N=101,032	%
Diploma in Nursing	4,455	4
Associate Degree in Nursing	24,449	24
Baccalaureate Degree in Nursing	60,933	60
Master's Degree in Nursing	10,001	10
DNP, PhD, or Other Doctoral Degree in Nursing	1,194	1

*The 12,403 missing/invalid data are excluded.

RNs were asked to report the country where they received their entry-level nursing education. Of the 101,515 RN respondents, 90,625 RNs received their entry-level nursing education in the United States. Of the remaining 10,890 respondents, the Philippines (66%) were the most common source of entry-level nursing education outside of the United States. **Figure 2.2** describes the 10,890 RN respondents who received their entry-level nursing education **outside** of the United States.

Figure 2.2: Country of RN Entry-level Nursing Education **Outside of the United States**
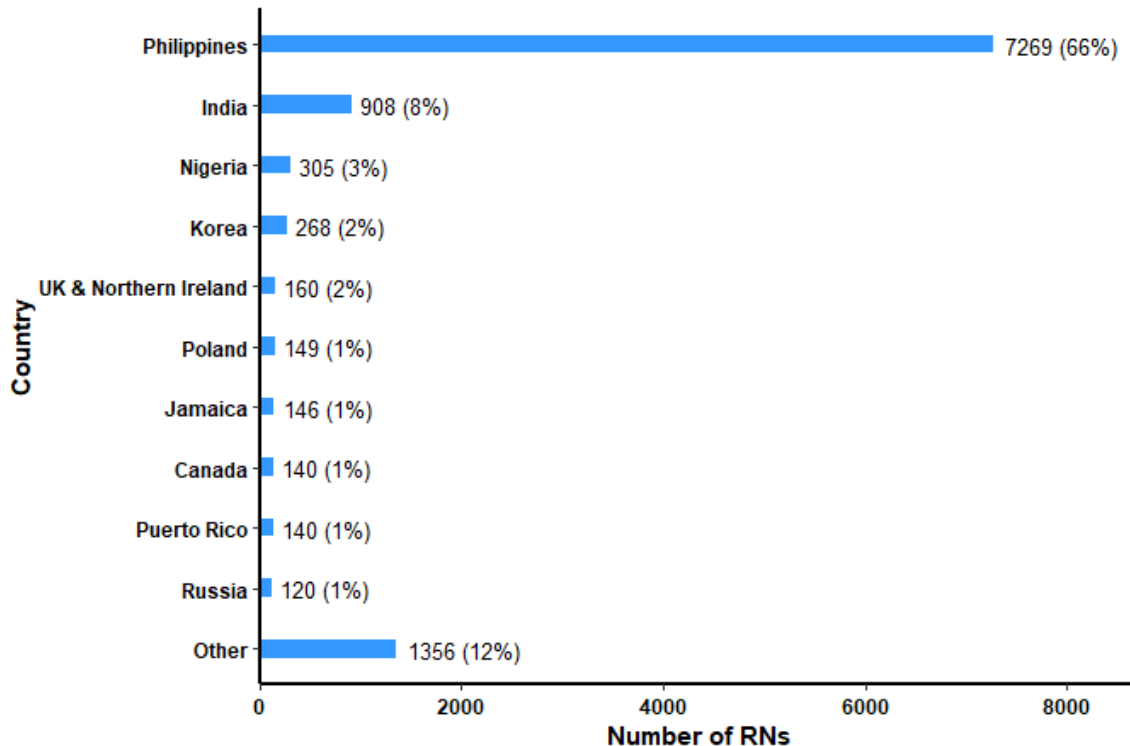
Employment Characteristics

Table 2.5 describes there were 101,365 RN respondents who reported their employment status. The table shows that 75% respondents were employed in nursing full-time, and 9% were employed in nursing part-time.

Table 2.5: RN Employment Status*

	N=101,365	**%**
Employed in nursing full-time	75,503	75
Employed in nursing part-time	9,003	9
Employed in nursing per diem	5,458	5
Retired	5,336	5
Unemployed, seeking work in nursing	3,040	3
Employed in a field other than nursing	2,355	2
Volunteering (only) in nursing	670	<1

*The 12,070 missing data are excluded.

RNs were asked to report the number of positions that they were currently employed as a nurse during that time period. **Table 2.6** shows that 16% of 93,100 RN respondents held multiple nurse positions.

Table 2.6: Number of Positions Held by RNs*

	N=93,100	**%**
1 position	78,442	84
2 positions	13,295	14
3 positions	1,363	2

*The 20,335 missing data are excluded.

Employment Position

Figure 2.3 depicts the primary employment position of 98,864 RN respondents. The figure shows 70% of the respondents reported that their primary employment position was as a staff nurse.

Figure 2.3: RN Primary Employment Position*
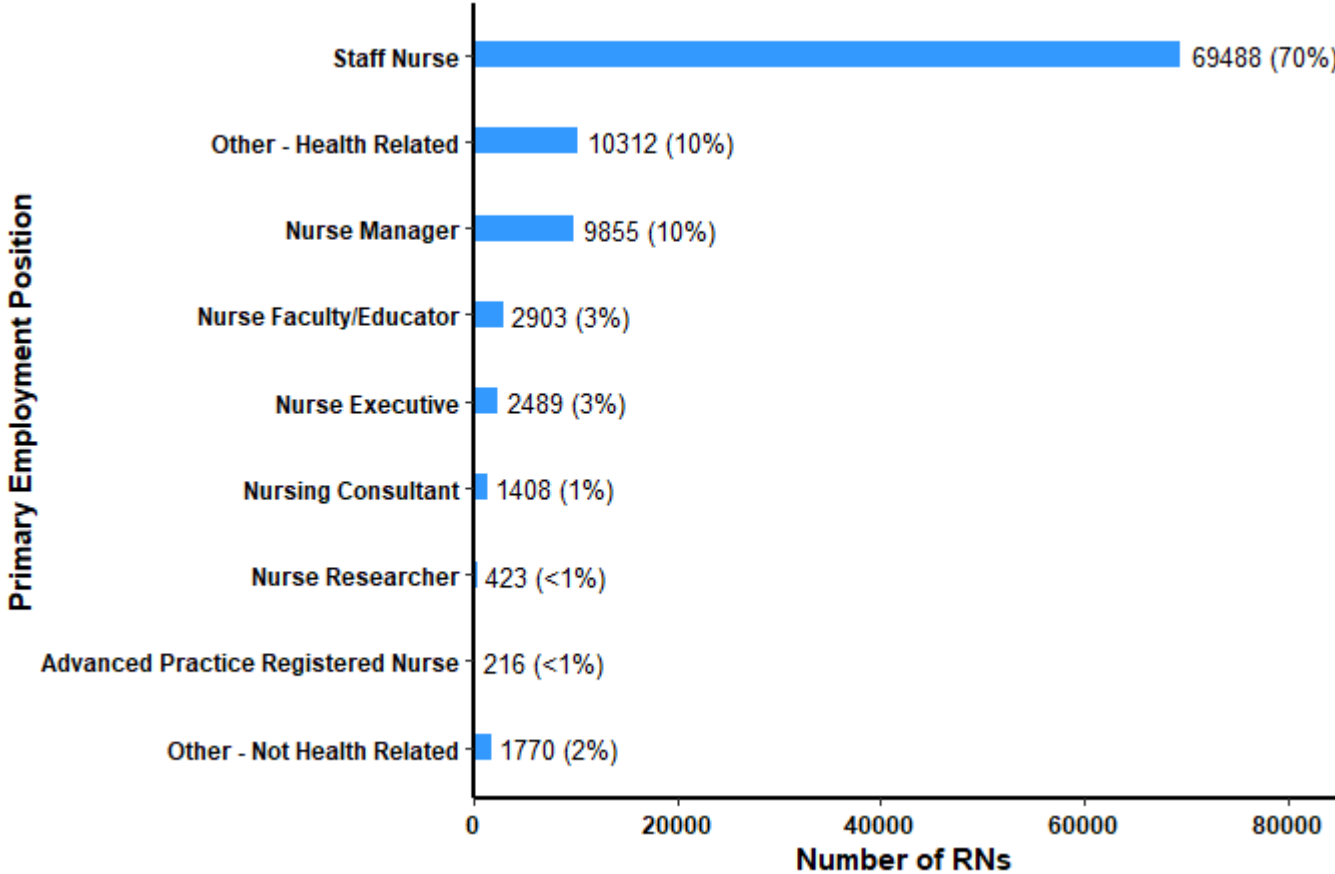
*The 14,571 missing data are excluded.

Employment Setting

Figure 2.4 depicts the primary employment setting of 98,028 RN respondents. The figure shows 55% of the respondents reported the hospital as their primary employment setting.

Figure 2.4: RN Primary Employment Setting*
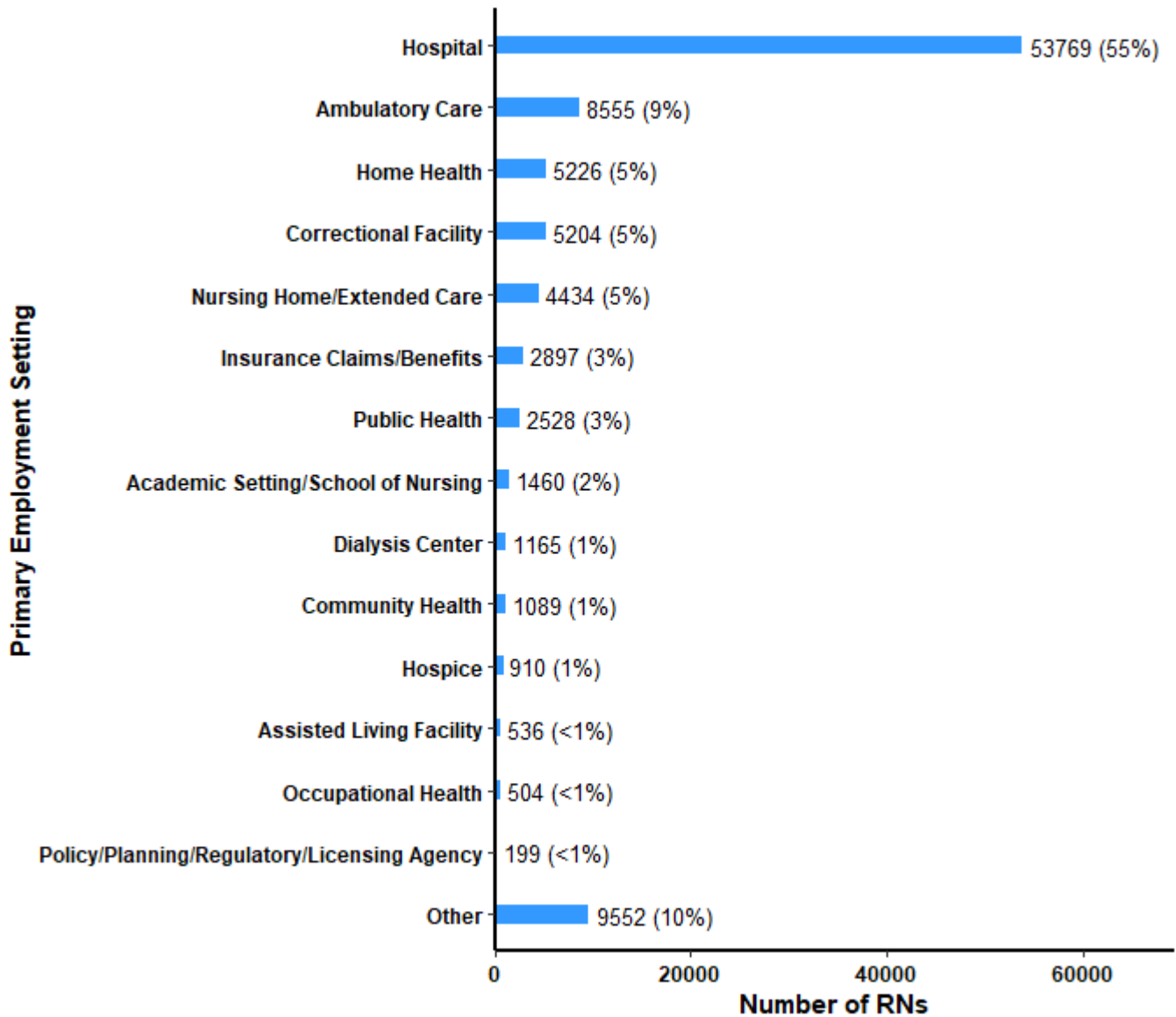
*The 15,407 missing data are excluded.

Employment Specialty

Figure 2.5 depicts the primary employment position specialty of 96,079 RN respondents. The figure shows 16% classified their primary employment specialty as acute care/critical care.

Figure 2.5: RN Primary Employment Position Specialty*
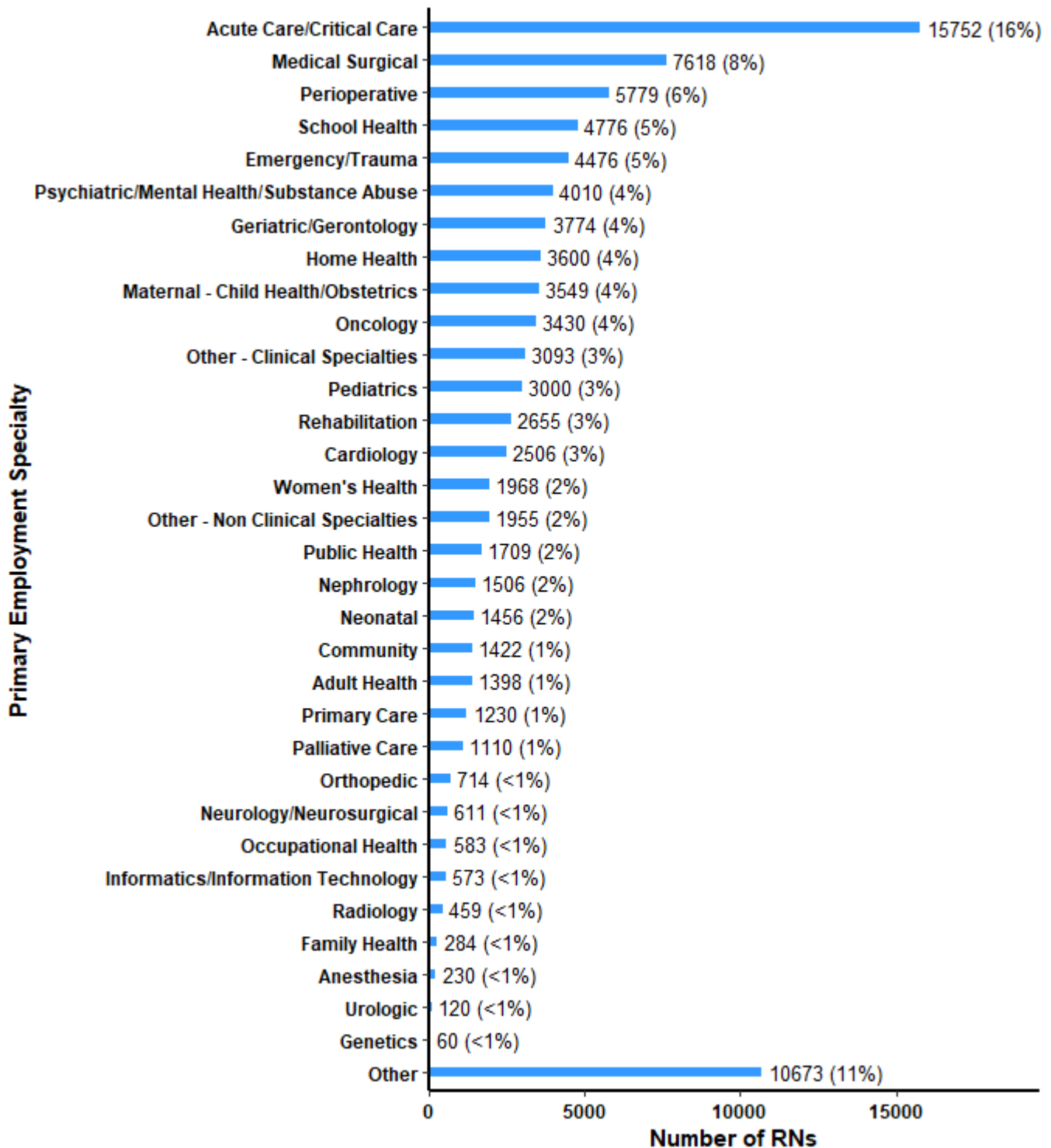
*The 17,356 missing data are excluded.

Employment by County

Table 2.7 shows the counties where RN respondents were employed.

<p style="text-align:center">Table 2.7: RN Employment by County</p>

Employment County	Number of RNs
Atlantic	3,044
Bergen	8,735
Burlington	4,009
Camden	6,353
Cape May	651
Cumberland	1,541
Essex	7,659
Gloucester	1,874
Hudson	2,754
Hunterdon	892
Mercer	4,095
Middlesex	7,816
Monmouth	6,616
Morris	5,406
Ocean	4,305
Passaic	2,848
Salem	386
Somerset	2,246
Sussex	760
Union	3,530
Warren	655

<p style="text-align:center">The 37,260 missing data are excluded*</p>

Unemployment

Figure 2.6 shows that there were 11,584 RNs reported a reason of not being employed. Of those 29% indicated "taking care of home and family" as their primary reason and 56% indicated "other".

Figure 2.6: RN Reason for Not Being Employed
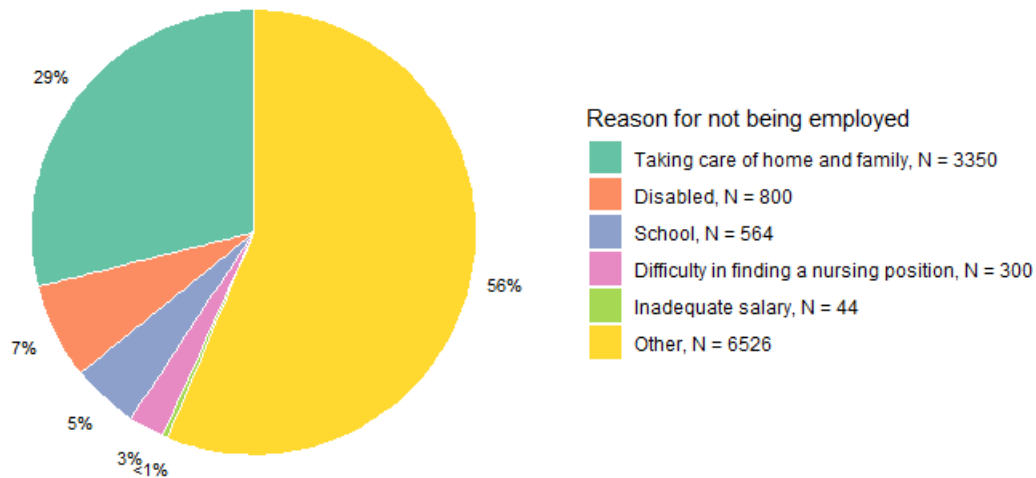
Retirement

NJCCN asked survey participants about their intention to retire within two years, prior to the next license renewal. There were 91,764 out of 113,435 RN respondents who answered this question. In response, 6% of 91,764 RN respondents indicated a plan to retire within this timeframe.

Table 2.8 identifies RN respondents who declared an intent to retire by age bracket. Of nurses who are 66-75 years old, 27% intend to retire; of nurses who are 76-85 year old, 29% intend to retire. The number of RN respondents in each age bracket is different from the numbers in **Table 2.3** because **Table 2.8** only includes RNs who reported their age **and** their intent to retire.

Table 2.8: RN Intent to Retire According to Age

Age	RN Respondents N=91,764	Intent to Retire N=5,601	*%
19-25	2,202	61	3
26-35	16,742	253	2
36-45	17,498	157	1
46-55	19,278	177	1
56-65	22,668	1,335	6
66-75	11,833	3,171	27
76-85	1,468	424	29
86+	75	23	31

*Percentages are calculated as intent to retire over the number of RN respondents.

Advanced Practice Nurse (APN) Profile

Advanced Practice Nurses are RNs with advanced degrees and specialty certification approved by a national certifying agency. NJCCN added a question to the Nursys® survey that inquired about APN specialities (NP/CRNA/CNS/CNM). RNs who indicated one of these specialities were identified as APNs.

In the 2022-2023 survey period, 14,714 APNs responded out of New Jersey's 14,897 actively licensed APNs and 3,042 inactive APNs. Of those 14,714 licensed APNs who responded, 14,103 were active while 361 were inactive. Respondents may have skipped questions, causing data in some tables and figures to add up to less than 14,714.

License Status

As shown in **Table 2.9**, 98% of 14,464 APN respondents have an active APN license.

Table 2.9: APN License Status

	N=14,464	%
Active	14,103	98
Inactive	361	2

*The 250 missing data are excluded.

APN Specialty

APN survey respondents were identified by their indication of one or more certifications. An APN may have multiple certifications; for example, a Nurse Practitioner may also be a Clinical Nurse Specialist. **Table 2.10** shows the specialty of 14,714 APN respondents.
Note: Due to the nature of the survey, APNs could select more than one specialties. For example, APN may answer Yes to the question "Nurse Practitioner(NP)" and to the question "Clinical Nurse Specialists (CNS)".

Table 2.10: APN Specialty

	N=14,714
Nurse Practitioner (NP)	11,878
Certified Registered Nurse Anesthetist (CRNA)	1,390
Clinical Nurse Specialist (CNS)	893
Certified Nurse Midwife (CNM)	307
NP & CNS	118
NP & CNM	69
NP & CRNA	55
CNS & CRNA	3
Invalid	1

Demographics

Table 2.11 shows the demographic characteristics of 14,714 APN respondents. APN respondents are primarily female (88%), White (61%), and between 36-55 years of age (51%). The mean age of APN respondents is 48.

<div align="center">

Table 2.11: APN Demographic Characteristics

</div>

Gender		**N=14,714**	**%**
	Female	12,943	88
	Male	1,517	10
	Missing/No Data	254	2
Race/Ethnicity			
	White	9,014	61
	Asian	1,884	13
	Black/African American	1,796	12
	Hispanic/Latino	790	5
	Pacific Islander	74	<1
	American Indian	19	<1
	Other	630	4
	Missing/No Data	507	3
Age			
	19-25	5	<1
	26-35	2,604	18
	36-45	4,166	28
	46-55	3,371	23
	56-65	2,777	19
	66-75	1,337	9
	76-85	199	1
	86+	5	<1
	Missing/No Data	250	2

Education

Table 2.12 describes the highest degree of nursing education held by 13,438 APN respondents. Of those respondents, 85% have a Master's Degree and 13% have a DNP.

<div align="center">

Table 2.12: APN Highest Level of Nursing Education*

</div>

	N=13,438	**%**
Master's Degree in Nursing	11,394	85
Doctor of Nursing Practice	1,779	13
PhD	182	1
Other Doctoral Degree in Nursing	83	<1

<div align="center">

*The 1,276 missing/invalid data are excluded.

</div>

Employment Characteristics

Table 2.13 shows that there were 13,389 APN respondents who reported their employment status. The table shows that 83% of the respondents were employed in nursing full-time, and 9% were employed in nursing part-time.

Table 2.13: APN Employment Status*

	N=13,389	%
Employed in nursing full-time	11,073	83
Employed in nursing part-time	1,211	9
Employed in nursing per diem	490	4
Unemployed, seeking work in nursing	230	2
Retired	200	2
Employed in a field other than Nursing	132	<1
Volunteering (only) in nursing	53	<1

*The 1,325 missing data are excluded.

APN respondents were asked to report the number of positions that they were employed as a nurse during that time period. **Table 2.14** indicates that 24% of 12,676 APN respondents held multiple nurse positions.

Table 2.14: Number of Positions Held by APNs*

	N=12,676	%
1 position	9,587	76
2 positions	2,595	20
3 positions	494	4

*The 2,038 missing data are excluded.

Employment Position

Figure 2.7 depicts the primary employment position of 13,556 APN respondents. The figure shows 79% of the respondents reported that their primary employment position was as an APN.

Figure 2.7: APN Primary Employment Position*
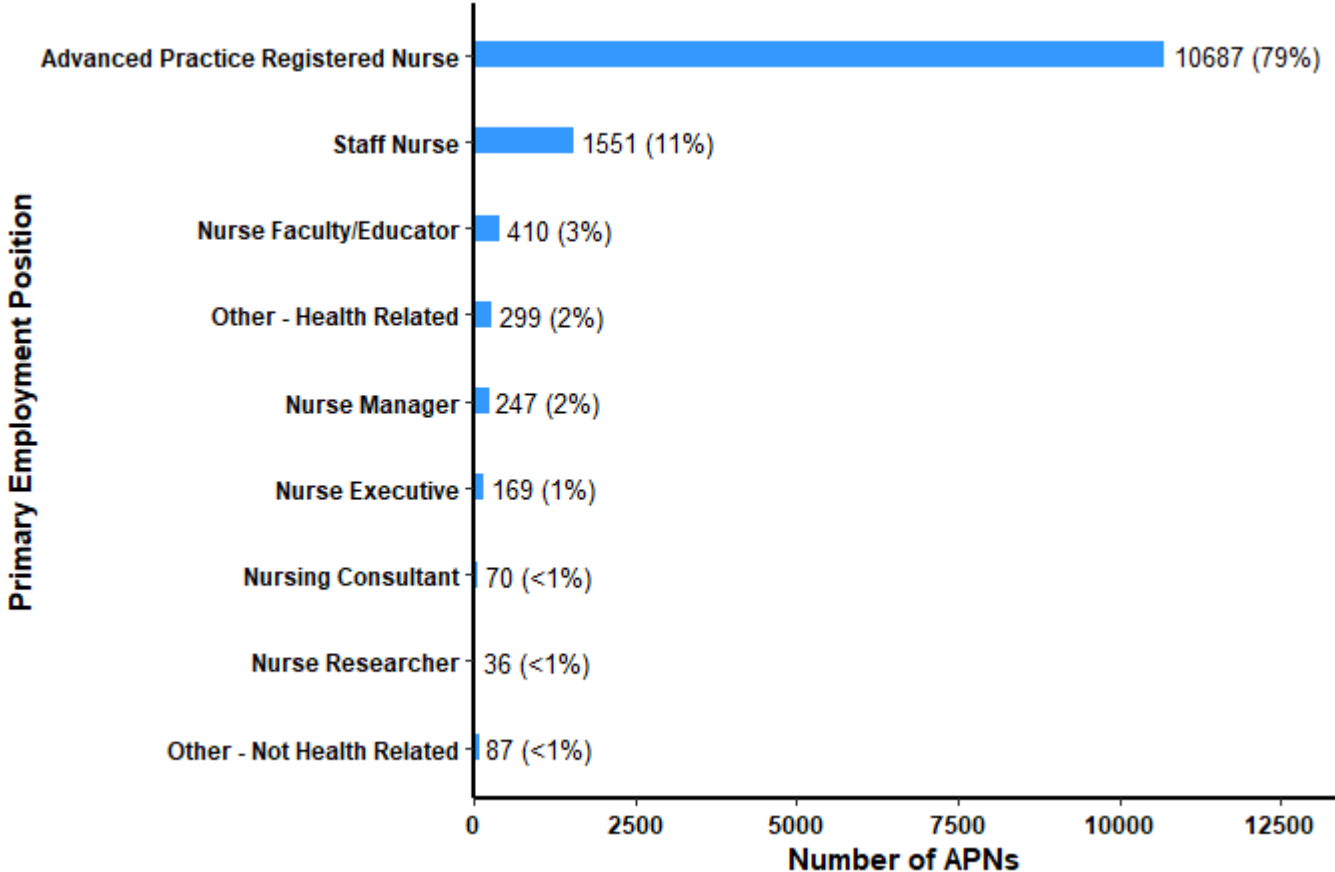
*The 1,158 missing data are excluded.

Employment Setting

Figure 2.8 depicts the primary employment setting of 13,416 APN respondents. The figure shows 44% of the respondents reported the hospital as their primary employment setting.

Figure 2.8: APN Primary Employment Setting*
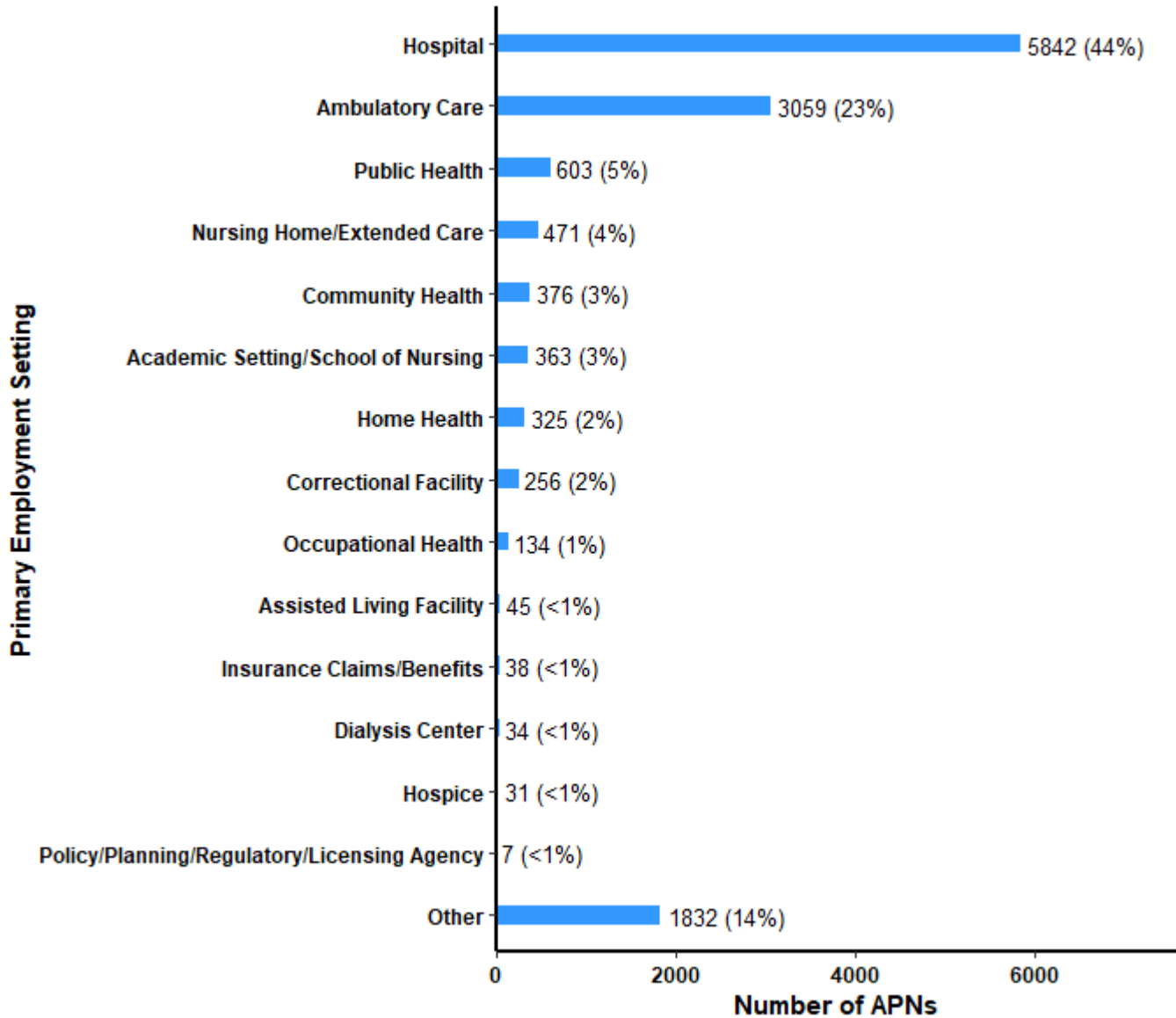
*The 1,298 missing data are excluded.

Employment Specialty

Figure 2.9 depicts the primary employment position specialty of 12,783 APN respondents. The figure shows 13% of the respondents classified their primary employment specialty as acute care/critical care.

Figure 2.9: APN Primary Employment Position Specialty*
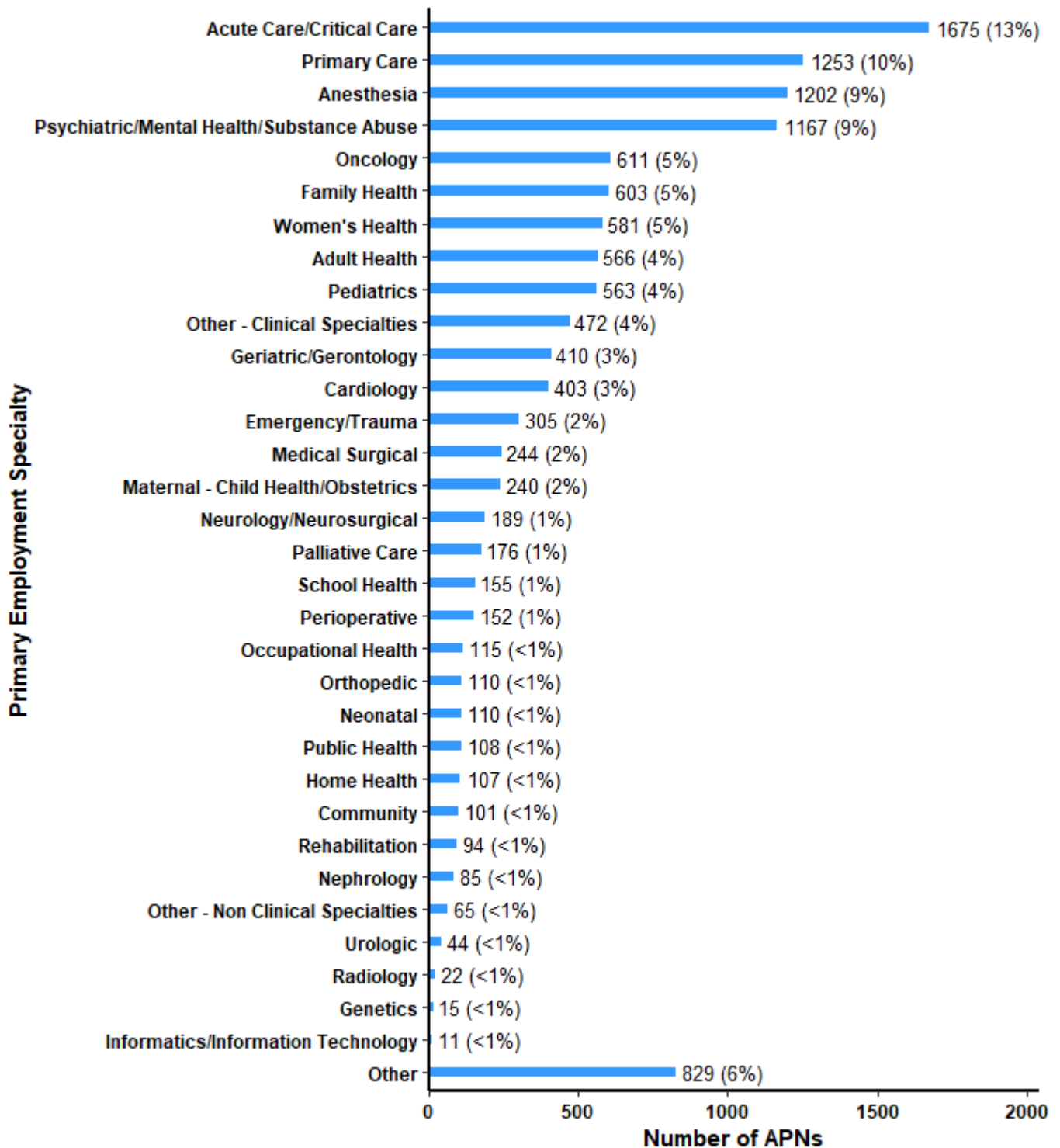
*The 1,931 missing data are excluded.

Nurse Practitioners

The majority of APNs are identified as NPs. In this 2022-2023 survey period, there were 11,878 out of 14,714 APN respondents reported they were NPs. The data does not include those who reported two APN specialties (see **Table 2.10**).

Table 2.15 shows there were 10,421 out of 11,878 NP respondents reported their NP primary area of focus.

Table 2.15: Nurse Practitioner Specialty*

	N=10,421	**%**
Family	3,452	33
Adult/Gero Primary	2,694	26
Adult/Gero Acute	1,385	13
Psychiatric	929	9
Pediatrics	833	8
Women's Health	407	4
Other	721	7

*The 1,457 missing data are excluded.

In **Table 2.16**, 3,016 out of 11,878 NP respondents indicated that they are active in states other than New Jersey. It is important to note that New York allows for full practice authority.

Table 2.16: NPs Active in Other States

	N=3,016	**%**
New York	1,284	43
Pennsylvania	1,123	37
Delaware	72	2
Connecticut	22	<1
Other	475	16
Missing	40	1

Employment by County

Table 2.17 shows the counties where APN respondents were employed.

Table 2.17: APN Employment by County*

Employment County	Number of APNs
Atlantic	400
Bergen	1,063
Burlington	484
Camden	838
Cape May	79
Cumberland	141
Essex	880
Gloucester	217
Hudson	324
Hunterdon	84
Mercer	522
Middlesex	721
Monmouth	836
Morris	596
Ocean	431
Passaic	328
Salem	33
Somerset	280
Sussex	68
Union	386
Warren	69

*The 5,934 missing data are excluded

Unemployment

Figure 2.10 shows that 836 APNs reported a reason for not being employed. Of those, 23% indicated "taking care of home and family" as their primary reason, and 62% indicated other.

Figure 2.10: APN Reason for Not Being Employed
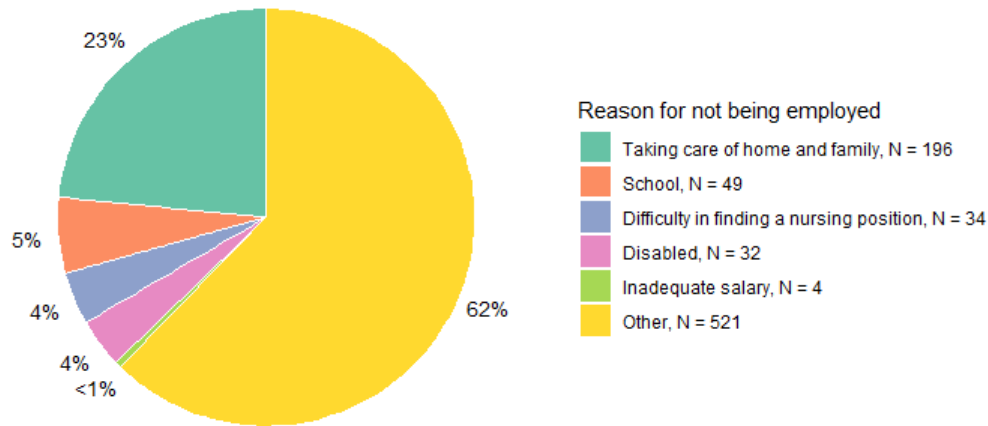
Retirement

NJCCN asked survey participants about their intention to retire within two years, prior to the next license renewal. There were 12,806 out of 14,714 APN respondents who answered this question. In response, 3% of APN respondents indicated a plan to retire within this time frame.

Table 2.18 identifies APN respondents who declared an intent to retire by age bracket. Of nurses who are 66-75 years old, 17% intend to retire; of nurses who are 76-85 years old, 23% intend to retire. The number of APN respondents in each age bracket is different from the numbers in **Table 2.11** because **Table 2.18** only includes APNs who reported their age and their intent to retire.

Table 2.18: APN Intent to Retire according to Age

Age	APN Respondents N=12,806	Intent to Retire N=385	*%
19-25	3	0	0
26-35	2,258	25	1
36-45	3,620	28	<1
46-55	3,003	21	<1
56-65	2,541	74	3
66-75	1,209	199	17
76-85	169	38	23
86+	3	0	0

*Percentages are calculated as intent to retire over the number of APN respondents.

Licensed Practical Nurse (LPN) Profile

In the 2022-2023 survey period, 21,067 LPNs responded out of New Jersey's 23,330 active licensed LPNs and 5,768 inactive LPNs. Of those 21,067 licensed LPNs, 20,444 were active while 623 were inactive. Respondents may have skipped questions, causing data in some tables and figures to add up to less than 21,067.

License Status

As shown in **Table 2.19**, 97% of 21,067 LPN respondents have an active LPN license, which renders them eligible to practice as an LPN in New Jersey.

Table 2.19: LPN License Status

	N=21,067	%
Active	20,444	97
Inactive	623	3

Table 2.20 describes the method by which LPN respondents attained their licensure. Those who attained their licensure via exam (87%) have graduated from an approved practical nursing program and have taken the NCLEX-PN examination in New Jersey. Those who attained their license via endorsement (12%) have first been licensed in another state.

Table 2.20: Basis for LPN Licensure

	N=21,067	%
Exam	18,255	87
Endorsement	2,426	12
Missing/No Data	386	2

Demographics

Table 2.21 shows the demographic characteristics of 21,067 LPN respondents. LPN respondents are primarily female (90%), over 61% are from diverse racial/ethnic backgrounds, and 71% are between 36-65 years of age. The mean age of the LPN respondents is 49.

Table 2.21: LPN Demographic Characteristics

Gender		N=21,067	%
	Female	18,879	90
	Male	2,184	10
	Missing/No Data	4	<1
Race/Ethnicity			
	White	8,138	39
	Black/African American	7,564	36
	Hispanic/Latino	2,058	10
	Asian	1,439	7
	Pacific Islander	111	1
	American Indian	45	<1
	Other	1,375	7
	Missing/No Data	337	2
Age			
	19-25	278	1
	26-35	3,321	16
	36-45	5058	24
	46-55	4,971	24
	56-65	4,779	23
	66-75	2,364	11
	76-85	284	1
	86+	12	<1

Employment Characteristics

Table 2.22 shows that there were 18,002 LPN respondents who reported their employment status. The table shows that 74% respondents were employed in nursing full-time, and 9% were employed in nursing part-time. "Employed in nursing" is defined as being employed as a nurse or in a position that requires an LPN license.

Table 2.22: LPN Employment Status*

	N=18,002	**%**
Employed in nursing full-time	13,360	74
Employed in nursing part-time	1,544	9
Employed in nursing per diem	945	5
Unemployed, seeking work in nursing	875	5
Employed in a field other than Nursing	639	4
Retired	546	3
Volunteering (only) in nursing	93	<1

*The 3,065 missing data are excluded.

LPNs were asked to report the number of positions that they were currently employed as a nurse during that time period. **Table 2.23** indicates that 17% of 16,150 LPN respondents held multiple positions.

Table 2.23: Number of LPN Positions*

	N=16,150	**%**
1 position	13,398	83
2 positions	2,521	16
3 positions	231	1

*The 4,917 missing data are excluded.

Employment Position

Figure 2.11 depicts the primary employment position of 17,437 LPN respondents. The figure shows 80% of the respondents reported their primary employment position was a staff nurse.

Figure 2.11: LPN Primary Employment Position Description*
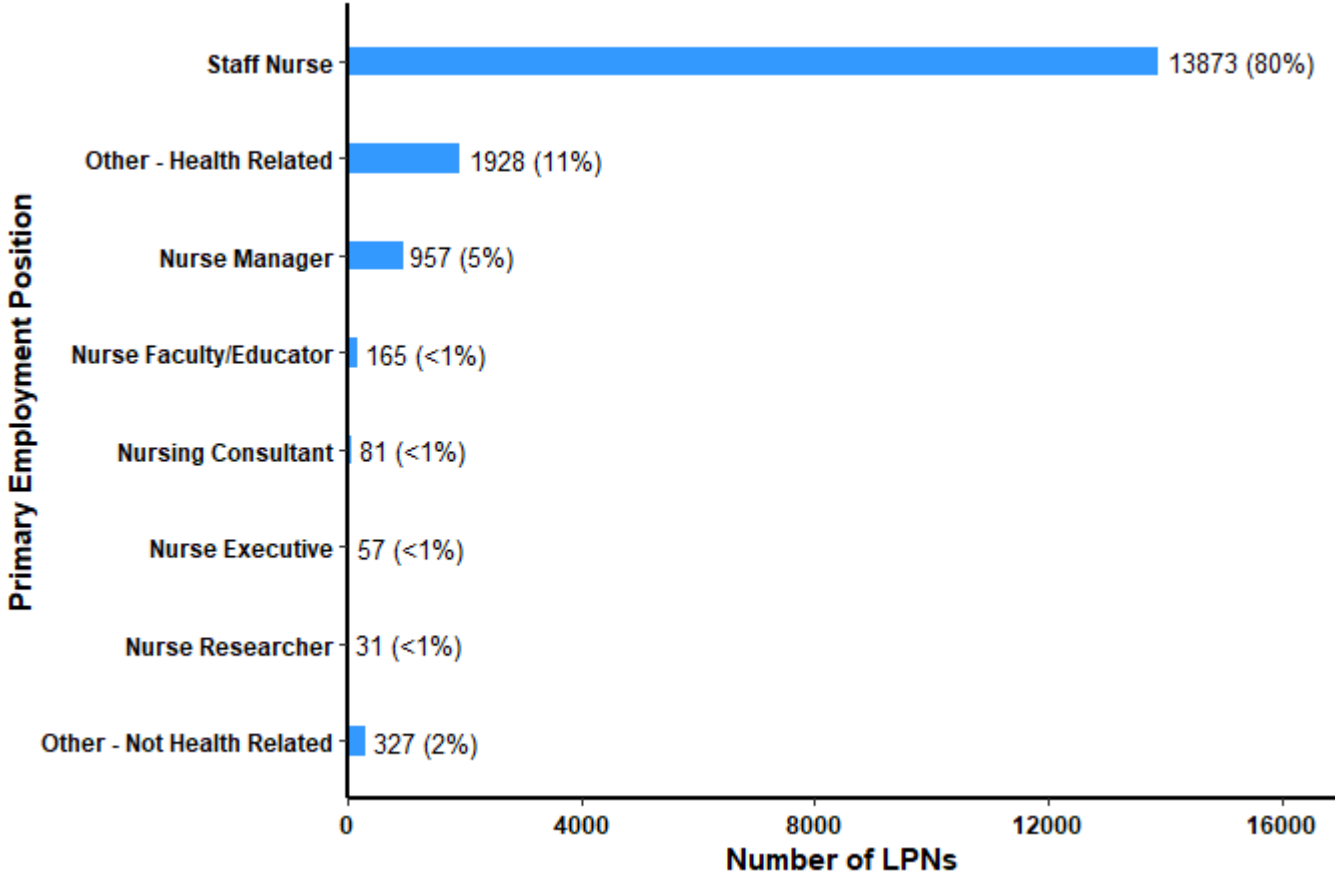
*The 3,630 missing/invalid data are excluded.

Employment Setting

Figure 2.12 depicts the primary employment setting of 16,668 LPN respondents. The figure shows 36% of the respondents reported a nursing home/extended care as their primary employment setting.

Figure 2.12: LPN Primary Employment Setting*
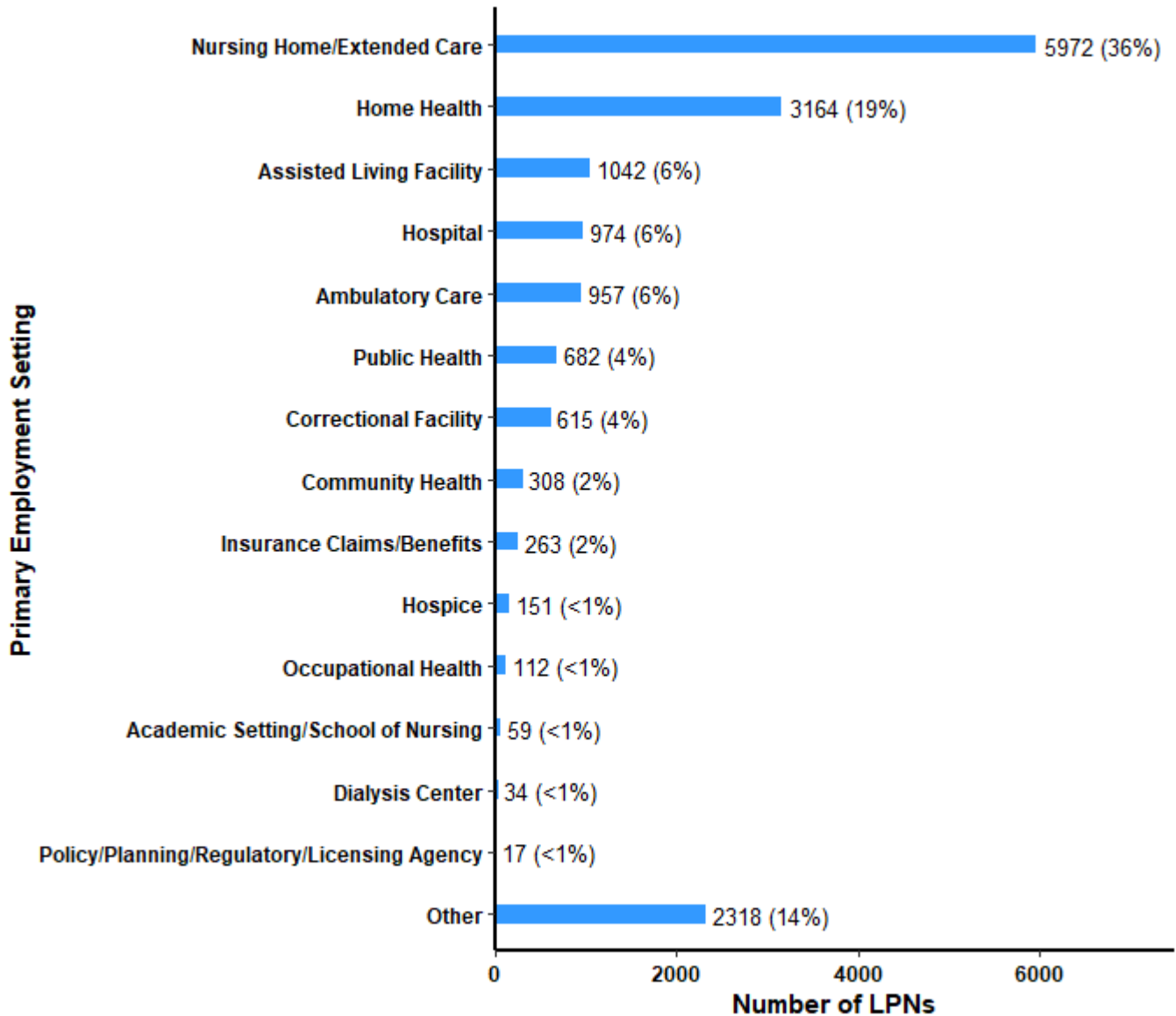
*The 4,399 missing data are excluded.

Employment Specialty

Figure 2.13 depicts the primary employment position specialty of 16,576 LPN respondents. Twenty-six percent reported geriatric/gerontology as their primary specialty.

Figure 2.13: LPN Primary Employment Position Specialty*
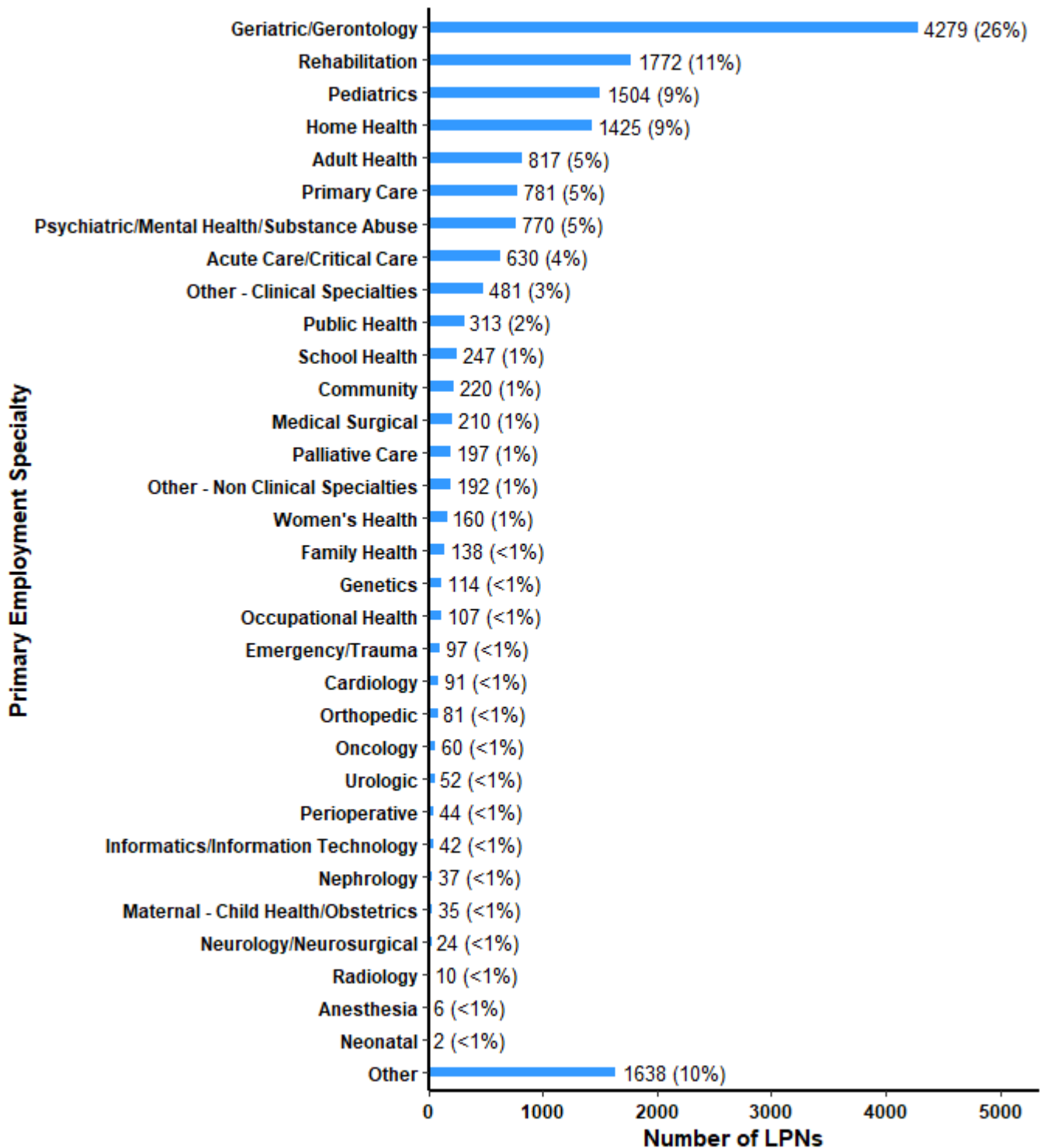
*The 4,491 missing data are excluded.

Employment by County

Table 2.24 shows the counties where LPN respondents were employed.

Table 2.24: LPN Employment by County

Employment County	Number of LPNs
Atlantic	828
Bergen	1,351
Burlington	1,123
Camden	1,237
Cape May	258
Cumberland	581
Essex	1,090
Gloucester	548
Hudson	378
Hunterdon	196
Mercer	853
Middlesex	1,305
Monmouth	1,248
Morris	756
Ocean	1,429
Passaic	530
Salem	152
Somerset	524
Sussex	191
Union	717
Warren	170

The 5,602 missing data are excluded*

Unemployment

Figure 2.14 shows that there were 3,031 LPNs who reported a reason for not being employed. Of those, 26% indicated "taking care of home and family" as their primary reason.

Figure 2.14: LPN Reason for Not Being Employed
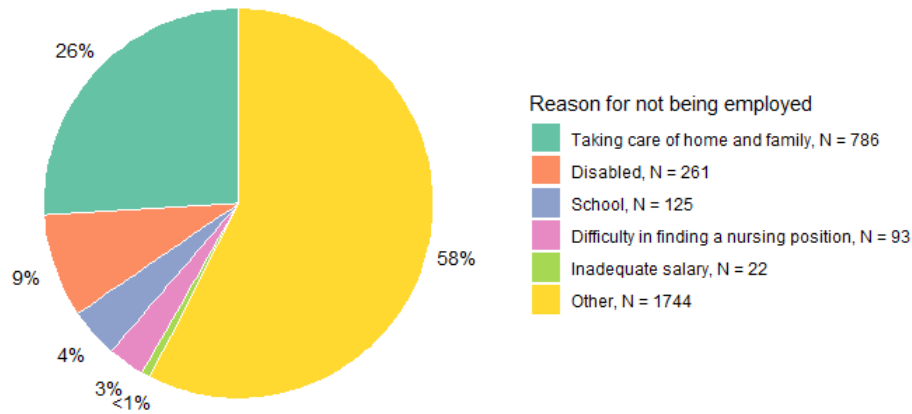
Retirement

NJCCN asked survey participants about their intention to retire within two years, prior to the next license renewal. There were 16,002 out of 21,067 LPN respondents who answered this question. In response, 4% of 16,002 LPN respondents indicated a plan to retire within this time frame.

Table 2.25 identifies LPN respondents who declared an intent to retire by age bracket. Of nurses who are 66-75 years old, 17% intend to retire; of nurses who are 76-85 year old, 17% intend to retire. The number of LPN respondents in each age bracket is different from the numbers in **Table 2.21** because **Table 2.25** only includes LPNs who reported their age **and** their intent to retire.

Table 2.25: LPN Intent to Retire According to Age

Age	LPN Respondents N=16,002	Intent to Retire N=688	*%
19-25	188	8	4
26-35	2,286	55	2
36-45	3,813	66	2
46-55	3,909	57	2
56-65	3,814	157	4
66-75	1,807	312	17
76-85	175	29	17
86+	10	4	40

*Percentages are calculated as intent to retire over the number of LPN respondents.

Nurse Licensure Compact*

New Jersey is a member of the Nurse Licensure Compact (NLC), which is an agreement among states that allows nurses to have one license but have the right to practice in any other states partaking in the agreement. Nurses who hold active, unencumbered nursing licenses issued by members of the NLC may practice in NJ. New Jersey licensed nurses may apply for a multistate license with the authority to practice in other Compact states by submitting an application for a License by Upgrade. A multistate Compact license will be issued if you meet the requirements. A single state NJ license may be issued if you do not meet the requirements for a Compact license. In short, a multi-state license allows the nurse to practice in the home state (the nurse's primary state of residence) and all compact states with one license issued by the home state.

To be eligible for a New Jersey (New Jersey as the home state) issued multistate license, you must:

- Meet the requirements for licensure in New Jersey (state of residency);

- Have graduated from a board-approved education program; or has graduated from an international education program (approved by the authorized accrediting body in the applicable country and verified by an independent credentials review agency);

- Have passed an English proficiency examination (applies to graduates of an international education program not taught in English or if English is not the individual's native language);

- Have passed an NCLEX-RN® or NCLEX-PN® Examination or predecessor exam;

- Be eligible for or holds an active, unencumbered license (i.e., without active discipline);

- Have submitted to state and federal fingerprint-based criminal background checks;

- Have not been convicted or found guilty, or has entered into an agreed disposition, of a felony offense under applicable state or federal criminal law;

- Have no misdemeanor convictions related to the practice of nursing (determined on a case-by-case basis);

- Not currently a participant in an alternative program;

- Be required to self-disclose current participation in an alternative program; and

- Have a valid United States Social Security number.

*Above information was obtained from NJBON (2022) Nurse Licensure Compact
Please visit: https://www.njconsumeraffairs.gov/nur/Pages/Nurse-Licensure.aspx

Figure 2.15 shows the map of 41 states which have enacted the Nurse Licensure Compact.

Figure 2.15: NLC Map

41 states have enacted the NLC
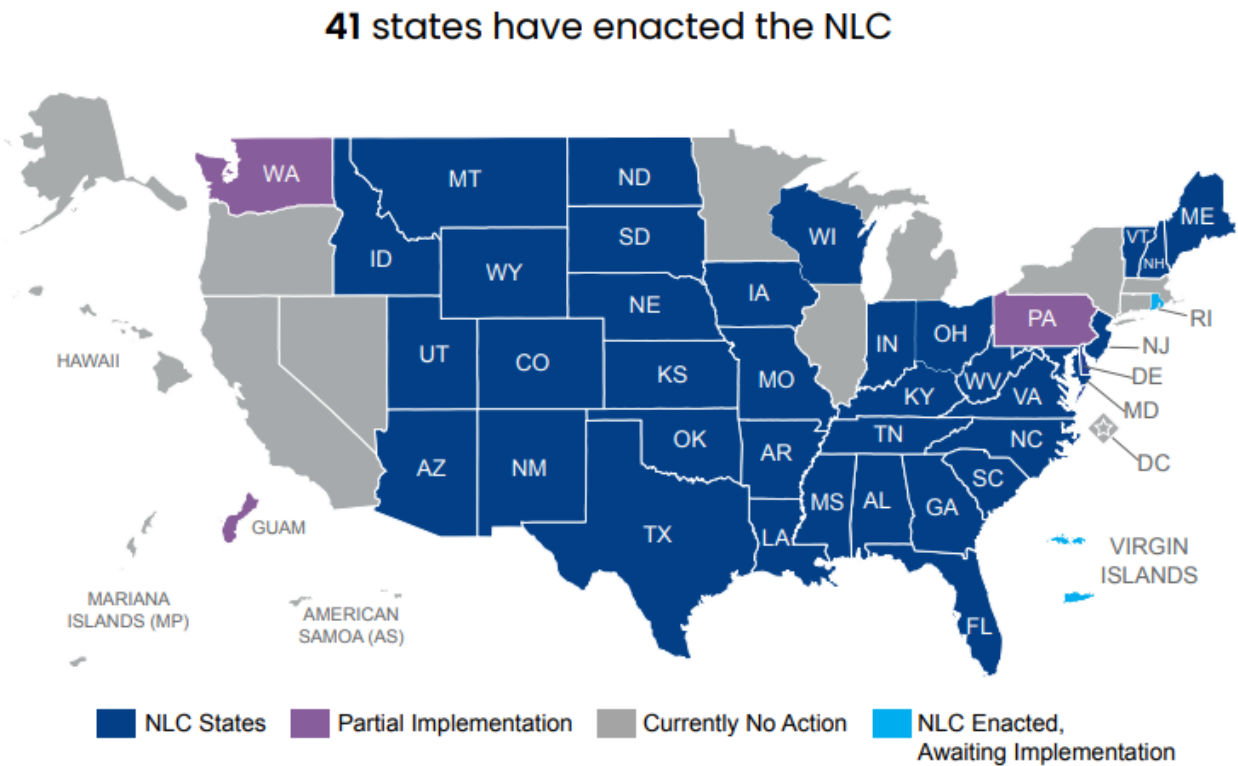
Note: This figure was obtained from National Council of State Boards of Nursing (NCSBN) website.
Please visit: https://www.ncsbn.org/compacts/nurse-licensure-compact.page

Table 2.26 shows the state license status and primary state of residency for 21,067 LPNs, 113,435 RNs, and 14,714 APNs.

Table 2.26: State License Status and Residency

	LPN N=21,067	RN N=113,435	APN N=14,714
(1)Single state, declared residency	19,480 (92%)	94,232 (83%)	10,500 (71%)
(2)Single state, didn't declare residency	1,197 (6%)	15,525 (14%)	3,757(26%)
(3)Multi-state compact license	390 (2%)	3,665 (3%)	207 (1%)
(4)Missing	0 (0%)	13 (<1%)	250 (2%)

See below to find explanation of categories (1), (2), and (3).

Definition of (1), (2), and (3):
(1) Those who hold a single state license and declared NJ as their primary state of residency.
(2) Those who hold a single state license and did not declare NJ as their primary state of residency - they are looking for a primary license in a non-compact state.
(3) Those who hold a multi-state compact license. APNs have to apply as a RN in NJ for multi-state licensure.

New Jersey Data from NCSBN National Survey

Every two years, the National Council of State Boards of Nursing (NCSBN) and the National Forum of State Nursing Workforce Centers conduct a national-level survey focused on the entire U.S. nursing workforce. The survey generates data on the supply of registered nurses (RNs) and licensed practical nurses (LPNs). This study involved mailing a randomized sample survey to licensed RNs and LPNs in most jurisdictions, including New Jersey. Data from RN and LPN respondents were collected between April 11, 2022, and September 30, 2022. Data included nurse demographics, educational attainment, employment, practice characteristics, and trends.

Results
In New Jersey, surveys were mailed to 5,304 RNs, yielding 861 responses (16.2% response rate). For LPNs, 5,228 surveys were mailed with 673 responses (12.9% response rate).

As shown in **Table 2.27**, the New Jersey (NJ) RN and LPN responses to the impact of COVID-19 on their employment were similar to the United States (US) RN and LPN responses. **Figure 2.15** shows the impact of COVID-19 on employment of RNs and LPNs.

Table 2.27: Impact of COVID-19 on Employment of RNs and LPNs

How did the COVID-19 pandemic impact your employment?	NJ RN	US RN	NJ LPN	US LPN
	n (%)	(%)	n (%)	(%)
My workload increased	467 (57)	62	361 (57)	63
I became a travel nurse	21 (3)	5	13 (2)	4
I changed my practice setting	118 (14)	16	51 (8)	11
I started doing telehealth	39 (5)	6	19 (3)	5
I left nursing	22 (3)	3	25 (4)	4
I retired	80 (10)	6	61 (10)	6
The COVID-19 pandemic did not impact my employment	119 (15)	12	91 (14)	14
Other	137 (17)	17	136 (22)	17

As shown in **Table 2.28** and **Table 2.29**, the majority of RN and LPN respondents indicated that they felt emotionally drained from their work, used up at the end of the workday, and fatigued from their work daily or once to a few times throughout the week. While a majority of RN respondents also indicated they were burned out from their work daily or once to a few times throughout the week.

Table 2.28: RN Feelings related to Current Job Role

How frequently you have each feeling in relation to your role at your job? n (%)	Every day n (%)	Once/few times a week n (%)	Once/few times a month n (%)	Never/Few times a year n (%)
I feel emotionally drained from my work	184 (23)	278 (35)	164 (21)	158 (20)
I feel used up at the end of the workday	213 (27)	268 (34)	147 (19)	152 (19)
I feel fatigued when I get up and have to face another day on the job	196 (25)	237 (30)	157 (20)	192 (25)
I feel burned-out from my work	180 (23)	223 (29)	143 (18)	233 (30)
I feel like I'm at the end of my rope	103 (13)	175 (23)	151 (19)	347 (45)

Table 2.29: LPN Feelings related to Current Job Role

How frequently you have each feeling in relation to your role at your job? n (%)	Every day n (%)	Once/few times a week n (%)	Once/few times a month n (%)	Never/Few times a year n (%)
I feel emotionally drained from my work	128 (22)	204 (35)	125 (21)	131 (22)
I feel used up at the end of the workday	167 (29)	176 (30)	112 (19)	124 (21)
I feel fatigued when I get up and have to face another day on the job	139 (24)	174 (30)	133 (23)	138 (24)
I feel burned-out from my work	136 (23)	149 (25)	121 (21)	179 (31)
I feel like I'm at the end of my rope	80 (14)	110 (19)	89 (15)	302 (52)

Chapter 3

Workforce Demand Data

Lightcast™ job postings data is gathered by scraping over 65,000 websites worldwide, including company career sites, national and local job boards, and job posting aggregators.

Lightcast™ applies a unique two-step approach to deduplication that results in up to 80% of all jobs we collect being deduplicated.

The first step: On a source-level basis, we use intelligence contained within the scraping spiders to identify a new advertisement for that source. The spiders refrain from collecting advertisements that have previously been aggregated.

The second step: As the same new advertisement can be found across multiple sources. We use normalized fields including job title, company, and location to check if these fields have been used in new advertisements found in another source. This is checked across 60 days of data to identify duplicates.

To illustrate 'step two', here is an example: if there is a job for a Marketing Specialist at Google posted for the first time on March 1st, Lightcast™ considers this as the 'original posting' then for the next 60 days Lightcast™ considers any advertisements found as duplicates. In theory, if Google posts the same ad every day for the entire year on different sources Lightcast™ will count it 6 times. Each job posting is further enriched with value-add processes including:

- Job title and company standardization

- Skill extraction and tagging

- SOC and NAICS code determination and assignment

- Education and experience determination

NJCCN used data mined from Lightcast ™ to determine demand for nurses in the state of New Jersey. All tables and figures in this chapter are attributed to Lightcast™. The O*Net-SOC taxonomy was used to standardize the occupation-specific indicators. The postings were reviewed and data cleaned to eliminate job titles and companies not within the parameters of a specific SOC Code or postings outside of New Jersey.

Table 3.1 shows the demand summary for Registered Nurses, Nurse Practitioners, and Licensed Practical Nurse.

The following table illustrates the anticipated number of FTEs that will be in demand over the next 10 years (2022-2032). Turnover rates are calculated by comparing total separations to total jobs (separations divided by jobs). There is a high turnover in all 3 occupations which then translates to high demand. There was an increase in the median annual earnings in all three occupations for 2022 as compared to 2021.

Table 3.1: Demand by Occupation Summary - 2022

Category		Demand and Employment				Salary
SOC Code (ONET-6)	**Occupation Title**	**Number of jobs 2022**	**Number of jobs 2032**	**% Change in** Employment 2022-2032	**Turnover Rate 2022**	**Median Annual Salary**
29-1141	Registered Nurses	78,820	87,614	11%	26%	98,092
29-1171	Nurse Practitioners	6,678	9,989	50%	24%	136,468
29-2061	Licensed Practical & Licensed Vocational Nurses	16,294	18,020	11%	46%	61,464

Registered Nurse (RN) Demand Profile

Job Postings

According to **Figure 3.1**, there were 41,414 total job postings and 9,921 unique job postings for Registered Nurse (RN) in 2022. The median posting duration was 25 days, which is shorter than the regional average of 28 days. Posting intensity is the ratio of total job postings to unique (de-duplicated) job postings. The job posting intensity of 4:1 means that there were 4 job postings for every 1 unique RN position.

Figure 3.1: RN Job Posting Overview

9,921	775
Unique Postings ❓	Employers Competing ❓
41,414 Total Postings	43,576 Total Employers
25 Days	4 : 1
Median Posting Duration ❓	Posting Intensity ❓
Regional Average: 28 Days	Regional Average: 3 : 1
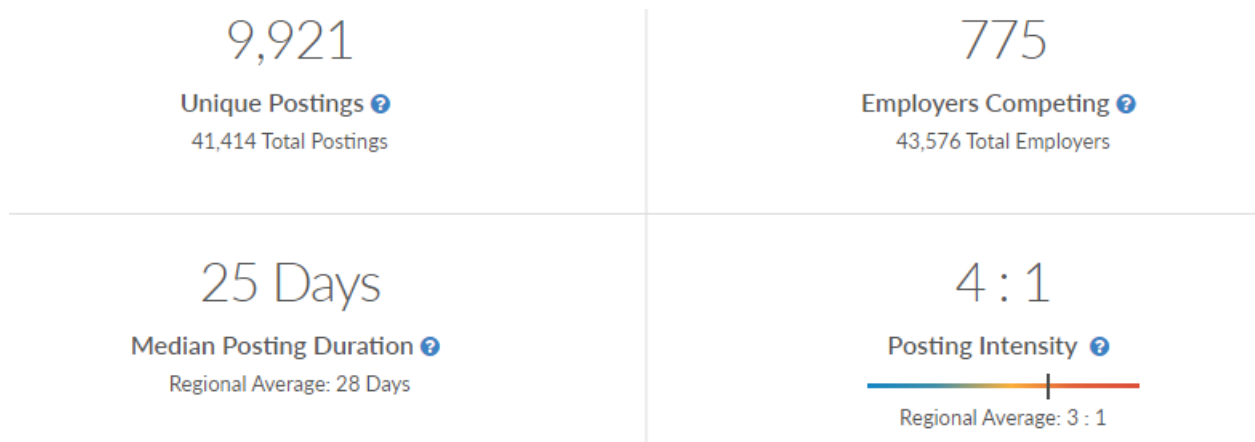
Figure 3.2 shows the time series of unique RN job postings for 5 years from October 2018 through October 2023. The section in yellow highlights the time frame from January 2022 through December 2022.

Figure 3.2: RN Job Posting Time Series 2018-2023
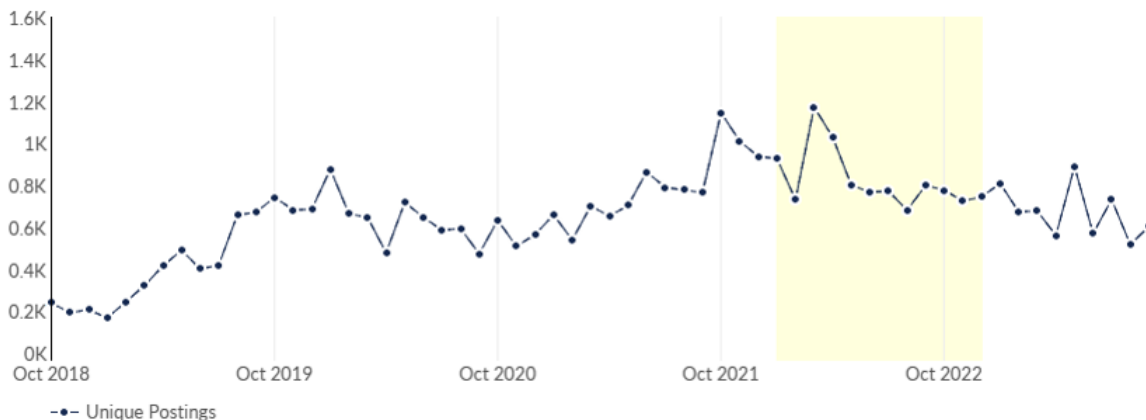
-•- Unique Postings

Table 3.2 shows the monthly number of unique RN job postings from January 2022 to September 2023. The number of unique postings was highest in March and April of 2022 which is consistent with last year's report. Posting intensity is the ratio of total job postings to unique (de-duplicated) job postings.

Table 3.2: Monthly Unique RN Job Posting Trend

Month	Unique Job Postings	Posting Intensity
Jan 2022	927	4:1
Feb 2022	731	5:1
Mar 2022	1,173	4:1
Apr 2022	1,028	4;1
May 2022	800	4:1
Jun 2022	767	5:1
Jul 2022	771	4:1
Aug 2022	681	4:1
Sep 2022	799	4:1
Oct 2022	776	3:1
Nov 2022	724	3:1
Dec 2022	744	5:1
Jan 2023	808	3:1
Feb 2023	673	3:1
Mar 2023	677	3:1
Apr 2023	560	4;1
May 2023	889	3:1
Jun 2023	570	4:1
Jul 2023	731	3:1
Aug 2023	518	4:1
Sep 2023	602	3:1

Positions in Demand

Figure 3.3 and **Figure 3.4** compare the top RN positions for 2022 and 2021 in most demand. **Figure 3.3** shows the top 25 positions in demand in 2022. In addition to the 2,017 positions that were categorized as RN unique postings, the nursing leadership positions (nurse managers and nurse supervisors) had 1,114 unique postings, which is greater than in 2021.

Figure 3.3: Top 25 RN Positions in Demand (2022)
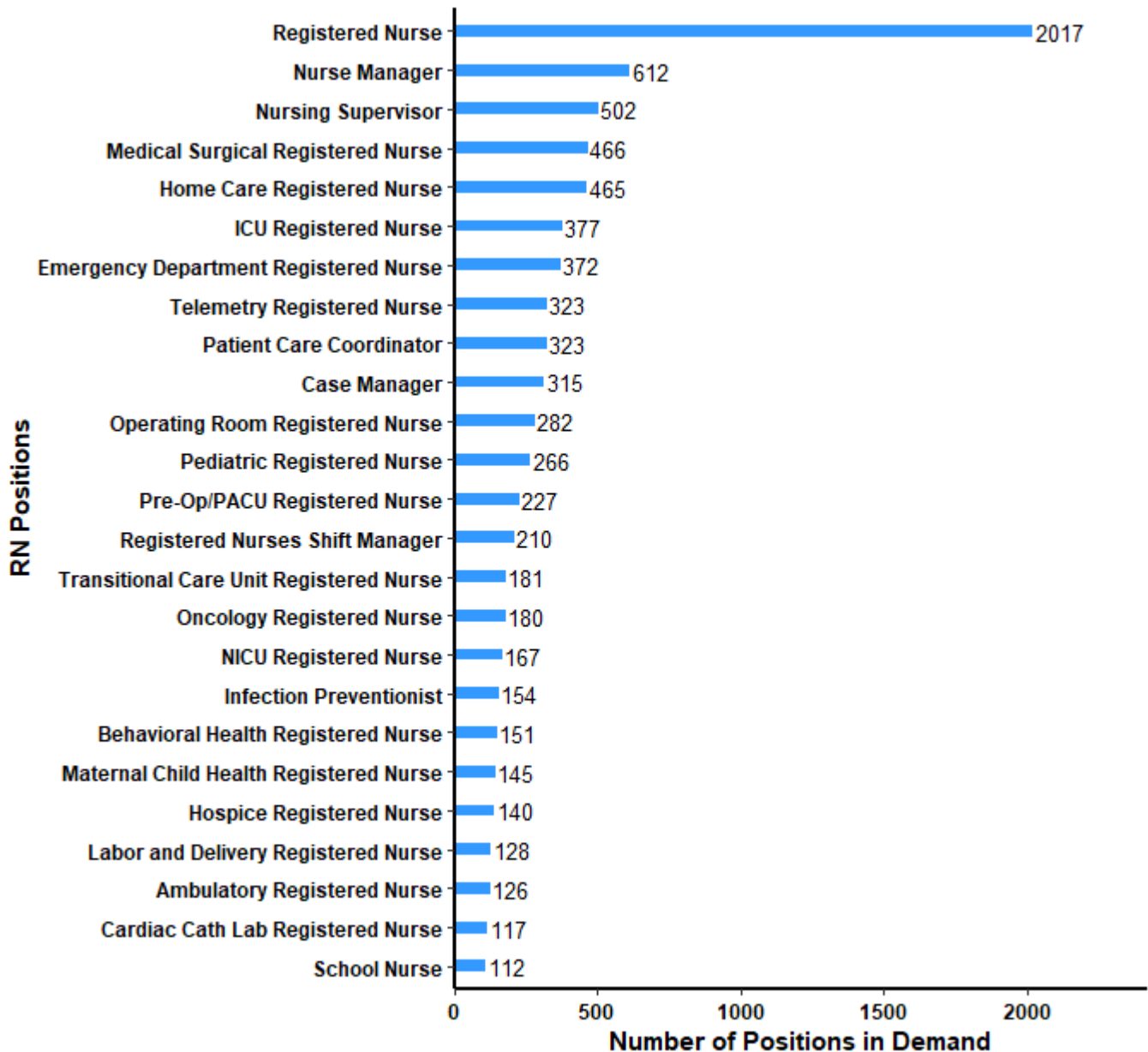
Figure 3.4 shows the top 20 positions in demand in 2021.

Figure 3.4: Top 20 RN Positions in Demand (2021)
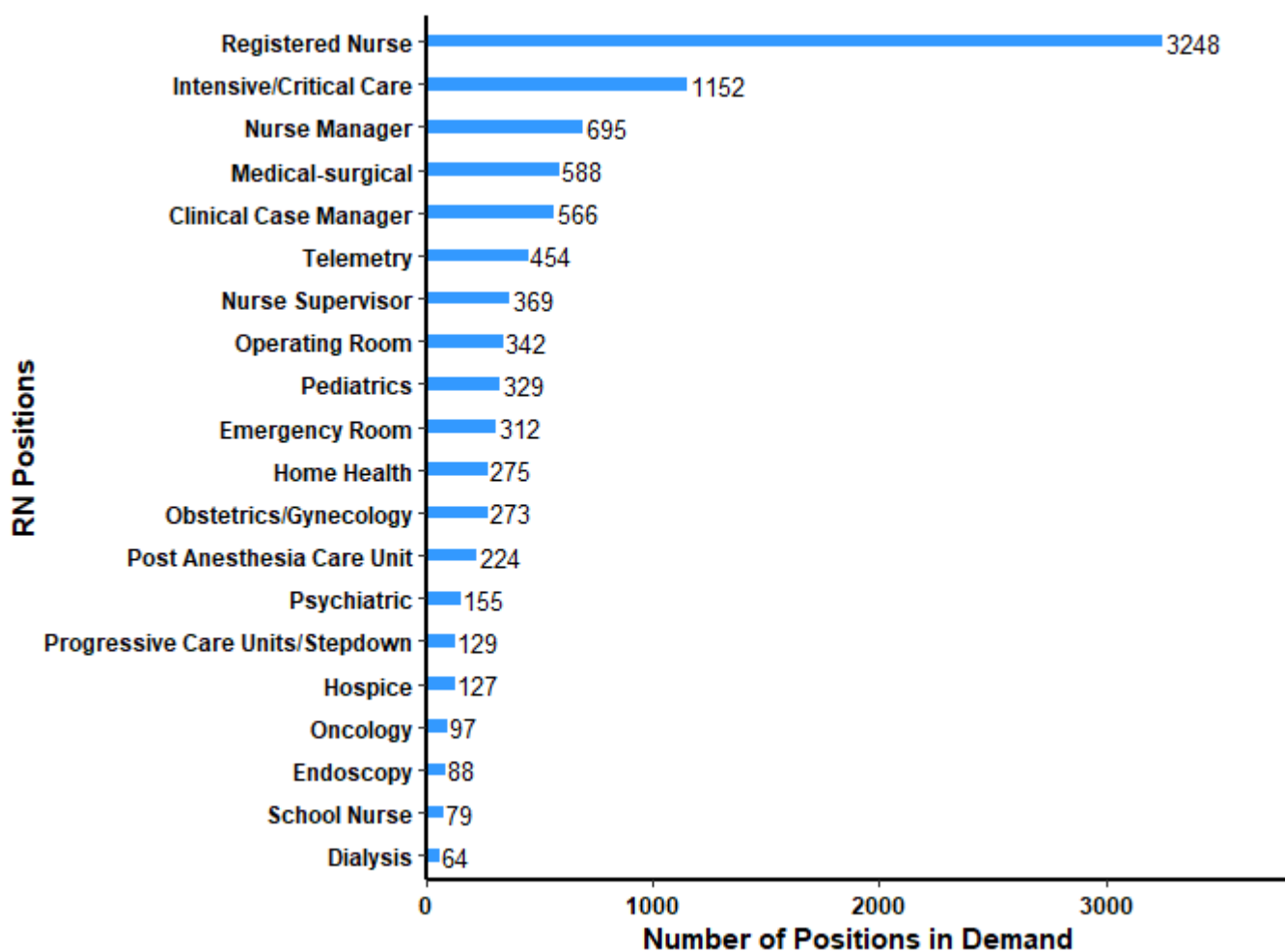
Employer

Figure 3.5 shows the top 25 employers with the greatest number of unique job postings (n=7,215) for RNs in 2022. Hospital employers were combined under their healthcare system where applicable. Greater number of unique postings may reflect a high rate of turnover or a high demand for employees.

Figure 3.5: Top 25 Employers of RNs
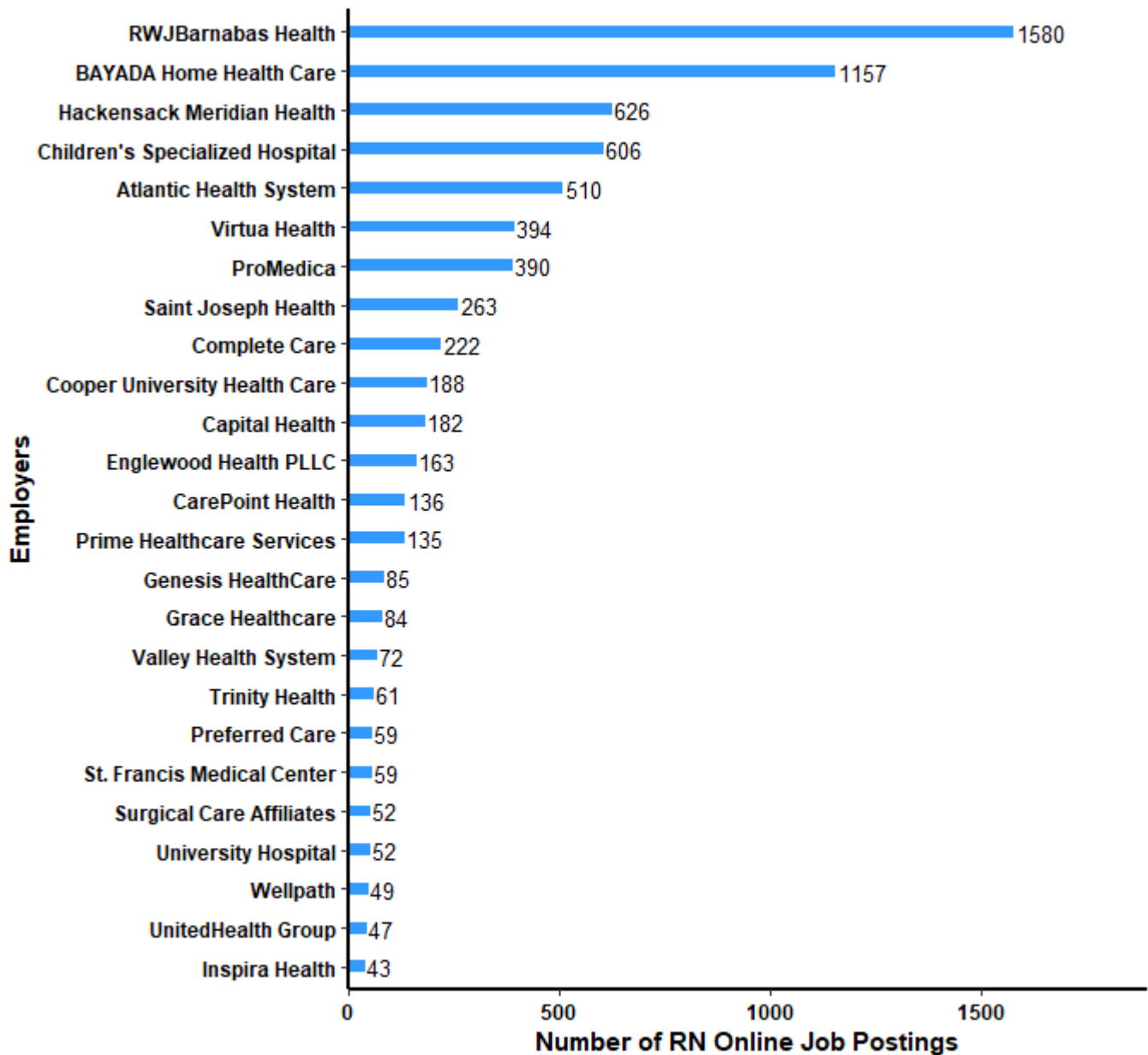
National Demand Comparison

January 1, 2022 - December 31, 2022

Figure 3.6 shows the level of demand for RNs across the United States from January 1, 2022 through December 31, 2022. Posting concentrations shows the concentration of job postings in a region relative to the national average. This can be used to determine if the job posting concentration is high or low in a region compared to the nation. A concentration score greater than one indicates that posting in the region has a high concentration. Scores lower than one indicate posting concentration is lower than the national average.

Figure 3.6: National Demand Map for RNs
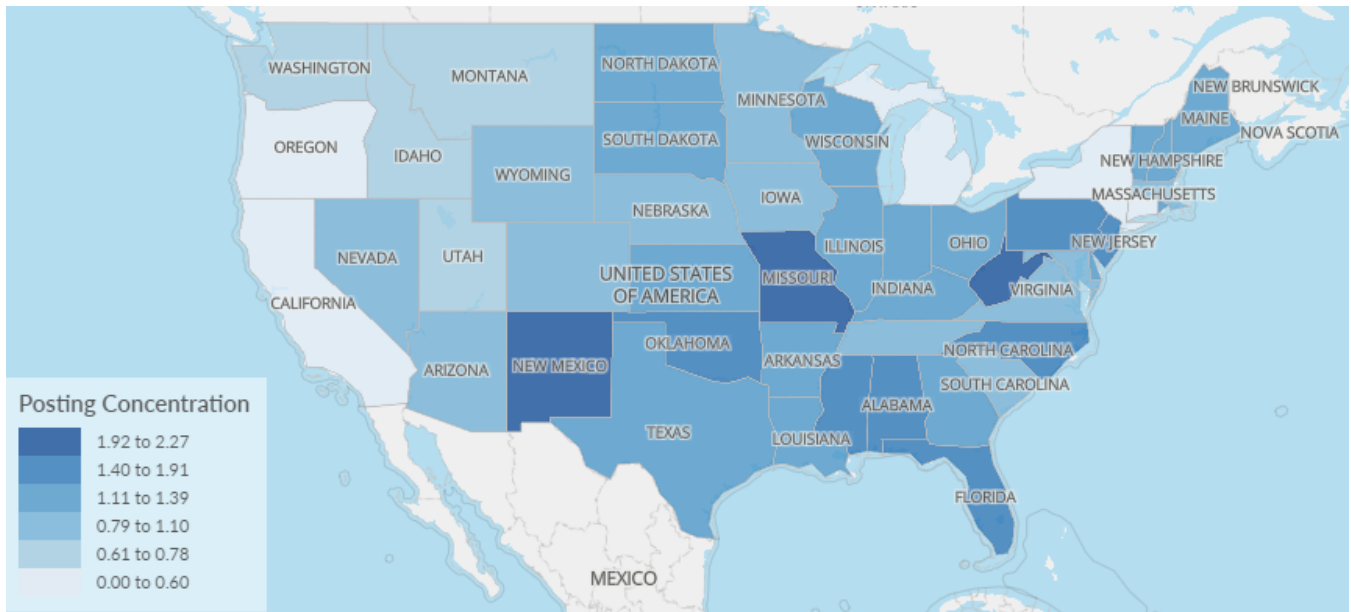
New Jersey has a high posting concentration of 1.61 which placed it as the 5th highest in the U.S. The states with the highest posting concentration were West Virginia (2.27), Missouri (1.89), New Mexico (1.84), Alabama (1.65), and New Jersey (1.61). The states with the lowest posting concentration were Michigan (0.33), California (0.34), New York (0.34), the District of Columbia (0.39), and Connecticut (0.44).

Job Postings by NJ County

January 1, 2022 - December 31, 2022

Table 3.3 and **Figure 3.7** show the county-level data for the raw number of unique job postings and demand concentration for RNs in 2022. There were a total of 9,921 unique RN job postings in 2022. The counties with the highest demand concentration were Ocean (4.08), Camden (2.43), Essex (2.29), Salem (2.29), and Cape May (2.27). All counties in NJ were above a 1.0 posting concentration. The counties with the greatest number of unique RN job postings were Essex (1,381), Camden (852), and Bergen (773).

Table 3.3: Demand for RNs by NJ County

County	Unique Job Postings	Demand Concentration
Atlantic	149	1.37
Bergen	773	1.11
Burlington	529	1.82
Camden	852	2.43
Cape May	50	2.27
Cumberland	99	1.94
Essex	1,381	2.29
Gloucester	147	1.03
Hudson	673	1.06
Hunterdon	94	1.40
Mercer	642	1.51
Middlesex	770	1.11
Monmouth	575	1.95
Morris	693	1.45
Ocean	615	4.08
Passaic	567	2.11
Salem	52	2.29
Somerset	293	1.04
Sussex	109	1.19
Union	691	1.71
Warren	81	2.03

*86 unclassified postings

Figure 3.7 shows the level of demand for RNs across New Jersey from January 1, 2022 through December 31, 2022.

Figure 3.7: Demand Map for RNs by NJ County
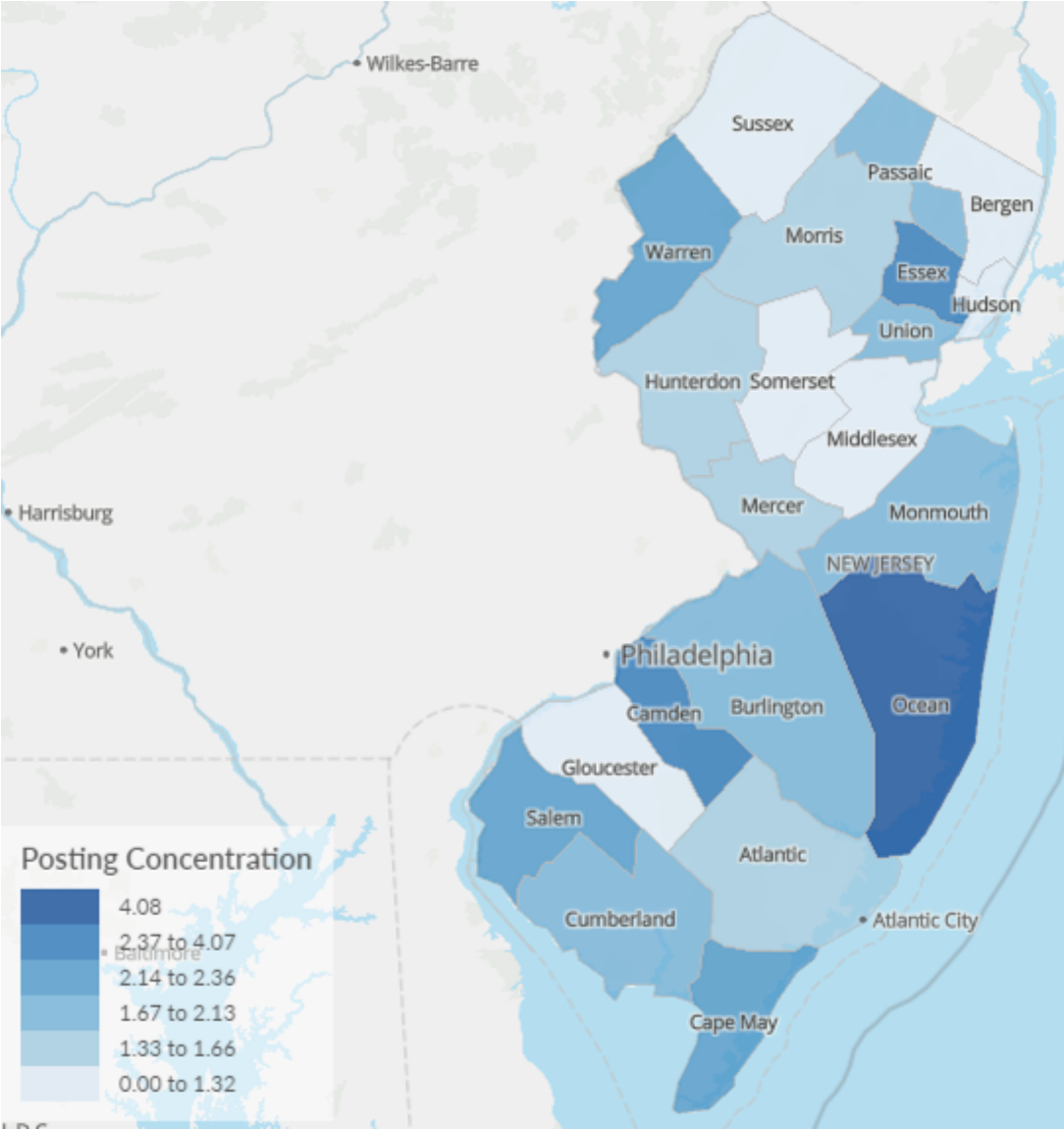
Nurse Practitioner (NP) Demand Profile

Job Postings

According to **Figure 3.8**, there were 7,245 total job postings and 2,955 unique job postings for Nurse Practitioner (NP). The median posting duration was 28 days. Posting intensity is the ratio of total job postings to unique (de-duplicated) job postings. The job posting intensity of 2:1 means that there were 2 job postings for every 1 unique NP position.

Figure 3.8: NP Posting Overview

2,955	477
Unique Postings	**Employers Competing**
7,245 Total Postings	43,576 Total Employers
28 Days	**2 : 1**
Median Posting Duration	**Posting Intensity**
Regional Average: 28 Days	Regional Average: 3 : 1
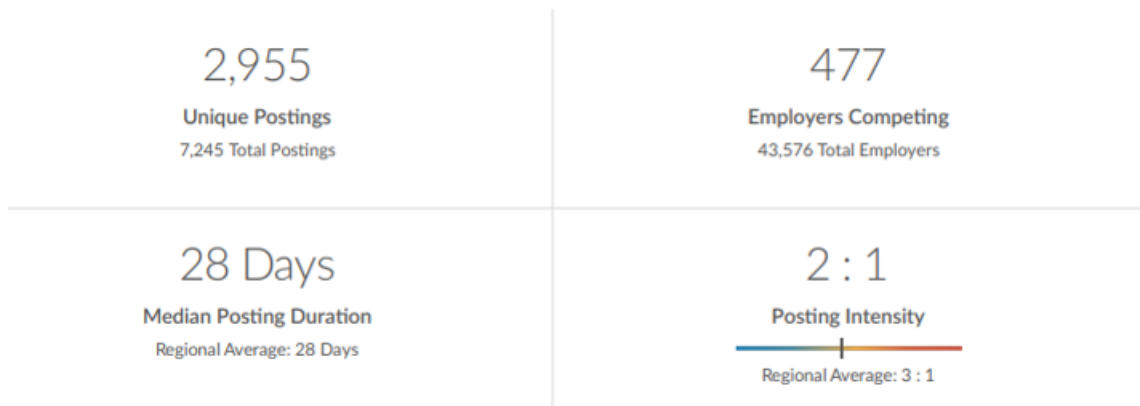
Figure 3.9 shows the time series of unique NP job postings for 5 years from October 2018 through October 2023. The section in yellow highlights the time frame from January 2022 through December 2022.

Figure 3.9: NP Job Posting Time Series 2018-2023

-•- Unique Postings

73
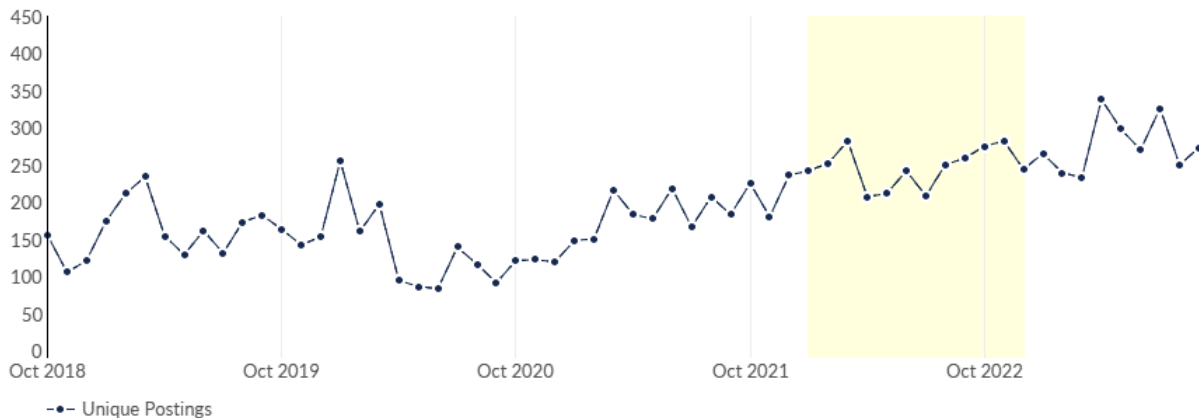
Table 3.4 shows the monthly number of unique NP job postings from January 2022 to present. The number of monthly unique NP postings was stable in 2022. The posting trend goes beyond 2022 into 2023 with some increased posting numbers noted. Posting intensity is the ratio of total job postings to unique (de-duplicated) job postings.

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Table 3.4: Monthly Unique NP Job Posting Trend

Month	Unique Job Postings	Posting Intensity
Jan 2022	242	2:1
Feb 2022	252	2:1
Mar 2022	282	2:1
Apr 2022	207	3;1
May 2022	211	2:1
Jun 2022	242	3:1
Jul 2022	208	3:1
Aug 2022	250	2:1
Sep 2022	259	2:1
Oct 2022	275	2:1
Nov 2022	282	3:1
Dec 2022	244	2:1
Jan 2023	265	3:1
Feb 2023	239	2:1
Mar 2023	233	4:1
Apr 2023	338	3;1
May 2023	298	3:1
Jun 2023	270	4:1
Jul 2023	326	3:1
Aug 2023	250	3:1
Sep 2023	273	2:1

</div>

Employer

Figure 3.10 shows the top 25 employers with the greatest number of unique job postings (n=1,758) for NPs in 2022. Hospital employers were combined under their healthcare system where applicable. Greater number of unique postings may reflect a high rate of turnover or a high demand for employees.

Figure 3.10: Top 25 Employers of NPs
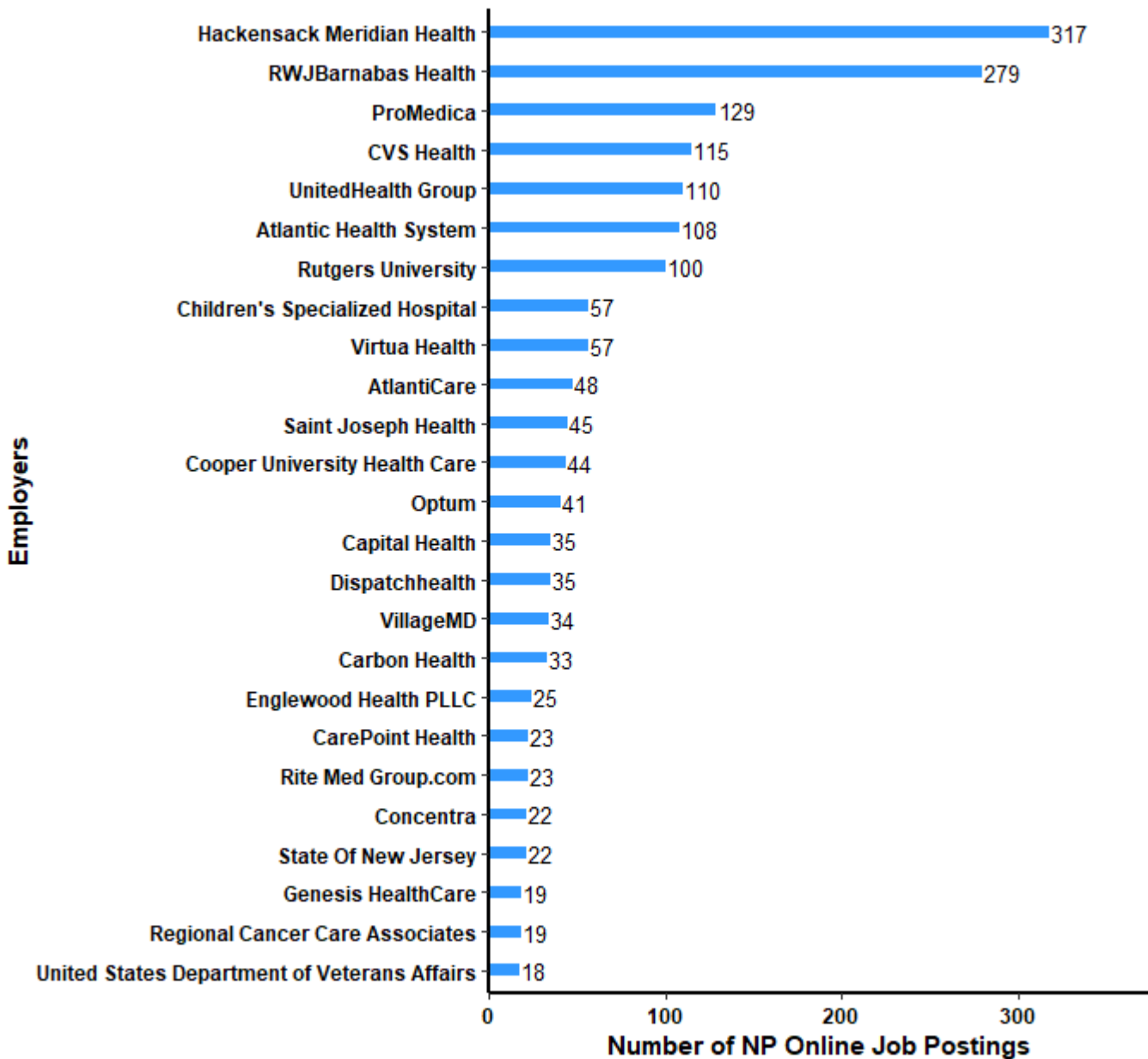
National Demand Comparison

January 1, 2022 - December 31, 2022

Figure 3.11 shows the level of demand for NPs across the United States from January 1, 2022 through December 31, 2022. Posting concentrations shows the concentration of job postings in a region relative to the national average. This can be used to determine if the job posting concentration is high or low in a region compared to the nation. A concentration score greater than one indicates that posting in the region has a high concentration. Scores lower than one indicate posting concentration is lower than the national average.

Figure 3.11: National Demand Map for NPs
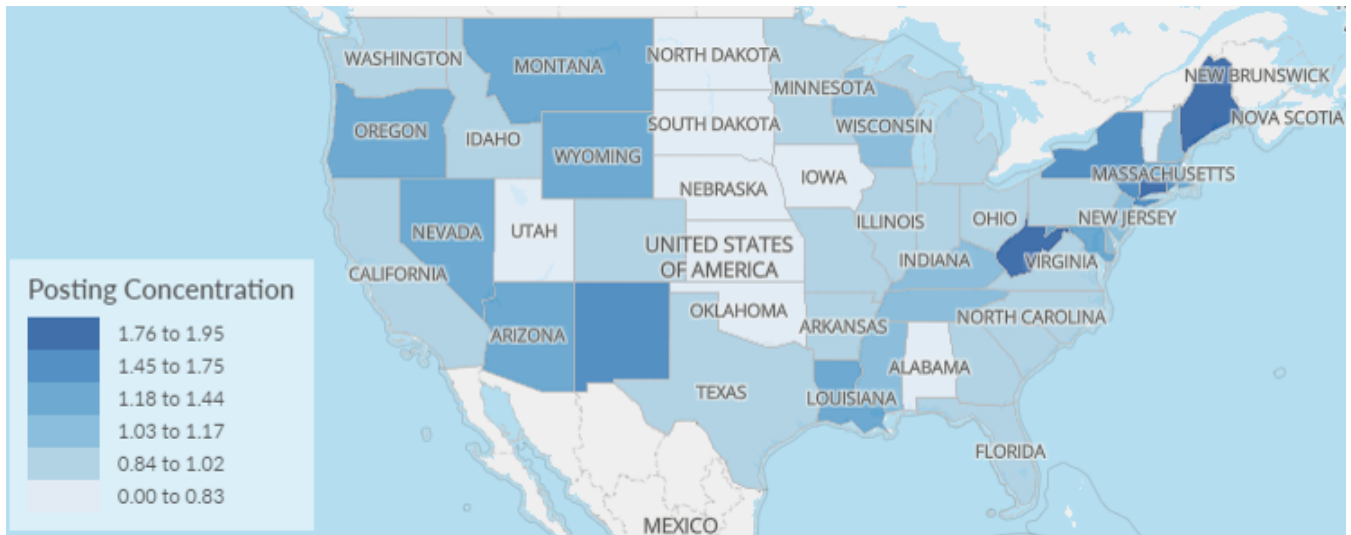
New Jersey has a posting concentration of 1.09 and ranked 20th in the nation. The states with the highest positing concentration were West Virginia (1.96), Connecticut (1.89), Maine (1.75), New Mexico (1.58) and New York (1.49). The states with the lowest posting concentration were Kansas (0.56), Vermont (0.59). South Dakota (0.61) Utah (0.62) and Iowa (0.63).

Job Postings by NJ County

January 1, 2022 - December 31, 2022

Table 3.5 and **Figure 3.12** show county-level data for the raw number of unique job postings and demand concentration for NPs in 2022. There were a total of 2,955 unique NP job postings in 2022. The counties with the highest demand concentration were Atlantic (2.51), Monmouth (2.07), Essex (1.43), Camden (1.38), and Passaic (1.35). The counties with the greatest number of unique NP job postings were Essex (378), Bergen (318), and Middlesex (298).

Table 3.5: Demand for NPs by NJ County

County	Unique Job Postings	Demand Concentration
Atlantic	120	2.51
Bergen	318	1.04
Burlington	156	1.22
Camden	213	1.38
Cape May	11	1.14
Cumberland	25	1.12
Essex	378	1.43
Gloucester	61	0.97
Hudson	193	0.69
Hunterdon	20	0.63
Mercer	103	0.55
Middlesex	298	0.98
Monmouth	269	2.07
Morris	189	0.90
Ocean	87	1.31
Passaic	160	1.35
Salem	8	0.80
Somerset	92	0.75
Sussex	50	1.25
Union	188	1.06
Warren	11	0.63

*5 unclassified postings

Figure 3.12 shows the level of demand for NPs across New Jersey from January 1, 2022 through December 31, 2022.

Figure 3.12: Demand Map for NPs by NJ County
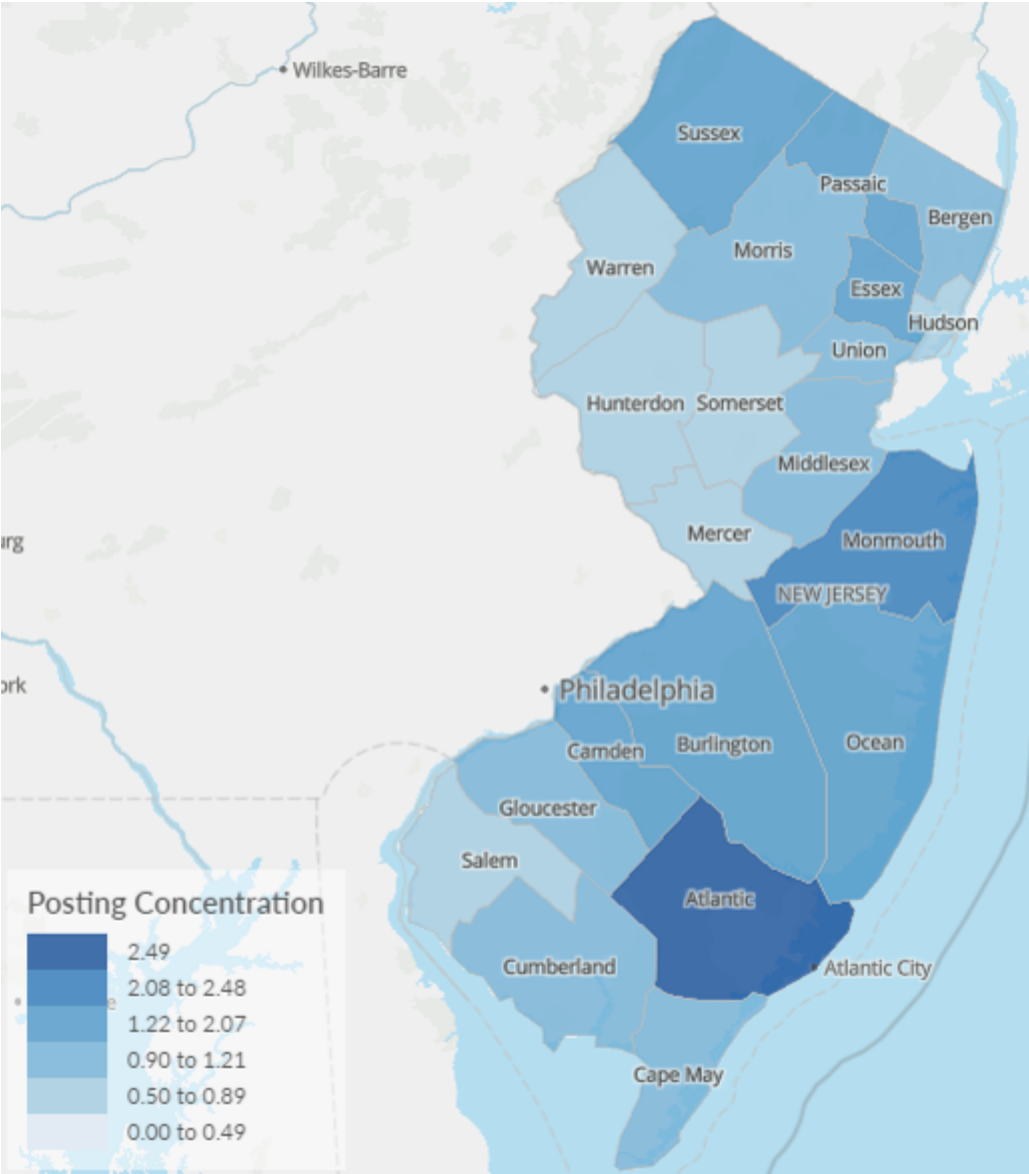
Licensed Practical Nurse (LPN) Demand Profile

Job Postings

According to **Figure 3.13**, there were 9,081 total job postings and 2,816 unique job postings for Licensed Practical Nurse (LPN). The median posting duration was 25 days. Posting intensity is the ratio of total job postings to unique (de-duplicated) job postings. The job posting intensity of 3:1 means that there were 3 job postings for every 1 unique LPN position.

Figure 3.13: LPN Posting Overview
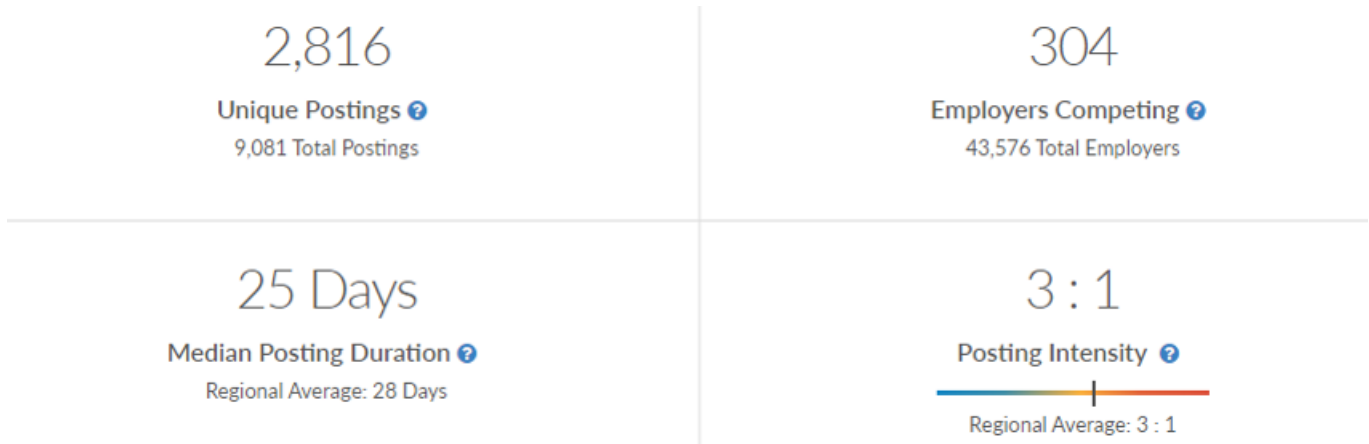
Figure 3.14 shows the time series of unique LPN job postings for 5 years from October 2018 through October 2023. The section in yellow highlights the time frame from January 2022 throuth December 2022.

Figure 3.14: LPN Job Posting Time Series 2018-2023
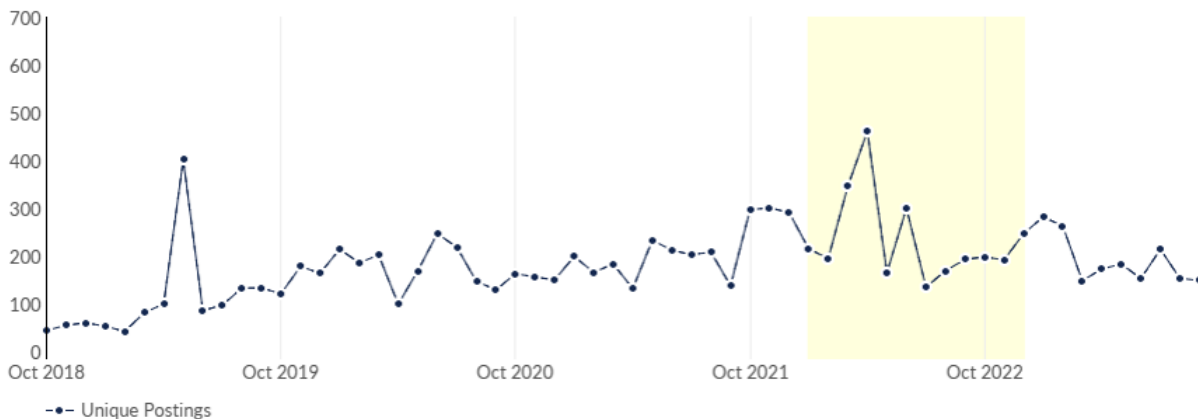
Table 3.6 shows the monthly number of unique LPN job postings from January 2022 to present. The number of monthly unique LPN postings was highest in March and April of 2022. The unique postings in these months reflect the top employer postings which may account for the high unique posting number. Posting intensity is the ratio of total job postings to unique (de-duplicated) job postings.

Table 3.6: Monthly Unique LPN Job Posting Trend

Month	Unique Job Postings	Posting Intensity
Jan 2022	215	3:1
Feb 2022	195	4:1
Mar 2022	346	2:1
Apr 2022	461	3;1
May 2022	165	4:1
Jun 2022	300	2:1
Jul 2022	135	3:1
Aug 2022	169	3:1
Sep 2022	193	4:1
Oct 2022	198	4:1
Nov 2022	192	4:1
Dec 2022	247	4:1
Jan 2023	282	3:1
Feb 2023	263	2:1
Mar 2023	148	5:1
Apr 2023	173	4;1
May 2023	183	3:1
Jun 2023	153	3:1
Jul 2023	214	3:1
Aug 2023	153	3:1
Sep 2023	149	2:1

Employer

Figure 3.15 shows the top 25 employers with the greatest number of unique job postings (n=2,070) for LPNs in 2022. Hospital employers were combined under their healthcare system where applicable. Greater number of unique postings may reflect a high rate of turnover or a high demand for employees.

Figure 3.15: Top 25 Employers of LPNs
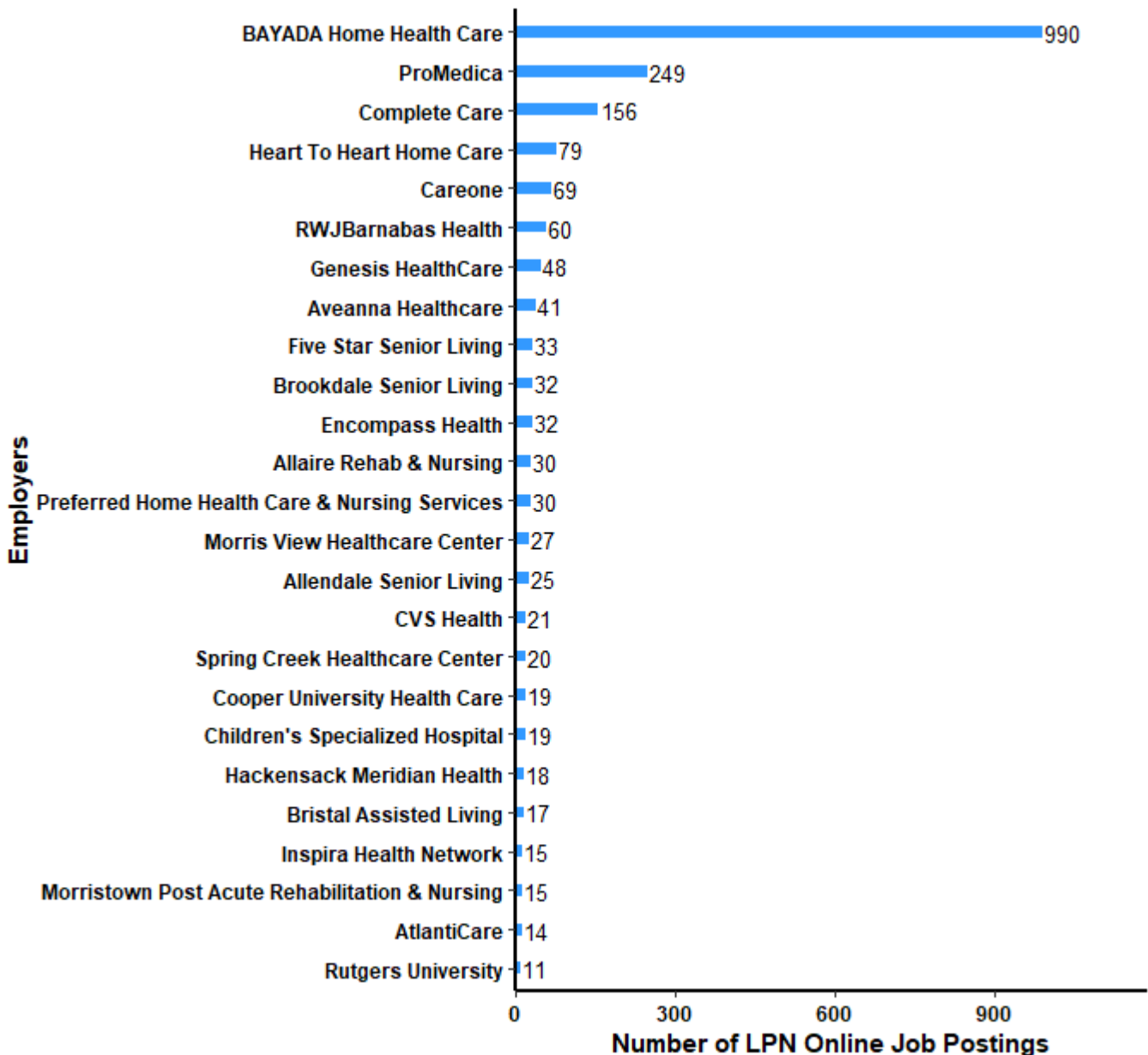
National Demand Comparison

January 1, 2022 - December 31, 2022

Figure 3.16 shows the level of demand for LPNs across the United States from January 1, 2022 through December 31, 2022. Posting concentrations shows the concentration of job postings in a region relative to the national average. This can be used to determine if the job posting concentration is high or low in a region compared to the nation. A concentration score greater than one indicates that posting in the region has a high concentration. Scores lower than one indicate posting concentration is lower than the national average.

Figure 3.16: National Demand Map for LPNs
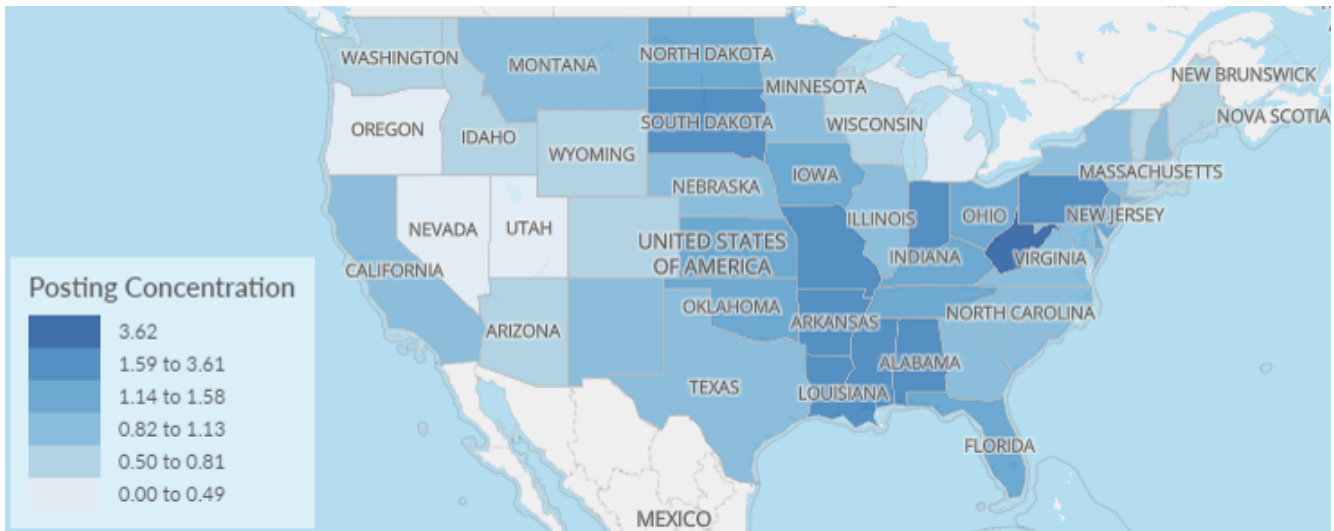
New Jersey has a posting concentration of 1.14 and ranked 19th in the nation. The states that have the highest posting concentration were West Virginia (3.34), Mississippi (2.11), Pennsylvania (1.83), Alabama (1.73), and South Dakota (1.71). The states with the lowest posting concentration were the District of Columbia (0.16), Alaska (0.23), Utah (0.24), Michigan (0.28), and Hawaii (0.34).

Job Postings by NJ County

January 1, 2022 - December 31, 2022

Table 3.7 and **Figure 3.17** show county-level data for the raw number of unique job postings and demand concentration for LPNs in 2022. There were a total of 2,816 unique LPN job postings in 2022. The counties with the highest demand concentration were Cape May (3.76), Ocean (3.17), Salem (3.09), Cumberland (2.90), and Gloucester (2.01). The counties with the lowest demand concentration were Somerset (0.46), Hudson (0.47), Middlesex (0.73), Morris (0.80), and Mercer (0.84). The counties with the greatest number of unique LPN job postings were Camden (272), Bergen (256), and Essex (249).

Table 3.7: Demand for LPNs by NJ County

County	Unique Job Postings	Demand Concentration
Atlantic	68	1.56
Bergen	256	0.92
Burlington	170	1.47
Camden	272	1.94
Cape May	33	3.76
Cumberland	59	2.9
Essex	249	1.03
Gloucester	115	2.01
Hudson	118	0.47
Hunterdon	49	1.83
Mercer	143	0.84
Middlesex	203	0.73
Monmouth	224	1.90
Morris	152	0.80
Ocean	191	3.17
Passaic	196	1.82
Salem	28	3.09
Somerset	52	0.46
Sussex	52	1.42
Union	151	0.93
Warren	32	2.01

*3 unclassified postings

Figure 3.17 shows the level of demand for LPNs across New Jersey from January 1, 2022 through December 31, 2022.

Figure 3.17: Demand Map for LPNs by NJ County
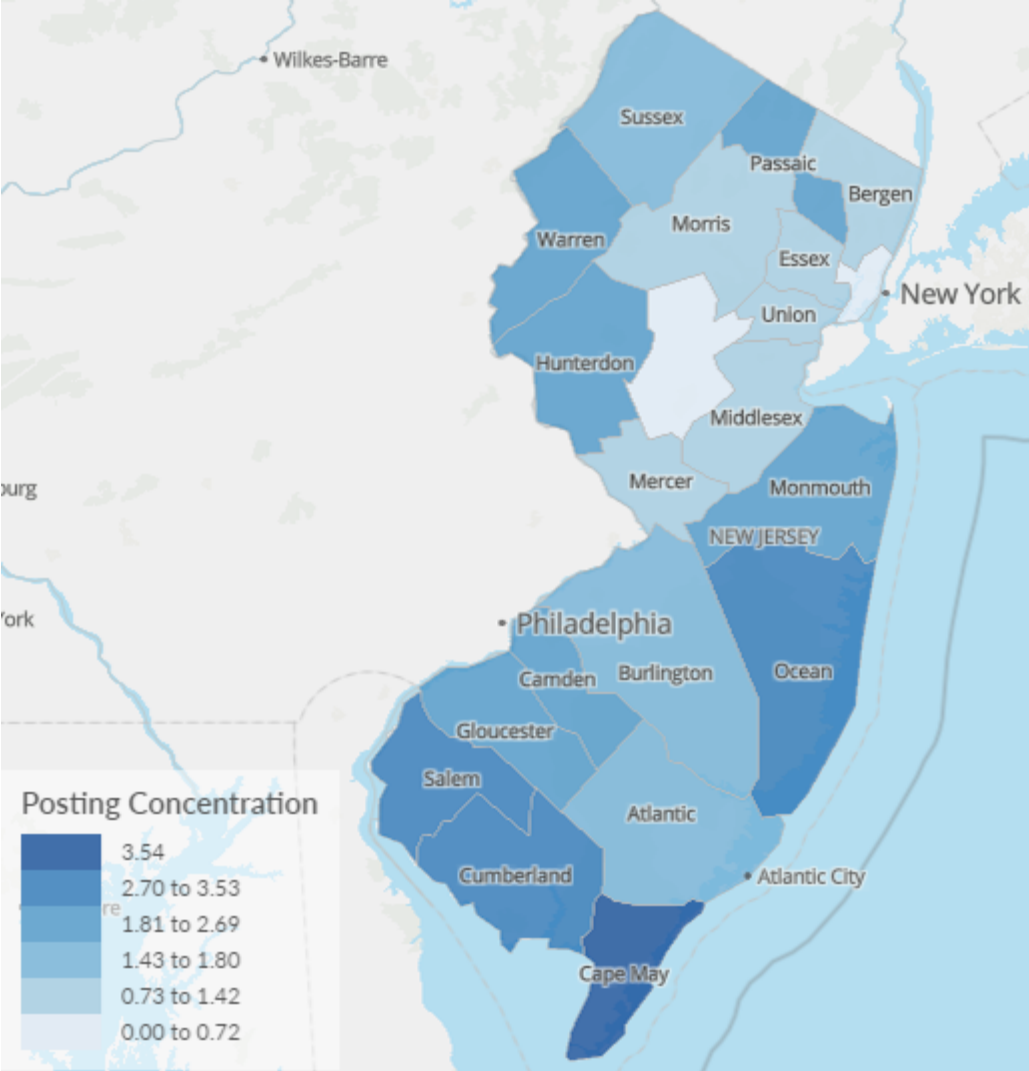
Appendices

Glossary

- **Accelerated BSN Nursing Program (2nd Degree):** A program of instruction that admits students who have already completed a bachelors or graduate degree in non-nursing discipline, and at completion, awards a baccalaureate degree in nursing and eligibility to apply for licensure as an RN. These fast-track entry-level baccalaureate programs take between 11 and 18 months to complete. (American Association of Colleges of Nursing)

- **Admitted Applicants:** A count of the individuals who received official notice from the program that they were invited to begin the nursing program during the reporting period.

- **ADN Bridge, LPN to RN Program** A program of instruction that is specifically designed to admit individuals licensed as practical nurses and, at completion, awards an associate degree in nursing or baccalaureate degree in nursing and eligibility to apply for licensure as a RN.

- **ADN Program, Generic:** A program of instruction that requires at least two years of full-time college academic work generally within a junior or community college, the completion of which results in an associate degree (e.g., AS, AA, AAS, ADN, etc.) with a major in nursing and eligibility to apply for licensure as a RN.

- **Available Seats:** A count of the total number of seats available for newly admitted students.

- **Completed Applicants:** Applications submitted to the school that has all required documents.

- **Diploma Nursing Program:** A program of instruction that requires two to three years of full-time coursework, usually within a hospital-based structural unit, the completion of which results in a diploma or certificate of completion and eligibility to apply for licensure as a RN.

- **DNP Program:** Practice-focused doctoral programs are designed to prepare experts in specialized advanced nursing practice. They focus heavily on practice that is innovative and evidence-based, reflecting the application of credible research findings. (American Association of Colleges of Nursing)

- **Enrollees:** A count of the Admitted Applicants who subsequently enrolled for the first time in the nursing program during the reporting period. This count should include only individuals who were still enrolled in a nursing course after the first two weeks of class.

- **Enrollees (%):** The percentage of Admitted Applicants who subsequently enrolled for the first time in the nursing program during the reporting period, relative to the total number of

Admitted Applicants. This count should include only individuals who were still enrolled in a nursing course after the first two weeks of class.

- **Faculty Vacancy:** A vacant position for a faculty member that is being actively recruited as of the fall semester census date.

- **Full-Time Faculty:** Those members of the instructional, administrative, or research staff of the nursing academic unit who are employed full-time as defined by the institution, hold academic rank, carry the full scope of faculty responsibility (e.g., teaching, advisement, committee work), and receive the rights and privileges associated with full-time employment. These faculty may be tenured, tenure-track, or non-tenure track (given that there is a tenure system in the institution).

- **Graduates:** A count of the number of students who successfully completed the program requirements and were formally awarded the degree during the reporting period.

- **License by Exam:** A RN or LPN who has graduated from an approved school of nursing and has taken the NCLEX examination (either the NCLEX-RN or the NCLEX-PN respectively).

- **LPN Program:** A program of instruction that requires at least 44 weeks of full-time coursework, generally within a vocational/technical school or community/junior college setting, and the completion of which results in a diploma or certificate of completion and eligibility to apply for licensure as an LPN.

- **MSN Program, Clinical Track:** A post-licensure master's program with emphasis on advanced clinical practice, including Nurse Practitioner, Nurse Anesthetist, Nurse Midwifery, and Clinical Nurse Specialist tracks.

- **MSN Program, Non-Clinical Track:** A post-licensure master's program with non-clinical emphasis, such as Nurse Educator and Management/Leadership tracks.

- **PhD Program:** Doctoral (Research-Focused) Program. A program of instruction that admits RNs and prepares nurse scientists and scholars, these programs focus heavily on scientific content and research methodology; and all require an original research project and the completion and defense of a dissertation or linked research papers. Most research-focused programs grant the Doctor of Philosophy degree (PhD), while a small percentage offers the Doctor of Nursing Science degree (DNS). (American Association of Colleges of Nursing).

- **Post-licensure BSN Program (RN-BSN Program):** A program of instruction that admits RNs with associate degrees or diplomas in nursing and awards a baccalaureate nursing degree.

- **Pre-licensure BSN Program, Generic:** A program of instruction to prepare registered nurses that admits students with no previous nursing education, the completion of which result in a baccalaureate degree (e.g., BA, BS, BSN, etc.) with a major in nursing and eligibility to apply for licensure as a RN. The program requires at least four years but not more than five years of full time college academic work within an educational institution or university.

- **Pre-licensure MSN Program (Entry MSN):** A program of instruction that admits students who have already completed a bachelor's degree in a non-nursing discipline. The

program prepares graduates for entry into the profession, eligibility to apply for licensure as a RN, and upon completion awards a master's degree (e.g., MSN, MS, MA, etc.) in nursing.

- **Qualified Applicants:** A count of the individuals who submitted complete applications on time and who met all institutional requirements for formal admission to the nursing program during the reporting period.

- **Total student enrollment:** A count of the number of students enrolled in the fall semester, which include students at all points of the program's curriculum sequence, including newly enrolled, continuing, and students in their final semester or year.

Methodology

Supply

Supply data are derived both from the entrance of new nurses (educational capacity) into the system as well as the data on the current workforce.

Educational Capacity

An email letter describing the purpose of the New Jersey Educational Capacity Survey was sent to the dean of each nursing program in New Jersey with a portable document file (pdf) of the questionnaire and a glossary of terms. The questionnaire included all items from the nurse minimum dataset (N-MDS) as outlined by the National Forum of Nursing Workforce Centers. Additional questions were added to provide additional context. Data were reviewed for completeness and consistency and adjusted as appropriate. When discrepancies in the data were found, the school was contacted for clarification. This is self-reported data which can have errors in how the school interprets or completes the survey. In 2020, data were obtained for BSN and higher degree graduates using AACN as a source, and then merged with NJCCN data surveys. This was process was offered to baccalaureate and higher degrees as an option to reduce survey burden.

Current Workforce Data

Licensure is renewed for all nursing categories every two years. Thus, every year, half of the APN, RN, and LPN licensure data are collected through the New Jersey Board of Nursing (NJBON) licensure renewal using Nursys®. At the end of the two-year period, the data are merged and analyzed collectively. These data are voluntarily self-reported by the nurses in the state. The data are provided to the Center for analysis by the NJBON. Because it is self-reported, these data can have errors.

Demand

Demand data that determines workforce trends in real-time is important for predicting the job market. As such, the Center is using Lightcast™. Lightcast™ draws on a comprehensive database of real-time demand on a national, state, and regional level. This database can track and analyze employer hiring activities by industry, occupation, education, and skills to help provide direction. Lightcast™ obtains data on online job postings, which is mined and coded from each posting to describe skills, education, and experience. O*Net is the nation's primary source of occupational information and is developed under the sponsorship of the US Department of Labor/Employment and Training Administration. The O*Net Standard Occupational Classification (O*Net –SOC) is used to standardize the approach to postings for the data report.

The Lightcast™ Occupation Taxonomy (LOT) is a proprietary taxonomy composed of four different levels (Career Area, Occupation Group, Occupation and Specialized Occupation). The Specialized Occupations within the taxonomy identify roles that are the same, across employers and geographies, regardless of job title. The next level up from Specialized Occupations are Occupations, which are composed of one or more Specialized Occupations that are slightly broader in nature and roughly equivalent to US O*NET-SOC detailed occupations and 4 digit ESCO codings. Occupation Groups combine similar Occupations in a logical group that are roughly

equivalent to US SOC broad occupations and ESCO 3 digit codes. Finally Career Areas group occupation groups together into large sectors with broad categories of labor. This is a great jumping off point to drill down if your aim is to understand broad labor market trends and patterns. Career Areas are roughly equivalent to US SOC major groups and ESCO 2 digit codes. This hierarchy allows you to start broad, but then "drill down" to a level of analysis that is far more granular and precise than most national occupation taxonomies can achieve. This level of granularity means that specific roles can be analyzed without the need to look at potentially confusing and messy job titles. The Lightcast™ Occupation Taxonomy is updated annually — infrequent enough to make it stable and useful for comparisons over time, but frequent enough to capture new, emerging roles as they formalize in the economy.

The Lightcast Occupation Taxonomy introduces several key benefits. Granular – The Lightcast Occupation Taxonomy provides significantly more granularity than federal taxonomies, while maintaining a level of aggregation that allows robust analysis. Users can create meaningful career ladders using Specialized Occupations, showing the skills and credentials required for each. Specific – The Specialized Occupations identify roles that are the same, across employers and geographies, regardless of job title. Job titles can cross occupations (as employers cast a wide net while advertising positions) so the Lightcast Occupation Taxonomy serves to close this language gap. Responsive – The Lightcast Occupation Taxonomy is updated annually — infrequent enough to make it stable and useful for comparisons over time, but frequent enough to capture new, emerging roles as they formalize in the economy. The O*Net –SOC taxonomy was used to standardize the occupation-specific indicators. The job ads were reviewed to eliminate any per diem positions, out-of-state commuters, temporary positions, and postings that had job openings outside of New Jersey.

Companies are labeled as a staffing company based on name, industry code, and qualitative research. For the purposes of job posting data, companies are labeled as staffing when they are a) true staffing companies, or b) job boards or brands maintained by staffing companies. This allows customers to filter results based on what they would like to see.

There are several limitations of Lightcast™ data. A major limitation is that online job advertisements are only partially representative of the labor market and the demand for labor. Another limitation is that one job posting may advertise the need for multiple nurses, but will only register as a single post in the database. Duplicate postings are common and may be missed even though Lightcast™ uses an algorithm to remove duplications. The use of O*Net-SOC also creates a limitation because it classifies most RNs under a single code (291141.00) and provides special codes only for Acute Care Nurses (291141.01) and Critical Care Nurses (291141.03), which creates challenges for breaking the codes down into more pinpointed specialties and subfields.

References

American Association of Colleges of Nursing (2023). Application, Baccalaureate, Masters, Doctoral, Faculty, Type of Nursing Program (SPSS v.29) [Data sets].

AMN Healthcare (2023) *The pandemic consequences.*
https://www.amnhealthcare.com/siteassets/amn-insights/surveys/amn-rnsurvey-2023-final.pdf

American Nurses Association, American Organization for Nursing Leadership, American Association of College of Nursing, Healthcare Financial Management Association, Institute For Healthcare Improvement (2022). *Nurse staffing think tank: priority topics and recommendations.* https://www.nursingworld.org/ 49940b/globalassets/practiceandpolicy/nurse-staffing/nurse-staffing-think-tank-recommendation.pdf.

American Nurses Foundation (2022). *Pulse on the nation's nurses COVID-19 survey series: workplace survey*
https://www.nursingworld.org/practice-policy/work-environment/health-safety/disaster-preparedness/coronavirus/what-you-need-to-know/covid-19-survey-series-anf-2022-workplace-survey/

American Organization for Nursing Leadership (2022 and 2023) *Nursing leadership workforce compendium-3 sections*

Bienemy, C. (2015). Developing a Multi-regional Statewide Nursing Workforce Forecast Model Requires Innovation and Collaboration. *Journal of Nursing Regulation*, 6(1): 14-19.

International Council of Nurses (2023) *Recover to rebuild*
https://www.icn.ch/sites/default/files/2023-07/ICN_Recover-to-Rebuild_report_EN.pdf

Lightcast™. (2023). https://lightcast.io/solutions/education/analyst [Date file].

Lightcast™. (2023). Lightcast data: *Basic overview*
https://kb.lightcast.io/en/articles/6957498-lightcast-data-basic-overview

National Academies of Science, Engineering and Medicine (2021). The future of nursing 2020-2030: charting a path to achieve health equity. Washington, D.C.: *The National Academic Press.* https://doi.org/10.17226/25982.

National Council of State Board of Nursing (2023). 2022 NCLEX Examination Statistics. Chicago: Author.

National Council of State Boards of Nursing and the National Forum of State Nursing Workforce Centers (2022). The 2022 National Nursing Workforce Center Survey. Chicago Author
https://www.journalofnursingregulation.com/issue/S2155-8256(23)X0004-0

Nursing Solutions, Inc.(2023). *2023 NSI national health care retention and RN staffing report.* https://www.nsinursingsolutions.com/Documents/Library/NSI_National_Health_Care_Retention_Report.pdf.

Tri-Council for Nursing (2021). *Transforming together implications and opportunities from Covid-19 pandemic for nursing education, practice and regulations.* https://img1.wsimg.com/blobby/go/3d8c2b58-0c32-4b54-adbd-efe8f931b2df/downloads/Tri-Council-COVID-19-Report-5-2021-Updated2.pdf?ver=1623419813920.

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