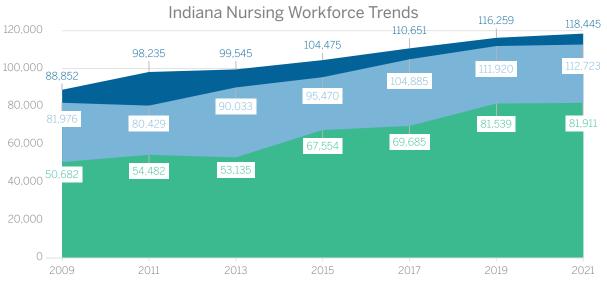


About the Data in this Brief: In Indiana, nurses are licensed and regulated by the Indiana State Board of Nursing at the Indiana Professional Licensing Agency (PLA). Indiana's registered nurses (RNs) provide information on their demographic, education, and practice characteristics through a series of supplemental questions that were embedded within the online license renewal process. These data are critical to monitoring trends in the nursing workforce and identifying gaps across the state. As such, RNs renewing license renewal online are required to provide key information to inform State policy and planning.¹

NOTE: Nurses completing their renewal manually (on paper) do not receive the supplemental survey questions.

Indiana Nursing Workforce Trends: The figure below depicts the trends in total Indiana registered nurse licenses, respondents to the supplemental questions, and the nurses that were included in the reporting sample (self-identified as actively practicing in Indiana) from 2009 to 2021. As evidenced by the trends, the number of registered nurse license renewals, online survey respondents, and reporting sample of Indiana nurses have seen a steady increase.



Of Indiana's 118,445 licensed RNs, 69.2% (81,911) reported actively practicing in in Indiana.

Who is included in the reporting sample?

- Active nurses who renewed their Indiana license online
- Indiana RN Compact holders, if they met all other criteria
- Practicing in nursing
- Serving Hoosiers (either in-person or through telehealth) under an Indiana license
- Advanced Practice Registered Nurses (APRNs) maintaining an RN license

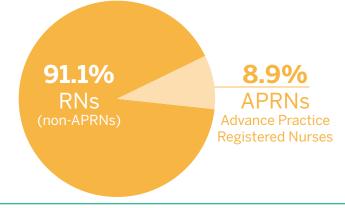
The reporting sample is referred to as the "Indiana Registered Nurse Workforce"

Who is NOT included in the reporting sample?

- Who is NOT included in the reporting sample?
- Nurses who renewed their licenses offline (paper renewals)
- Inactive nurses
- Nurses who are located out of state and do not report serving Hoosiers
- Nurses who may serve Hoosiers through a multi-state privilege whose home license is another state

This brief contains information on the total licensed RN workforce, which includes APRNs. A supplemental brief is focused on the APRN subset of the RN workforce.

How many of Indiana's licensed RNs report practicing as APRNs?



1. IC 25-1-2-10. Available at: https://iga.in.gov/legislative/laws/2021/ic/titles/025#25-1-2-10

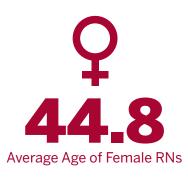
INDIANA NURSING WORKFORCE: DEMOGRAPHICS CHARACTERISTICS

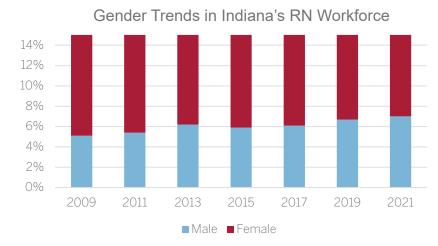


The Takeaway: Indiana's RN workforce is becoming more diverse in terms of both sex and race; the average age of an Indiana RN has remained stable.

Average Age of Indiana Registered Nurses







AGE

The trends in RN age have been stable for the past six years.

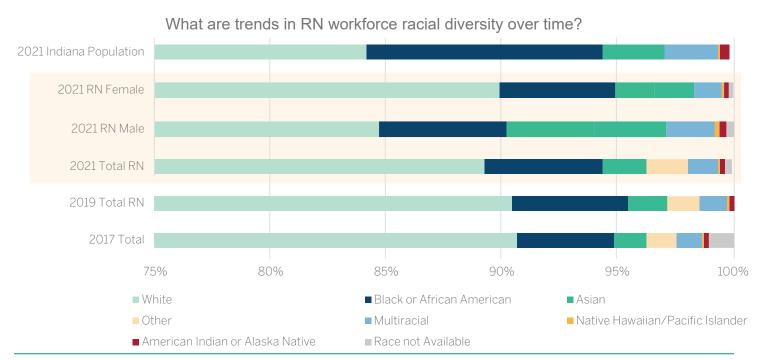
GENDER

Indiana's RN workforce has experienced incremental increases in male representation.

RACE

Male RNs are slightly more diverse than female RNs. Indiana's RN workforce has experienced incremental increases in racial diversity over time.

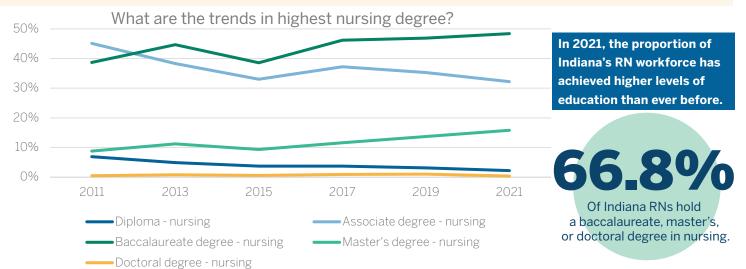
To explore how the RN workforce racial distribution compares to the overall Indiana population, <u>click here.</u>



INDIANA REGISTERED NURSES: EDUCATION AND NURSE FACULTY

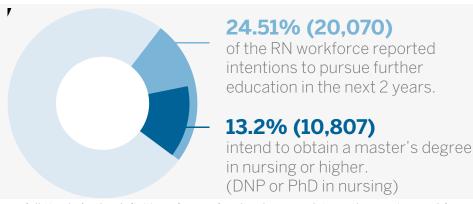


The Takeaway: The majority of Indiana's RNs report holding a bachelor degree in nursing or higher.

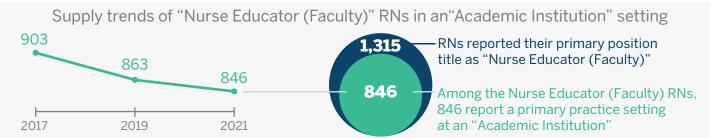


Indiana House Enrolled Act 1003-2022

codified several changes to nursing education in Indiana. These changes include modifications to nurse faculty, including codifying the definition of "faculty" as "a group of individuals who are employed to administer and teach in a nursing program" and allowing associate-degree granting nursing programs to employ majority part-time faculty (instead



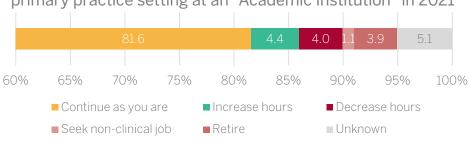
of previous requirements that majority faculty are full-time). As the definition of nurse faculty changes, data on the nursing workforce will be important to monitoring the availability of nurse faculty to train the next generation of the nursing workforce. This legislation also created a new pathway to licensure for graduates of foreign nursing schools and allowed for clinical simulations to substitute for a portion of normal clinical hours.



A LOOK AT RN EDUCATION & TRAINING: NURSE FACULTY

Indiana has 1,315 registered nurses that report their principal nursing position as "Nurse Educator (faculty)", among those, 846 report a primary practice setting as an "Academic Institution." A deeper dive into the employment plans of nurse faculty at academic institutions can be found within the diagram on the right.

Employment Plans for "Nurse Educator (Faculty)" with a primary practice setting at an "Academic Institution" in 2021

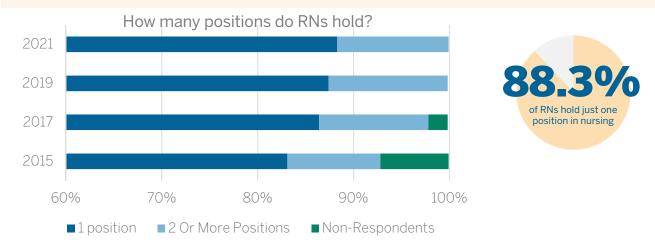


 $[\]hbox{* Does not include data for: Nurse Educator (staff development). Nurse Educator (patient educator) }$

INDIANA REGISTERED NURSES: EMPLOYMENT CHARACTERISTICS



The Takeaway: The Takeaway: The tides of employment plans for Indiana RNs has shifted; RNs are reporting greater levels uncertainty about their future plans and more RNs plan to decrease their hours or seek a non-clinical job compared to previous years.



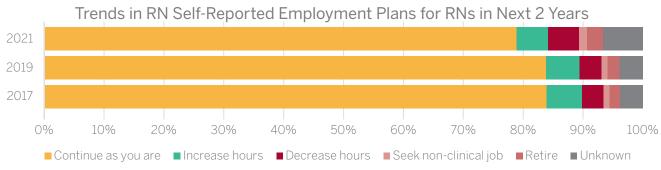
What are the Employment Plans for RNs in Next 2 Years?











^{*}Information on nurse employment was not collected in 2015. There was variation in survey question between surveys administered 2009-2013 and survey administered in 2017 and 2019. Full surveys and data reports available in historical data reports.

The COVID-19 pandemic highlighted and exacerbated an already strained healthcare workforce. Indiana's RN workforce is no exception. When compared to information collected during pre-pandemic licensure surveys, there is a noted increase in RNs self-reporting that they will retire, seek a non-clinical job, or decrease their hours. Additionally, there is a reported increase in uncertainty about future employment plans.

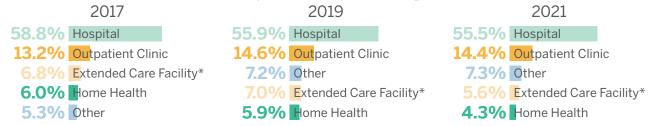
In addition to addressing nursing education issues, <u>House Enrolled Act 1003-2022</u> also had provisions to facilitate an increase in Indiana RN workforce capacity. This legislation created temporary licensure for out-of-state health providers or new graduates to practice in Indiana during the federal public health emergency, including nurses and nursing graduates. Additionally, among other updates to nursing education programs, this legislation allows eligible associate degree or bachelor degree-level nursing programs to increase enrollment at their discretion. With these investments in nursing recruitment, retention will also be an important priority.

INDIANA REGISTERED NURSES: PRACTICE CHARACTERISTICS

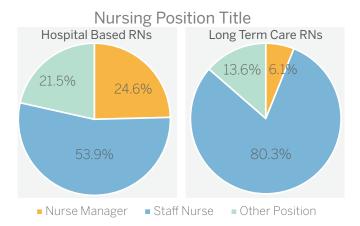


The Takeaway: The majority of RNs work in hospital settings. There has been a consistent decrease of RNs working in LTSS settings (Nursing Home/Extended Care Facility/Assisted Living Facility; Home Health). Nurses in long-term services and supports (LTSS) and public/community health settings are reporting plans to leave the RN workforce or decrease their hours at a higher rate than RNs in other settings.



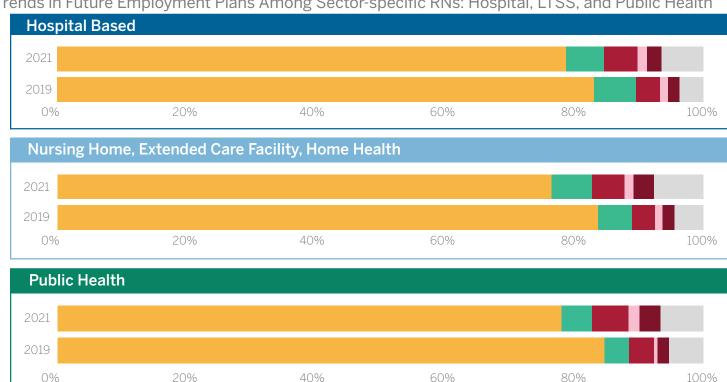


^{*}Includes: Nursing Home/Extended Care Facility/Assisted Living Facility



In hospital settings, the majority of the RN workforce report being staff nurses (80.3%) and a smaller proportion report leadership positions, such as nurse managers (6.1%). In contrast, the RNs that report working in long-term services and supports (LTSS) settings (including "Nursing Homes or Extended Living Care Facilities", "Home Health", "Assisted Living", and "Hospice") have greater proportions of nurses reporting leadership positions. In these settings, just over half of the workforce are staff nurses (53.9%), while almost one in four RNs in LTSS settings report holding a position as a nurse manager (24.6%).

Trends in Future Employment Plans Among Sector-specific RNs: Hospital, LTSS, and Public Health



INDIANA HOSPITAL-BASED RNS



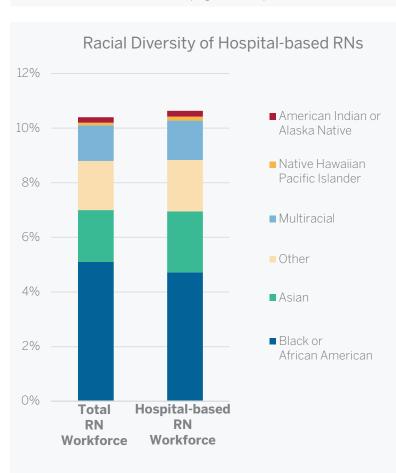
The Takeaway: Indiana's Hospital RN workforce has more gender and racial diversity compared to the total Indiana RN Workforce. Hospital RNs experience similar uncertainty about their future employment plans in nursing, or plan to decrease hours in the field as is experienced in the total RN workforce. A larger proportion of Hospital RNs hold a Bachelors in Nursing than the overall workforce.

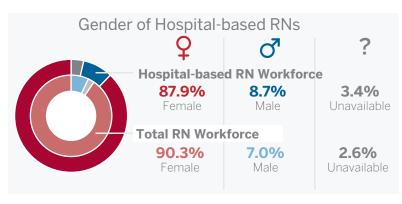
45,482

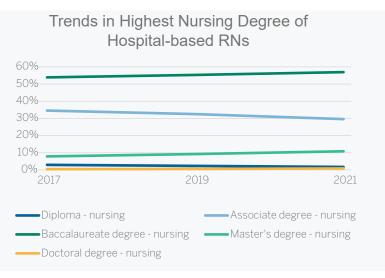
Hospital-based RNs in 2021

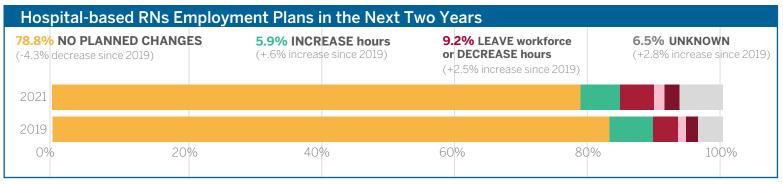
45,482 RNs reported their primary work setting as a "Hospital" in 2021, referred to on this page as "Hospital-based RNs"











INDIANA SCHOOL-BASED RNS

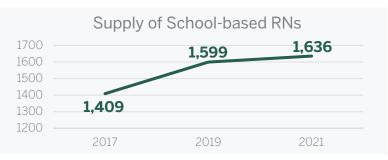


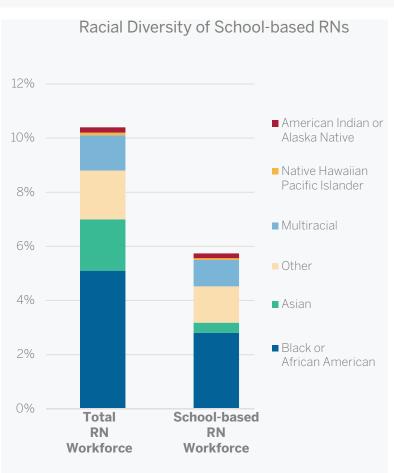
The Takeaway: Indiana's school-based RN workforce has slightly less gender and racial diversity compared to the total Indiana RN Workforce. School-based RNs experience similar uncertainty about their future employment plans in nursing, or plan to decrease hours in the field. A greater percentage of school-based RN hold a Bachelors in Nursing than the overall workforce.

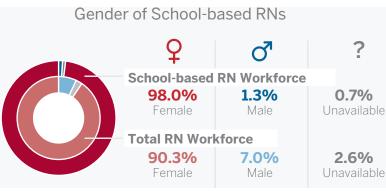


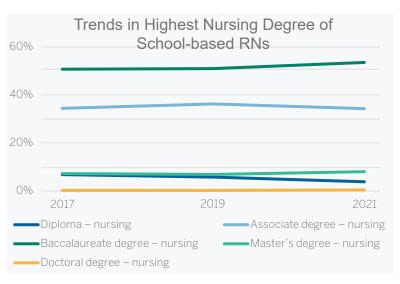
School-Based RNs in 2021

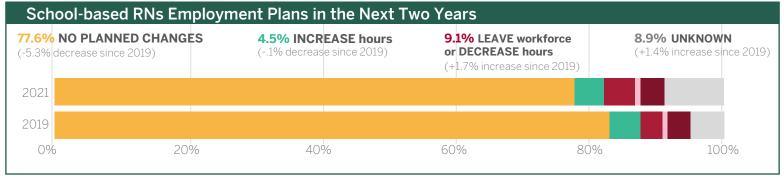
1,636 RNs reported their primary work setting as "school-based health" in 2021, referred to on this page as "School-based RNs"











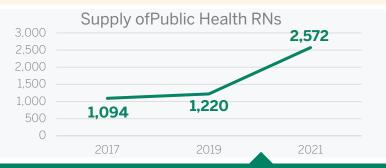
INDIANA PUBLIC HEALTH RNS



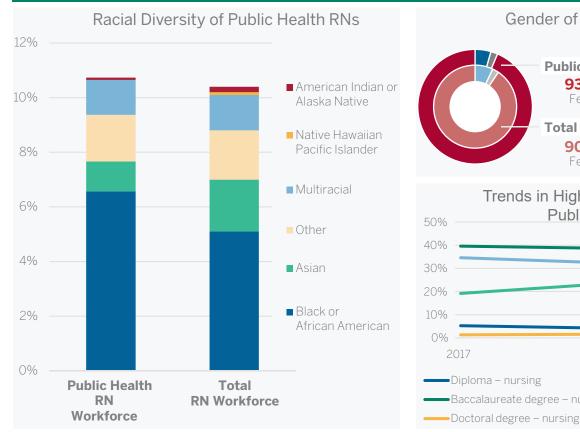
The Takeaway: Indiana's public health RN workforce has slightly less gender diversity but more racial diversity compared to the total Indiana RN Workforce. Public health RNs report planning to reduce hours in nursing or retire at a higher rate compared to the overall RN workforce. A large proportion of Public Health RNs hold a Master's in Nursing.

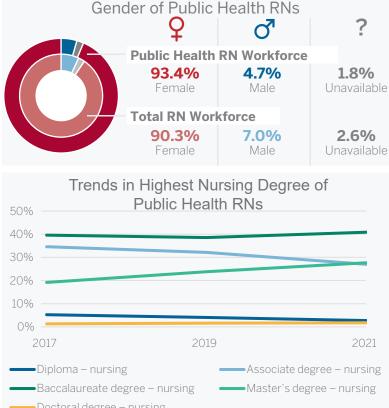
2,572Public Health RNs in 2021

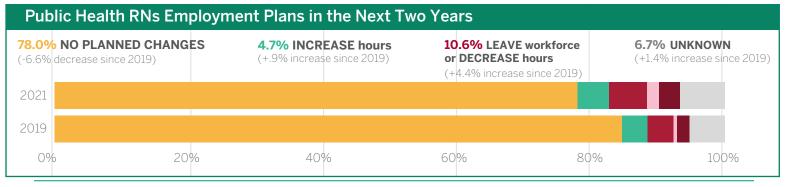
RNs reported their primary work setting as "Public/Community Health" in 2021, referred to on this page as "Public Health RNs"



Notice the increase in the number of RNs that report working in public health between 2019 and 2021? This data point is one that has likely been affected by the changes experienced by the workforce with the COVID-19 pandemic. These data were collected during RN renewal in early fall of 2021. Many RNs were likely serving in response to COVID and may have been more likely to work at a public or community health setting to provide related services (such as COVID testing or vaccines).







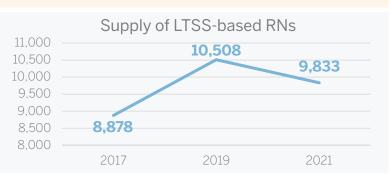
INDIANA LTSS-BASED RNS

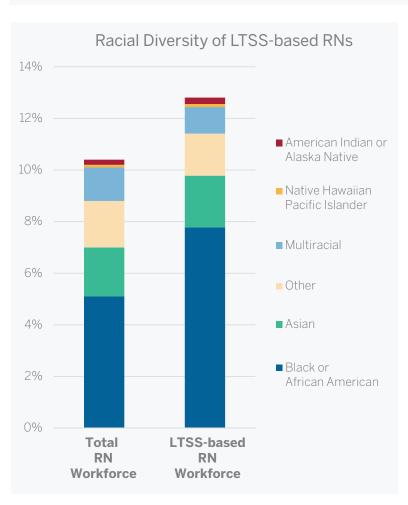


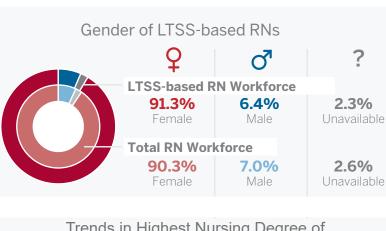
The Takeaway: Indiana's LTSS RN workforce has more racial diversity compared to the total Indiana RN Workforce. LTSS RNs experience greater uncertainty about their future employment plans in nursing, or plan to decrease hours in the field as is experienced in the total RN workforce. A small proportion of LTSS RNs hold a Bachelors in Nursing than the overall workforce.

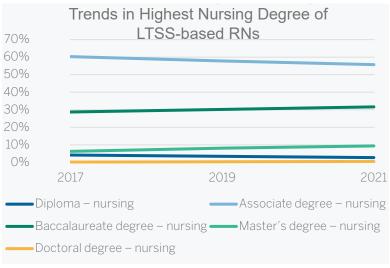
9,933
LTSS-based RNs

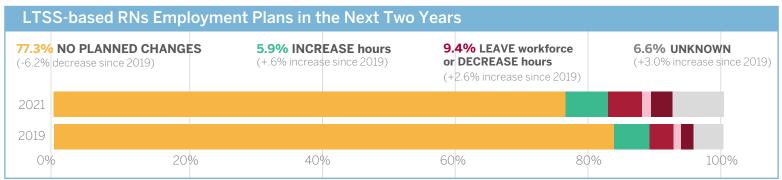
RNs reported their primary work setting as "Nursing Home", "Extended Care Facility", "Assisted Living", "Home Health", "Hospice", or "Assisted Living" in 2021, referred to on this page as "LTSS-based RNs"











ARE YOU A NURSING STUDENT OR EMPLOYER?



CHECK OUT THE INDIANA NURSING WORKFORCE DEVELOPMENT INCENTIVE PROGRAMS THAT MAY BE AVAILABLE!

There are several federally funded, State-operated, and externally-housed incentive programs available to support Indiana nurses. Most of these programs incentivize service in rural and underserved areas or specialties in Indiana.



Most federal and state opportunities require service in a shortage area. Check out whether your employer qualifies by reading the program eligibility requirements and exploring health professional shortage area designations in Indiana at: https://data.hrsa.gov/tools/shortage-area/hpsa-find



FEDERAL OPPORTUNITIES:

Nurse Corps Loan Repayment Program

- Up to 85% of unpaid nursing education debt for RNs, APRNs, and Nurse Faculty
- Must work in Critical Shortage Facility
- Or an eligible nursing school as faculty

Learn more about federal opportunities on HRSA's Website.



Nurse Corps Scholarship Program

• If accepted, HRSA pays nursing student tuition, fees, and other educational costs. In return, awardees work at a Critical Shortage Facility upon graduation.

NHSC Scholarship Program & NHSC Loan Repayment Programs

- Nurse Practitioner and Nurse Midwife Only
- · Awardees must work at a NHSC-approved location upon graduation for a defined service commitment



STATE OPPORTUNITIES:

• The Indiana Department of Health operates <u>Indiana's State Loan Repayment Program</u> which offers up to \$20,000 per year to serve in certain geographies or settings throughout the State.



OTHER OPPORTUNITIES:

There are also numerous other incentive programs operated externally to the State of Indiana through
the <u>Indiana Center for Nursing</u>, the <u>Indiana Health Care Foundation</u>, the <u>Indiana Organization for
Nursing Leadership</u>, among others. Additional incentive opportunities available to prospective
nurses, nursing students, and nursing professionals in Indiana can be found on the <u>Bowen Portal</u>.

NURSE LICENSURE COMPACT: INDIANA UPDATE



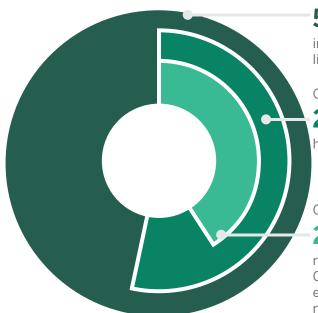
The Takeaway: In total, it is estimated that 2,081 RNs did not renew their Indiana RN license because of Compact implementation, but these individuals may still be practicing in Indiana. The impact of the Compact on recruitment of out-of-state nurses from Compact-participating states is impossible to quantify.

WHAT IS THE NURSE LICENSURE COMPACT?

The Nurse Licensure Compact (NLC) is an agreement between states whereby a nurse may hold one multi-state license that is issued by their primary state of residence and practice in any participating state. Nurses are subject to the specific practice laws of the state in which they are practicing (physically or electronically). The NLC includes both registered nurses (RNs) and licensed practical nurses (LPNs), but advanced practice registered nurses are not included. Nurses who wish to obtain a multi-state license and indicate Indiana as their home state would complete all requirements associated with license renewal in the home state and the Compact.

Currently 39 states, to Include Indiana participate in the NLC. Contiguous states Illinois and Michigan having pending legislation to enter the NLC. Ohio has enacted its NLC legislation and in the implementation stage while Kentucky is a full NLC participant.

What do we know about the impact of the NLC on Indiana's RN workforce?



5,064 RNs

in 2019 that did NOT renew their Indiana license in 2021.

Of these

2,710 RNS

had a license address in another state.

Of those with a license address in another state

2,081 RNs

report a license address in a Compact-participating state and would be expected to practice in Indiana under their multi-state license issued by their home state.

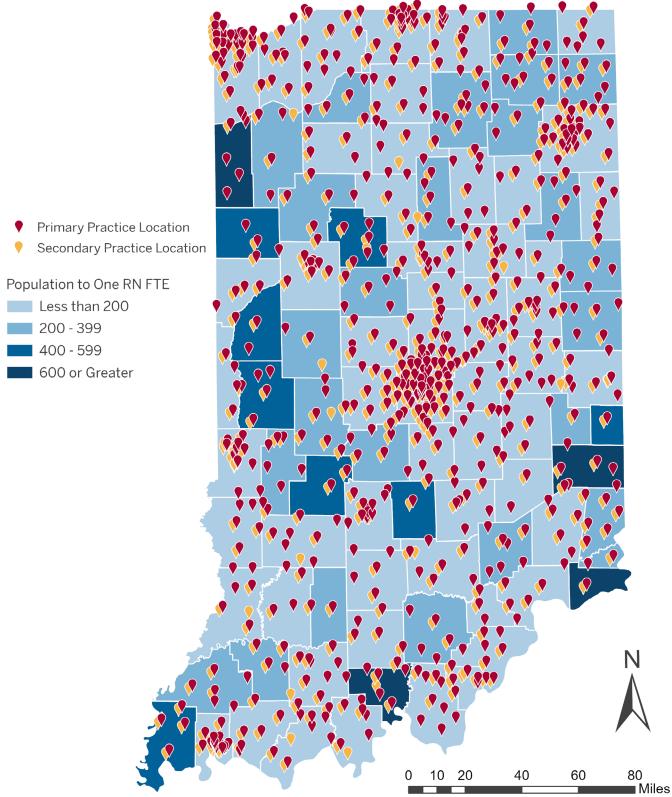
RECRUITING NURSING CAPACITY: OUT-OF-STATE-BASED RNS SERVING IN INDIANA Unfortunately, due to Compact-related data limitations, it is impossible to quantify how many RNs hold a primary license in a Compact-participating state and practice in Indiana under their multi-state privilege

SUPPORTING PORTABILITY: INDIANA-BASED RNS SERVING OUTSIDE OF INDIANA 11,324 RNs hold a primary license (single state or Compact) in Indiana but are not providing services in Indiana (2,513 of these RNs hold a compact license).

Note: At the time of data extract, Indiana had 118,445 RNs licenses. Of those, 13,318 RNs hold an Indiana RN Compact license.

INDIANA REGISTERED NURSES: PRACTICE DISTRIBUTION 2021

Indiana Registered Nurse's (RN) Reported Practice Location



Source: 2021 Indiana Registered Nurse License Supplemental Survey Data; U.S. Census Bureau, 2016 - 2020 American Community Survey 5- Year Estimates. Note: Population-to-Provider FTE Ratios cannot be calculated for counties with no reported registered nurse FTE. Nurses could only be geolocated to the zipcode centroid due to the structure of practice questions asked in the supplemental survey. Secondary practice location were offset for viewing purposes.

RN WORKFORCE POLICY UPDATES

HOUSE ENROLLED ACT 1003-2022 - NURSING PROGRAMS AND LICENSING MATTERS.

What did it do?

- Increase nursing program enrollment
 - Allowed eligible associate degree or bachelor's degree nursing programs to increase enrollment at any rate deemed appropriate by the program
- Clinical simulation hour substitution
 - It also allowed a nursing program to substitute a certain number of simulation hours for clinical hours in certain circumstances
- Defined clinical preceptors and modified faculty staffing for some programs
 - Codified requirements for clinical preceptors and established that nurse faculty are not required to be full-time employees of a state educational institution that operates a nursing program that predominantly awards associate degrees.

HOUSE ENROLLED ACT 1192-2022 - QUALIFIED PROVIDERS AND MEDICAID SCHOOL SERVICES

What did it do?

- Defines school-based nurses
 - Created a definition of "school-based nurse" for the purpose of providing Medicaid covered services in a school setting and sets requirements for school-based Medicaid services.
 - "School based nurse", is defined as a registered nurse or licensed practical nurse licensed who is employed by contracts with a school corporation that participates in Medicaid to provide school based Medicaid covered services for a Medicaid recipient.

SENATE ENROLLED ACT 7-2021 -FORENSIC NURSES

What did it do?

- Defines forensic nurses (SANE nurses) and eligibility requirements
 - This bill codified entry requirements that a registered nurse must meet in order to practice as a forensic nurse (beginning 6/30/23). The Board of Nursing was charged with defining biennial continuing education requirements for forensic nurses.

PROPOSED HOUSE BILL 1215-2023 - FUNDING FOR THE DEVELOPMENT OF HEALTH PROFESSIONS.

What would it do?

- Establish the Linking Industry to Nursing Education Fund.
 - Create a competitive grant program for education institutions to recruit new faculty, retain current faculty, provide student scholarships, acquire equipment needed to expand the institutions nurse education program.
 - Institutions must commit to a dollar-for-dollar match. Partial grants may be awarded if funds are not available for a dollar-for-dollar match.
 - Grant awards may not be used for the construction of new buildings or renovations of current buildings.

PROPOSED HOUSE BILL 1353-2023 -**HEALTH CARE STAFFING.**

What would it do?

- Require a hospital to establish a council with 51% of its members serving as RNs who spend at least 50% of their time in direct patient care.
 - Council would be charge with assisting staff planning functions and reviewing reports of deviations from the established nurse staffing plan
- Establishes workforce protections for nurses that file a deviation report.
- Would require a hospitals, ambulatory outpatient surgical care centers, and residential care facilities to share with a prospective RN and LPNs hire the hourly and on call requirements.
 - Would not allow these facility to mandate overtime hours and sets certain protections for RNs and LPNs in this settings.

PROPOSED HOUSE BILL 1460-2023 -PROFESSIONAL AND OCCUPATIONAL LICENSING

What would it do?

 Applicants for nursing license through endorsement would no longer have to provide their Social Security Number if the applicant can prove they are lawfully in the United States.

Sources

1. http://iga.in.gov/legislative/2022/bills/house/1003

2. http://iga.in.gov/legislative/2022/bills/house/1192

3. http://iga.in.gov/legislative/2021/bills/senate/7

4. https://iga.in.gov/legislative/2023/bills/house/1353

5. https://iga.in.gov/legislative/2023/bills/house/1460



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