



JOBS FOR THE FUTURE

# Growing Tomorrow's Nursing Workforce: New Paths to Professional Nursing



## ***The Problem: A National Nursing Shortage***

***The United States faces a looming nursing shortage. We will need another million nurses by 2020, according to the U.S. Bureau of Labor Statistics.<sup>1</sup> The need is driven, in part, by looming retirements. The average age of a registered nurse is 50, more than half of working nurses are over age 53, and more than half a million are projected to soon leave the workforce.<sup>2</sup> Meanwhile, an aging population, and the drive to deliver higher-quality health care with lower costs and better outcomes, makes filling the nursing gap more critical than ever.***

Compounding the urgency, we need not only more nurses, but nurses with higher skills and educational credentials. In 2011, the Institute of Medicine set a goal of 80 percent of nurses holding a bachelor's degree by the year 2020, citing lower rates of mortality and medical errors associated with use of nurses holding a bachelor of science in nursing (BSN) degree.<sup>3</sup>

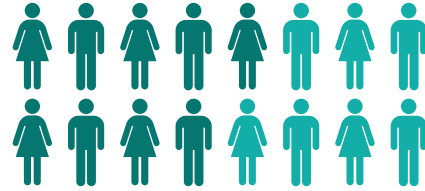
But even if the goal of graduating more nurses with higher credentials is met, the resulting workforce—if it resembles today's nursing population—will not represent the population it is called upon to treat. Just over one in six registered nurses are from a minority background (nonwhite or Hispanic), and just over one in four candidates enrolled in entry-level BSN programs is a racial or ethnic minority.<sup>4</sup> At present, 37 percent of U.S. residents are from minority backgrounds, and they are expected to comprise a majority of the population by 2043. As U.S. communities become more culturally and demographically diverse, the need for nurses from underrepresented groups will only increase, as will the need for diverse candidates in all the health professions. Reducing health disparities and addressing the social determinants of health increases the urgency of diversifying the nursing workforce. For this reason, Dr. Ebbin Dotson, of the University of Michigan's School of Public Health, has argued that "leveraging diversity is a business imperative for health care."<sup>5</sup>

# DEMOGRAPHICS OF NURSES



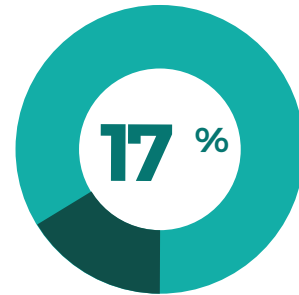
The need for new nurses is driven by looming retirements.

More than half of working nurses are over age **53**

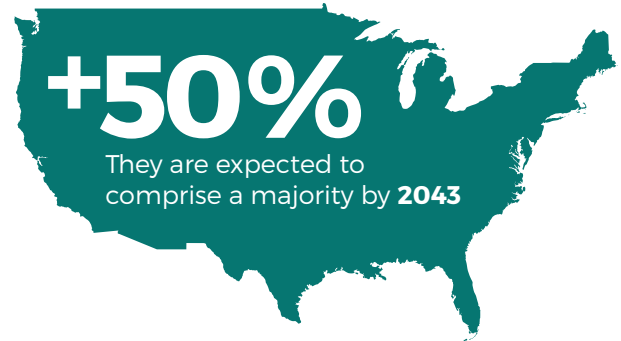


MORE THAN  
**500,000**  
NURSES ARE PROJECTED TO LEAVE THE WORKFORCE BY 2022

Just over one in six (**17%**) registered nurses are from a minority background



## WHY A DIVERSE WORKFORCE MATTERS USA POPULATION BREAKDOWN



### PARTICIPATING STUDENTS IN NEW PATHS TO PROFESSIONAL NURSING PROGRAM

WHITE POLISH DOMINICAN  
**AFRICAN AMERICAN**  
HAITIAN ASIAN HISPANIC BRAZILIAN  
AFRICAN NATIONS

Ages ranged from the **20s** to the **50s**

Just over one in four candidates enrolled in entry-level BSN programs is a racial or ethnic minority



## A Solution: Advance Frontline Health Care Workers

A recent New Jersey-based initiative, New Paths to Professional Nursing (NPPN), funded by the Robert Wood Johnson Foundation's New Jersey Health Initiatives (NJHI) program, demonstrates that it is possible to create a pipeline of nursing candidates who live in and resemble the communities they serve. NPPN tapped the frontline, non-licensed workforce of hospitals and other participating employers, enabling selected employees to enroll in prerequisite courses for a BSN to build the first stages of a diverse, culturally competent, bachelor-prepared nursing pipeline.

All of the students worked at least part time and most full time, and all received both tuition and material supports as well as strong guidance and encouragement at every turn. The cohort of students included nursing assistants, patient transporters, unit secretaries, and patient service representatives, among others—roles typically lacking natural career steps to higher-paying jobs. Their experience in NPPN illustrates the potential of a diverse (and often overlooked) workforce to help meet the nation's nursing needs. It also highlights the continuing challenges facing working, lower-income students. This brief examines key lessons from NPPN—noting both opportunities and challenges—and offers recommendations to build on this experience.

## New Jersey Health Initiatives' New Paths to Professional Nursing Program

Camden-based NJHI launched NPPN in 2014, with two-year, \$250,000 grants to five partnerships throughout the Garden State. The funds enabled low-earning health care workers to enroll in and complete the prerequisite courses for entering nursing programs, and prepare to take upper-division nursing courses and clinical rotations required for entering a BSN program.

The five funded partnerships took multiple approaches to building pathways to a bachelor's degree in nursing

## A RANGE OF PARTNERSHIPS

- ▶ **Accelerated LPN to BSN Pathway**  
Union County College, Plainfield, NJ  
**Partners:** Berkeley College, AristaCare
- ▶ **New Paths to the Nursing Profession**  
Caldwell University, Caldwell, NJ  
**Partner:** St. Joseph's Healthcare System
- ▶ **New Paths to Professional Nursing**  
Robert Wood Johnson University Hospital  
**Partner:** Rutgers University School of Nursing
- ▶ **Project OPEN: Opportunities for Paraprofessionals To Enter Nursing**  
Camden County College,  
Blackwood, Camden and Cherry Hill, NJ  
**Partner:** Cooper University Health Care
- ▶ **Rutgers Camden—Cooper Collaborative for Upward Mobility in Nursing**  
Rutgers School of Nursing Camden,  
Camden, NJ  
**Partner:** Cooper University Health Care

for frontline health care workers. While the majority were led by educational providers, one project was led by an employer—Robert Wood Johnson University Hospital—the flagship of New Jersey's largest health care system, RWJBarnabas Health. Students enrolled in both two-year and four-year colleges, primarily public but also private institutions, including Caldwell University. In most cases, employer partners were hospitals, with the exception of AristaCare, a long-term care provider, which collaborated with Union County College. Union County College's effort was also unique in that it enrolled working licensed practical nurses (LPNs) on a BSN path, and had a for-profit educational partner, Berkeley College, that developed an LPN-to-BSN path in response to the NPPN opportunity.

# The Problems

The need for nurses is growing



Current pool of nurses is aging

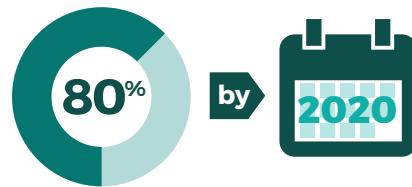


Cultural/demographic mismatch between nurses vs. populations they serve



Frontline workers have few career growth opportunities

Drive to increase percentage of nurses with B.S.N. degrees to

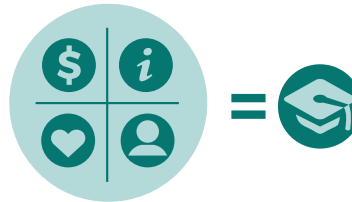


## A Solution

Develop frontline healthcare workers to create a culturally competent pipeline of new nurses with B.S.N. degrees



## The Approach



Provide multiple kinds of support to help give frontline workers the necessary academic preparation to enter a B.S.N. nursing program

## HOW DOES IT WORK?

Provide both financial aid and non-tuition expenses



Address both academic and non-academic needs



Harness the power of partnership



Change "business as usual" at the institutions



Offer multiple options for student success







NPPN sites all shared common features, however, including partnerships between academic and health care institutions; financial support for working students; and coaching to bolster students' academic and personal progress. They also shared a deep commitment to the success of working learners.

Participating students were nearly all female, but they varied in racial and ethnic composition as well as age and occupation. While the majority were African American or Hispanic, there were Asian and white students as well, and the students included immigrants from Brazil, Poland, Haiti, the Dominican Republic, and African nations. Students' ages ranged from the 20s to the 50s. Many were raising children, often

as single parents; a few still lived with their parents. Others worked alongside their grown children in the hospital. But something all students have in common is how little they resemble a "typical" nursing student, with few experiences or resources to draw on for succeeding in a highly rigorous academic environment.

## How to Support Working Students: Key Learnings

NPPN partnerships operated in two arenas simultaneously: they helped individuals beat the odds and move on to nursing school, and they sought to make changes in the way their institutions do business and reduce barriers to success. As the key learnings described below reveal, the activities in these two arenas are most effective when they operate in concert.

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### 1. Provide both financial aid and non-tuition expenses

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#### Tuition and fees

Chief among the barriers to a nursing degree is the high cost of attending school—a challenge for all students and families, but especially for those, like the nontraditional ones in NPPN, who are older, care for children or other family members, and work in low-paying jobs. Financial stresses are a major cause of students failing to complete college: a survey of students leaving school without completing a degree found that having to "go to work and make money" was a factor for more than 7 in 10. And working more than 20 hours a week is associated with early exit from college.<sup>6</sup> Finally, college costs have increased at a rate close to 4 times faster than increases in median income in the past 30 years.<sup>7</sup>

All NPPN partnerships provided tuition assistance, aided by the NJHI grant and by additional investment from participating employers. Since upfront payment of tuition and fees may be out of reach for students living paycheck to paycheck, some participating employers, such as Robert Wood Johnson University Hospital, opted to prepay tuition costs rather than reimbursing students for out-of-pocket payments.



Other employers ensured that human resource departments accelerated reimbursement payments to NPPN students, in one case waiving requirements for supervisor approval.

### **Non-tuition costs**

College tuition and fees are not the only financial barrier. Non-tuition costs, such as housing, health care, food, transportation, or child care also loom large.<sup>8</sup> Pre-nursing students at NPPN sites sometimes incurred emergency expenses, as well: one lost her housing to a fire, and another faced eviction. A national survey of 4,000 community college students estimated that half face food and/or housing insecurity, with rates of hunger and homelessness higher for African American and Latino students.<sup>9</sup> College partners also offered stipends for books, living expenses, transportation, and other costs, as well as providing laptop computers or tablets. The medical librarian at one hospital located required books and articles for student employees, for significant savings.

### **Financial literacy**

Educating students about applying for grants and loans and managing their finances was equally important. For program staff, it was crucial to communicate up front the full cost of degree attainment—including out-of-pocket costs not covered by grant or employer assistance—and revisit this information regularly. Another challenge that program staff had to overcome was students' reluctance to take on loans, which are critical for long-term attainment of the nursing degree. Student support staff employed

by the schools and, in a few cases, the health care employers, addressed this reluctance by illustrating the potential “return on investment” of debt, comparing the bills to be paid off to the eventual salary of a working nurse—typically double or triple the salaries for entry-level hospital or nursing home employees. Learning how to better manage their own finances also helped students to make choices about loans and debt. Staff encouraged students to stretch their money by completing required courses at low-tuition community colleges, particularly for those seeking to enter private college BSN programs.

*The medical librarian at one hospital located required books and articles for student employees, for significant savings.*

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## **2. Address both academic and non-academic needs**

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The bar for entering a BSN program is high. Before they are accepted into a baccalaureate nursing program and associated clinical and academic coursework, students must successfully navigate the rigors of a two-year, pre-nursing curriculum that includes microbiology, organic chemistry, and anatomy and physiology. NPPN was designed only to move working students through these requirements and help them reach the “starting line,” or the final two years of the BSN. While most NPPN students entered with some college credit—a few had entered and then dropped out of nursing programs previously—all faced one to two years of demanding coursework while balancing school, work, and family responsibilities.

### **Coaches, navigators, mentors, and tutors**

Every NPPN project team delivered intensive support for both academic and personal needs. Academic supports included both tutors already employed by colleges and academic coaches hired specifically for





the grant. Camden County College and its employer partner, Cooper University Health Care, provided dual support, with both college-based BSN mentors and a designated “nursing education navigator” to assist students at the workplace; Caldwell students also benefitted from nurse mentors at St. Joseph’s Healthcare System. Tutors added hours, matched their schedules to students’ work hours, and made themselves available off campus, even meeting students at the hospital before or after shifts. Tutors and coaches helped students overcome challenges in reading, writing, and math, as well as in specific courses such as microbiology or medical terminology. They also assisted students with mastering study strategies, managing test-taking anxiety, and navigating the academic environment.

One-to-one relationships with tutors, coaches, and mentors were vital to student persistence and success. As St. Joseph’s director of clinical education, Rose Nagle-Girgenti, observed, “the key to the program is the relationship.”<sup>10</sup> This also extended to personal encouragement and guidance—essential for students

facing life challenges and lacking the confidence of those socialized by family background and experience to tackle college.

***“We create a ‘culture of encouragement’ and make encouragement a shared value in the organization.”***

***Elisheba Hagg-Stevens, Academic Coach***

For such students, according to Robert Wood Johnson University Hospital’s academic coach, Elisheba Haqq-Stevens, “we become their family.” Key to this role is creating a “culture of encouragement,” according to Haqq-Stevens, in which the organization consistently expresses belief in individuals’ potential and makes encouragement a shared value in the organization.<sup>11</sup> Coaches and mentors helped students persist and discussed options when personal or

academic roadblocks arose. They stayed in touch frequently by text, phone, email, and social media to encourage persistence, but also to nudge students about upcoming deadlines for aid and academic applications, and to provide a sympathetic ear when necessary. Coaches and mentors were nonjudgmental, but also served to keep students accountable for their assignments.

### **Peer support**

NPPN students also found deep support in groups. While cohort members were not always able to share class times or study sessions, due to divergent work schedules and locations, peers provided robust

*The achievements of the NPPN program were the result of close collaboration between employers and educators, and strong commitments from each side. Together, they created a support system that assisted students at each step along the pathway.*

support to one another. Union County participants enjoyed dinners to inaugurate the semester, meet tutoring staff, and share stories. At Robert Wood Johnson University Hospital, Rutgers University School of Nursing candidates assembled in monthly workshops for both academic guidance and shared camaraderie. In addition to studying together, students cheered one another on and joined in celebrations to mark progress in completing courses and matriculating into nursing school.

### **Holding students accountable**

Some NPPN students did not take advantage of coaching, tutoring, or other support services, and did not respond to advisors' requests. Future programs should consider "intrusive" or mandatory advising,

and develop learning contracts with specific goals and timelines for students. Program funding could be tied to having these requirements.

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## **3. Harness the power of partnership**

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### **Employer and educator collaboration**

The achievements of the NPPN program were the result of close collaboration between employers and educators, and strong commitments from each side. Together, they created a support system that assisted students at each step along the pathway. Hospital and school representatives cooperated to recruit applicants, screen them, support their progress, and remove barriers. Designated point persons on each side communicated frequently to coordinate activities and troubleshoot challenges. Equally essential was the endorsement of senior managers and leadership from both sides, especially when the projects challenged traditional ways of doing business.

### **Employer partner support**

Employers of the working students—especially direct supervisors—made the program effective by informing frontline employees about the opportunity; providing release time and scheduling flexibility to attend courses and meet with coaches and advisors; and providing supervisory support and mentoring. They made space available for homework and study groups, and offered financial assistance.

These partnership efforts netted important benefits for employers. Investing in the education and careers of frontline staff boosts morale. It builds a pipeline of highly motivated future nursing candidates who are well versed in the routines and relationships of the organization, and are representative of the surrounding community and the patients who live there. And by working in partnership with colleges—as well as with the other NPPN project sites—employers learned new strategies for human resource and talent development and new ways to collaborate productively with two- and four-year educational institutions.



## Educational partner support

College staff worked closely with relevant departments in the schools and with each student to smooth their way forward: faculty, admissions, advising, counseling, and financial aid, among others. Where students are moving to another institution for nursing school, NPPN college-based project staff are coordinating with officials in the nursing schools to ensure a successful transition, lining up schedules, testing, and financial aid. Since nearly all NPPN students possessed some previous college experience, college officials scoured their transcripts to determine which courses and credits were transferable.

NPPN project staff also worked to augment traditional advising services with coaching; as one NPPN project director explained, generalist academic advisors may not always grasp the needs or situations of NPPN's diverse student population, whose academic and life paths have been anything but straightforward. In addition to using coaches assigned by the program, students also found mentorship from their schools' student nursing associations, particularly those built around minority and ethnic groups.

Participating in NPPN also benefitted educators in many ways. It prompted new or strengthened relationships between feeder schools and nursing programs, as well as between schools and health care employers. It addressed educational deficits, such as math, early in the pathway, before students entered nursing candidacy or attempted the nursing licensure exam. The schools shared successes and challenges with each other and adopted valuable lessons in guiding and retaining working students.

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## 4. Change “business as usual” at the institutions

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The clearest lesson from NPPN is that traditional policies and practices in colleges and workplaces may not fit the needs of working students. If the innovations of this project are to outlive the experience of a single, grant-funded cohort, then the institutions



need to change: employers, in areas such as tuition policy, employee mentoring, and flexibility in working hours for employed students; colleges, in areas such as tailoring programs to working students' schedules, engaging faculty and advisors to meet needs of a more diverse (and less prepared) student population; and better aligning two- and four-year college programs to facilitate credit transfer and admission. NPPN partners have begun initiating such changes in routines and policies to promote working student success. Most of these changes can be made without great expense, making them feasible in the absence of grant funding.

### Transferring credits

Among the changes to academic systems that NPPN partners adopted is greater flexibility in transferring prior college credits, which helps students move up faster and cuts costs. Some programs also modified their curricula to allow fulfillment of some BSN-level requirements through lower-division coursework. Rutgers University waived its restriction on allowing community college students to transfer in, opening the door to NPPN participants who fulfilled prerequisites at the state's two-year campuses. Rutgers-Camden relaxed grade point average and standardized test (SAT) requirements for pre-nursing admission, allowing a deeper pool of candidates to apply.



### **Course delivery innovations**

Participating schools also experimented with new forms of delivering instruction. Union County College, for instance, offered classroom, online, and hybrid courses to the pre-nursing cohort. The results were mixed: instructors discovered that statistics instruction did not translate successfully online; students needed far more face-to-face assistance in a classroom. However, other courses, such as pathophysiology, worked well in hybrid or online modes and allowed for accelerated completion of requirements.

### **Addressing academic skill gaps**

Students required to take noncredit developmental or remedial courses waste limited financial aid and are less likely to complete their programs. Conducting “boot camps” in foundational skills such as math, writing, or study strategies can help circumvent this, as can teaching basic skills contextualized in health care subjects. Caldwell University’s math faculty provided targeted tutoring keyed to specific student skill gaps, helping to increase pass rates on college assessment exams and retention in the pathway.

Rutgers-Camden had a foundation year for their student cohort, providing contextualized math, English, and science instruction, which proved beneficial to increasing students’ skill levels and readiness for the credit courses, and creating a strong cohort and peer support model.

### **Potential future changes**

The NPPN experience also resulted in consideration of needed systems changes for the future, especially in how nursing and pre-nursing education is structured. Several of the colleges are rethinking traditional course schedules tailored to weekday and full-time attendance; most colleges already offer part-time, weekend, and evening classes in other programs, which makes adopting such changes in the nursing program feasible. Caldwell University is reviewing the possibility of evening courses. The newly initiated nursing program at Berkeley College will hold courses on two full days—one on weekends, and the other on a weekday. Rutgers University is weighing a part-time BSN program with admittance twice per year. In the future, Robert Wood Johnson University Hospital

participants may enter pre-nursing programs with a longer timeline than two years to complete courses; this change is based on the experience of many NPPN students who required extra semesters to reach the BSN level because of work schedules and family responsibilities, as well as academic barriers.

Participating employers also initiated other systems changes, especially in the area of tuition assistance, providing it up front instead of reimbursing students. St. Joseph's, in addition to waiving the requirement for supervisor sign-off on aid requests, designated one point person in human resources for tuition remission and ensured that students are reimbursed immediately. Robert Wood Johnson University Hospital made plans to continue the functions of an academic coach or project manager beyond the grant, funding it from the hospital's operations budget.

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## 5. Offer multiple options for student success

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NPPN also reminds us that nursing school is not for everyone. Every school lost some students along the way, despite intensive support, as financial burdens, academic roadblocks, or family emergencies interrupted their progress. Some students, owing to financial need, attempted to work full time while carrying full course loads, and failed courses. Others did not earn grades sufficient to meet BSN requirements. Some students realized that a nursing career was not for them, or not at this point in their lives, while appreciating the opportunity that NPPN provided to imagine and pursue a career in health care.

### Screen potential candidates carefully

To succeed in this challenging course of study, candidates need to be highly motivated and passionate about the end goal while understanding the personal and financial sacrifices required. Family support and accommodation are critical. Having some prior college credits also proved to be a predictor of higher grades and retention in NPPN.

### Provide degree alternatives

The prerequisite coursework and associated effort and costs need not go to waste for students who invested time but were unable to matriculate in BSN programs. Camden County College worked closely with students to determine if nursing was the right fit for them

***"The key to the program is the relationship (between students and coaches)."***

***Rose Nagle-Girgenti,  
Director of Clinical Education***

and, in some cases, helped students transition to allied health pathways and programs. Union County College's associate's in health sciences degree provides a credential for these students, opening opportunities for employment in emerging roles such as health coaches and patient navigators. Several NPPN students at Caldwell University whose GPAs did not meet the nursing school's standards have entered a newly created program that awards a bachelor's degree in public health.

### Course and credential completion can be a long road

The two-year timeframe of grant support did not always match the needs of students—often the primary supporters of their families—for time and resources to complete required courses. A longer period, allowing fewer courses per semester if needed, could be beneficial, as could compression or acceleration of some courses. Where needed, students should be offered temporary "off-ramps" to reduce stress or achieve financial or life stability, accompanied by a plan for returning and using supports to complete coursework. Institutional changes can help shorten the time to completion as well: Camden County College collaborated with Rutgers-New Brunswick to accelerate the transition from Camden's associate program to the Rutgers-New Brunswick nursing program through curriculum changes that reduced the need for at least two prerequisites before entering the BSN program.



## Conclusion

Despite numerous challenges, more than 30 working students entering pre-nursing courses through NPPN enrolled in BSN programs as of fall 2016, or will after an additional semester or two of courses. There are a number of steps health care employers and colleges can take to build on the successes and learn from the challenges of NPPN. Employers can assess interest and career goals of frontline workers; review human resource and financial aid policies and their adequacy to support working students; set diversity goals; and enlist the cooperation of supervisors and managers in the overall effort. Colleges can take inventory of their own policies and programs to support working students, including non-financial assistance and the quality of academic advising and support services. Both schools and employers can identify current or potential partners to plan educational initiatives based on this model.

But the overarching lesson of NPPN is that relationships matter, above all: one-to-one coaching by dedicated mentors who are available at all hours; close-knit peer groups; family members who accommodate parents or children; and supervisors and managers who make it possible for their employees to “dream big” and step up to nursing degrees against all odds. These personal relationships, in turn, need to be undergirded by bonds between organizations. In NPPN, the partnership of school and workplace created the capacity and the motivation to spur working learners to success. If we are to build a nursing workforce that is experienced, passionate, and close to the communities it serves, then the NPPN program offers a powerful model—we should heed its lessons.

## Endnotes

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