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# California Board of Registered Nursing

## 2014-2015 Annual School Report

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Data Summary and Historical Trend Analysis

### **Northern California**

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## PREFACE

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Each year, the California Board of Registered Nursing (BRN) requires all pre-licensure registered nursing programs in California to complete a survey detailing statistics of their programs, students and faculty. The survey collects data from August 1 through July 31. Information gathered from these surveys is compiled into a database and used to analyze trends in nursing education.

The BRN commissioned the University of California, San Francisco (UCSF) to develop the online survey instrument, administer the survey, and report data collected from the survey. This report presents ten years of historical data from the BRN Annual School Survey. Data analyses were conducted statewide and for nine economic regions<sup>1</sup> in California, with a separate report for each region. All reports are available on the BRN website (<http://www.rn.ca.gov/>).

This report presents data from the 11-county Northern California region. Counties in the region include Del Norte, Humboldt, Lake, Lassen, Mendocino, Modoc, Nevada, Plumas, Sierra, Siskiyou, and Trinity. All data are presented in aggregate form and describe overall trends in the areas and over the times specified and, therefore, may not be applicable to individual nursing education programs. Additional data from the past ten years of the BRN Annual School Survey are available in an interactive database on the BRN website.

Beginning with the 2011-2012 Annual School Survey, certain questions were revised to allow schools to report data separately for satellite campuses located in regions different from their home campus. This change was made in an attempt to more accurately report student and faculty data by region, and it resulted in data that were previously reported in one region being reported in a different region. This is important because changes in regional totals that appear to signal either an increase or a decrease may in fact be the result of a program reporting satellite campus data in a different region. However, due to the small number of students impacted and the added complication in collecting the data, accounting for satellite programs in different regions was discontinued in 2014-2015.

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<sup>1</sup> The regions include: (1) Bay Area, (2) Central Coast, (3) Central Sierra (no programs), (4) Greater Sacramento, (5) Northern California, (6) Northern Sacramento Valley, (7) San Joaquin Valley, (8) Los Angeles Area (Los Angeles and Ventura counties), (9) Inland Empire (Orange, Riverside, and San Bernardino counties), and (10) Southern Border Region. Counties within each region are detailed in the corresponding regional report.

## DATA SUMMARY AND HISTORICAL TREND ANALYSIS<sup>2</sup>

This analysis presents pre-licensure program data from the 2014-2015 BRN School Survey in comparison with data from previous years of the survey. Data items addressed include the number of nursing programs, enrollments, completions, retention rates, NCLEX pass rates, new graduate employment, student and faculty census data, the use of clinical simulation, availability of clinical space, and student clinical practice restrictions.

### Trends in Pre-Licensure Nursing Programs

#### *Number of Nursing Programs*

In 2014-2015, Northern California had a total of 3 pre-licensure nursing programs; 2 were ADN programs and one was an ADN to LVN only program. The BSN program in the region graduated all of its students and closed in the 2012-2013 school year. All of the pre-licensure nursing programs in the region are public.

**Table 1. Number of Nursing Programs\*, by Academic Year**

	2005- 2006	2006- 2007	2007- 2008	2008- 2009	2009- 2010	2010- 2011	2011- 2012	2012- 2013	2013- 2014	2014- 2015
<b>Total nursing programs</b>	<b>3</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>3</b>	<b>3</b>
ADN	2	3	3	3	3	3	3	3	3	3
BSN	1	1	1	1	1	1	1	1	0	0
ELM	0	0	0	0	0	0	0	0	0	0
Public	3	4	4	4	4	4	4	4	3	3
Private	0	0	0	0	0	0	0	0	0	0
<b>Total number of schools</b>	<b>3</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>3</b>	<b>3</b>

<sup>2</sup> Between 2011-2012 and 2013-2014, data may be influenced by satellite campus data being reported and allocated to their proper region. Tables affected by this change are noted, and readers are cautioned against comparing data collected these years with data collected before and after this change.

In 2014-2015, one pre-licensure programs (33%) in the region reported partnering with another school to offer a program leading to a higher nursing degree. This nursing program had both a formal and informal collaboration with other programs.

**Table 2. Partnerships\*, by Academic Year**

	2005-2006	2006-2007	2007-2008	2008-2009	2009-2010	2010-2011	2011-2012	2012-2013	2013-2014	2014-2015
Programs that partner with another program that leads to a higher degree	0	0	0	1	1	1	0	1	1	1
Formal collaboration								100%	100%	100%
Informal collaboration								0%	0%	100%
<b>Number of programs that reported</b>	<b>3</b>	<b>3</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>3</b>	<b>3</b>

\*These data were collected for the first time in 2005-2006.

Note: Blank cells indicate the information was not requested

### *Admission Spaces and New Student Enrollments*

Spaces available for new students in Northern California pre-licensure nursing programs reached a high of 153 in 2008-2009. Since then, the region has seen declining availability of spaces for new students. New student enrollments in the region have followed a similar pattern. Although available space and new student enrollment has been declining in recent years, the region's programs continued to enroll more students than there were spaces available. In 2014-2015, programs reported 93 spaces available for new students, which were filled with a total of 99 students. This represents the tenth consecutive year in which the region's programs have overenrolled students.

**Table 3. Availability and Utilization of Admission Spaces, by Academic Year**

	2005-2006	2006-2007	2007-2008	2008-2009	2009-2010	2010-2011	2011-2012	2012-2013	2013-2014	2014-2015
Spaces available	127	131	147	153	153	113	93	93	90	93
New student enrollments	144	147	178	172	154	122	109	110	102	99
<b>% Spaces filled with new student enrollments</b>	<b>113.4%</b>	<b>112.2%</b>	<b>121.1%</b>	<b>112.4%</b>	<b>100.7%</b>	<b>108.0%</b>	<b>117.2%</b>	<b>118.3%</b>	<b>113.3%</b>	<b>106.5%</b>

Although Northern California nursing programs continued to receive more applications requesting entrance into their programs than can be accommodated, the number of qualified applications programs in the region received has declined over the past four years. Most of this decline is due to the closure of the BSN program in the region. Programs in the region enrolled a smaller share of applications in 2014-2015 (49%) than in 2012-2013 (55%).

**Table 4. Student Admission Applications\*, by Academic Year**

	2005-2006	2006-2007	2007-2008	2008-2009	2009-2010	2010-2011	2011-2012	2012-2013	2013-2014	2014-2015
<b>Qualified applications</b>	<b>343</b>	<b>350</b>	<b>272</b>	<b>419</b>	<b>438</b>	<b>290</b>	<b>269</b>	<b>239</b>	<b>187</b>	<b>202</b>
ADN	194	193	156	201	246	290	269	239	187	202
BSN	149	157	116	218	192	0	0	0	0	0
<b>% Qualified applications not enrolled</b>	<b>58.0%</b>	<b>58.0%</b>	<b>34.6%</b>	<b>58.9%</b>	<b>64.8%</b>	<b>57.9%</b>	<b>59.5%</b>	<b>54.0%</b>	<b>45.5%</b>	<b>51.0%</b>

\*These data represent applications, not individuals. A change in the number of applications may not represent an equivalent change in the number of individuals applying to nursing school.

New student enrollments in the region's pre-licensure programs have shown an overall decline since 2007-2008. While ADN programs in the region had two years of declining enrollment between 2007-2008 and 2009-2010, these programs have seen relatively constant enrollment since 2010-2011.

No programs reported that they enrolled fewer students in 2014-2015 compared to the previous year.

**Table 5. New Student Enrollment by Program Type, by Academic Year**

	2005-2006	2006-2007	2007-2008	2008-2009	2009-2010	2010-2011	2011-2012	2012-2013	2013-2014	2014-2015
<b>New student enrollment</b>	<b>144</b>	<b>147</b>	<b>178</b>	<b>172</b>	<b>154</b>	<b>122</b>	<b>109</b>	<b>110</b>	<b>102</b>	<b>99</b>
ADN	89	103	118	110	94	102	109	110	102	99
BSN	55	44	60	62	60	20	0	0	0	0

### Student Census Data

The total number of students enrolled in the Northern California region's nursing programs declined every year from 2010 to 2014 and then increased slightly in 2015 (8%, n=12). The majority of this decline is the result of the closing of the BSN program in the region, resulting in only ADN students being enrolled in nursing programs in the region. A total of 170 students were enrolled in a Northern California region ADN program in 2014-2015, marking the highest ADN census in the region in the last ten years.

**Table 6. Student Census Data\* by Program Type, by Year**

	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
ADN	132	163	168	160	155	162	148	165	158	170
BSN	130	119	133	177	135	79	21	0	0	0
<b>Total nursing students</b>	<b>262</b>	<b>282</b>	<b>301</b>	<b>337</b>	<b>290</b>	<b>241</b>	<b>169</b>	<b>165</b>	<b>158</b>	<b>170</b>

\*Census data represent the number of students on October 15<sup>th</sup> of the given year.

### Student Completions

The number of students who completed Northern California nursing programs decreased by 34% (n=52) between 2011-2012 and 2013-2014. This decrease was the result of fewer BSN completions due to the closure of the BSN program in the region. However, the number of ADN completions has stayed steady at 100 students per year from 2013-2014 to 2014-2015.

**Table 7. Student Completions by Program Type, by Academic Year**

	2005- 2006	2006- 2007	2007- 2008	2008- 2009	2009- 2010	2010- 2011	2011- 2012	2012- 2013	2013- 2014	2014- 2015
ADN	57	82	95	99	90	84	95	92	100	100
BSN	51	40	47	42	56	55	57	22	0	0
<b>Total student completions</b>	<b>108</b>	<b>122</b>	<b>142</b>	<b>141</b>	<b>146</b>	<b>139</b>	<b>152</b>	<b>114</b>	<b>100</b>	<b>100</b>

### Retention and Attrition Rates

Of the 93 students scheduled to complete a Northern California nursing program in the 2014-2015 academic year, 86% (n=80) completed the program on-time, none are still enrolled in the program, and 14% (n=13) dropped out or were disqualified from the program. The region's average attrition rate has been increasing recently – from 5% in 2011-2012 to 14% in 2014-2015.

**Table 8. Student Retention and Attrition, by Academic Year**

	2005-2006	2006-2007	2007-2008	2008-2009	2009-2010	2010-2011	2011-2012	2012-2013	2013-2014	2014-2015
<b>Students scheduled to complete the program</b>	<b>98</b>	<b>113</b>	<b>152</b>	<b>129</b>	<b>151</b>	<b>138</b>	<b>148</b>	<b>108</b>	<b>92</b>	<b>93</b>
Completed on time	85	98	134	119	131	118	134	95	80	80
Still enrolled	0	3	3	1	2	10	6	3	1	0
Total attrition	13	12	15	9	18	10	8	10	11	13
Attrition-dropped out										4
Attrition-dismissed										9
Completed late <sup>†</sup>					0	0	2	3	0	0
<b>Retention rate*</b>	86.7%	86.7%	88.2%	92.2%	86.8%	85.5%	90.5%	88.0%	87.0%	86.0%
<b>Attrition rate**</b>	13.3%	10.6%	9.9%	7.0%	11.9%	7.2%	5.4%	9.3%	12.0%	14.0%
<b>% Still enrolled</b>	0.0%	2.7%	1.9%	0.8%	1.3%	7.2%	4.1%	2.8%	1.1%	0.0%

<sup>†</sup>These completions are not included in the calculation of either retention or attrition rates.

\*Retention rate = (students completing the program on-time) / (students scheduled to complete)

\*\*Attrition rate = (students dropped or disqualified who were scheduled to complete) / (students scheduled to complete the program)

Note: Blank cells indicate the information was not requested.

### NCLEX Pass Rates

Over the last ten years, NCLEX pass rates in the Northern California region have fluctuated for ADN and BSN program graduates. The NCLEX passing standard was increased in April 2013, which may have impacted later NCLEX passing rates, however, the 2014-2015 pass rate was the highest in the last ten years for ADN programs in the region at over 91%.

**Table 9. First Time NCLEX Pass Rates\* by Program Type, by Academic Year**

	2005-2006	2006-2007	2007-2008	2008-2009	2009-2010	2010-2011	2011-2012	2012-2013	2013-2014	2014-2015
ADN	84.1%	88.5%	89.1%	87.5%	85.9%	88.3%	90.8%	86.8%	89.9%	91.4%
BSN	82.5%	92.7%	82.6%	91.3%	82.0%	91.4%	93.8%	90.5%	-	-

\*NCLEX pass rates for students who took the exam for the first time in the given year.

### *Employment of Recent Nursing Program Graduates<sup>3</sup>*

The largest share of RN program graduates continues to work in hospitals, increasing from a ten-year low of 39% in 2011-2012 to a ten year high of 90% in 2014-2015. Between 2006-2007 and 2011-2012, the graduates of programs in the Northern California region had increasingly found employment at long-term care facilities. Over the last two years, the share of Northern California graduates employed in long-term care facilities declined dramatically – from 26% in 2012-2013 to 1% in 2013-2014 and 2014-2015. The share of recent graduates working as nurses in California, which has been relatively stable since 2008-2009, declined slightly in 2014-2015 (73%). Programs reported that only 2% of recent graduates were unable to find employment in nursing at the time of the survey.

**Table 10. Employment Location for Recent Nursing Program Graduates, by Academic Year**

	2005- 2006	2006- 2007	2007- 2008	2008- 2009	2009- 2010	2010- 2011	2011- 2012	2012- 2013	2013- 2014	2014- 2015
Hospital	85.0%	84.0%	76.0%	77.5%	60.5%	48.0%	39.1%	61.2%	79.8%	89.5%
Long-term care facilities	3.3%	2.5%	7.5%	10.0%	14.5%	16.3%	29.1%	25.6%	0.9%	1.2%
Community/public health facilities	5.0%	20.0%	5.0%	12.8%	14.5%	0.3%	5.6%	3.8%	7.0%	1.2%
Other healthcare facilities	6.7%	10.0%	10.0%	5.0%	11.7%	5.8%	17.5%	5.5%	10.4%	3.7%
Pursuing additional nursing education <sup>†</sup>								2.8%	0.0%	2.7%
Other	0.0%	10.0%	1.5%	0.0%	3.5%	1.5%	1.9%	0.0%	0.0%	0.0%
Unable to find employment*					14.5%	6.7%	6.9%	1.0%	1.8%	1.8%
<b>Employed in California</b>	<b>94.7%</b>	<b>90.7%</b>	<b>84.0%</b>	<b>79.5%</b>	<b>78.8%</b>	<b>79.3%</b>	<b>81.3%</b>	<b>76.7%</b>	<b>82.0%</b>	<b>73.3%</b>

Note: Blank cells indicated that the applicable information was not requested in the given year.

<sup>3</sup> Graduates whose employment setting was reported as “unknown” have been excluded from this table. In 2014-2015, on average, the employment setting was unknown for 10% of recent graduates.



### *Clinical Training in Nursing Education*

Questions regarding clinical simulation<sup>4</sup> were revised in the 2014-2015 survey to collect data on average amount of hours students spend in clinical areas including simulation in various content areas and plans for future use. All three of the Northern California region nursing programs reported using clinical simulation in 2014-2015. One (33%) of the three programs has plans to increase staff dedicated to administering clinical simulation in their program in the next 12 months.

The content areas using the most hours of clinical simulation on average are Medical/Surgical (22), and Psychiatry/Mental Health and Obstetrics (9 each). The largest proportion of clinical hours in all programs is in direct patient care (76%) followed by non-direct patient care (16%) and simulation (8%).

**Table 11. Average Hours Spent in Clinical Training by Content Area 2014-2015**

Content Area	Direct Patient Care	Non-Direct Patient Care (excluding simulation)	Clinical Simulation	Avg Total Clinical Hours
Medical/surgical	228.0	39.8	22.0	289.8
Fundamentals	110.0	54.5	6.0	170.5
Obstetrics	55.3	9.7	9.0	74.0
Pediatrics	55.3	10.0	8.7	74.0
Geriatrics	118.0	18.3	7.7	144.0
Psychiatry/mental health	66.0	1.3	9.0	76.3
Leadership/management	6.7	2.7	8.0	17.3
Other	0.0	0.0	0.0	0.0
<b>Total average clinical hours</b>	<b>639.3</b>	<b>136.3</b>	<b>70.3</b>	<b>846.0</b>
<b>Percent of clinical hours</b>	<b>75.6%</b>	<b>16.1%</b>	<b>8.3%</b>	<b>100.0%</b>
<b>Number of programs that reported</b>	<b>3</b>	<b>3</b>	<b>3</b>	<b>3</b>

In the 2014-2015 survey, programs were asked to report whether over the next 12 months they planned to increase, decrease, or maintain the number of hours in direct patient care, non-direct patient care, and clinical simulation for each of the eight content areas listed above. In each content area and clinical experience, all three programs reported plans to maintain the current balance of hours.

Respondents were asked why they were reducing the clinical hours in their program if they indicated in the prior questions that they were decreasing clinical hours in any content area or clinical experience type. The one program that answered the survey question about reasons for reducing clinical hours noted that its clinical hours were not changing.

<sup>4</sup> Clinical simulation provides a simulated real-time nursing care experience which allows students to integrate, apply, and refine specific skills and abilities that are based on the theoretical concepts and scientific knowledge. It may include videotaping, de-briefing and dialogue as part of the learning process.

### *Clinical Space & Clinical Practice Restrictions<sup>5</sup>*

No pre-licensure nursing programs in the Northern California region reported being denied access to a clinical placement, unit or shift in 2014-2015. Consequently, there were no losses in clinical placements, units or shifts, and no students were affected. No schools reported being allowed fewer students for a clinical placement, unit, or shift in this year than in the prior year.

**Table 12. RN Programs Denied Clinical Space, by Academic Year**

	2010- 2011	2011- 2012	2012- 2013	2013- 2014	2014- 2015
<b>Number of programs denied a clinical placement, unit or shift</b>	<b>1</b>	<b>1</b>	<b>2</b>	<b>1</b>	<b>0</b>
Programs offered alternative by site*					0
Placements, units or shifts lost*					0
Number of programs that reported	4	4	4	3	3
<b>Total number of students affected</b>	<b>2</b>	<b>0</b>	<b>40</b>	<b>27</b>	<b>0</b>

\*Significant changes to these questions for the 2014-2015 administration prevent comparison to the data from prior years.

This year since no programs reported loss of clinical space, no reasons were reported for that loss. For the for the two years prior to 2014-2015, nursing programs in the region reported that clinical space was unavailable due to competition for space and clinical sites no longer accepting ADN students.

**Table 13. Reasons for Clinical Space Being Unavailable\*, by Academic Year**

	2009- 2010	2010- 2011	2011- 2012	2012- 2013	2014- 2015
Competition for clinical space due to increase in number of nursing students in region	0%	0%	50%	100%	0%
No longer accepting ADN students	0%	0%	50%	100%	0%
Implementation of Electronic Health Records system			50%	0%	0%
Nurse residency programs	100%	0%	50%	0%	0%
Staff nurse overload or insufficient qualified staff	100%	100%	0%	0%	0%
Visit from Joint Commission or other accrediting agency			0%	0%	0%
Displaced by another program	0%	0%	0%	0%	0%
Decrease in patient census	0%	0%	0%	0%	0%
Closure, or partial closure, of clinical facility		0%	0%	0%	0%
Clinical facility seeking magnet status	0%	0%	0%	0%	0%
Change in facility ownership/management		0%	0%	0%	0%
The facility began charging a fee (or other RN program offered to pay a fee) for the placement and the RN program would not pay				0%	0%
Other	100%	0%	0%	0%	0%
<b>Number of programs that reported</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>2</b>	<b>0</b>

\*Data were collected for the first time in the 2009-2010 or 2010-2011 survey.

<sup>5</sup> Some of these data were collected for the first time in 2009-2010. However, changes in these questions for the 2010-2011 administration of the survey prevent comparability of the data. Therefore, data prior to 2010-2011 are not shown.

Note: Blank cells indicated that the applicable information was not requested in the given year.

No programs lost access to clinical space in 2014-2015 and no strategies to address lost clinical space were reported.

**Table 14. Strategies to Address the Loss of Clinical Space\*, by Academic Year**

	2011-2012	2012-2013	2013-2014	2014-2015
Replaced lost space at different site currently used by nursing program	0%	100%	100%	-
Added/replaced lost space with new site	0%	0%	100%	-
Replaced lost space at same clinical site	0%	100%	0%	-
Clinical simulation	0%	0%	0%	-
Reduced student admissions	0%	0%	0%	-
Other	100%	100%	0%	-
<b>Number of programs that reported</b>	<b>1</b>	<b>2</b>	<b>1</b>	<b>0</b>

\*Data collected for the first time in 2011-12.

In 2014-2015, for the second year, none of the nursing programs in the Northern California region reported an increase in out-of-hospital clinical placements.

**Table 15. Alternative Out-of-Hospital Clinical Sites\* Used by RN Programs, by Academic Year**

	2010-2011	2011-2012	2012-2013	2013-2014	2014-2015
Skilled nursing/rehabilitation facility	0%	100%	100%	0%	0%
Public health or community health agency	0%	0%	0%	0%	0%
School health service (K-12 or college)	0%	50%	0%	0%	0%
Medical practice, clinic, physician office	0%	50%	0%	0%	0%
Hospice	0%	0%	0%	0%	0%
Outpatient mental health/substance abuse	0%	50%	0%	0%	0%
Surgery center/ambulatory care center	0%	100%	0%	0%	0%
Home health agency/home health service	0%	50%	0%	0%	0%
Renal dialysis unit	0%	0%	0%	0%	0%
Case management/disease management	0%	50%	0%	0%	0%
Occupational health or employee health service	0%	0%	0%	0%	0%
Urgent care, not hospital-based	0%	50%	0%	0%	0%
Correctional facility, prison or jail	0%	0%	0%	0%	0%
Other	0%	0%	100%	0%	0%
<b>Number of programs that reported</b>	<b>0</b>	<b>2</b>	<b>1</b>	<b>0</b>	<b>0</b>

\*These data were collected for the first time in 2010-2011.

In 2014-2015, 33% (n=1) of Northern California schools reported that pre-licensure students in their programs had encountered restrictions to clinical practice imposed on them by clinical facilities. The most common types of restricted access students faced were to the clinical site itself, due to a visit from the Joint Commission or another accrediting agency and automated medical supply cabinets. Over the last three years, fewer schools reported restricted access to electronic medical records, bar coding medication administration, and student health and safety requirements.

**Table 16. Common Types of Restricted Access in the Clinical Setting for RN Students, by Academic Year**

	2009-2010	2010-2011	2011-2012	2012-2013	2013-2014	2014-2015
Clinical site due to visit from accrediting agency (Joint Commission)	75%	0%	0%	0%	100%	100%
Automated medical supply cabinets	50%	0%	0%	50%	100%	100%
IV medication administration	25%	0%	0%	50%	100%	0%
Some patients due to staff workload		0%	0%	50%	100%	0%
Alternative setting due to liability	0%	0%	0%	50%	100%	0%
Electronic Medical Records	75%	0%	100%	50%	0%	0%
Bar coding medication administration	50%	0%	100%	50%	0%	0%
Glucometers	25%	0%	0%	0%	0%	0%
Student health and safety requirements		0%	100%	50%	0%	0%
Direct communication with health team	0%	0%	0%	0%	0%	0%
<b>Number of schools that reported</b>	<b>4</b>	<b>1</b>	<b>1</b>	<b>2</b>	<b>1</b>	<b>1</b>

Note: Blank cells indicated that the applicable information was not requested in the given year.

Numbers indicate the percent of schools reporting these restrictions as "common" or "very common".

In 2014-2015, no schools reported access problems related to electronic medical records. In 2013-2014, one school had reported restrictions due to staff still learning the system and unable to assure documentations standards were being met.

In 2014-2015, one school reported that liability was the sole reason for restricted student access to medication administration systems. In 2013-2014, no school gave a reason for restrictions in this category

**Table 17. Share of Schools Reporting Reasons for Restricting Student Access to Electronic Medical Records and Medication Administration, 2013-2014 & 2014-2015**

	Electronic Medical Records		Medication Administration	
	2013-2014	2014-2015	2013-2014	2014-2015
Liability	0%	0%	0%	100%
Staff still learning and unable to assure documentation standards are being met	100%	0%	0%	0%
Insufficient time to train students	0%	0%	0%	0%
Staff fatigue/burnout	0%	0%	0%	0%
Cost for training	0%	0%	0%	0%
Patient confidentiality	0%	0%	0%	0%
Staff still learning and unable to assure documentation standards are being met	100%	0%	0%	0%
<b>Number of schools that reported</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>1</b>

Note: Data collected for the first time in 2013-2014.

Numbers indicate the percent of schools reporting these restrictions as “uncommon”, “common” or “very common” to capture any instances where reasons were reported.

In both 2013-2014 and 2014-2015, the nursing school in the region that reported restricted access for students compensated for training in areas of restricted student access by providing training in the simulation lab. In 2014-2015 the one school also compensated by ensuring all students have access to sites that train them in this area.

**Table 18. How the Nursing Program Compensates for Training in Areas of Restricted Access**

	2013-2014 % Schools	2014-2015 % Schools
Training students in the simulation lab	100%	100.0%
Ensuring all students have access to sites that train them in this area	0%	100.0%
Training students in the classroom	100%	0.0%
Purchase practice software, such as SIM Chart	0%	0.0%
Other	0%	0.0%
<b>Number of schools that reported</b>	<b>1</b>	<b>1</b>

Note: Data collected for the first time in 2013-2014.

### Faculty Census Data<sup>6</sup>

In 2014-2015, total number of nursing faculty in the region decreased by 6 faculty members from 43 the prior year to 37.<sup>7</sup> Of these faculty, 30% (n=11) were full-time and 68% (n=25) were part-time. Since 2007, the number of full-time faculty in the region has declined, while the number of part-time faculty increased to a high of 48 in 2010 and has since also declined. Nursing schools in the region continue to report a need for faculty. On October 15, 2015, there were five vacant faculty positions in the region, representing a 11.9% faculty vacancy rate, the highest reported rate in ten years. The vacancy rate for full-time faculty was 21.4%, while the vacancy rate for part-time faculty was 7.4%.

**Table 19. Faculty Census Data, by Year**

	2006	2007*	2008	2009	2010	2011	2012	2013	2014*	2015*
<b>Total Faculty</b>	<b>34</b>	<b>44</b>	<b>61</b>	<b>56</b>	<b>62</b>	<b>45</b>	<b>38</b>	<b>34</b>	<b>43</b>	<b>37</b>
<i>Full-time</i>	15	17	16	16	14	13	10	10	8	11
<i>Part-time</i>	19	27	45	40	48	32	28	24	28	25
<b>Vacancy Rate**</b>	<b>5.6%</b>	<b>6.4%</b>	<b>6.2%</b>	<b>6.7%</b>	<b>1.6%</b>	<b>2.2%</b>	<b>2.6%</b>	<b>2.9%</b>	<b>4.4%</b>	<b>11.9%</b>
<i>Vacancies</i>	2	3	4	4	1	1	1	1	2	5

\*The sum of full- and part-time faculty did not equal the total faculty reported in these years.

\*\*Vacancy rate = number of vacancies/(total faculty + number of vacancies)

In 2014-2015, all of the Northern California region nursing schools reported that their faculty worked overloaded schedules, and all reported paying the faculty extra for the overloaded schedule.

**Table 20. Faculty with Overloaded Schedules\*, by Academic Year**

	2008- 2009	2009- 2010	2010- 2011	2011- 2012	2012- 2013	2013- 2014	2014- 2015
Schools with overloaded faculty	2	2	3	3	2	2	3
Share of schools that pay faculty extra for the overload	100%	100%	66.70%	100%	100%	100%	100.0%
<b>Total number of schools</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>3</b>	<b>3</b>

\*These data were collected for the first time in 2008-2009.

<sup>6</sup> Census data represent the number of faculty on October 15<sup>th</sup> of the given year.

<sup>7</sup> Since faculty may work at more than one school, the number of faculty reported may be greater than the actual number of individuals who serve as faculty in nursing schools in the region.

## Summary

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The number of pre-licensure nursing programs in the Northern California region has stayed steady at three over the last two years, after decreasing from four to three in 2013-2014 due to the closure of the BSN program in the region. In 2014-2015, there was one program that partnered with another school to offer a program leading to a higher degree in nursing.

Spaces available for new students in Northern California pre-licensure nursing programs reached a high of 153 in 2008-2009. Since then, the region has seen declining availability of spaces for new students. New student enrollments in the region have followed a similar pattern. These declines in admission spaces and new student enrollments are almost exclusively due to the closing of the BSN program in the region. Applications to programs in the region have been declining since 2009-2010. However, nursing programs continue to receive more qualified applications than can be accommodated. In 2014-2015, 49% (n=99) of qualified applications enrolled.

Nursing program expansion over the past ten years has led to a growing number of graduates in the region – from 108 graduates in 2005-2006 to 152 graduates in 2011-2012. Since 2011-2012, when the BSN program in the region stopped enrolling new students, the total number of graduates in the region has declined. The region had 100 graduates from its programs in 2014-2015. In addition, the average attrition rate in the region has increased from its ten-year low of 5% in 2012-2013 to 14% in 2014-2015.

Most of the region's recent graduates continue to work in hospitals. Although a number of graduates turned to long-term care facilities for employment between 2006-2007 and 2012-2013, this number dropped dramatically in 2013-2014 through 2014-2015. In 2014-2015, hospitals made up a larger proportion of employment than at any time in the last ten years. At the time of the survey, 2% of new graduates from the region's RN programs were unable to find employment in nursing.

All three of the nursing programs in Northern California reported using clinical simulation in 2014-2015, and one of these programs plans to expand its use in the coming year. All of the programs plan to maintain their number of clinical simulation hours in all content areas. No schools reported being denied access to clinical space that had been previously available.

Restrictions to student clinical practice at clinical facilities have become less common over time. In 2009-2010, all programs in the region reported that students faced restricted access to various practices in the clinical setting, or to the clinical setting itself. In 2014-2015, only one program reported limited access.

The total number of nursing faculty in the region reached a ten-year high of 62 faculty in 2010. Since then, the number of faculty has declined due to the BSN program in the region that was no longer admitting students in 2010-2011. Faculty vacancy rates have remained low for the past five years with only one or two faculty vacancies reported in each of those years. However, the vacancy rate reported in 2015 was 11.9% overall (n=5) – 21.4% for full-time faculty and 7.4% for part-time faculty—the highest rate in the last ten years.

## **APPENDICES**

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### **APPENDIX A – Northern California Nursing Education Programs**

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#### *ADN Programs (2)*

College of the Redwoods  
Mendocino College

#### *LVN to ADN Program Only (1)*

College of the Siskiyous



## **APPENDIX B – BRN Education Issues Workgroup Members**

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### **Members**

	<b><u>Organization</u></b>
Loucine Huckabay, Chair	California State University, Long Beach
Judee Berg	HealthImpact (formerly CINHC)
Audrey Berman	Samuel Merritt University
Stephanie L. Decker	Kaiser Permanente National Patient Care Services
Brenda Fong	Community College Chancellor's Office
Deloras Jones	Independent Consultant
Judy Martin-Holland	University of California, San Francisco
Robyn Nelson	West Coast University
Tammy Rice	Saddleback College
Stephanie R. Robinson	Fresno City College
Paulina Van	Samuel Merritt University

### **Ex-Officio Member**

Louise Bailey	California Board of Registered Nursing
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### **Project Manager**

Julie Campbell-Warnock	California Board of Registered Nursing
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