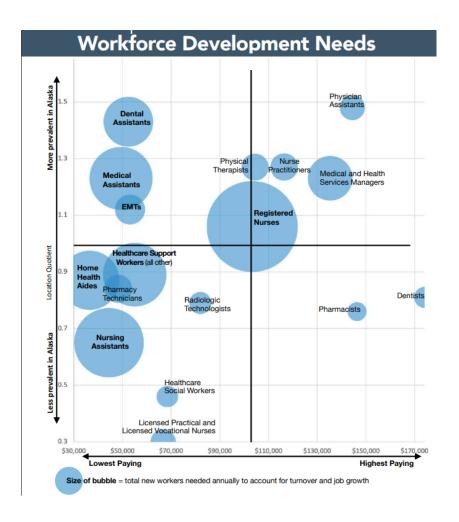
Alaska Nursing Workforce Center – Background Information

Key Nursing Workforce Data

AHHA Workforce Data Analysis Report 2023 - Full Report

- 7,992 unique people worked as registered nurses in Alaska in 2022, including traveling nurses.
- Need nearly 1400 new RNs every year to meet turnover and growth in need.
- Hospital-based registered nurses had a vacancy rate of 21%, and it took an average of 118 days to fill a vacant position.

New Workers Needed Annually Based on Turnover & Growth							
SOC Code	Occupational Title	2022 Average Quarterly worker count	Annual average worker "churn"	New workers needed for turnover	New workers needed for growth	New workers needed annually	
291141	Registered Nurses	6,707	19%	1,285	81	1,366	
291171	Nurse Practitioners	523	23%	119	5	124	



Why a State Nursing Workforce Center?

Nursing workforce centers are state initiatives are made up of people who work to increase the supply of nurses and resolve the critical nursing shortage. 40 States have Nursing Workforce Centers that engage in a variety of activities to ensure the state's nursing workforce is adequate and growing. Workforce centers use evidence-based policy and strategy to drive activities. Activities include data collection and analysis, publication of reports and information, assessing the demand for nursing; establishing strategies based on state nursing workforce findings to address unique state needs; launching programs for nursing professional development, leadership engagement, transition to practice support, and more.

Each state nursing workforce center works with state partners to ensure that the state has a well supported, robust, and sustainable workforce. Organizational structures, funding sources, and entity names vary, the state nurse workforce entities are commonly referred to as "Centers." The majority of states have a nurse workforce initiative.

Focus of the Centers

Study the unique characteristics state nursing workforce

- o Gather data on supply, demand and educational pipeline of nurses (24 states).
- Explore regional and workplace setting differences to inform solutions (Oregon).

Increase the number of new nurses

- Collect data and test solutions to nurse faculty shortages (California, Connecticut, Hawaii, Idaho, Indiana, Louisiana, New Jersey, New York, Washington, and Wisconsin).
- Address inefficiencies in clinical experience scheduling and advocate for new clinical sites (California, Colorado, Connecticut, Hawaii, Idaho, Indiana, Maryland, Mississippi, New Jersey, Washington).
- Predict the need to increase nurse production which resulted in funding to more than double the students enrolled in nursing schools (North Dakota and Oregon).
- Coordinate scholarship programs (Colorado, Illinois, Indiana, New Jersey, New Mexico, New York, North Dakota, Pennsylvania, and Vermont).

Recruit nurses to the profession

- Create programs to increase interest and awareness of nursing to K-12 students (Arkansas, Colorado, Hawaii, Indiana, Mississippi, North Dakota, Washington).
- Build programs to diversify their nursing workforce including mentoring programs (Arkansas, California, Colorado, Connecticut, Illinois, Indiana, Louisiana, Michigan, Mississippi, New York, Pennsylvania, Washington, and Wisconsin).

Retain nurses in the workplace

 Ensure the well-being of the nursing workforce and improve workplace environment (California, Colorado, Hawaii, Idaho, Indiana, Maryland, Mississippi, New Jersey, North Dakota, Pennsylvania, South Dakota, Washington, and Wisconsin).

- Create training opportunities for nurses at all levels and in all settings to advance leadership and professional practice (Arkansas, California, Colorado, Connecticut, Hawaii, Illinois, Indiana, Louisiana, Maryland, Mississippi, Montana, New Mexico, North Dakota, Pennsylvania, Washington, and Wisconsin).
- o Promote continual learning and academic progression for nurses (Arkansas, California, Colorado, Connecticut, Hawaii, Indiana, Maryland, Pennsylvania, and Washington).

Advocate for changes to improve the stability of our state's nursing workforce

- Provide critical employer- education connections through statewide planning and implementation of programs (Colorado, Connecticut, Indiana, North Dakota)
- Leverage connections through state nursing stakeholders to pass critical legislation such as Nurse Licensure Compacts and respond to the future needs of the nursing workforce needs following the COVID pandemic (Louisiana, North Dakota, Oregon, Louisiana, West Virginia, Arkansas).

Funding Strategies

- 1. Fund the Center for Nursing through nurse license fee assessment at a rate of \$20 nurse upon initial licensure and license renewal to support staffing, research, data analysis, strategy, and program planning necessary to fulfill the mission
- 2. Fund the Center for Nursing through state general funds at \$500,000 annual to support staffing, research, data analysis, strategy, and program planning necessary to fulfill the mission
- 3. Continue the current funding, as established, to ensure that the staffing, research, data analysis, strategy, and program planning necessary to fulfill the mission

Incorporation (table)

Across the nation, members of the National Forum of State Nursing Workforce Centers are established in a variety of ways. All forum members support the advancement of new and existing nurse workforce initiatives by sharing best practices in nursing workforce research, workforce planning, workforce development, and the formulation of workforce policy.

Types of establishment*	States		
Centers established in state law	HI, FL, WA, OR, WI		
501C3	WA, CA, CO, IN*, OR, CT, WI, ND, MS Included membership		
BON	AL, IL, LA, IA, KY, SD		
Hospital Association	MT, MS		

Universities	FL, HI, MN, TN, NJ, GA, MA		
State Government	UT, VA		
AHEC	SC, VT		
Professional Association	AZ, NM, ID, ND		
Action Coalition	PA, NV		

^{*}One state may fall under multiple categories