



Finding Employment as a Newly Licensed Registered Nurse in Louisiana

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June 2022

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Executive Summary

Newly licensed registered nurses (NLRNs) face significant challenges that impact successful transition into the workforce. Finding employment begins either before graduation or sometime soon thereafter for most new graduates. Once employed, they are exposed to a world that may often overwhelm them. It is no secret that new nurses feel stressed and fatigued during the transition from academia to practice. They must learn to manage patients, families, caregivers, relationships with their healthcare team, as well as their personal lives, and in some situations, they may be placed in managerial or supervisory positions they have not been adequately prepared to handle. If not given the proper support during this very critical time, NLRNs may experience anxiety, frustration, and burnout which could lead to attrition (Hofler & Thomas, 2016).

The 2021 Louisiana Center for Nursing (LCN) NLRN Survey represents the sixth biennial survey of NLRNs conducted by LCN. The initial survey, originally entitled the New Graduate Survey, was conducted in 2011. The name of the survey was changed to better identify the target population – graduates from pre-RN licensure nursing programs that successfully passed the National Council Licensure Examination for Registered Nurses (NCLEX-RN) and received their initial RN license. Conducting the LCN NLRN Survey every two years allows for monitoring of employment trends and challenges reported by NLRNs in Louisiana which will equip employers of NLRNs and nurse educators with information that can be used to help create a seamless transition from academia to practice.

Key Findings from the 2021 LCN NLRN Survey

A total of 594 NLRNs completed the 2021 LCN NLRN Survey yielding a 12.7% response rate which is 3.6 percentage points lower than the 16.3% response rate obtained with the 2019 LCN NLRN Survey. Because of the low response rate, it should not be assumed that the entire target population of NLRNs in Louisiana would respond in a similar fashion. It is also important to note that findings from this study are in line with similar studies that have been conducted across the country (Orlowski & Berg, J, 2020; Feeg & Mancino, 2018).

Education and Transition to Practice for NLRNs

- Ninety-eight percent of the NLRNs were employed at the time they completed the survey.
- Thirty-four percent (34%) of the NLRNs were minorities, which is equivalent to the percentage of minorities in the 2021 graduates from Louisiana's Pre-RN nursing programs (2021 LSBN Annual Report).
- Eighty-three percent of the NLRNs completed their education in Louisiana compared to 89% in 2019, a decrease of six percentage points.
- Fifty two percent (52%) of the NLRNs were prepared at the associate degree level, which was a shift from 2015 when over half of the NLRNs were prepared at the baccalaureate level.
- Thirty-nine percent (233) of the NLRNs reported having a degree or certificate in another field, with the greatest percentage having a bachelors' degree in another field (43%), followed by an associate degree (23%).
- Eighteen percent (18%) of the NLRNs that had a degree or certificate in another field reported that they were licensed practical nurses.
- Thirty-three percent (33%) of the NLRNs indicated that they graduated from an accelerated nursing program.

- Seventy-nine percent (79%) of the NLRNs plan to advance their education: 35% planned to pursue a baccalaureate degree in nursing, 39% a masters' degree in nursing, and 11% planned to pursue a doctorate.
- Sixty-four percent (64%) of the NLRNs took the NCLEX-RN between two to seven weeks after graduation; 33% between 2-4 weeks; and 31% between 5-7 weeks.
- Ninety-two percent (92%) of the NLRNs reported passing the NCLEX-RN on first take.
- The percentage of NLRNs seeking employment prior to graduation went from 78% in 2019 to 75% in 2021, a decrease of 3 percentage points.
- In 2021, 43% of the NLRNs reported that they had participated in a nurse residency program compared to 15% in 2017 and 38% in 2019.
- Sixty-six percent (220) of the NLRNs that had not participated in a nurse residency program reported that a nurse residency/transition to practice program was not offered by their employer.
- The top two motivating factors reported by NLRNs for participating in a nurse residency program were increasing skills and confidence (68% of respondents) and receiving a salary/stipend (58% of respondents).

NLRNs Find Employment

- Ninety-eight percent (98%) of the NLRNs were employed at the time they completed the survey which was consistent with the 2019 survey.
- Eighty-four percent (84%) of the NLRNs submitted less than three job applications before finding a position as a RN compared to 56% in 2013.
- Ninety-seven percent (97%) of the NLRNs found employment as a RN in less than three months.
- Methods used by NLRNs to seek employment included: previous employment (36%), clinical experience at the healthcare facility (34%), hospital/health facility websites (29%), knowing someone at the healthcare facility (22%), job fair (12%); and referral (8%).
- Sixty-five percent (65%) of the NLRNs had worked as a RN for more than a year at the time they completed the 2021 LCN NLRN Survey, followed by 16% that reported being employed seven to ten months.
- The vast majority (95%) of NLRNs were working full-time, two percent reported working part-time and three percent were working on a per diem basis.
- Seventy-two percent (72%) of the NLRNs reported being employed in an acute care hospital at the time of completion of the survey, six percent were working in home health/community health/public health, five percent were working in clinic/ambulatory care, and five percent in long term care/skilled nursing facilities.
- Seventy-eight percent (78%) of the NLRNs reported that they were working in their job of choice.
- Thirty-six percent (36%) of the employed NLRNs reported starting salaries of \$25-\$27 an hour compared to 23% in 2019. The percentage of NLRNs reporting a starting salary of \$22-\$24 an hour decreased by 30 percentage points over the last two years (58% in 2019; 64% in 2017).
- Thirty-three percent (189) of the NLRNs reported that they had changed employment settings at least once since their initial position as a RN.
- Reasons given for changing positions included uncomfortable work environment (38%), which included bullying, inadequate training, unsafe staff/patient ratios and lack of support by management/administration; better opportunities (16%); need for better pay/benefits (14%); relocation (9%); travel nursing (7%); and other (17%).

NLRNs That Were Not Employed

- Two percent of the NLRNs reported that they were unemployed at the time they completed the 2021 LCN NLRN Survey.
- Eight of the NLRNs reported that they were not actively seeking employment and one said they had been seeking employment for less than three months.
- Reasons given for not being hired included: employers were not currently hiring; lack of experience; and no positions were available for new graduates.

Narrative Comments by NLRNs

Each year the LCN NLRN Survey is conducted, respondents are asked to share comments/concerns about their employment seeking experiences in Louisiana and each year there have been hundreds of comments shared about their successes and challenges in pursuing employment as a RN in Louisiana, as well as their experiences as newly employed RNs. The following represent a few of the NLRNs comments that are presented with grammatical edits. More of their comments as written and without edits can be found at the end of this report. To maintain anonymity, the letter 'X' was used when NLRNs referred to specific health care agencies or cities.

NLRNs that found it relatively easy to find employment in Louisiana

- I had no issues finding employment. I receive (and still receive) mail/emails regarding employment opportunities in the region.
- It's easy to get job in Louisiana.

Lack of experience and not feeling prepared

- It was very difficult to find 8 hr. shift jobs both in the acute care settings and dr.'s offices without having any form of nursing experience.
- Several employers want 1-year clinical RN experience. They did not take my 7 yrs. as an LPN into consideration.
- There should certainly be more opportunities for newly licensed nurses to transition into their career field as there are hardly any opportunities around my residence; and health care facilities need to implement better orientation programs as many of them lack proper organization and preparation for new nurses, which hinders them to practice as safer and effective nurses when completing their orientation. As a newly licensed nurse I have had a hard time finding a job in my field of interest in Louisiana as well because of the lack of facilities wanting to hire due to no/little prior experience.

Nurse residency /transition to practice programs

- Improve and enforce staffing ratios and you will improve hiring in critical needs areas. No one wants to start out in Med Surg anymore because they feel forgotten and hung out to dry. Starting out new on nights with a 7-1 ratio with little support and a staff shortage is a guaranteed quick burnout. Universal residencies that have a firm, dedicated schedule with weeks of education and orientating moving through all units/ levels of care, and skills labs, would be highly beneficial, not only in making a better equipped more well-rounded, more capable new nurse, but also in finding the best department fit for those nurses.
- The only concern is that there are not a lot of preceptors assigned to train new grads due to the lack of staff. Many facilities are working short and new grads are not being trained at their best.

Hiring / Interview process

- Research jobs and employers before accepting the first one that comes along.
- Finding a nurse tech/intern job is the best way to know the type of unit/nursing one is trying to pursue

Work environment

- Educate new nurses to stand up for themselves and not be bullied by more experienced nurses. And let them know it's acceptable to ask for a different preceptorship during orientation. Even though employers may say they do not tolerate bullying in the workplace, looking the other way is accepting the behavior.
- I personally was happy to finally have a steady job and was very grateful and lucky to get a job in the field I wanted right out of school. However, after working as a nurse for over a year, it is unfair to have the pay that we do for the amount that we work and must tolerate in the field. We do not get paid enough, and we are being overworked. Administration does not help when we ask. They falsely stated that they are helping. They are completely out of touch with what is happening at the bedside. They wait until the last minute to reorder supplies we desperately need in the hospital let alone the ICUs. It is not fair to us as bedside nurses to be treated as we are and paid as we are. It needs to change.

Nurse patient ratio

- Please implement safe nurse to pt. ratios!!!
- The staffing ratios are very high demanding and hard for a new nurse to learn under. Poor management at a lot of places and everything is about making a profit, not what benefits the patient.

Salary

- I do not think there is a problem with finding a job in LA. The problem is that we are short on nurses, and we are not paid enough. Most of the loyal workers are leaving doing travel nursing. I think if the pay was increased or if they offered to pay off our student loans, I think more nurses would stay.
- The starting pay is ridiculous in our area. We can move 1 state over and make almost double. Many leave. The only reason I stayed is because my family lives here.

COVID

- It concerns me that many hospitals in LA have adopted a policy of requiring the Covid-19 vaccine for employment. I believe a Covid-19 vaccine mandate does and will continue to negatively impact the nursing shortage and ability to secure stable employment.
- The Covid pandemic really sucked and totally ruined my mental health for the duration that it occurred.

Other

- Places that were once requiring experienced nurses are now allowing new grads with no training to work there as well as travel jobs taking away lots of nurses for insane amount of money whereas not all of us new grads can travel. Which is causing problems because new grad pay traveling vs new grad pay working the floor are completely different amounts. Which is causing people not to want to work "regular" jobs and nurses especially new grads are becoming burnt out newly graduated because everywhere is so short staffed.
- The pay is too low, the work is hard and dangerous, and students are being taken advantage of. If nursing schools showed students what the job currently is, no one would enroll. Nursing and hospitals deserve reform.

Recommendations

Recommendations that stem from this report include but are not limited to the following:

- Implement collaborative, innovative academic-practice partnerships between pre-RN nursing programs in universities and community colleges and healthcare systems that will create an environment that allows the NLRN to attain the critical thinking, clinical, communication and professional skills that are needed to become a safe, effective, compassionate member of the nursing profession.
- Develop accredited comprehensive nurse residency programs across the state that will allow for a seamless transition from academia to practice for NLRNs.
- Develop nurse mentoring / coaching programs for NLRNs that will allow them to achieve competency, confidence, and autonomy as a RN.
- Create a work environment that is supportive, safe, and provides opportunities for NLRNs to increase their skills and advance professionally within the organization.
- Utilize innovative strategies such as flex scheduling and decreased nurse patient ratios on large units, such as medical surgical units, to create an environment where NLRNs can enhance their skills, feel valued and productive, and grow as leaders.
- Explore the role of repayment of student loans as a deterrent to NLRNs advancing their education.
- Repeat the NLRN Survey every two years to continue to monitor trends in hiring practices experienced by NLRNs as changes occur in the state's health care system, economy, and nursing workforce, to better inform policy makers, schools of nursing, prospective nursing students, and other interested stakeholders.

Introduction

According to the Bureau of Labor Statistics (BLS) Occupational Outlook Handbook (2018), employment of registered nurses (RNs) is projected to grow 9% from 2020 to 2030. About 194,500 openings for RNs are projected each year, on average, over the next decade. Many of those openings are expected to result from the need to replace workers who exit the labor force due to retirement and the need to replace workers who transfer to different occupations. New graduates continue to be the largest source of RNs for recruitment. Yet, there are significant concerns amongst employers about the attrition rate of newly licensed registered nurses (NLRNs) within their institutions. About 17% of NLRNs leave their first job within the first year; 31% by the second year; and by four and a half years, the turnover rate is 49% (Feister, 2013). By six years after graduation, the rate is about 55%. By better understanding the viewpoints and desires of NLRNs regarding the nursing profession, healthcare organizations can be better prepared to attract and retain nurses from a generation which is fast becoming one of the largest cohorts of the nursing profession.

Purpose

The Louisiana Center for Nursing (LCN) has conducted the NLRN Survey (formerly referred to as the New RN Graduate Survey) every other year, beginning in 2011, to obtain objective data about the actual and potential employment challenges experienced by NLRNs in Louisiana. Findings from the LCN NLRN Survey are shared with nurse educators, employers, policy makers, student nurses, and other interested stakeholders to identify employment issues or concerns that could potentially impact the current and future nursing workforce in Louisiana. It is imperative that nurse educators and employers of NLRNs are informed about the concerns of this very important segment of the RN workforce if we are to ensure that Louisiana will continue to have a thriving nursing workforce that is safe, effective, and qualified to care for an increasingly diverse and aging population with complex healthcare needs.

Methods

In addition to demographic information, newly licensed RNs in Louisiana were asked to respond to questions related to their experiences in finding initial employment as a RN. Some of the questions asked were: When did you begin seeking employment? How many jobs did you apply for prior to securing a RN position? and, Was your initial position as a RN your job of choice? Additional questions have been added to the survey over the years to gain more information about the employment experiences of NLRNs in Louisiana.

On September 29, 2021, an email blast with the link to the 2021 LCN NLRN Survey went out via SurveyMonkey to a total of 4,689 new RNs that received their initial RN license between June 1, 2019, and May 31, 2021. Follow-up email blasts were sent at two- and four-week intervals, and again one week prior to the close of the survey. The survey was closed on Friday, November 12, 2021, with a total of 594 NLRNs completing the survey yielding a 12.7% response rate (Figure 1). Louisiana's response rate is higher than the National Council of State Boards of Nursing 2017 RN Nursing Knowledge Survey which yielded an 11.4% response rate.

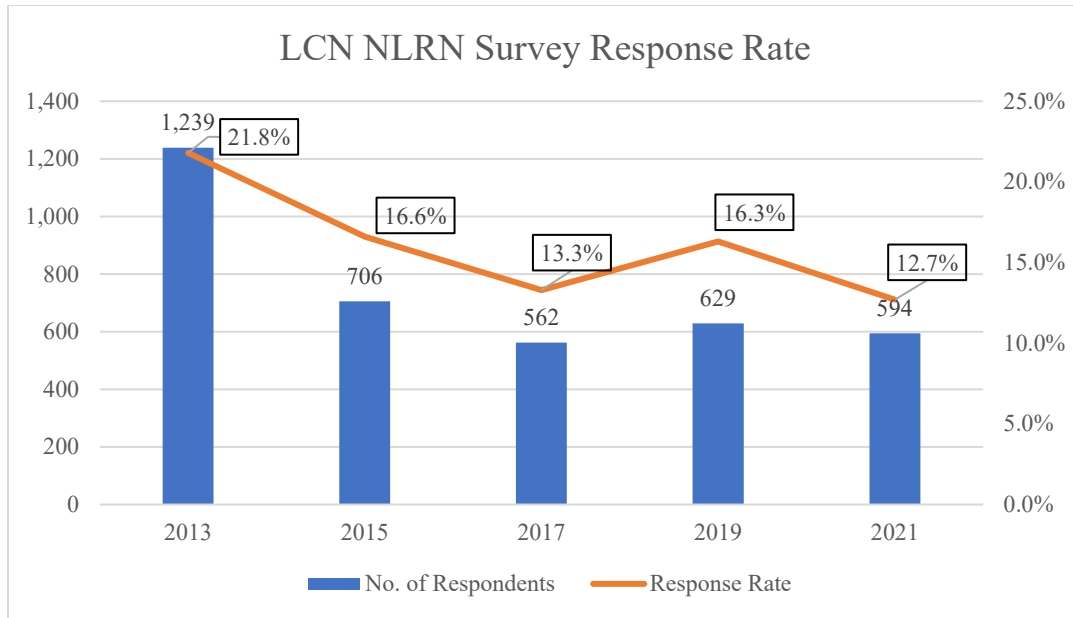


Figure 1. Number of respondents that completed the LCN NLRN Survey.

The Statistical Package for Social Sciences (SPSS version 18) was used to conduct the analysis of the survey. Descriptive statistics were used to describe the population and findings.

Limitations

Valuable information about the employment of NLRNs in Louisiana has been gained from data obtained with the LCN NLRN Surveys over the past twelve years. Findings obtained from these types of surveys are used to inform potential employers, nursing faculty, policymakers, and other interested stakeholders. Yet, because of the low response rate, survey findings must be used cautiously, and it should not be assumed that the entire target population of NLRNs in Louisiana would respond in a similar fashion. It is also important to note that findings from this study are in line with other studies that have been done across the country (Orlowski & Berg, J, 2020; Feeg & Mancino, 2018).

Findings

Residence of NLRNs While in School and at the time of Completion of the 2021 LCN NLRN Survey

NLRNs were asked to provide information about the parish in which they lived while in nursing school and the parish in which they lived at the time they responded to the 2021 LCN NLRN Survey. Parishes were then converted to the eight Regional Labor Market Areas (RLMA) designated by the Louisiana Workforce Commission (2018). One hundred percent of the eight RLMAs and 91% of parishes (58 of the 64 parishes) in Louisiana were represented in the survey. Since 2013, most of the respondents lived in the New Orleans, Baton Rouge, and Shreveport RLMAs while in nursing school and at the time that they completed the survey (Table 1).

Table 1. Residence of NLRNs while in school and at the time of completion of the 2021 LCN NLRN Survey according to Regional Labor Market Area (RLMA)

Regional Labor Market Areas	Residence while in School (2021)		Current Residence as a RN (2021)		Residence while in School (2019)		Current Residence as a RN (2019)		Residence while in School (2017)		Current Residence as a RN (2017)		Residence while in School (2015)		Current Residence as a RN (2015)		Residence while in School (2013)		Current Residence as a RN (2013)	
	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%
RLMA 1 - New Orleans	143	24%	167	28%	164	26%	186	30%	154	27%	155	28%	190	27%	206	28%	343	28%	356	29%
RLMA 2 – Baton Rouge	97	16%	104	18%	113	18%	131	21%	114	20%	117	21%	131	19%	118	21%	239	19%	226	18%
RLMA 3 – Houma	39	7%	25	4%	41	7%	27	4%	32	6%	26	5%	40	6%	33	5%	52	4%	40	3%
RLMA 4 – Lafayette	87	15%	80	13%	52	8%	57	9%	45	8%	50	9%	66	9%	72	9%	99	8%	121	10%
RLMA 5 – Lake Charles	40	7%	32	5%	29	5%	26	4%	28	5%	31	6%	51	7%	49	6%	111	9%	88	7%
RLMA 6 – Alexandria	35	6%	34	6%	31	5%	25	4%	30	5%	34	6%	39	6%	42	6%	62	5%	68	6%
RLMA 7 – Shreveport	96	16%	94	16%	108	17%	100	16%	97	17%	92	16%	111	16%	105	16%	213	17%	200	16%
RLMA 8 – Monroe	42	7%	42	7%	50	8%	49	8%	43	8%	39	7%	46	7%	37	7%	62	5%	63	5%
Not Sure of Region	1	0.2%	1	0.2%	2	0.3%	4	0.6%	1	0.2%	2	0.4%	4	0.6%	3	0.4%	3	0.2%	7	0.6%
Do not live in Louisiana	14	2%	15	3%	39	6%	24	4%	18	3%	16	3%	28	4%	41	3%	55	4%	70	6%
Total	594		594		629		629		562		562		706		706		1,239		1,239	

Note: Questions related to residency were not included in the 2011 survey.

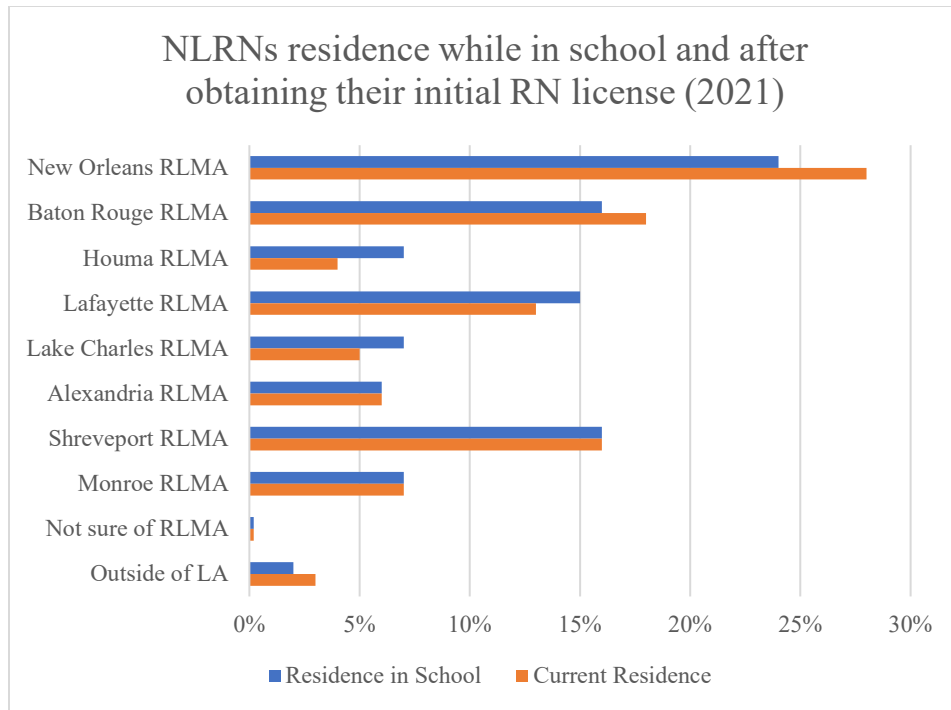


Figure 2. Place of residence for NLRNs pre- and post-graduation in 2021.

Gender

As shown in Figure 3, each year most respondents to the LCN NLRN Survey have been females, which is in alignment with Louisiana’s RN workforce (88% female in 2021) and students enrolled in Louisiana’s Pre-RN programs (89% female in 2021) (LSBN Annual Report, 2021; LCN 2021 Education Capacity Report; LCN 2021 Nurse Supply Addendum Report).

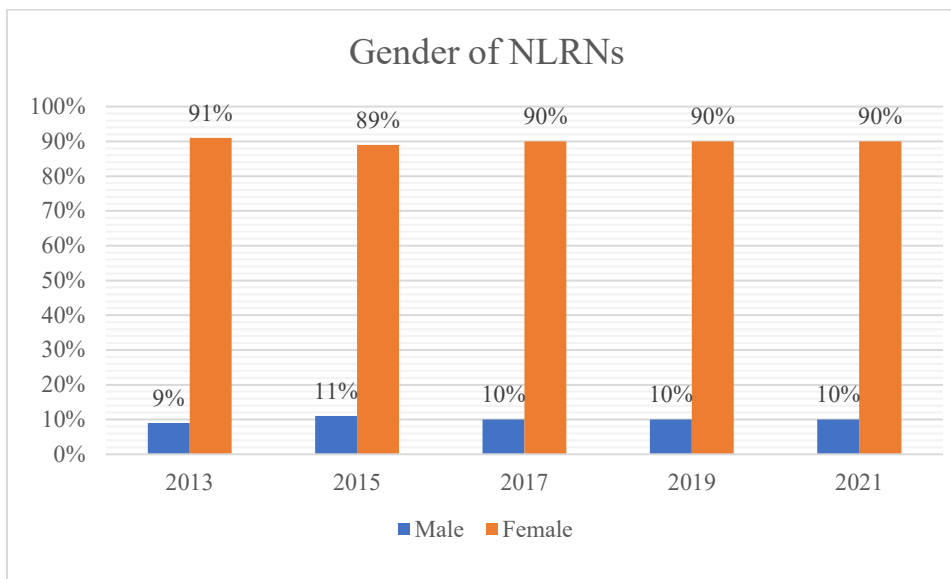


Figure 3. Gender of respondents to the LCN NLRN Survey.

Race

In 2021, 67% of the NLRN respondents were White/Caucasian (Figure 4) with 34% of the NLRNs that responded to the survey reporting that they were minorities. This is equivalent to the percentage of minorities that were represented in the 2021 graduates from Louisiana’s Pre-RN nursing programs (2021 LSBN Annual Report). In contrast, 79% of the nursing workforce in Louisiana were White/Caucasian in 2021. These findings indicate that NLRNs in Louisiana are more diverse than the current nursing workforce (2021 LCN Nurse Supply Addendum Report). Beginning in 2017, NLRNs were given the option to select ‘Two or More Races’ which may have contributed to the decrease in the percentage of NLRNs selecting White/Caucasian since 2017.

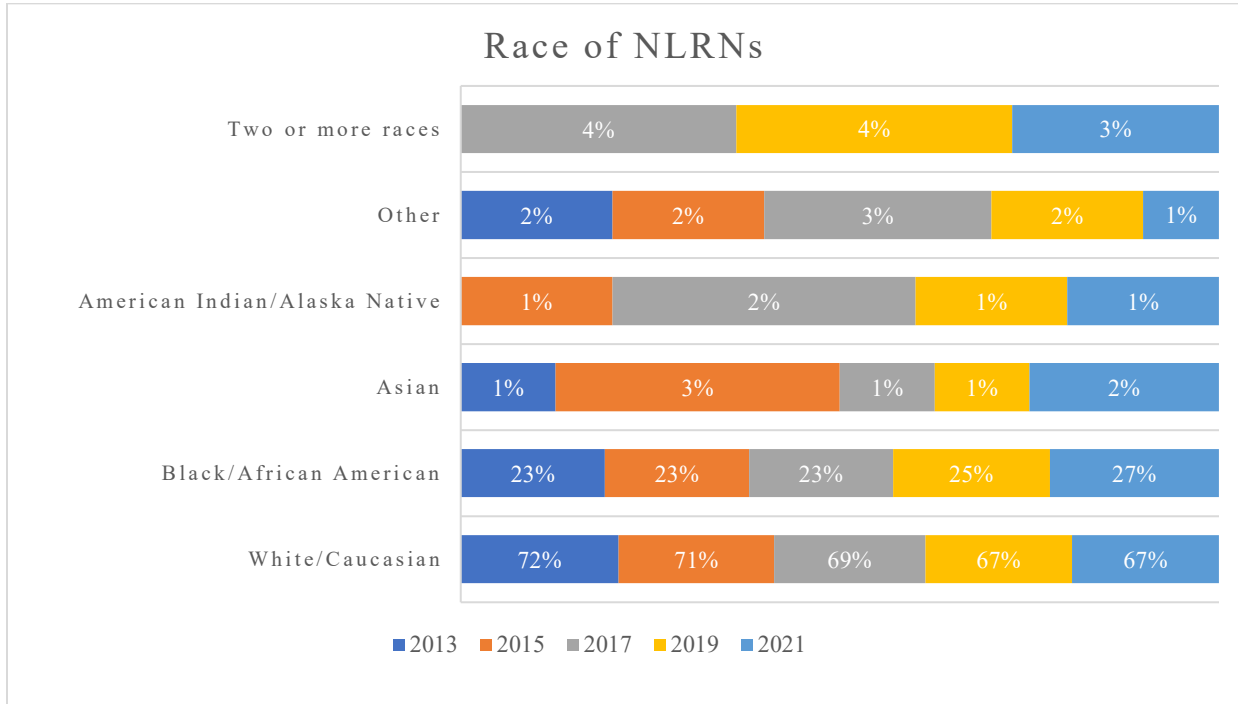


Figure 4. Race of respondents to the LCN NLRN Survey.

Ethnicity

According to the U.S. Census Bureau (2021), 18.5% of the U.S. population is Hispanic/Latino, whereas 5.3% of Louisiana’s population is Hispanic/Latino. Five percent of the respondents to the 2021 LCN NLRN Survey reported their ethnicity as Hispanic/Latino (Figure 5), three percent of Louisiana’s 2021 pre-RN graduates and three percent of Louisiana’s RN workforce are of Hispanic/Latino ethnicity (LCN 2021 Nurse Supply Addendum Report).

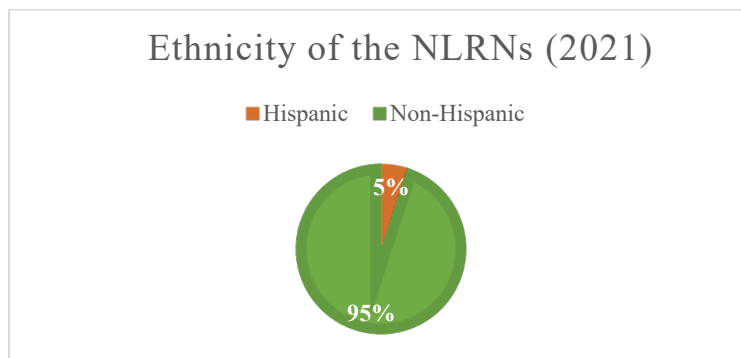


Figure 5. Ethnicity of respondents to the 2021 LCN NLRN Survey.

Age

As seen in Figure 6, over the years, most of the respondents to the LCN NLRN Survey were between 20 and 30 years of age (53% in 2021) followed by 31-40 years of age (29% in 2021). Sixteen percent of the NLRNs were between 41 and 50 years of age. There continues to be a very small percentage of NLRNs that are between 51 and 60 years of age (2% in 2021).

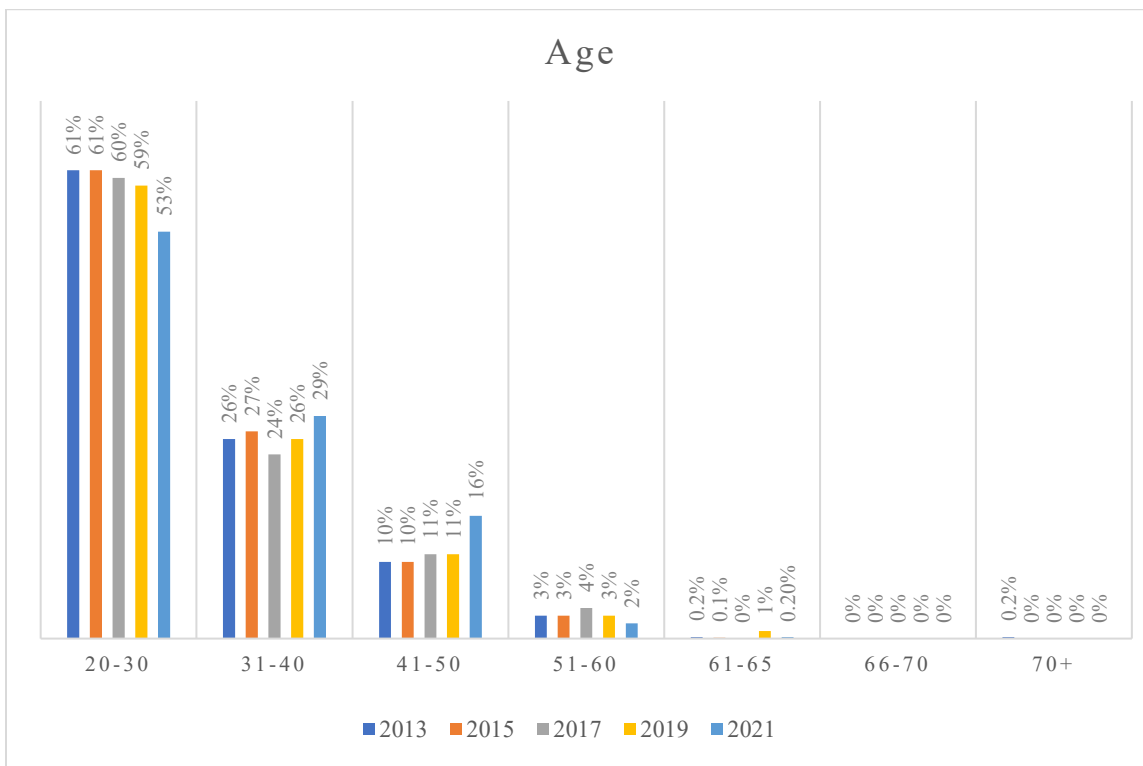


Figure 6. Age of respondents to the LCN NLRN Survey.

Location of Nursing Education

Findings from each of the NLRN Surveys beginning in 2011, revealed that most respondents completed their education in Louisiana. In 2021, 83% of the NLRNs responding to the survey completed their education in Louisiana compared to 89% in 2019, a decrease of six percentage points (see Figure 7).

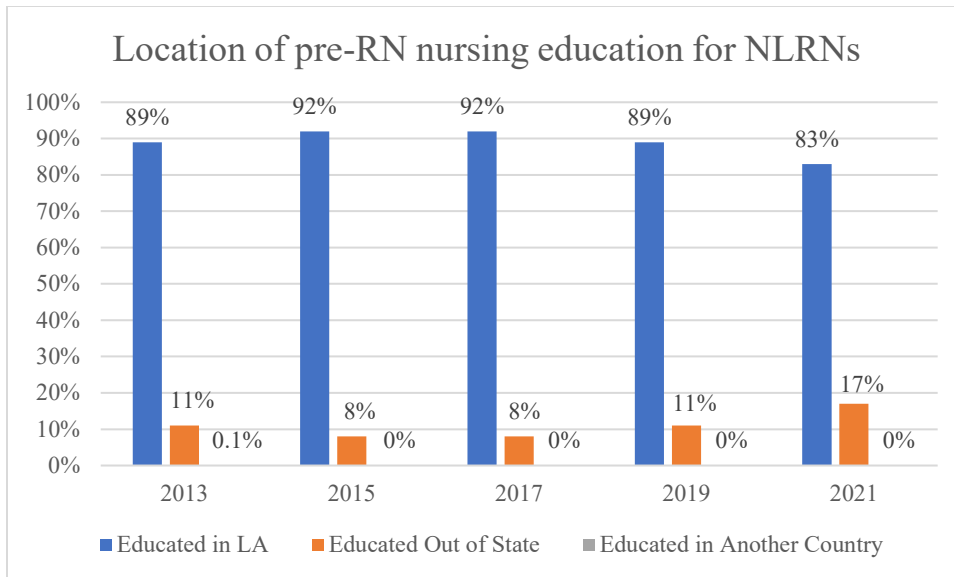


Figure 7. Location of nursing education of respondents to the LCN NLRN Survey.

Educational Preparation

A larger proportion of the respondents to the 2021 LCN NLRN Survey were prepared at the associate degree level (52%) when compared to the baccalaureate level (47%), which is a shift from the previous three surveys when over half of the respondents to the LCN NLRN Survey were prepared at the baccalaureate level. Only 0.3% of the respondents were prepared at the diploma level (Figure 8). This may be attributable to the one diploma nursing program in the state closing and reopening during this time.

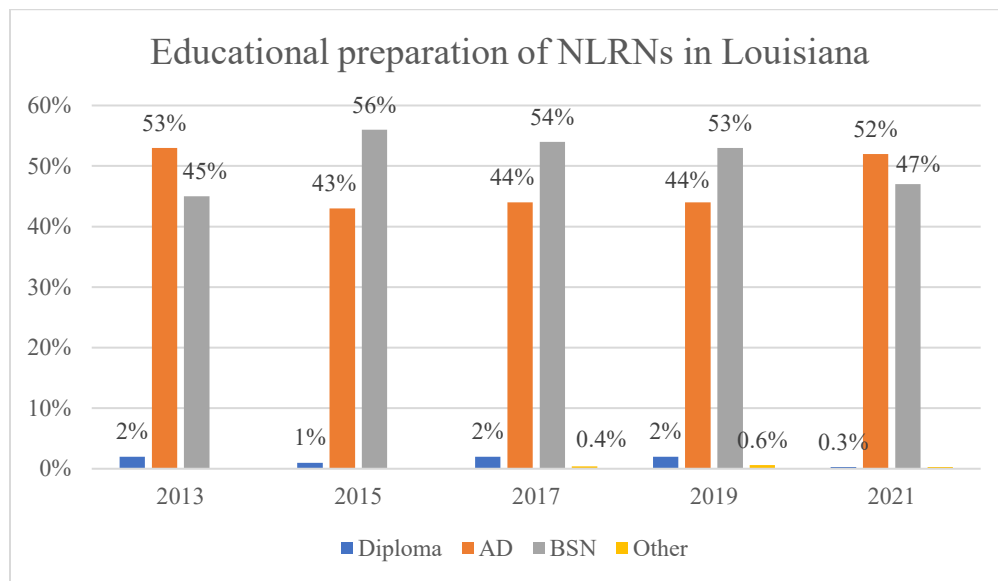


Figure 8. Educational preparation of respondents to the LCN NLRN Survey.

Degrees or Certificates in Other Fields

Beginning in 2013, NLRNs were asked to identify degrees or certificates they had acquired in fields outside of nursing. Thirty-nine percent (233) of the respondents to the 2021 LCN NLRN Survey reported having a degree or certificate in another field, with the greatest percentage having a bachelors' degree in another field (43%),

followed by an associate degree (23%) (Figure 9). In 2021, 18% (43) of the respondents having a degree or certificate in another field reported that they were licensed practical nurses.

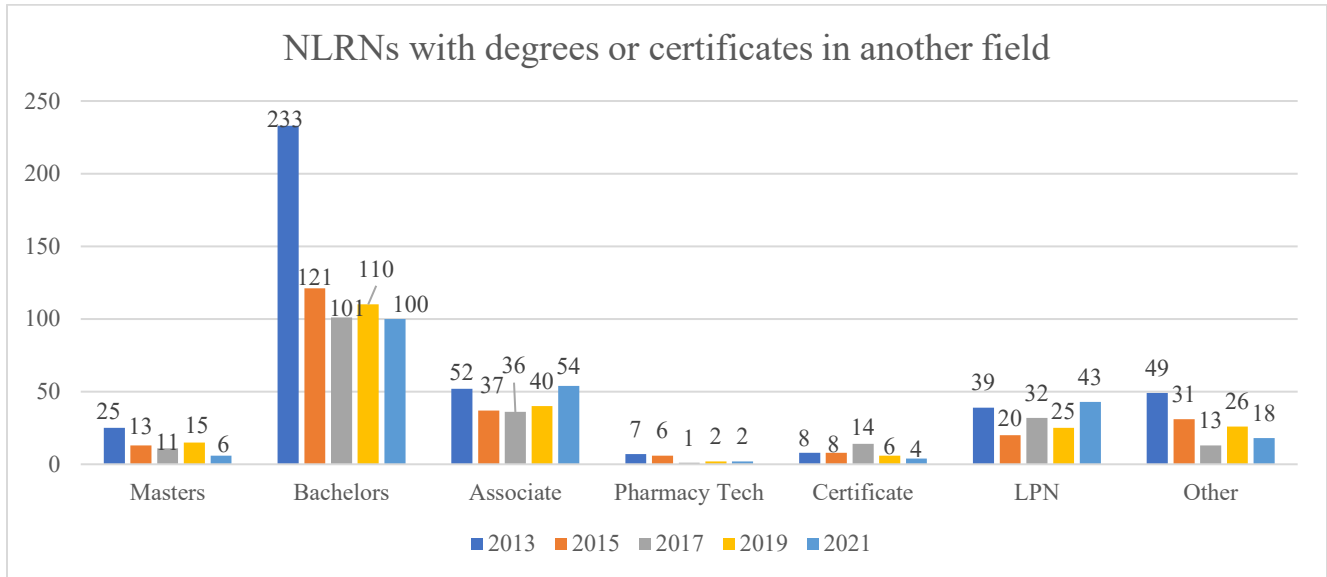


Figure 9. Respondents to the 2021 LCN NLRN Survey with degrees or certificates in other fields.

Graduates from Accelerated Nursing Programs

With an increasing emphasis on preparing nurses at the baccalaureate and higher degree level, one innovative approach to nursing education that has gained significant momentum is the accelerated degree program for non-nursing graduates. These programs build on previous learning experiences and provide a way for individuals with undergraduate degrees in other disciplines to transition into nursing (AACN, 2017). Since 2013, over one fourth of the respondents to the 2021 LCN NLRN survey indicated that they graduated from accelerated nursing programs (Figure 10).

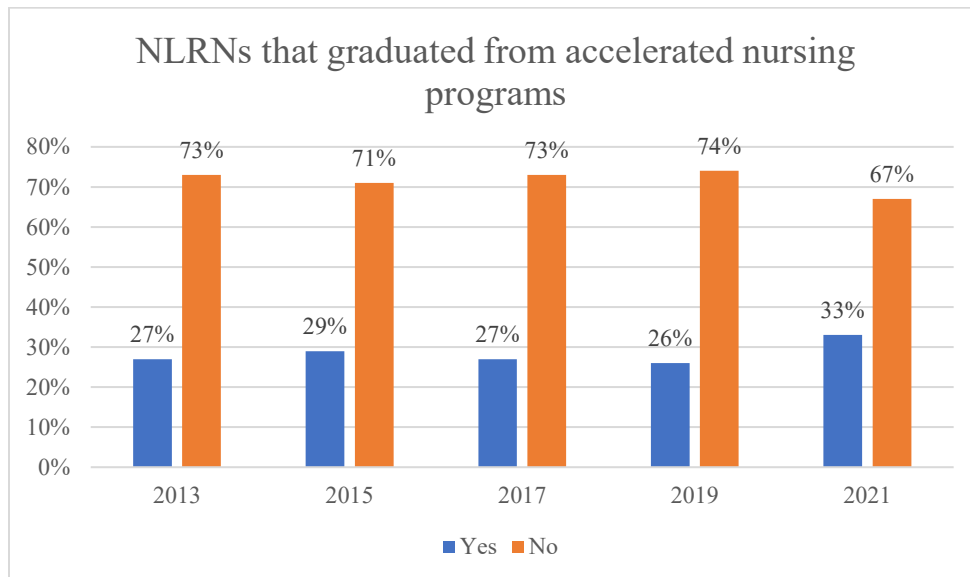


Figure 10. Respondents to the LCN NLRN Survey that graduated from accelerated nursing programs.

NLRNs Plans to Advance Their Education

According to the Institute of Medicine Report on the Future of Nursing (2011), education should serve as a platform for continued lifelong learning and include opportunities for seamless transition to higher degree programs. This concept of continued lifelong learning is evident in the responses from NLRNs in Louisiana (Figure 11). In 2021, 79% of the NLRNs indicated that they plan to advance their education.

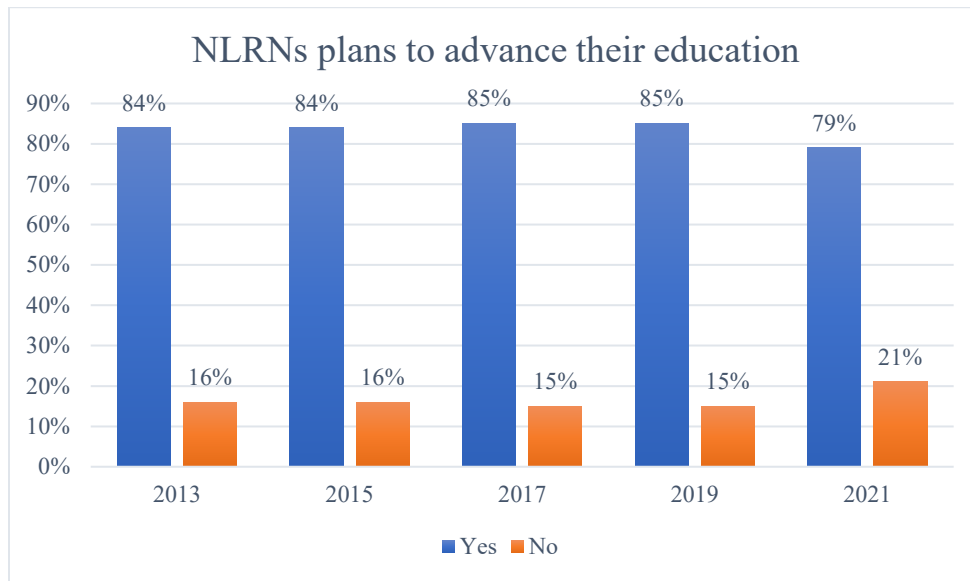


Figure 11. Plans of respondents to the LCN NLRN to advance their education.

In 2021, 35% of the NLRNs planned to pursue a baccalaureate degree in nursing, 39% planned to pursue a masters' degree in nursing, and 11% planned to pursue a doctorate (Figure 12).

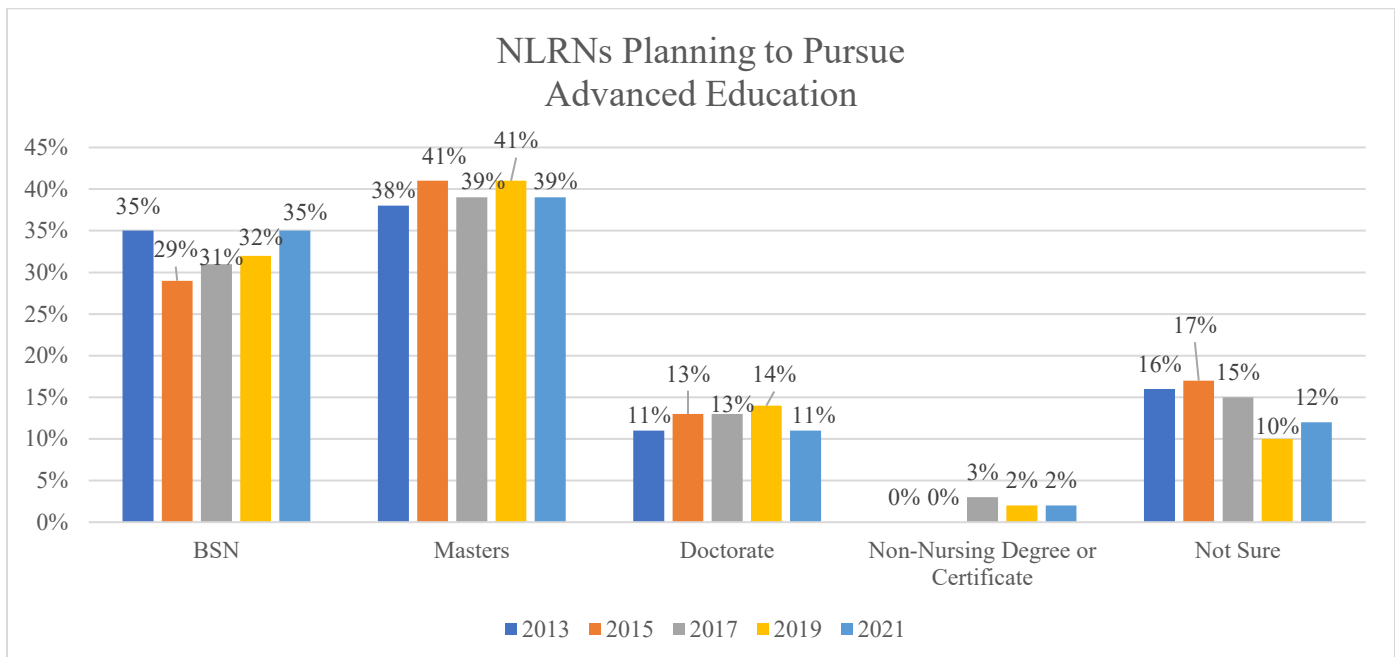


Figure 12. Type of advanced education that NLRNs plan to pursue.

Length of Time Between Graduation and Taking the NCLEX-RN

Taking the National Council Licensure Examination for RNs (NCLEX-RN) as soon after graduation as possible is positively correlated with an increased chance of passing the examination on first take (Zerwekh and Garneau, 2018). It is thought that if graduates wait too long after graduation to take the NCLEX-RN, their level of comprehension of critical information will be decreased. Sixty-four percent of the NLRNs responding to the 2021 survey took the NCLEX-RN between two to seven weeks after graduation; 33% between 2-4 weeks; and 31% between 5-7 weeks (Figure 13). Nineteen percent of the respondents to the 2021 LCN NLRN Survey took the exam two months after graduation, nine percent took it three months after graduation, and six percent took the exam greater than three months after graduation.

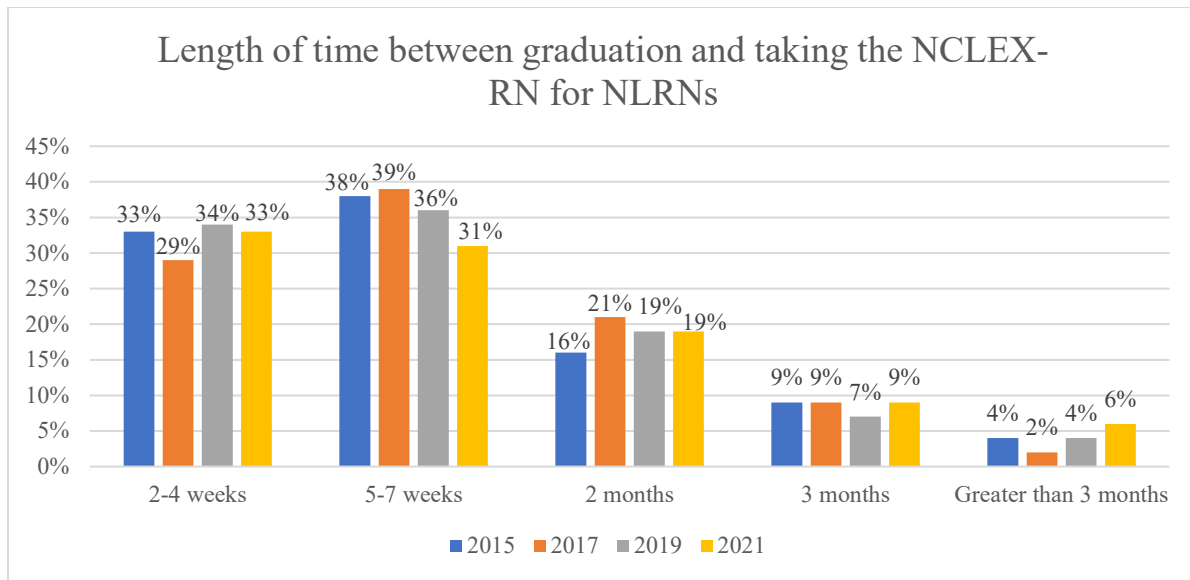


Figure 13. NLRNs report length of time between graduation and taking the NCLEX-RN.

Passage on the NCLEX-RN on First Take

As seen in Figure 14, most of the respondents to the LCN NLRN Survey were successful in passing the NCLEX-RN on first take. In 2021, 92% of the NLRNs reported passing the NCLEX-RN on the first take which is in line with Louisiana's overall passage rate of 88.93% in 2021.

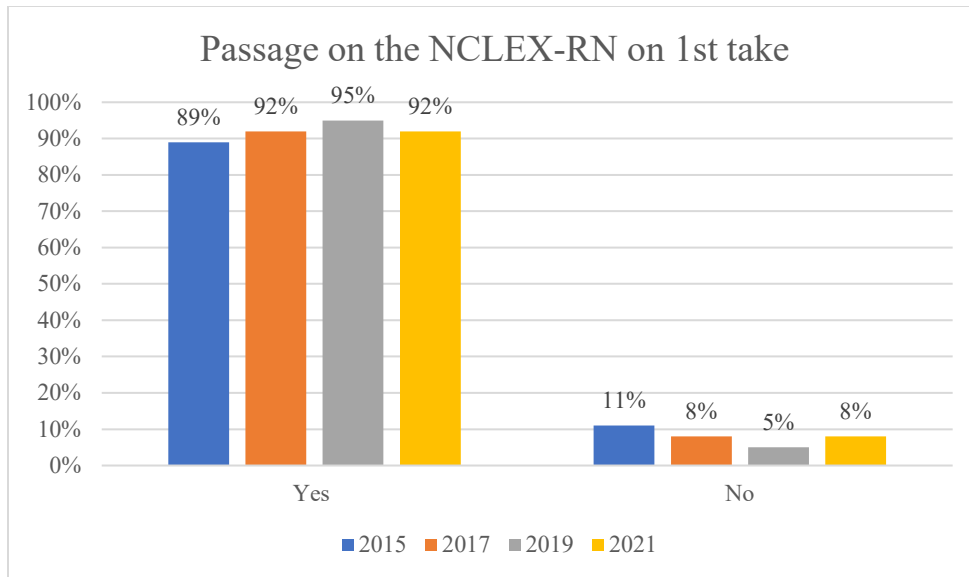


Figure 14. Passage on the NCLEX-RN on first take for NLRNs. This question was not asked on the 2011 and 2013 NLRN Surveys.

Seeking Employment as a RN

Most new graduates began seeking employment prior to graduation based on findings from the NLRN surveys (Figure 15). The number of respondents that reported seeking employment prior to graduation increased by 18 percentage points between 2013 and 2021. The percentage of new graduates waiting to seek employment immediately after graduation went from 23% in 2013 to 11% in 2021, a decrease of 12 percentage points. Additionally, those respondents waiting to seek employment after passing the NCLEX-RN has decreased with each survey since 2015.

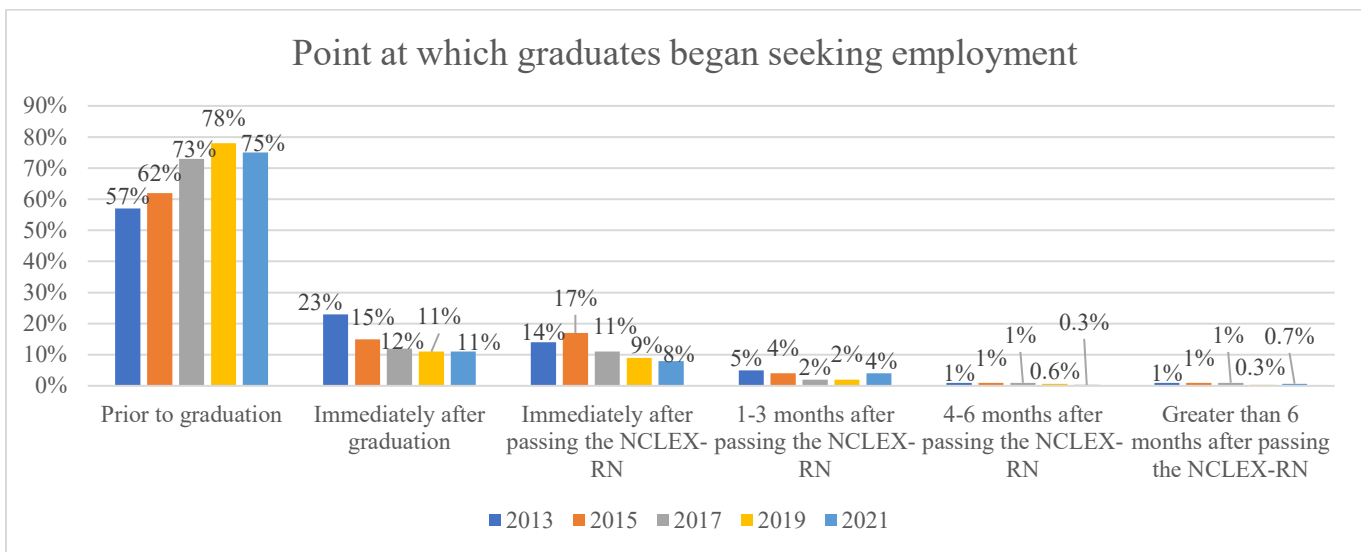


Figure 15. Point at which NLRNs reported that they began to seek employment as a RN.

Participation in a Nurse Residency Program

The implementation of nurse residency programs was one of the major recommendations that came out of the Institute of Medicine Report on the Future of Nursing (2011). In 2017, a question was added to the LCN NLRN Survey to gain insight into the participation of Louisiana’s NLRNs in nurse residency or transition to practice

programs. As seen in Figure 16, in 2021, 43% of the NLRNs reported participation in a nurse residency program compared to 15% in 2017, which represents a 28-percentage point increase in the number of NLRNs that completed a nurse residency program.

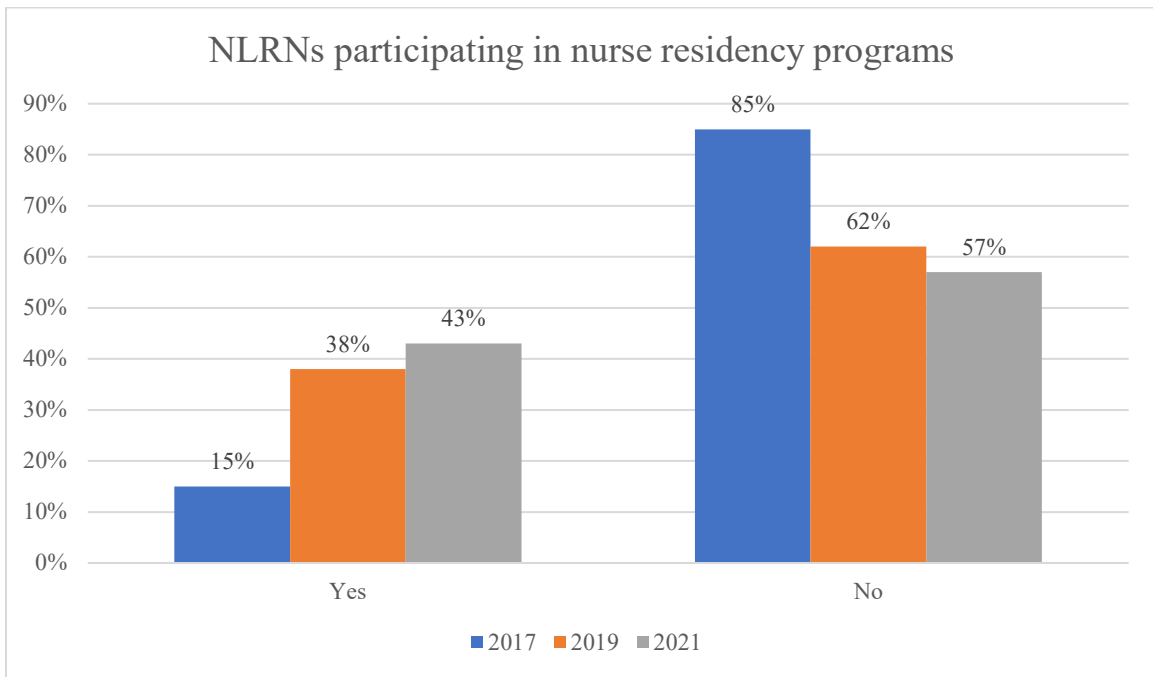


Figure 16. NLRNs report participation in a nurse residency program.

When asked about the barriers that prevented them from participating in a nurse residency program, 66% (220) of the NLRNs that had not participated in a nurse residency program reported that a nurse residency/transition to practice program was not offered by their employer, 22% (72) indicated that there was not a transition to practice program available that addressed the specialty area they were interested in, and 11% (36) reported that they did not see the value in participating in a nurse residency/transition to practice program (Figure 17).

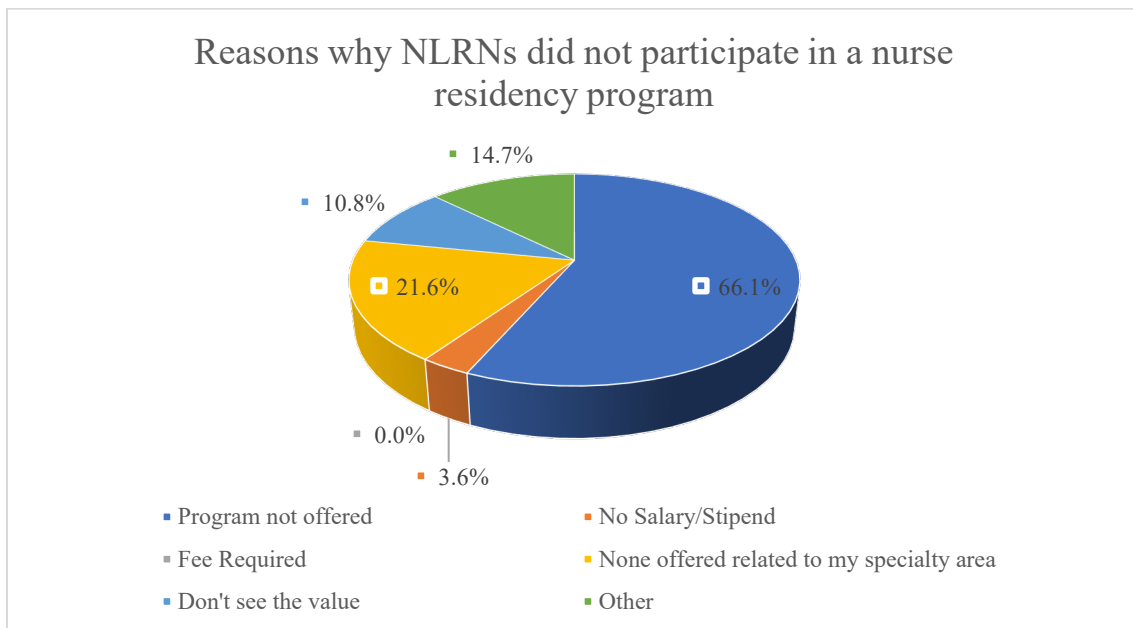


Figure 17. Reasons why NLRNs did not participate in a nurse residency/transition to practice program in 2021.

In 2021, the top two motivating factors for participating in a nurse residency program were increasing skills and confidence (68% of respondents) and receiving a salary/stipend (58% of respondents). Thirty-eight percent of the respondents also indicated student loan deferment as a motivating factor (Figure 18).

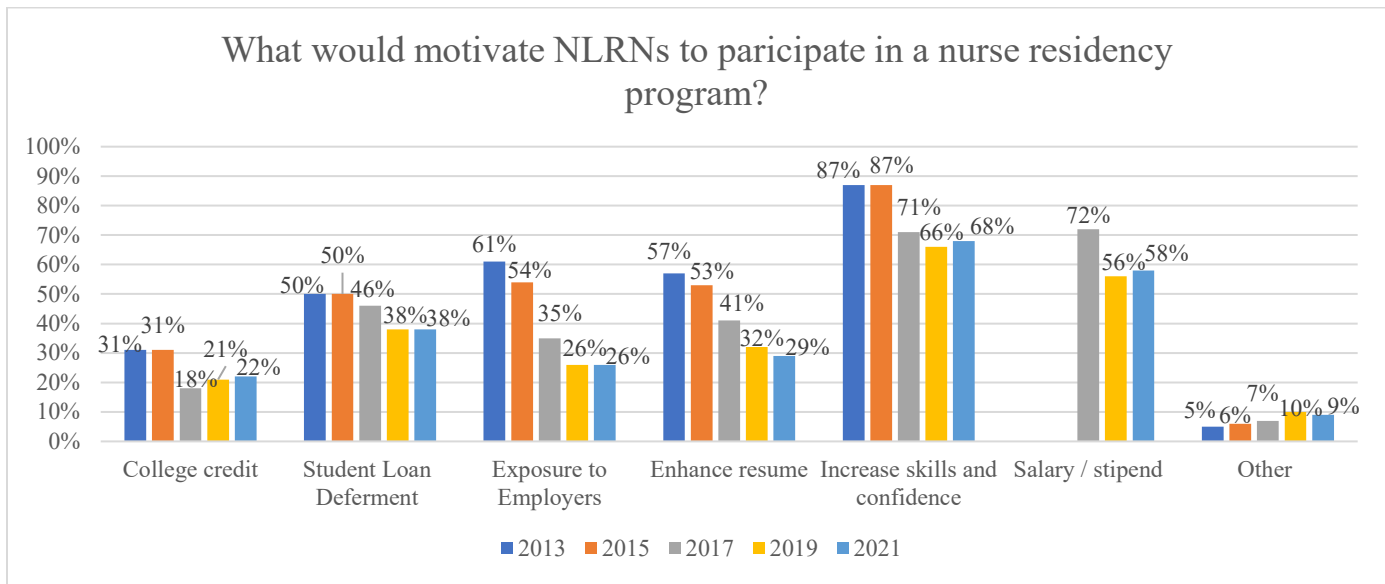


Figure 18. Motivators reported by NLRNs to participate in a nurse residency program.

NLRNs Working as RNs at the Time of Completion of the LCN NLRN Survey

A consistent and extremely positive finding for all LCN’s NLRN Surveys is that the vast majority of NLRNs were working at the time they participated in the survey; since 2017, 98% of the NLRNs reported working (Figure 19). These findings are in alignment with findings from the 2017 National Student Nurses Association annual survey of new graduates (Feeg & Mancino, 2018) which showed an upward trend for new graduates finding jobs and employment opportunities in all areas of the country with the higher employment opportunities existing in the Central and South regions of the country.

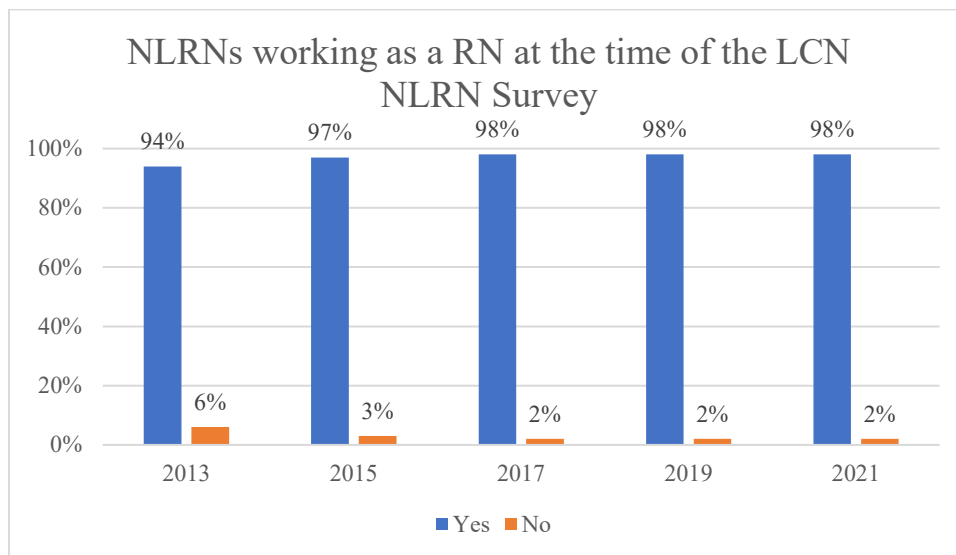


Figure 19. NLRNs that reported working at the time they completed the LCN NLRN Survey.

Length of Employment as a RN

In 2021, the majority (65%) of the NLRNs had been working as a RN for more than a year at the time they participated in the survey, followed by 16% that had been working seven to ten months (Figure 20).

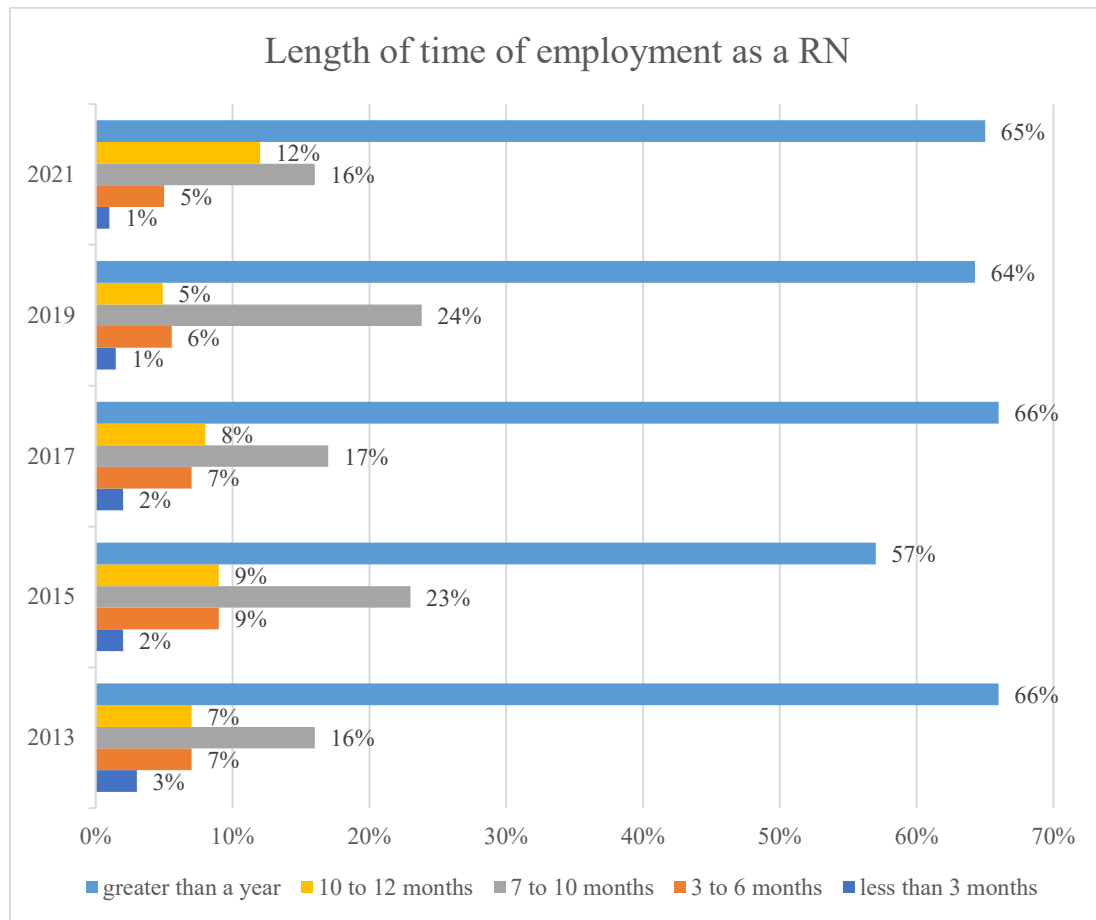


Figure 20. Length of time of employment reported by NLRNs completing the LCN NLRN Survey.

Employment Status as a RN

The majority of employed NLRNs were working full-time as a RN at the time they completed the 2021 LCN NLRN Survey; two percent reported working part-time and three percent were working on a per diem basis (Figure 21).

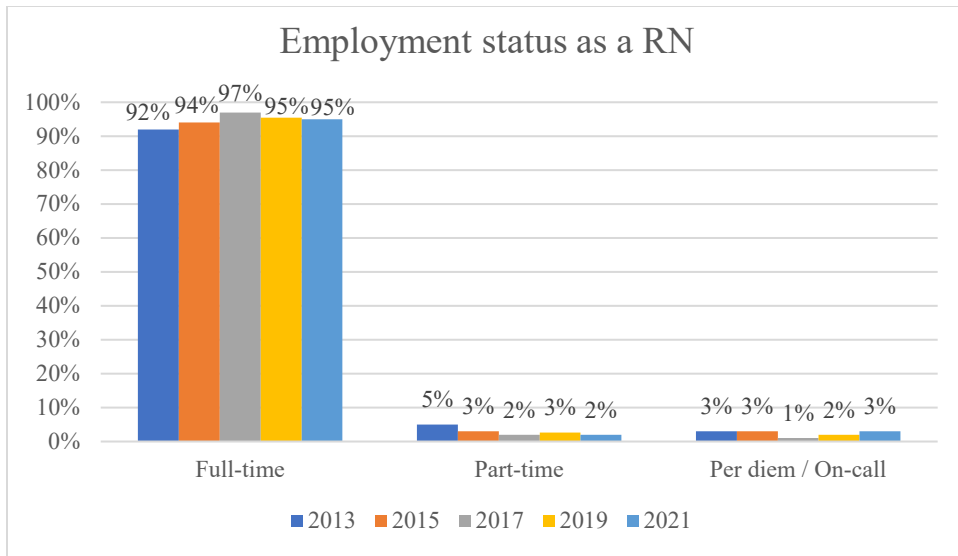


Figure 21. Employment status of NRLNs at the time of the survey.

Length of Time to Find a Job as a RN

As seen in Figure 22, in 2021, 97% of the NLRNs reported finding a position as a RN in less than three months, which is in direct alignment with what was reported in 2017 and 2019.

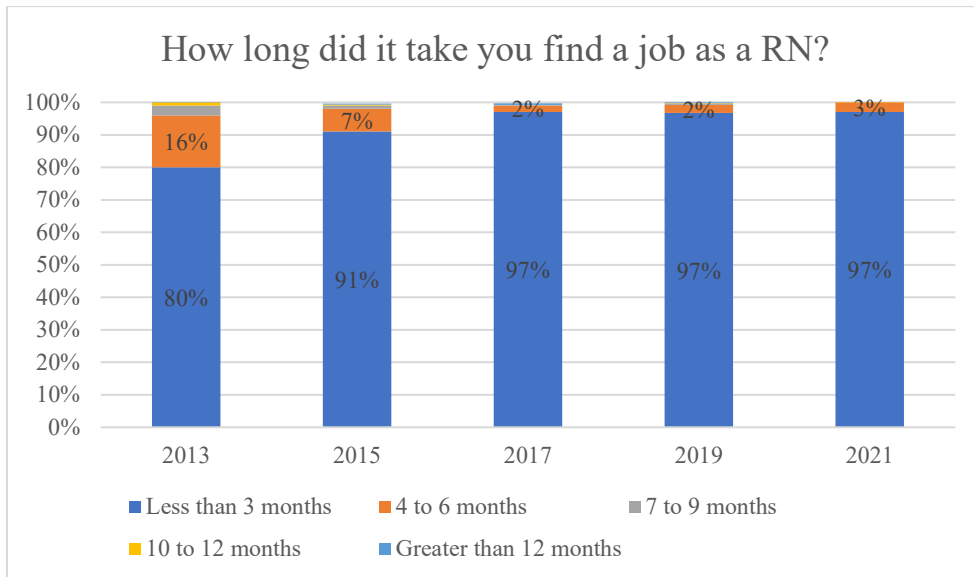


Figure 22. Length of time it took NLRNs to find a position as a RN.

Job of Choice

According to Figure 23, over the last ten years, the majority of NLRNs reported that they were working in their job of choice. Since 2013, the respondents reporting that they were not working in their job of choice decreased by six percentage points.

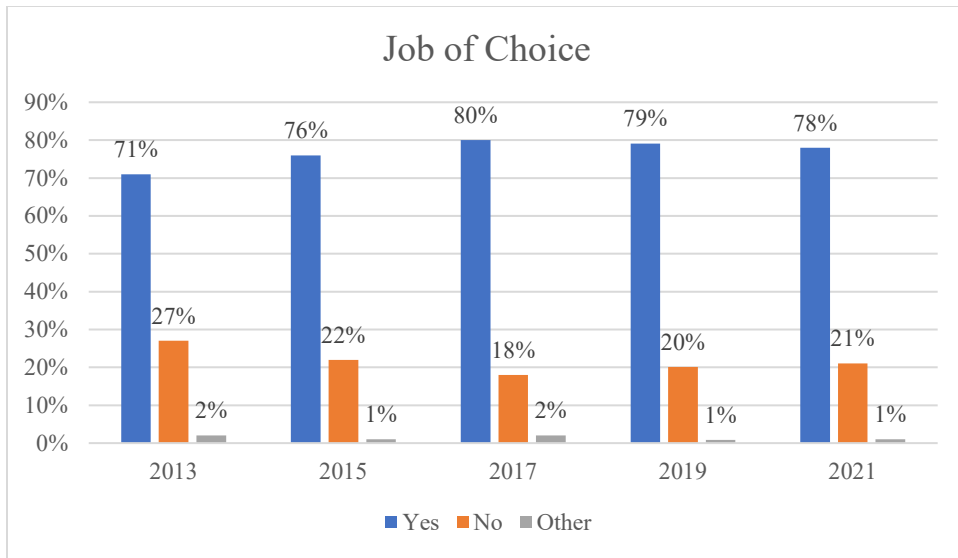


Figure 23. NLRNs reporting working in their job of choice.

Number of Jobs Applied for Before Finding Employment as a RN

In 2021, 84% of the NLRNs reported having to submit less than three job applications before finding a position as a RN compared to 56% of the respondents in 2013, a difference of 28 percentage points (Figure 24).

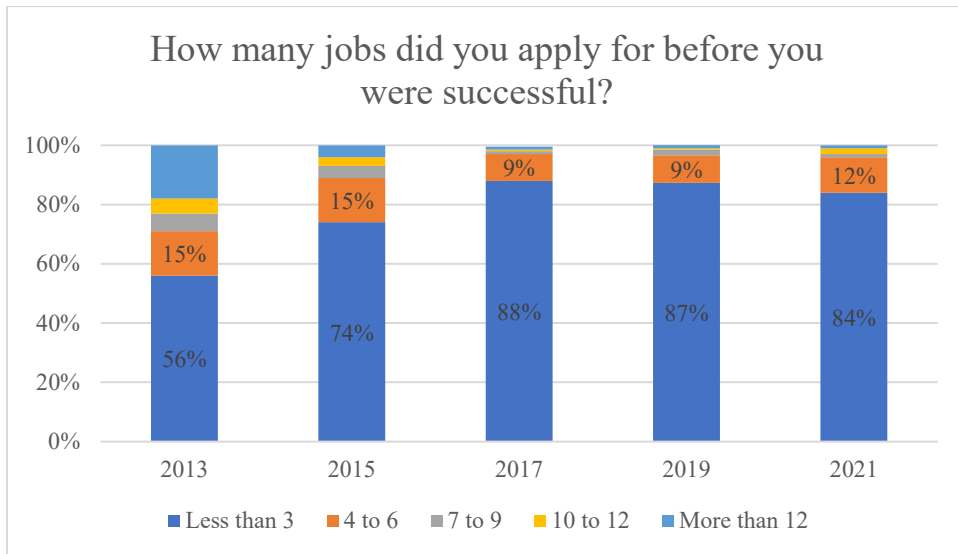


Figure 24. Number of jobs NLRNs applied for before finding a position as a RN.

Methods Used by NLRNs to Find a Position as a RN

A variety of methods were used by NLRNs to find RN positions (Figure 25). In 2021, 34% of the NLRNs reported clinical experiences at healthcare facilities was helpful in finding employment as a RN, 36% reported previous employment, 29% reported hospital/health facility websites, and 22% indicated that knowing someone at the healthcare facility assisted them in finding a position. Job fairs (12%) and referrals (8%) were also identified as methods used for finding a position as a RN.

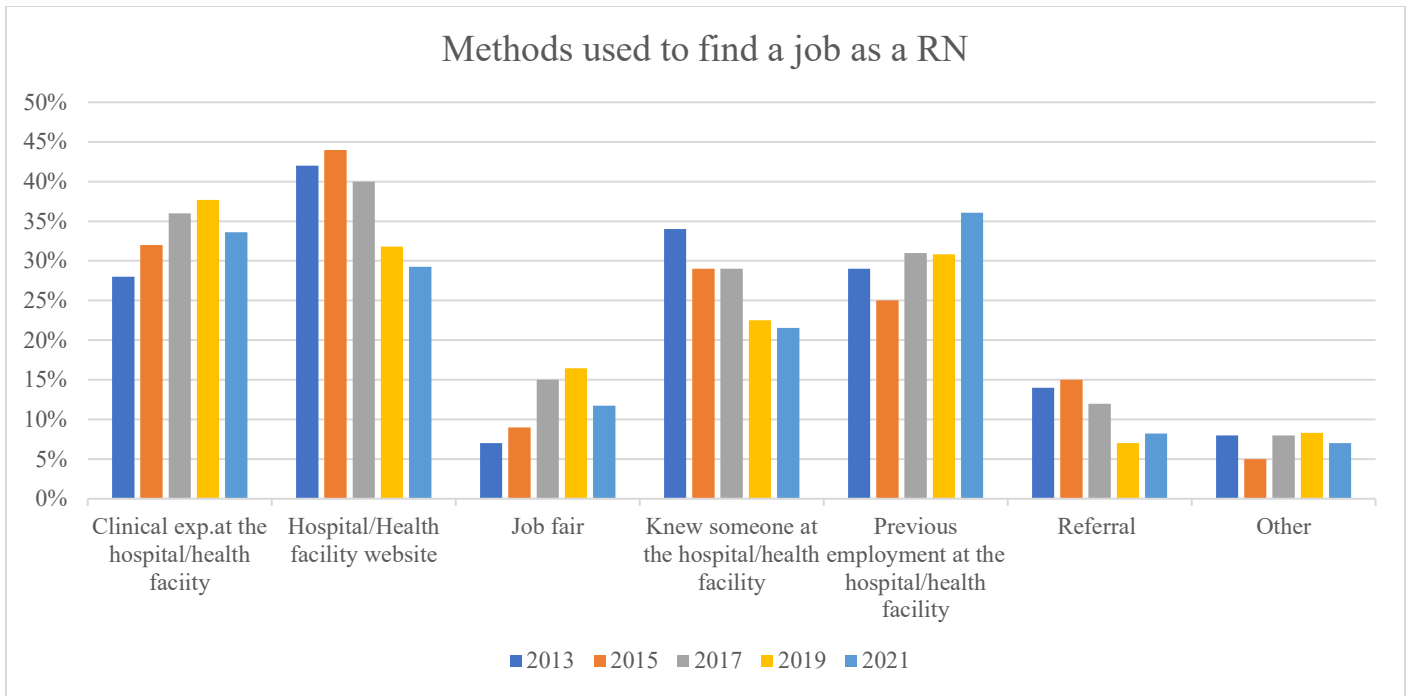


Figure 25. Methods used by NLRNs to find RN positions.

Types of Healthcare Facilities in Which NLRNs Found Employment

The majority of NLRNs reported finding employment in acute care hospitals (Figure 26). In 2021, 72% of the NLRNs reported that they were employed in an acute care hospital at the time they completed the NLRN Survey, a decrease of five percentage points when compared to 77% in 2019. Six percent of NLRNs reported working in home health/community health/public health, five percent reported working in clinic/ambulatory care, and five percent reported working in long term care/skilled nursing facilities. The five percent of respondents reporting ‘Other’ included settings such as critical access hospitals, mental health, research centers and surgery centers.

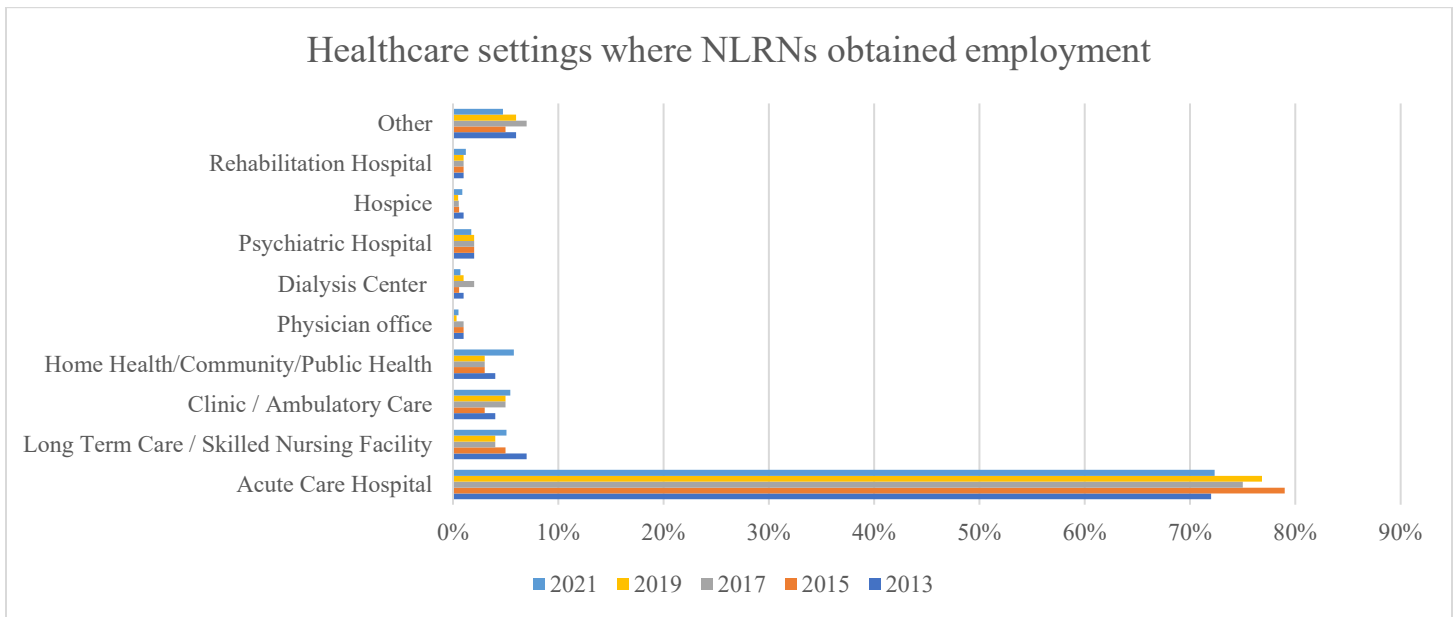


Figure 26. Types of healthcare facilities where NLRNs found employment.

Starting Salaries for NLRNs

In 2021, 34% of the NLRNs reported a starting salary of \$22-\$24 an hour (Figure 27), which represents a decrease of 24 percentage points when compared to 2019 (58%). Yet there was a 13-percentage point increase in the number of NLRNs reporting a starting salary of \$25-\$27 an hour and a 13-percentage point increase in those with a starting salary of greater than \$28 per hour.

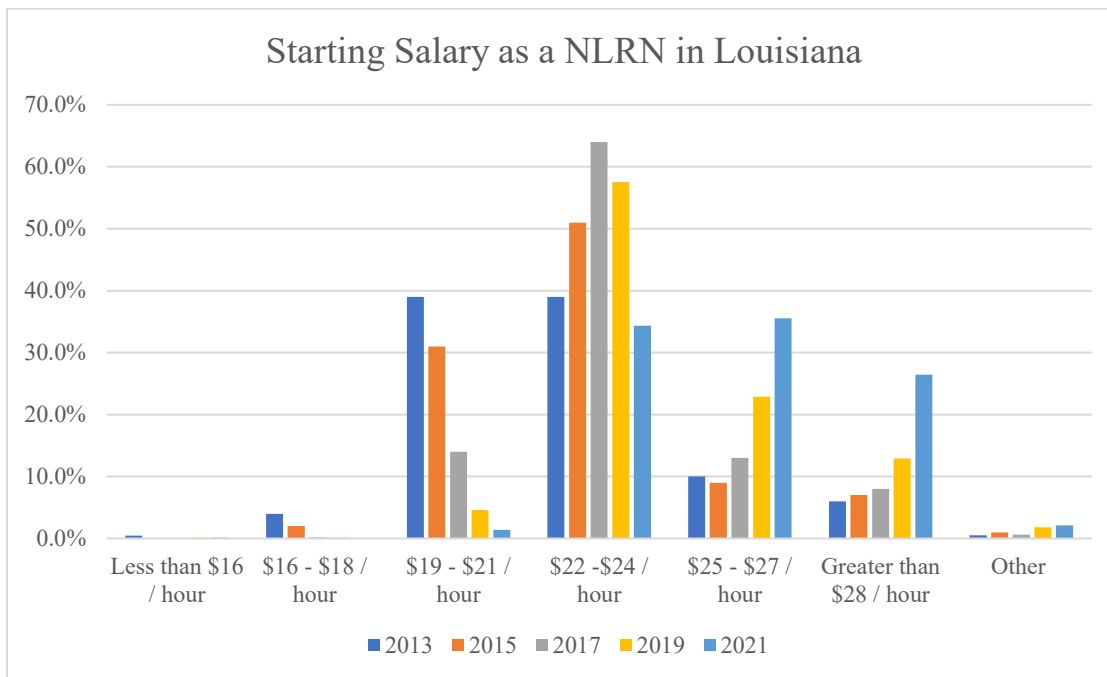


Figure 27. Starting salaries for NLRNs in Louisiana.

Change of Employment Settings

In 2021, NLRNs were asked if they had changed jobs since their initial employment as a registered nurse. Thirty-three percent (33%) of the NLRNs reported that they had changed jobs at least once since their initial employment as a RN (Figure 28). Reasons given for changing positions included uncomfortable work environment which encompassed bullying, inadequate training, unsafe staff/patient ratios and lack of support by management/administration (70, 38%); relocation (16, 9%); need for better pay/benefits (25, 14%); better opportunities (29, 16%); travel nursing (13, 7%); and other (31, 17%). Other reasons given for changing employment included COVID, the job was not their first choice and personal reasons.

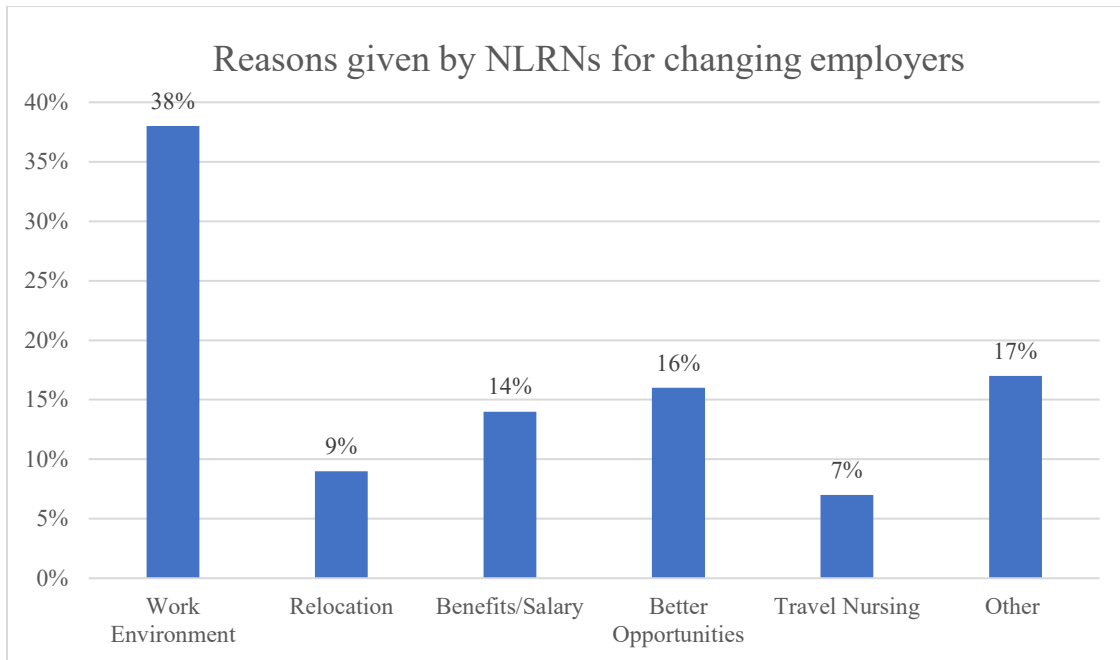


Figure 28. Reasons given by NLRNs for changing employers in 2021.

NLRNs That Were Not Employed

Two percent of the respondents to the 2021 LCN NLRN Survey reported that they were unemployed at the time they completed the survey which is in line with findings from the 2017 and 2019 survey but remains lower than the six percent reported in 2013 and the three percent in 2015 (Figure 29). Beginning in 2013, NLRNs that were not employed at the time they completed the LCN NLRN Survey were asked how long they had been seeking a position as a RN and what were the reasons given by potential employers as to why they were not hired. In 2021, eight NLRNs reported that they were not actively seeking employment and one said they had been seeking employment for less than three months. Reasons given for not being hired included: employers were not currently hiring; lack of experience; and no positions were available for new graduates.

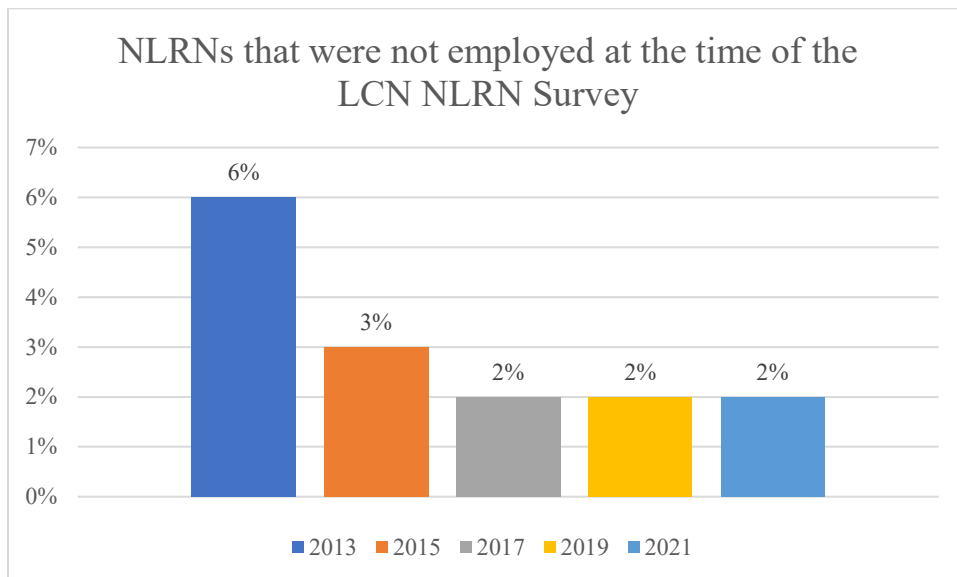


Figure 29. NLRNs that were not employed at the time they completed the LCN NLRN Survey.

Comments from Louisiana's NLRNs on their Successes and Challenges Pre and Post Employment

Each year the NLRN Survey has been conducted, NLRNs have shared hundreds of comments about their successes as well as their challenges during their pursuit of employment as a RN in Louisiana and their experiences as newly employed RNs. ***The following are a few of their comments presented in their authentic language without edits.*** To maintain anonymity, the letter 'X' was used when NLRNs referred to specific health care agencies or cities.

NLRNs that Found It Relatively Easy to Find Employment as a RN in Louisiana

- The XX is very open to hiring new graduates with competitive pay.
- Finding employment is not hard. I suggest doing research before accepting any position. The residency programs I was in was great.
- Its easy to get job in Louisiana
- I had no issues finding employment. I receive (and still receive) mail/emails regarding employment opportunities in the region.
- It was very easy to find a job. I literally just showed up and they interviewed me and I applied online at a later time. I also currently have two PRN jobs in addition to my full-time position, which were also easily obtained. With the exception of one clinical instructor that continuously felt the need to bully and belittle myself and my fellow classmates, I absolutely loved nursing school....the good and the bad. Regardless of the bully instructor, I have grown so much as a person and learned so much that it has changed who I am. Thank you for the opportunity to care for patients and continue learning! I consider every day a blessing.

Lack of Experience

- Most facilities won't hire new grads with no RN experience. The few positions offered are reasonable but starting pay is low despite degree status and/or other degree(s) or certifications obtained prior.
- New nurses should have the opportunity to gain positions in specialty areas as well. Most employers would like 2 years experience but the skills are taught and learned during clinicals.
- Some places require a lot of experience.
- Several employers want 1 year clinical RN experience. They did not take my 7 yrs as a LPN into consideration.
- I feel it is a disservice that new grads have not received proper clinical experience and training due to the pandemic. I hope that they are not taken advantage of by facilities that will expect more than they should form them and risk their licenses they worked so hard for.
- It was very difficult to find 8 hr shift jobs both in the acute care settings and dr's offices without having any form of nursing experience.
- They say they are looking for nurses but won't acknowledge or hire new nurses with less than a year of experience. Due to covid or not being able to work during school.
- My concerns would be lack of hands on experience in the hospitals due to the pandemic.

Not Feeling Prepared

- very easy to get a Job as a new grad in LA, due to a record number of staff nurses quitting their current jobs based on poor working conditions, no support, and never ending scrutiny by their employers. So as of now, new grads surely shouldn't have any problem getting a job anywhere they want in LA. however, do not expect to be adequately trained to provide safe nursing care. Best of Luck to these new grads.
- There should certainly be more opportunities for newly licensed nurses to transition into their career field as there are hardly no opportunities in the area of my residence; and, health care facilities need to implement better orientation programs as many of them lack proper organization and preparation for new nurses, which hinders them to practice as safer and effective nurses when completing their

orientation . As a newly licensed nurse I have had a hard time finding a job in my field of interest in Louisiana as well because of the lack of facilities wanting to hire due to no/little prior experience.

- Hospital pay in Louisiana is not competitive, especially with travel nursing contracts. Hospitals in Louisiana are critically short staffed, and will continue to be if they continue to pay at their current rate. Additionally, the lack of emphasis on staff retention is a huge issue in local hospitals. This leads to inexperienced staff caring for highly acute patients, thus leading to patient safety issues. Lastly, the lack of preparedness for real life, bedside nursing for new graduates is unacceptable. There is so much emphasis on academia and far less emphasis on clinical skills. Most new grads, especially those that didn't have a Nurse Tech job prior to graduation are timid and unprepared when presented with basic clinical skills and patient care.

The Need for Nurse Residency Programs

- I think having the opportunity to shadow more shifts prior to being hired would've been helpful.
- Transition programs should be a requirement. Education regarding protection of license should be required.
- Improve and enforce staffing ratios and you will improve hiring in critical needs areas. No one wants to start out in MedSurg anymore because they feel forgotten and hung out to dry. Starting out new on nights with a 7-1 ratio with little support and a staff shortage is a guaranteed quick burnout. Universal residencies that have a firm, dedicated schedule with weeks of education and orientating moving through all units/ levels of care, and skills labs, would be highly beneficial, not only in making a better equipped more well rounded more capable new nurse, but also in finding the best department fit for those nurses.
- The only concern is that there are not a lot of preceptor's assigned to train new grads due to the lack of staff. Many facilities are working short and new grads are not being trained at their best.
- Longer training /orientation and I feel every new nurse should be orientated to each area in the hospital before being pulled to a unit that you have not worked on prior

Salary/Benefits

- I found the pay for newly graduated RN's shameful. Some units won't consider you unless you have a BSN.
- It is very difficult to find a decent paying job as a new grad. I want/need to do travel nursing but I need a year of a specialty before I can do that.
- Starting nursing salary in Louisiana varies. We seem to have a low starting salary compared to other states.
- Nurses are in demand, yet the starting salaries are not looking good for the state of Louisiana. LA is behind in competitiveness and losing in skill and experience, as many seasoned nurses are traveling because of this
- The pay is extremely low for the cost of living. You honestly need two jobs to maintain bills and pay back student loans. I'm exhausted.
- Finding employment is not the problem in LA. Finding employment with fare wages is the main issue.
- New Grads are getting paid significantly less then other states so they take take contracts before they are prepared
- I think we aren't paid enough. Covid is scary, hospital work is hard. And living is expensive. Thanks for reading
- I do not think there is a problem with finding a job in LA. The problem is that we are short on nurses and we are not paid enough. Most of the loyal workers are leaving doing travel nursing. I think if the pay was increased or if they offered to pay off our student loans, I think more nurses would stay.
- There is no incentive to practice in Louisiana. Wages are lower than a number of states and there are no mandated safe patient to nurse ratios. I currently travel in union states.

- The starting pay is absolutely ridiculous in our area. We can move 1 state over and make almost double. Many leave. The only reason I stayed is because my family lives here.
- If I would not have had signed a contract for student line reimbursement I would have probably considered travel nursing due to salary
- Our starting RN salaries in Louisiana are consistently gravely lower than those of other states. If salaries do not increase in Louisiana, more and more new nurses (that are much needed for our dire staffing issues) are going to continue leaving Louisiana for employment in other states. That has affected me, personally, and I have many nurse friends who have either left nursing altogether due to these and other issues or moved to gain better RN employment opportunities in other states.
- If retention is to be increased, nurses will need increase in pay. There's no reason the hospital can afford to pay a travel nurse \$80-\$120 per hour but can't afford to pay staff more than \$30. Also, med-surg ratios are out of control and need to be decreased for safety of patients. The \$25/hr definitely is not worth risking your license taking care of 7 sick patients on your own every night.
- The pay is extremely low in the state of LA especially. It is sad that I can work as a bartender as I did through school and make more in one night than I currently do working 3 twelve hour shifts.
- I do not believe there is a problem finding employment. However, I believe there is a problem with keeping and retaining employment due to management not caring for safe practices at the hospital, especially proper pay rates. They claim they have no money to properly pay staff nurses but have enough money to pay for travel nurses with short contracts and incredibly high hourly wages. Even travel nurses I have worked with say that how management treats staff nurses is extremely questionable in regards to compensation and patient safety.

Work Environment

- Educate new nurses to stand up for themselves and not be bullied by more experienced nurses. And let them know it's acceptable to ask for a different preceptorship during orientation. Even though employers may say they do not tolerate bullying in the workplace, looking the other way is accepting the behavior.
- I personally was happy to finally have a steady job and was very grateful and lucky to get a job in the field I wanted right out of school. However, after working a nurse for over a year it is unfair to have the pay that we do for the amount that we work and have to tolerate in the field. We do not get paid enough, and we are being overworked. Administration does not help when we ask. They falsely stated that they are helping. They are completely out of touch with what is happening at the bedside. They wait until the last minute to reorder supplies we desperately need in the hospital let alone the ICUs. It is not fair to us as bedside nurses to be treated as we are and paid as we are. It needs to change.
- My concerns are the lack of staff and compensation for unsafe working environments. Many new graduates like myself are thrown into a hostile work environment set up long before we got there and we are expected to navigate and excell in it. This is unhealthy on many many levels and to top it off our local government continuously cuts Healthcare funds . Therefore the sick stay sick and the healthy will eventually be the sick. Someone has to be tired of this endless cycle .
- Employment is everywhere; finding a job isn't hard. The problem is keeping nurses once they are hired on the unit. Nurses wear about 20+ different hats each shift. The compensation/benefits/incentives sometimes just don't add up enough to make it worth it and that's why we lose nurses not just from units or employers but from the profession altogether.

Hiring/Interview Processes

- Research jobs and employers before accepting the first one that comes along.
- Don't just apply for a job. Ask others and do your research. Your first choice might not be your best choice.

- I don't think that finding a job was any problem. There were plenty of opportunities. Finding a job in a specific field was a little trickier, because the employers wanted previous experience of which I had none.
- Students need to put in job applications before you graduate or Immediately after you pass your last final.
- Finding a nurse tech/intern job is the best way to know the type of unit/nursing one is trying to pursue

COVID

- I am concerned and offended by the fact that nurses will be terminated based on their choice to not receive the Covid vaccine whenever there is a chronic nursing shortage. Nurses are unsafely taking on 3 patients in the ICU because the hospital is short staffed and full of patients, yet the hospitals are willing to fire their employees based on a decision that should be our own. I am concerned for my safety, as well as patient safety. It feels as if the people taking care of others as their career choice are not being taken care of.
- It concerns me that many hospitals in LA have adopted a policy of requiring the Covid-19 vaccine for employment. I believe a Covid-19 vaccine mandate does and will continue to negatively impact the nursing shortage and ability to secure stable employment.
- The Covid pandemic really sucked and totally ruined my mental health for the duration that it occurred.
- That we will run out of nurses due to nurses losing their jobs if they do not want to get the vaccine. Lots of nurses are being FORCED against their will. This WILL affect the nursing shortage.

Nurse Patient Ratio

- No concerns because of the many available positions! My biggest concerns are that nurses are over worked and under paid. The nurse to patient ratio should max at 5:1 on a med surg floor. We are burnt out!
- Please implement safe nurse to pt ratios!!!
- The staffing ratios are very high demanding and hard for a new nurse to learn under. Poor management at a lot of places and everything is about making a profit, not what benefits the patient.

Other

- There needs to more availability to therapist and counselors. With covid and being a new nurse these nurse will burn out in less than one year. There a lot of units with nurses with 2 years or less trying to precept news grads which is not beneficial. Nursing schools should be more hands on to help the transition of student nurse to new graduate. Also programs should be a mixture of skill and learning.
- Hospitals are mostly offering 2-3 years contract to new nurses with a low pay restricting new nurses to obtain a job with better pay once experience is obtained. Experienced nurses are now becoming travel nurses and then new nurses are obligated to work in unsafe short staffed environment with low pay. Residency programs are useless or with repetitive info from nursing school and with complicated schedules for those new nurses who decided to work night shift to make more money.
- Places that were once requiring experienced nurses are now allowing nee grads with no training to work there as well as travel jobs taking away lots of nurses for insane amount of money where as not all of us new grads can travel. Which is causing problems because new grad pay traveling vs new grad pay working the floor are completely different amounts. Which is causing people not to want to work "regular" jobs and nurses especially nee grads are becoming burnt out newly graduated because everywhere is so short staffed.
- The pay is too low, the work is hard and dangerous, and students are being taken advantage. If nursing schools actually showed students what the job current is, no one would enroll. Nursing and hospitals as a whole deserve reform.

Recommendations

Recommendations that stem from this report include but are not limited to the following:

- Implement collaborative innovative academic-practice partnerships between pre-RN nursing programs in universities and community colleges and healthcare systems that will create an environment that allows the NLRN to attain the critical thinking, clinical, communication and professional skills that are needed to become a safe, effective, compassionate member of the nursing profession.
- Develop accredited comprehensive nurse residency programs across the state that will allow for a seamless transition from academia to practice for NLRNs.
- Develop nurse mentoring / coaching programs for NLRNs that will allow them to achieve competency, confidence, and autonomy as a RN.
- Create a work environment that is supportive, safe, and provides opportunities for NLRNs to increase their skills and advance professionally within the organization.
- Utilize innovative strategies such as flex scheduling and decreased nurse patient ratios on large units, such as medical surgical units, to create an environment where NLRNs can enhance their skills, feel valued and productive, and grow as leaders.
- Explore the role of repayment of student loans as a deterrent to NLRNs advancing their education.
- Repeat the NLRN Survey every two years to continue to monitor trends in hiring practices experienced by NLRNs as changes occur in the state's health care system, economy, and nursing workforce, to better inform policy makers, schools of nursing, prospective nursing students, and other interested stakeholders.

References

- Bureau of Labor Statistics, U.S. Department of Labor (2018). *Occupational Outlook Handbook*, Registered Nurses. Retrieved from <https://www.bls.gov/ooh/healthcare/registered-nurses.htm> (visited May 16, 2022).
- Feeg, V. & Mancino, D. J. (2018). New graduates' first jobs and future plans: Debt, employers, and education prospects. *Dean's Notes*, 40(1), 1-5.
- Hofler, L. & Thomas, K. (2016). Transition of new graduate nurses to the workforce: Challenges and solutions in the changing health care environment. *North Carolina Medical Journal*, 77(2), 133-136.
- Institute of Medicine Report on the Future of Nursing (2011). *The future of nursing: Leading change, advancing health*. Washington, D.C.: The National Academies Press. Retrieved from: <https://www.ncbi.nlm.nih.gov/pubmed/24983041>.
- Louisiana Center for Nursing (2021). 2021 Louisiana Nursing Education Capacity Report. Retrieved from [Microsoft Word - NURSING EDUCATION CAPACITY IN LOUISIANA 2021 Report_Final_03222022 \(state.la.us\)](#)
- Louisiana Center for Nursing (2021). LCN Nurse Supply Addendum Report. Retrieved from [Nurse Workforce \(state.la.us\)](#)
- Louisiana State Board of Nursing Annual Report (2021). Retrieved from [Microsoft Word - Annual Report Compiled Final 03222022 \(state.la.us\)](#)
- Louisiana Workforce Commission Department of Labor (2018). Local workforce development area regional/local plans. Retrieved from http://www.laworks.net/WorkforceDev/LWDP_Menu.asp.
- Orlowski, C. and Berg, J. (2019). HealthImpact: California newly licensed RN employment survey. Retrieved from <https://healthimpact.org/wp-content/uploads/2019/02/California-Newly-Licensed-RN-Employment-Survey-Report-of-Findings-Fall-2018-FINAL-Jan-2019.pdf>
- Zerwekh, J. and Garneau, A. Z. (2018). *Nursing today: Transitions and trends* (9th ed.). Elsevier.