

# FINDING EMPLOYMENT AS A NEWLY LICENSED REGISTERED NURSE IN LOUISIANA 2025



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## **Executive Summary**

Newly licensed registered nurses (NLRNs) often encounter a challenging transition from academic preparation to professional practice, with many reporting feelings of being overwhelmed and underprepared and needing stronger organizational support to build competence and confidence. Although most new graduates secure employment shortly before or after graduation, the realities of clinical practice can be overwhelming. NLRNs must quickly adapt to complex care environments, manage patient and team responsibilities, and balance professional and personal demands. In some cases, they are placed in supervisory or leadership roles without adequate preparation. Inadequate transition experiences have been associated with increased stress, emotional strain, and heightened risk of early turnover, particularly when workplace support and structured orientation are lacking (See et al., 2023; Hale et al., 2024).

The Louisiana Center for Nursing (LCN) NLRN Survey is a biennial instrument designed to monitor employment trends, workplace experiences, and transition challenges among NLRNs in Louisiana. First administered in 2011 and now in its eighth iteration (2025), the survey enables ongoing monitoring of employment patterns, workplace challenges, and transition experiences of NLRNs across the state. Findings from this survey provide valuable insights for nurse educators and employers and can be used to inform strategies aimed at promoting a more seamless transition from academia to professional nursing practice.

### **Key Findings from the 2025 LCN NLRN Survey**

A total of 725 NLRNs completed the 2025 LCN NLRN Survey yielding a 14.1% response rate which is a 1.3 percentage point higher than the 12.8% response rate obtained with the 2023 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 (98%) of the NLRNs were employed at the time they completed the survey.
- Fifty percent (50%) of the NLRNs were minorities.
- Ninety-one percent of the NLRNs completed their education in Louisiana compared to 90% in 2023, an increase of one percentage point.
- Between 2017 and 2025, the proportion of NLRNs with an associate degree increased from 44% to 52%, while the proportion with a baccalaureate degree decreased from 54% to 45%.
- Forty-three percent (310) of the NLRNs reported having a degree or certificate in another field, with the greatest percentage having a bachelor's degree in another field (35%), followed by an associate degree (22%).
- Seventeen percent (17%) of the NLRNs that had a degree or certificate in another field reported that they were licensed practical nurses.
- Forty percent (40%) of the NLRNs indicated that they graduated from an accelerated nursing program.

- Eighty-five percent (85%) of the NLRNs plan to advance their education: 36% planned to pursue a baccalaureate degree in nursing, 37% a master's degree in nursing, and 12% planned to pursue a doctorate.
- Seventy-six percent (76%) of the NLRNs took the NCLEX-RN between two to seven weeks after graduation; 46% between 2-4 weeks; and 30% between 5-7 weeks.
- Ninety-one percent (91%) of the NLRNs reported passing the NCLEX-RN on first take.
- The percentage of NLRNs seeking employment prior to graduation went from 73% in 2017 to 77% in 2025, an increase of 4 percentage points.
- In 2025, 64% of the NLRNs reported that they had participated in a nurse residency program compared to 15% in 2017 and 54% in 2023.
- Fifty-five percent (147) 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 (65% of respondents) and receiving a salary/stipend (49% 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 2023 survey.
- Eighty-five percent (85%) of the NLRNs submitted less than three job applications before finding a position as a RN compared to 91% in 2023.
- Ninety-three percent (93%) of the NLRNs found employment as a RN in less than three months.
- Methods used by NLRNs to seek employment included: previous employment (41%), clinical experience at the healthcare facility (37%), hospital/health facility websites (30%), knowing someone at the healthcare facility (19%), job fair (13%); and referral (8%).
- Sixty-seven percent (67%) of the NLRNs had worked as a RN for more than a year at the time they completed the 2025 LCN NLRN Survey, followed by 10% that reported being employed ten to twelve months.
- The vast majority (97%) of NLRNs were working full-time, two percent reported working part-time and one percent were working on a per diem basis.
- Seventy-one percent (71%) of the NLRNs reported being employed in an acute care hospital at the time of completion of the survey, six percent were working in clinic/ambulatory care, six percent in long term care/skilled nursing facilities, and four percent were working in home health/community health/public health.
- Seventy-eight percent (78%) of the NLRNs reported that they were working in their job of choice compared to 87% in 2023.
- Nineteen percent (19%) of the employed NLRNs reported starting salaries of \$25-\$27 an hour compared to 33% in 2023. The percentage of NLRNs reporting a starting salary of greater than \$28 an hour increased by 18 percentage points over the last two years (55% in 2023; 73% in 2025).
- Twenty-seven percent (27%) 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 (41%), which included experiences of bullying, inadequate training, unsafe staff-to-patient ratios and lack of support by management/administration; better opportunities (12%); scheduling concerns (12%);

need for better pay or benefits (10%); relocation (7%); commute-related issues (4%); and other (14%).

### **NLRNs That Were Not Employed**

- Two percent of the NLRNs reported that they were unemployed at the time they completed the 2025 LCN NLRN Survey.
- Eight of the NLRNs reported that they were not actively seeking employment and two said they had been seeking employment for less than three months.
- Reasons given for not being hired included: lack of experience and limited availability of positions for new graduate nurses.

### **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 an 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**

- It's relatively easy, especially being an Extern prior to graduation.
- Since I had been working at X prior to getting my RN getting a job after graduation was very easy for me.
- Finding employment in Louisiana is a breeze compared to X. The hospitals in X are monopolies and require at least a year of experience for all their positions unless they are new graduate positions. The new graduate positions are limited.

#### **Lack of experience and not feeling prepared**

- Hello. After graduating with my associate's degree, as a Registered Nurse, I found it was difficult to find employment. After completing multiple applications and proceeding through one interview as a new graduate, (besides my current job), I've learned that healthcare employers preferred someone with experience. This made it hard for me to find a job as a new grad, even though I felt I obtained a lot of knowledge and skills during school and experience as an LPN.
- If it's not a new grad residency program, then most jobs were not willing to give a new grad the chance or opportunity to gain experience and knowledge without having prior experience, which is hard to have if you are a new grad.
- If you have no experience or less than 2 years' experience, it puts you at a disadvantage of opportunities. More employers should be willing to train you. You can't get experience until you're given the opportunity to learn.
- It is hard to find a job as a newly licensed RN. Every hospital or facility wants someone with experience and a new graduate; it was difficult trying to get into a specialty.
- It was hard to get any RN job without previous experience. Even fresh from graduating and passing the NCLEX.

- It's really tough finding a job, especially if experience is limited. Everyone wants someone with experience but to get experience someone has to hire you to gain experience. It really sucks.

### **Nurse residency /transition to practice programs**

- The hospital I work for has a nurse residency program that lasted a little over a year. It was awesome and crucial to our development. X, X nurse Residency program, and just the overall transitioning experience was amazing for me. I believe that experience should be the standard all over the state if it is not. I felt truly prepared and supported.
- I believe a facility offering a nurse residency program is the best for newly licensed nurses. Staffing is better at most large facilities now and a lot of areas are focusing on mentoring and supporting staff don't listen to the negativity. Choose your area and go for it!

### **Hiring / Interview process**

- It is incredibly hard to find employment surprisingly. I applied to countless jobs and either never got a call back, or my application was rejected because it didn't pass the software that the hospitals use to sift through applications. The only job that probably would've hired a new nurse was a struggling med surg unit that I would've left in 6 months or less from burnout. Hospitals don't want to train new grads and it's very sad, especially when they say they're dying for nurses to apply.
- Apply for the specialty that you want to go in don't just choose a specialty because everyone says you're supposed to start in a specific specialty.
- Apply early in the last semester of nursing school. Try to get a nurse tech position somewhere you like so you're guaranteed a job as a new grad RN.

### **Work environment**

- Bullying is real and prevalent.
- Finding employment is the easy part. Finding a job that has a healthy, balanced work environment is the hard part. I am on my third nursing job in less than 2 years. The first ICU job paid well (FT no benefits) and my team is parked well together, but we were overworked with no CNAs. I felt burnt out quickly. However, the culture is what kept me. I left that job because I moved back closer to home. My second job didn't pay well and had a terrible culture. I was full time only 2 months before going to PRN. My current job is at an LTAC. I do not like my coworkers, but the workload is healthier, and the pay is exponentially higher. Every job has its issues. You just have to decide which factors are most important.
- Getting married right out of college; I needed a job that worked hours and non-holidays to have family time. And many jobs now require participation in procedures that are against my knowledge of human nature.
- It can be a strenuous process due to low pay. and as the nurse-to-patient ratio increases it can be stressful for new grads to maintain mental and physical health while working in understaff environments.

### **Nurse patient ratio**

- It's just the hospital with the unsafe ratios. As a new grad I honestly don't even know about nursing anymore. It's like you don't get respected as a nurse. You try your very best and still feel like nothing. I only have been in nursing for 8 months and I want to change where I work. I am currently in process of doing so.
- One of the biggest challenges as a new RN is not having enough seasoned nurses to orient with and work alongside prior to being thrown to the wolves. Especially pushing the new RN to be in a position of leadership such as charge nurse when you're literally still trying to figure out how to be a RN. Nurse-to-patient ratios suck and being short staffed is an understatement.

- What I experienced was low paying wages after spending so much money to acquire the degree and poor staffing of the hospitals where it could easily lead to dangerous patient/nurse ratios and nurse ratios for acuity not being safe so that mistakes could have easily happened putting your new license on the line.

### **Salary**

- I moved out of Louisiana when I first graduated because the pay is so low. If I were to move back I would have to take a 40% salary cut
- Louisiana nurses are underpaid. I made more money as an LPN than I make as an RN. I advanced my career thinking it would financially help me provide for my kids; however, I've realized overworking myself for overtime to care for sick people will eventually kill me here. The salary for nurses does not keep up with the rising economy and it's pathetic.
- Salary is too low. It is extremely difficult to get raises. No reward for becoming valuable asset & learning facility, staff & processes. Have to quit and go find new employment and then return in 6 months to get a raise. No reward for being loyal. New hires starting more than any seasoned nurses. At 12% of my salary range is pitiful.

### **Recommendations**

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

- Implement and expand collaborative, innovative academic-practice partnerships between pre-RN nursing programs in universities and community colleges and healthcare systems to better prepare NLRNs with the critical thinking, clinical, communication, and professional skills necessary to become a safe, effective, compassionate member of the nursing profession.
- Develop and sustain accredited, comprehensive nurse residency and transition-to-practice programs across all healthcare settings in Louisiana to ensure equitable access and a seamless transition from academia to professional nursing practice.
- Establish structured nurse mentoring and coaching programs that support NLRNs in developing competency, confidence, autonomy, and leadership skills during the early years of practice.
- Create and maintain work environments that are supportive, safe, and free from bullying, with clear policies that promote adequate orientation, ongoing education, and professional development opportunities for NLRNs.
- Utilize innovative workforce strategies, including flexible scheduling, improved staffing models, and reduced nurse-to-patient ratios on high-acuity and medical-surgical units, to reduce burnout and promote retention.
- Explore financial incentives such as student loan repayment, tuition assistance, and competitive salary structures as mechanisms to retain NLRNs at the bedside for a minimum of two years.
- Continue to administer the LCN NLRN Survey biennially to monitor employment trends, transition-to-practice experiences, and workforce challenges, and to inform educators, employers, policymakers, and other stakeholders as Louisiana's healthcare system and nursing workforce evolve.

## Introduction

According to the Bureau of Labor Statistics (BLS) Occupational Outlook Handbook (2025), employment of registered nurses (RNs) is projected to grow 5% from 2024 to 2034. About 189,100 openings for RNs are projected each year, on average, over the decade. Many of those openings are expected to result from the need to replace workers who transfer to different occupations or exit the labor force, such as to retire. New graduates continue to be the largest source of RNs for recruitment. Yet, there are significant concerns amongst employers and nursing educators about the attrition rate of newly licensed registered nurses (NLRNs) within their institutions. It has been reported that 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). Within six years of graduation, the rate of turnover among NLRNs is about 55%. While it may be that this high rate of turnover only reflects changing nursing positions, it is still concerning that the high rate may also reflect that NLRNs are actually leaving the profession within 6 years of graduation. The profession cannot afford both the loss of financial and human resources that this turnover reflects. By better understanding the viewpoints and desires of NLRNs regarding the nursing profession, healthcare organizations can be better prepared to improve the recruitment and retention of 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 an RN. Some of the questions asked were: When did you begin seeking employment? How many jobs did you apply for prior to securing an 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 9, 2025, an email blast with the link to the 2025 LCN NLRN Survey went out via SurveyMonkey to a total of 5,140 new RNs that received their initial RN license between June 1, 2023, and May 31, 2025. 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 Wednesday, November 5, 2025, with a total of 725 NLRNs completing the survey yielding a 14.1% response rate (Figure 1).

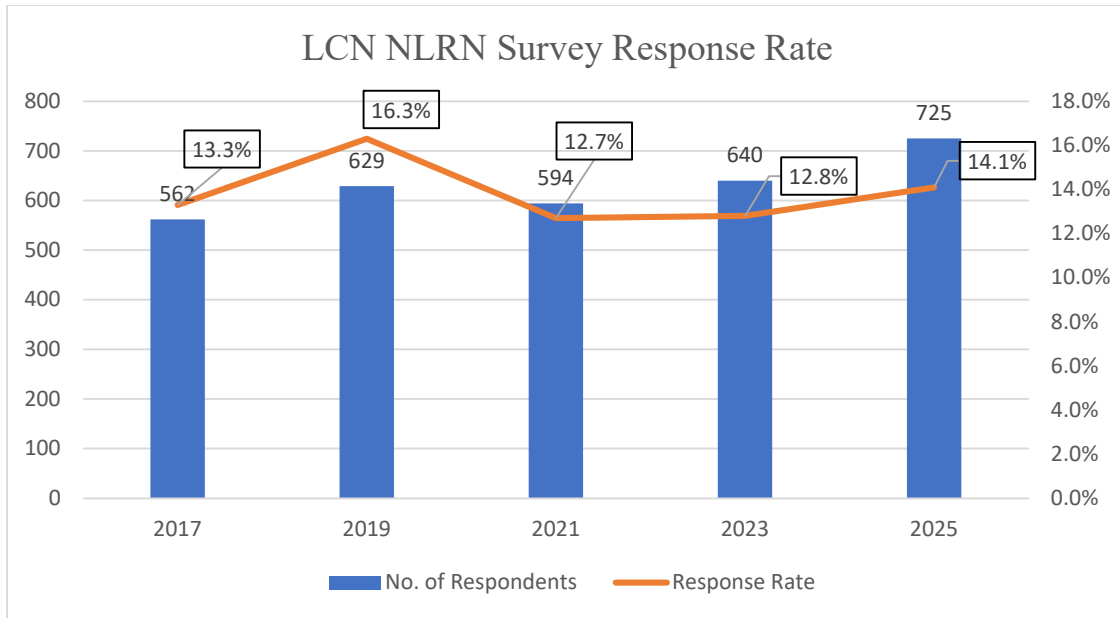


Figure 1. Number of respondents that completed the LCN NLRN Survey.

### Limitations

Valuable information about the employment of NLRNs in Louisiana has been gained from data obtained with the LCN NLRN Surveys over the past 16 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 2025 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 2025 LCN NLRN Survey. Parishes were then converted to the eight Regional Labor Market Areas (RLMA) designated by the Louisiana Workforce Commission (2025). One hundred percent of the eight RLMA and 94% of parishes (60 of the 64 parishes) in Louisiana were represented in the survey. Since 2017, most of the respondents lived in the New Orleans, Baton Rouge, Lafayette and Shreveport RLMA 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 2025 LCN NLRN Survey according to Regional Labor Market Area (RLMA)

Regional Labor Market Areas	Residence while in School (2025)		Current Residence as a RN (2025)		Residence while in School (2023)		Current Residence as a RN (2023)		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)	
	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%
RLMA 1 - New Orleans	192	26%	187	26%	151	24%	156	24%	143	24%	167	28%	164	26%	186	30%	154	27%	155	28%
RLMA 2 – Baton Rouge	137	19%	147	20%	129	20%	138	22%	97	16%	104	18%	113	18%	131	21%	114	20%	117	21%
RLMA 3 – Houma	43	6%	34	5%	33	5%	23	4%	39	7%	25	4%	41	7%	27	4%	32	6%	26	5%
RLMA 4 – Lafayette	78	11%	80	11%	97	15%	93	15%	87	15%	80	13%	52	8%	57	9%	45	8%	50	9%
RLMA 5 – Lake Charles	43	6%	40	5%	29	5%	29	5%	40	7%	32	5%	29	5%	26	4%	28	5%	31	6%
RLMA 6 – Alexandria	31	4%	35	5%	30	5%	29	5%	35	6%	34	6%	31	5%	25	4%	30	5%	34	6%
RLMA 7 – Shreveport	123	17%	116	16%	94	15%	88	14%	96	16%	94	16%	108	17%	100	16%	97	17%	92	16%
RLMA 8 – Monroe	65	9%	58	8%	59	9%	50	8%	42	7%	42	7%	50	8%	49	8%	43	8%	39	7%
Not Sure of Region	2	0.3%	2	0.3%	0	0%	2	0.3%	1	0.2%	1	0.2%	2	0.3%	4	0.6%	1	0.2%	2	0.4%
Do not live in Louisiana	11	2%	26	4%	18	3%	32	5%	14	2%	15	3%	39	6%	24	4%	18	3%	16	3%
<b>Total</b>	<b>725</b>		<b>725</b>		<b>640</b>		<b>640</b>		<b>594</b>		<b>594</b>		<b>629</b>		<b>629</b>		<b>562</b>		<b>562</b>	

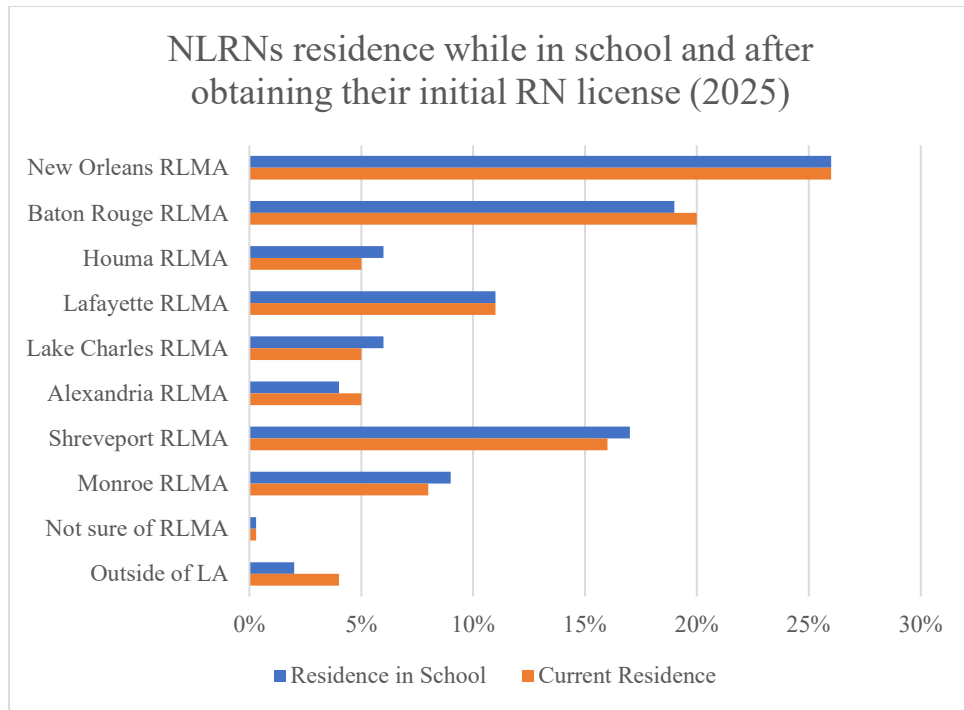


Figure 2. Place of residence for NLRNs pre- and post-graduation in 2025.

### Gender

As shown in Figure 3, each year most respondents to the LCN NLRN Survey have been female, which is in alignment with Louisiana’s RN workforce (88% female in 2024) and students enrolled in Louisiana’s Pre-RN programs (89% female in 2024) (LSBN Annual Report, 2024; LCN 2024 Education Capacity Report; LCN 2024 Nurse Supply Report).

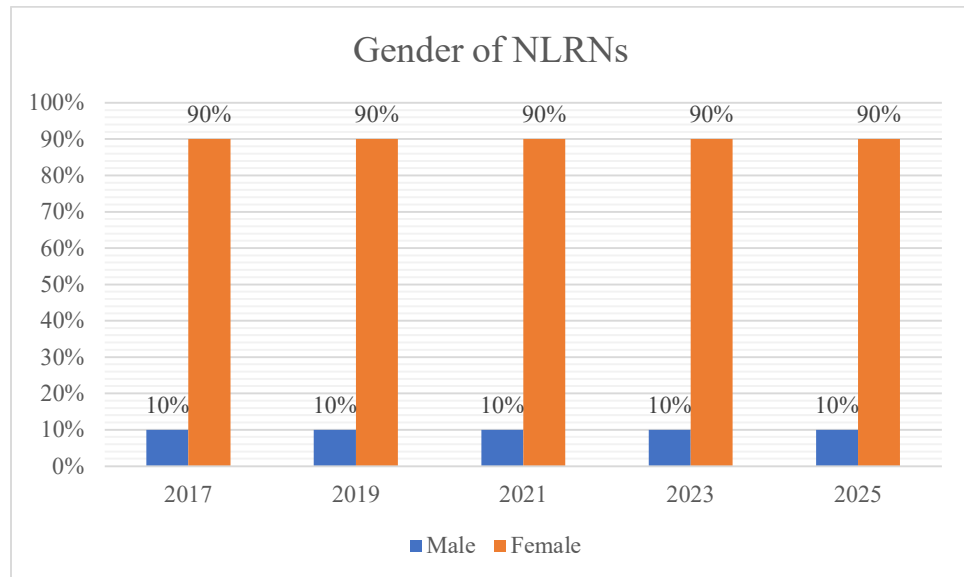


Figure 3. Gender of respondents to the LCN NLRN Survey.

## Race

In 2025, 50% of the NLRN respondents were White/Caucasian (Figure 4) with 50% of the NLRNs that responded to the survey reporting that they were minorities. 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.

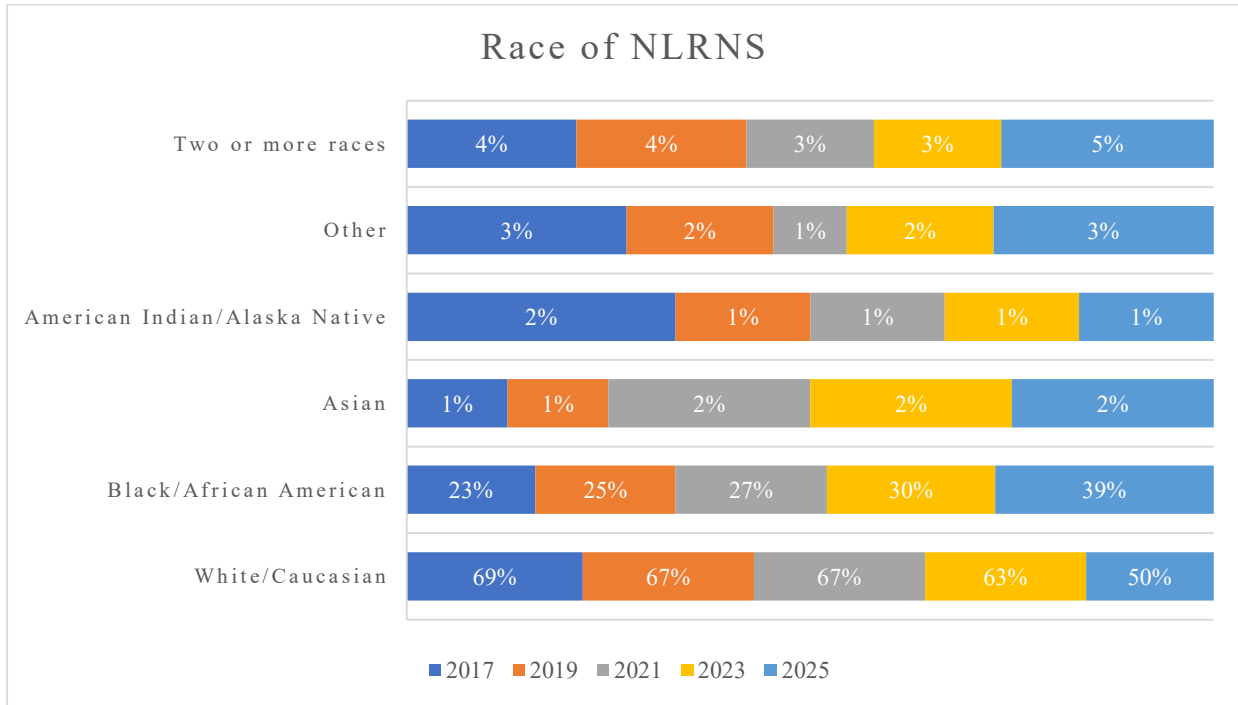


Figure 4. Race of respondents to the LCN NLRN Survey.

## Age

Over the years, as seen in Figure 5, most of the respondents to the LCN NLRN Survey were between 20 and 30 years of age (46% in 2025) followed by 31-40 years of age (28% in 2025). Twenty 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 (6% in 2025).

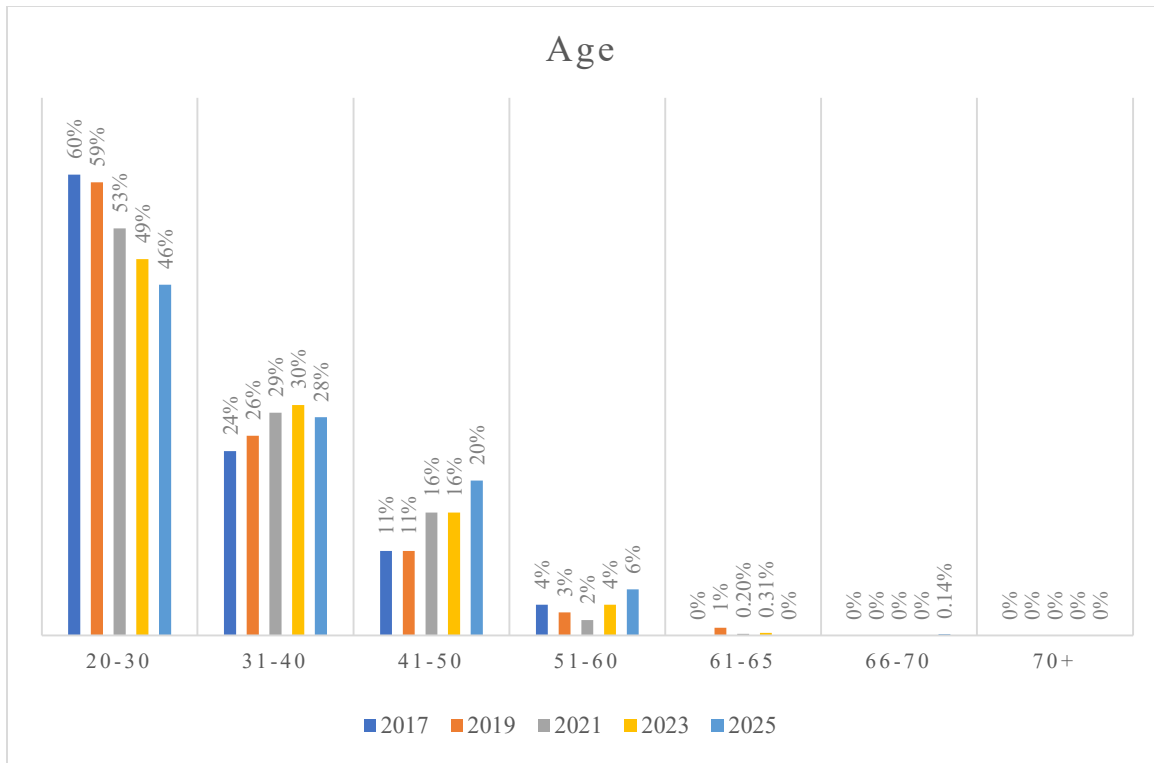


Figure 5. Age of respondents to the LCN NLRN Survey.

### Location of Nursing Education

Findings from each of the NLRN Surveys beginning in 2011 revealed that most respondents completed their education in Louisiana. In 2025, 91% of the NLRNs responding to the survey completed their education in Louisiana compared to 90% in 2023, an increase of one percentage point (see Figure 6).

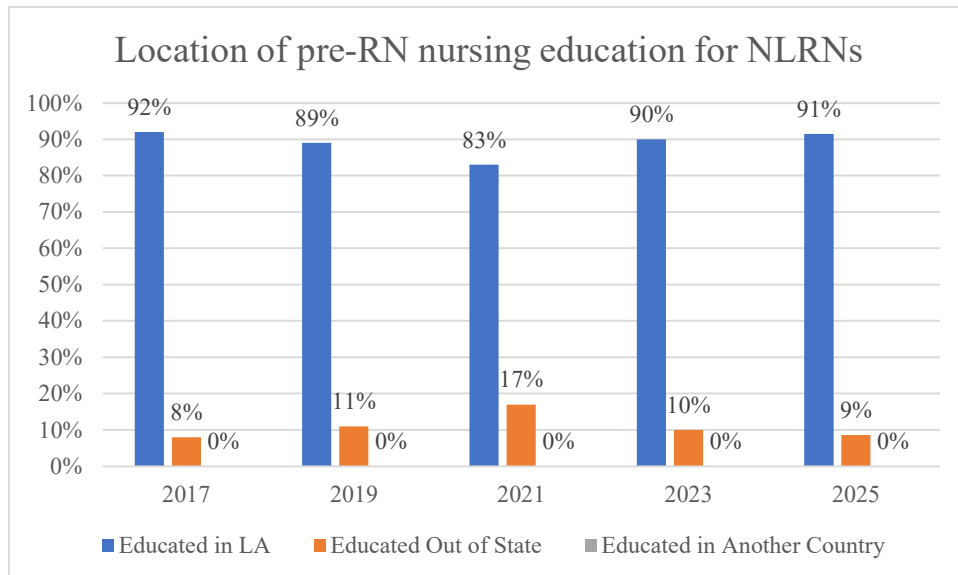


Figure 6. Location of nursing education of respondents to the LCN NLRN Survey.

## Educational Preparation

A larger proportion of the respondents to the 2025 LCN NLRN Survey were prepared at the associate degree level (52%) when compared to the baccalaureate level (45%). Only 2% of the respondents were prepared at the diploma level (Figure 7).

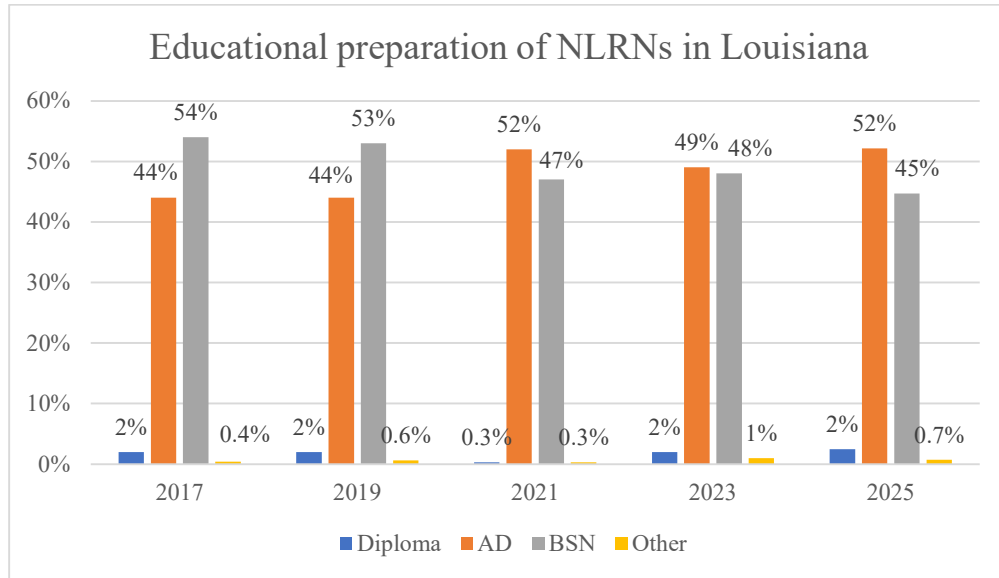


Figure 7. Educational preparation of respondents to the LCN NLRN Survey.

## 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. Forty-three percent (310) of the respondents to the 2025 LCN NLRN Survey reported having a degree or certificate in another field, with the greatest percentage having a bachelors' degree in another field (35%), followed by an associate degree (22%) (Figure 8). In 2025, 17% (54) of the respondents having a degree or certificate in another field reported that they were licensed practical nurses.

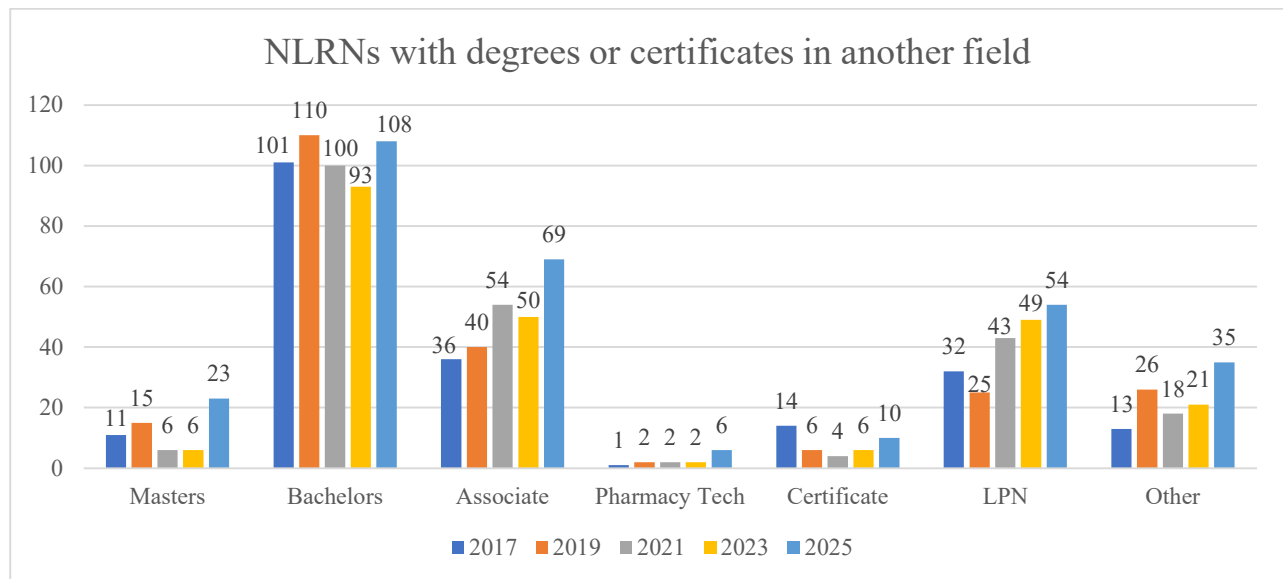


Figure 8. Respondents to the 2023 LCN NLRN Survey with degrees or certificates in other fields.

## Graduates from Accelerated Nursing Programs

With an increasing emphasis on preparing nurses at the baccalaureate and graduate degree levels, accelerated nursing programs for individuals with non-nursing backgrounds have emerged as an innovative and increasingly prevalent pathway into the profession. 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). Reflecting this trend, data from the 2025 LCN NLRN survey indicate that since 2017, more than one-quarter of respondents reported graduating from an accelerated nursing program (Figure 9).

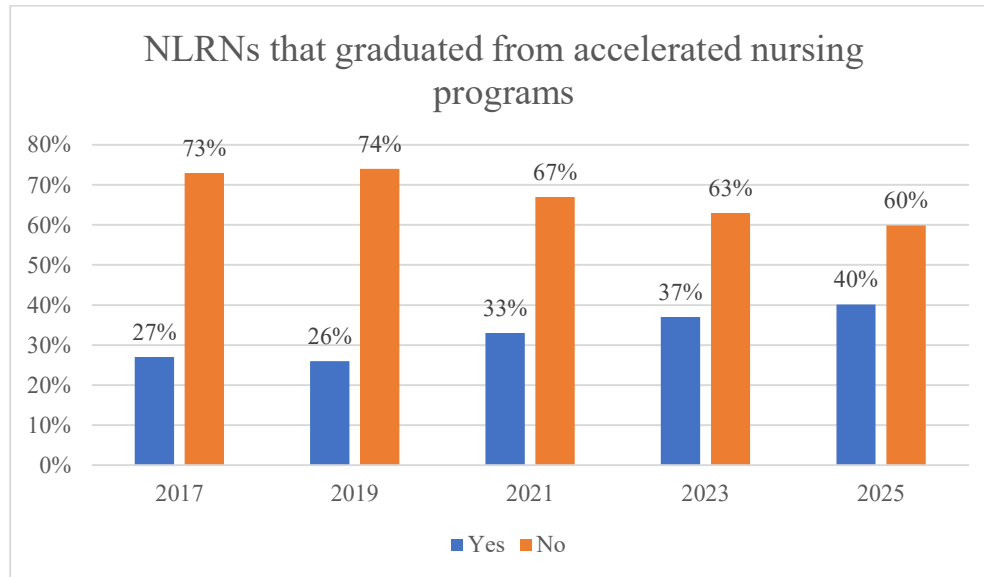


Figure 9. Respondents to the LCN NLRN Survey that graduated from accelerated nursing programs.

## NLRNs Plans to Advance Their Education

According to the *Future of Nursing 2020-2030* report from the National Academies of Sciences, Engineering, and Medicine, nursing education should not only prepare students for initial licensure but also support ongoing professional development and lifelong learning to ensure nurses remain competent in evolving practice environments (NASEM, 2021). This contemporary emphasis on continuous education reflects a strategic priority within the profession. In Louisiana, this commitment to advancing education is evident in responses from NLRNs. In 2025, 85% of NLRNs indicated that they plan to advance their education (Figure 10).

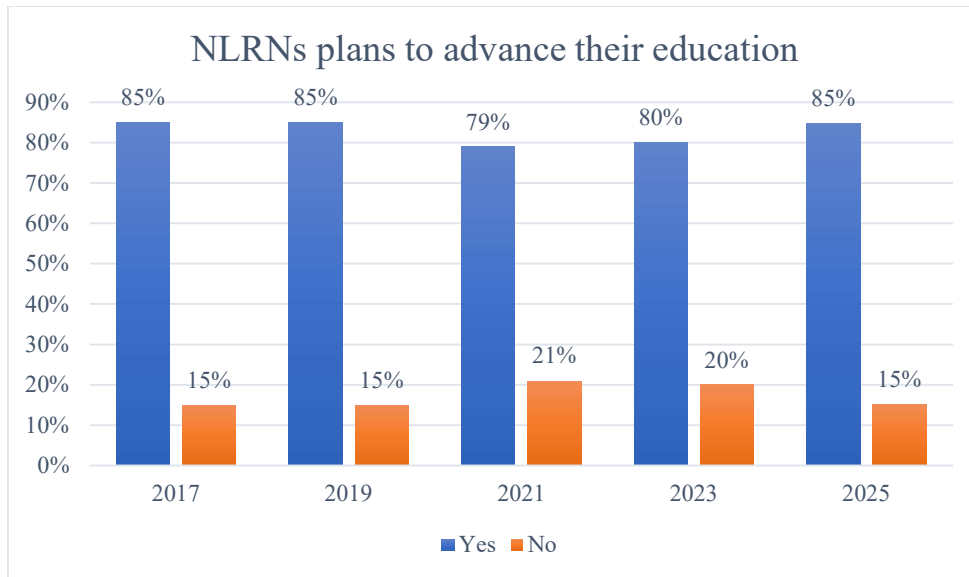


Figure 10. Plans of respondents to the LCN NLRN to advance their education.

In 2025, 36% of the NLRNs planned to pursue a baccalaureate degree in nursing, 37% planned to pursue a master’s degree in nursing, and 12% planned to pursue a doctorate (Figure 11).

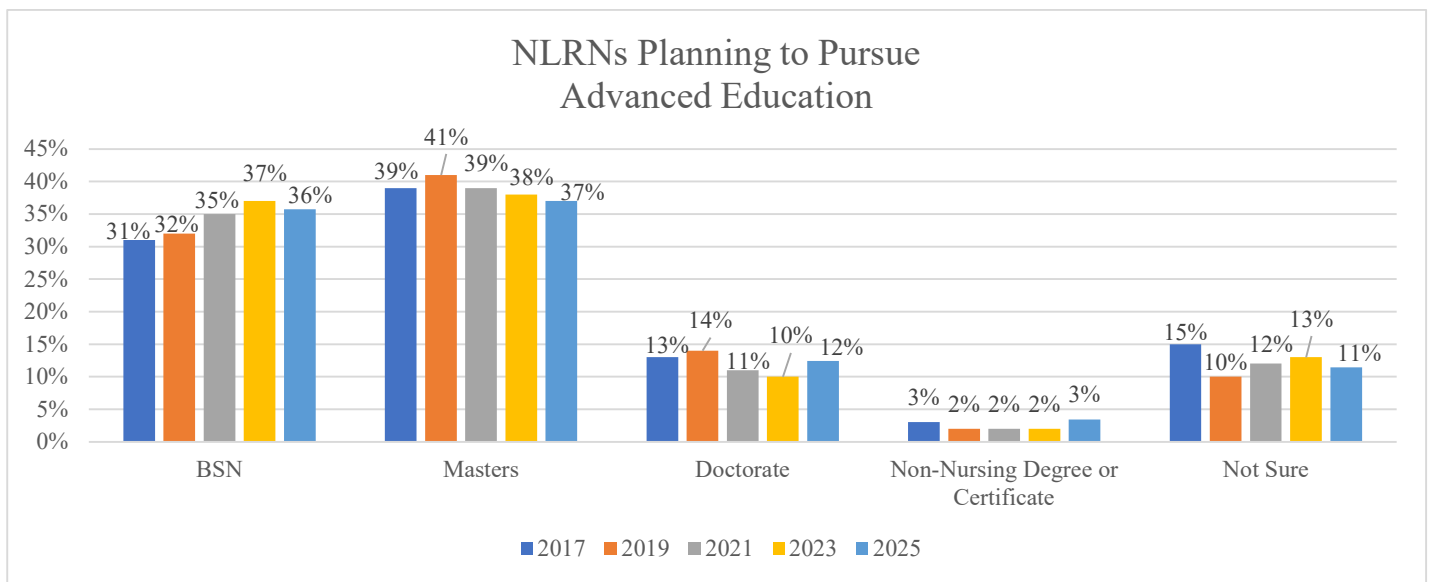


Figure 11. Type of advanced education that NLRNs plan to pursue.

### 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 attempt (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. Seventy-six percent of the NLRNs responding to the 2025 survey took the NCLEX-RN between two to seven weeks after graduation; 46% between 2-4 weeks; and 30% between 5-7 weeks (Figure 12). Twelve percent of the respondents to the 2025 LCN NLRN Survey took the exam two months after graduation, four percent took it three months after graduation, and two percent took the exam greater than three months after graduation.

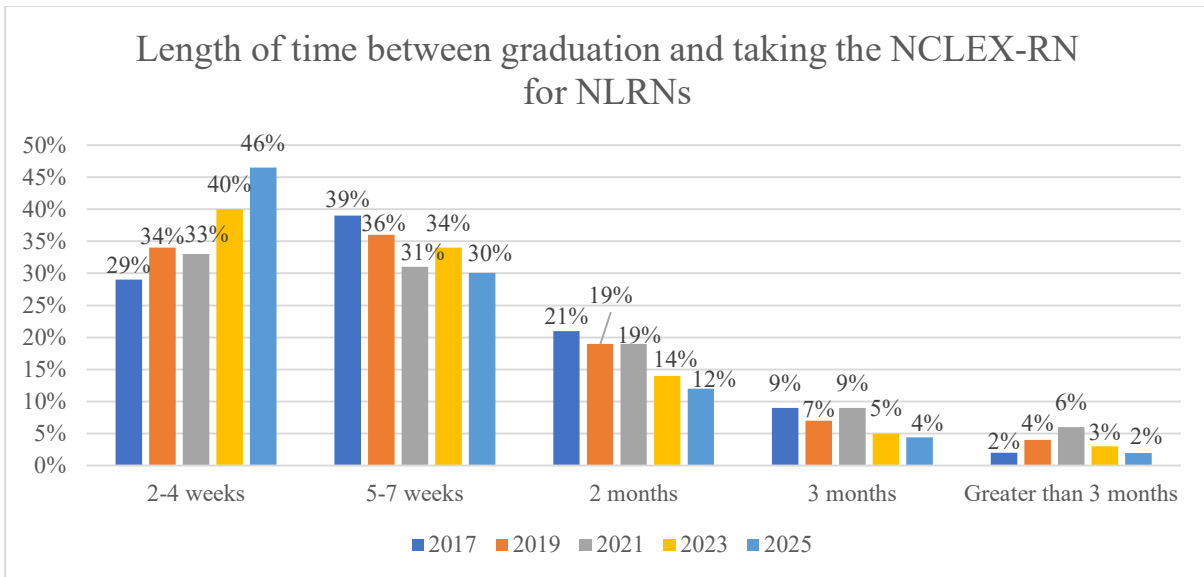


Figure 12. NLRNs report length of time between graduation and taking the NCLEX-RN.

### Passage on the NCLEX-RN on First Take

As seen in Figure 13, most of the respondents to the LCN NLRN Survey were successful in passing the NCLEX-RN on first take. In 2025, 91% of the NLRNs reported passing the NCLEX-RN on the first take which is in line with Louisiana’s overall passage rate of 93.52% in 2024.

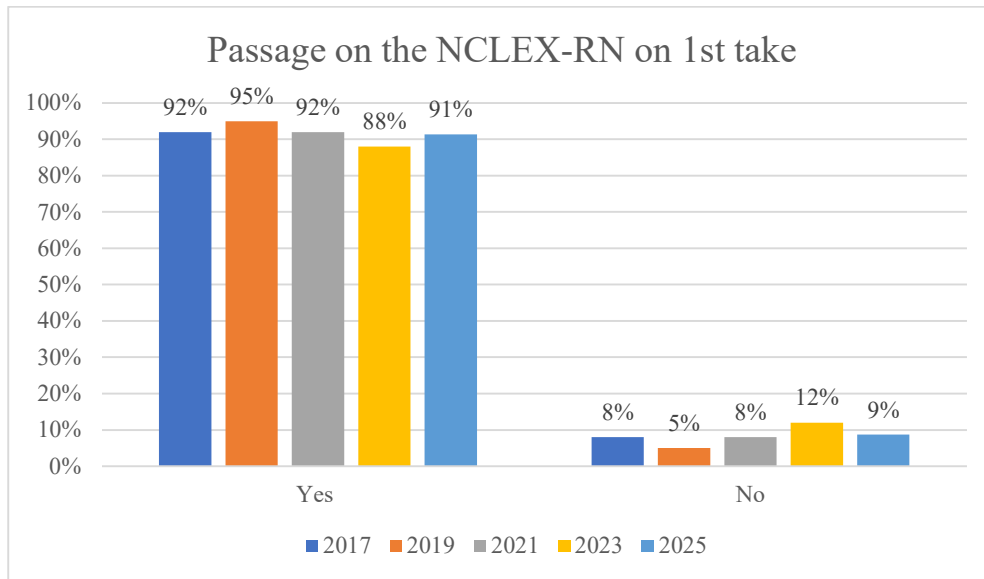


Figure 13. Passage on the NCLEX-RN on first take for NLRNs.

### Seeking Employment as an RN

Most new graduates began seeking employment prior to graduation based on findings from the NLRN surveys (Figure 14). The number of respondents that reported seeking employment prior to graduation increased by four percentage points between 2017 and 2025. The percentage of new graduates waiting to seek employment immediately after graduation went from 12% in 2017 to 10% in 2025, a decrease of two percentage points.

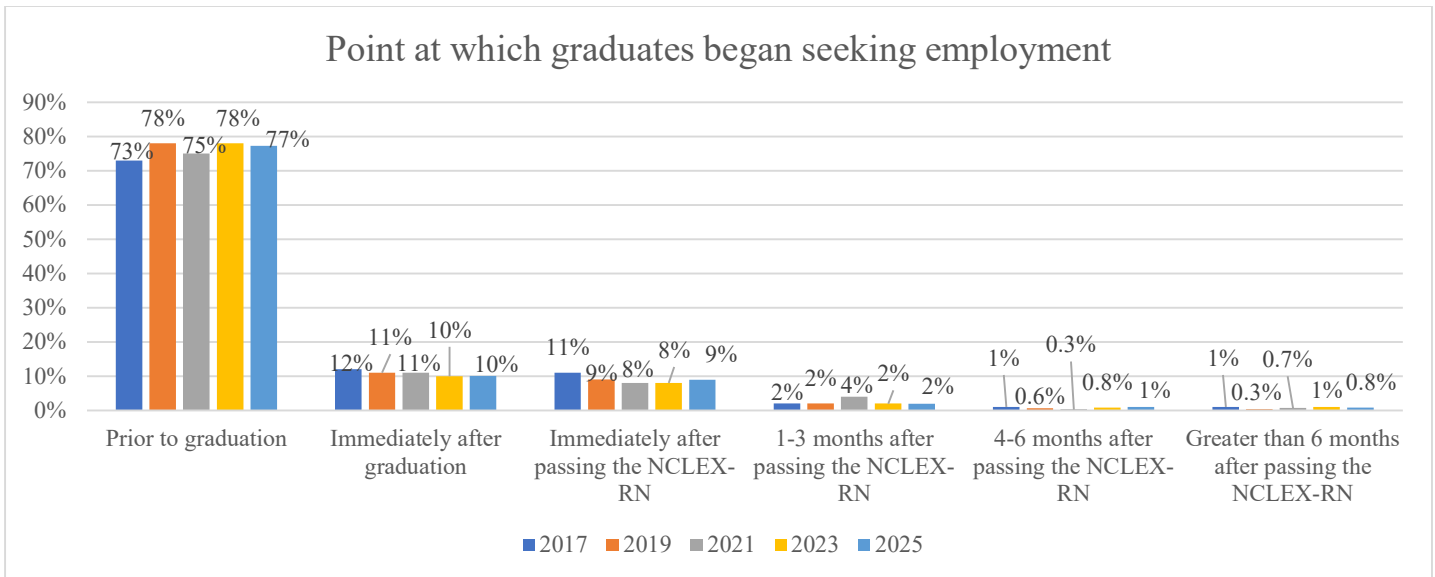


Figure 14. Point at which NLRNs reported that they began to seek employment as a RN.

### Participation in a Nurse Residency Program

The importance of supporting newly licensed nurses through structured transition-to-practice initiatives, including nurse residency programs, has been reaffirmed and expanded in the Future of Nursing 2020–2030 report published by the National Academies of Sciences, Engineering, and Medicine (2021). Consistent with this emphasis, a question was added to the LCN NLRN Survey in 2017 to assess participation in nurse residency or transition-to-practice programs among newly licensed registered nurses in the state. As shown in Figure 15, participation in nurse residency programs increased substantially over time: in 2025, 64% of NLRNs reported participating in a nurse residency program, compared to 15% in 2017. This represents a 49-percentage-point increase in nurse residency participation among Louisiana’s newly licensed registered nurses.

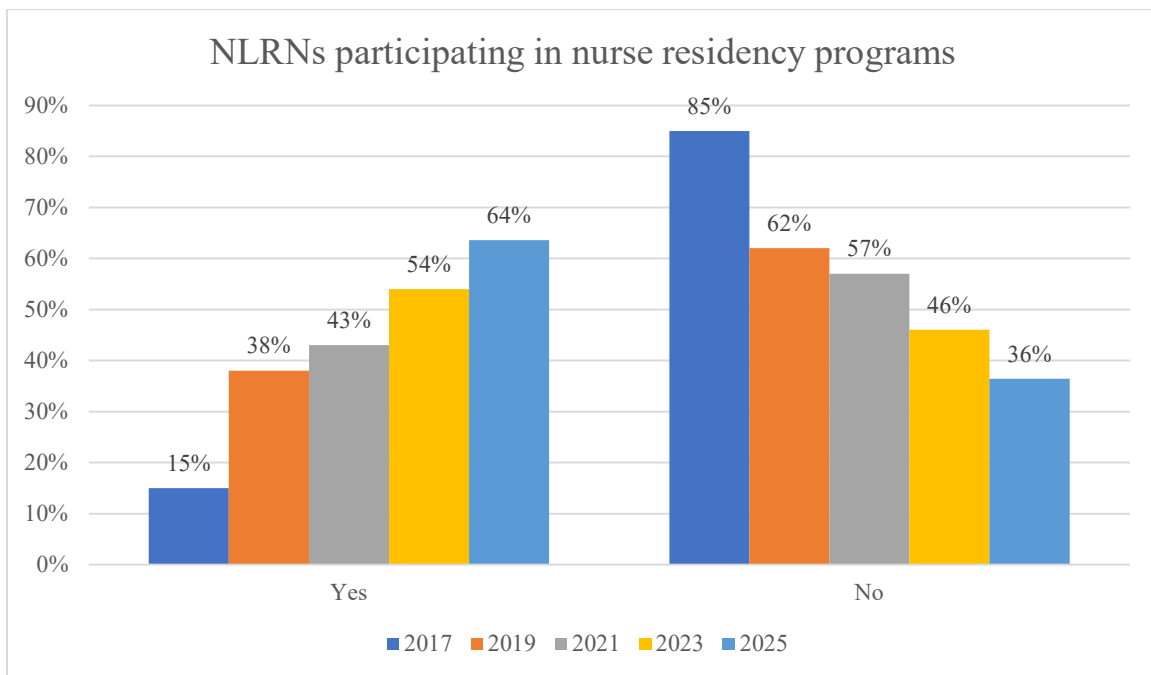


Figure 15. NLRNs report participation in a nurse residency program.

When asked about the barriers that prevented them from participating in a nurse residency program, 55% (147) 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, 23% (60) indicated that there was not a transition to practice program available that addressed the specialty area they were interested in, and 8% (20) reported that they did not see the value in participating in a nurse residency/transition to practice program (Figure 16).

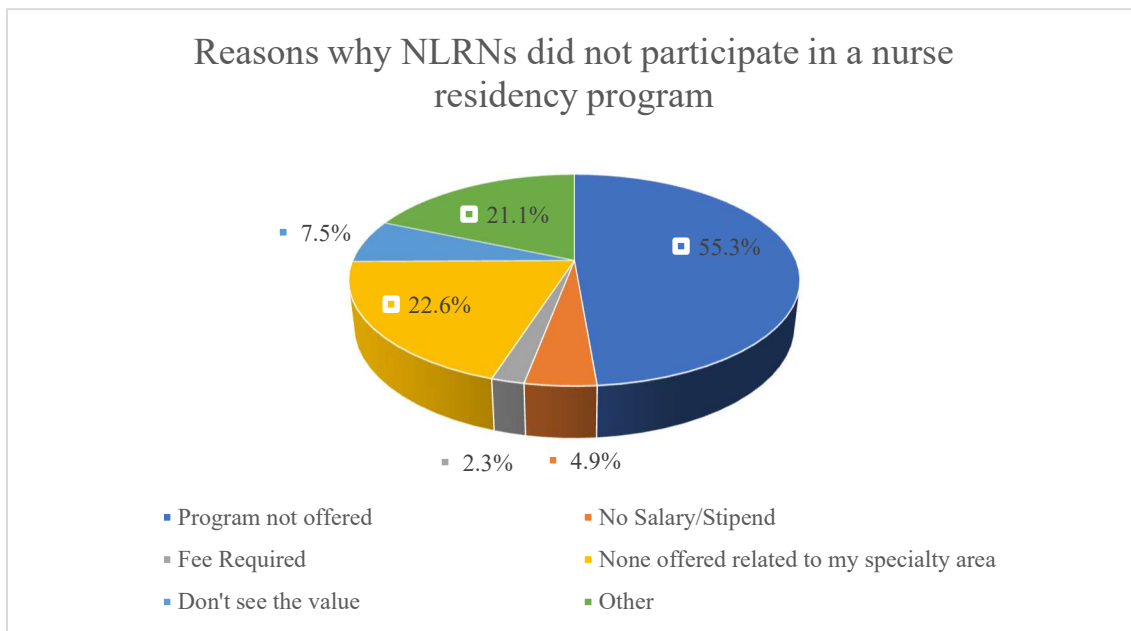


Figure 16. Reasons why NLRNs did not participate in a nurse residency/transition to practice program in 2025.

In 2025, the top two motivating factors for participating in a nurse residency program were increasing skills and confidence (65% of respondents) and receiving a salary/stipend (49% of respondents). Thirty-one percent of the respondents also indicated student loan deferment as a motivating factor (Figure 17).

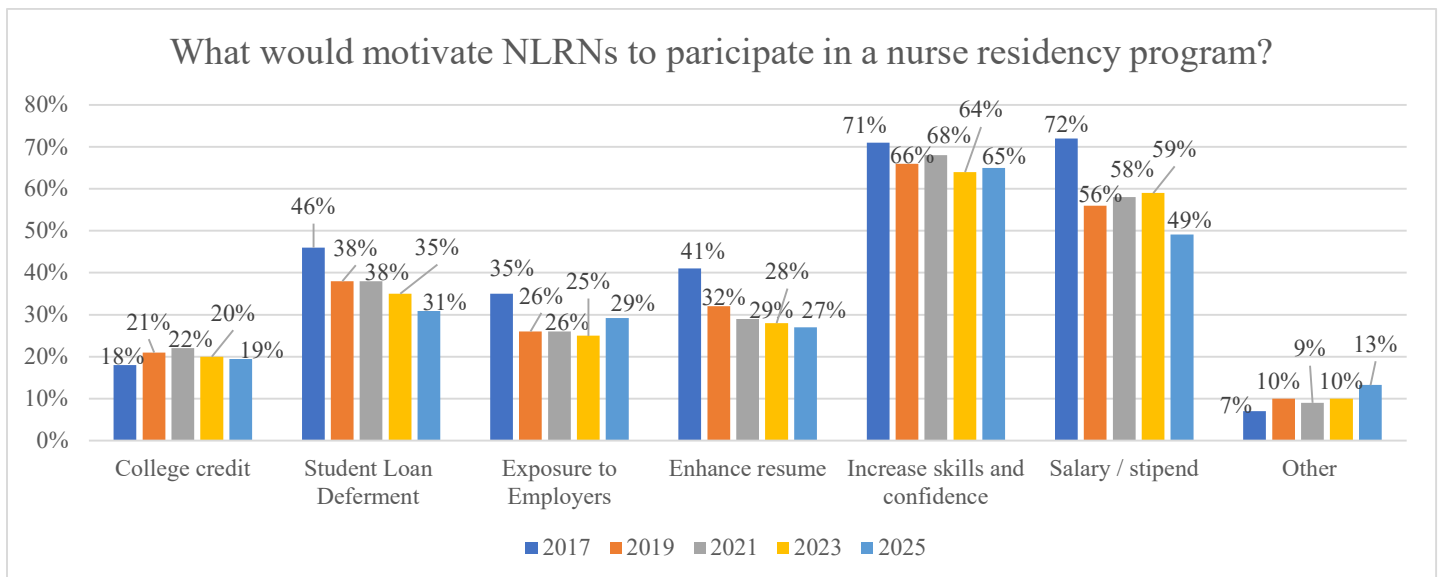


Figure 17. Motivators reported by NLRNs to participate in a nurse residency program.

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

A consistent and notably positive finding across all LCN’s NLRN Surveys is the exceptionally high employment rate among respondents. Since 2017, more than 97% of NLRNs reported being employed at the time of survey participation (Figure 18). 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.

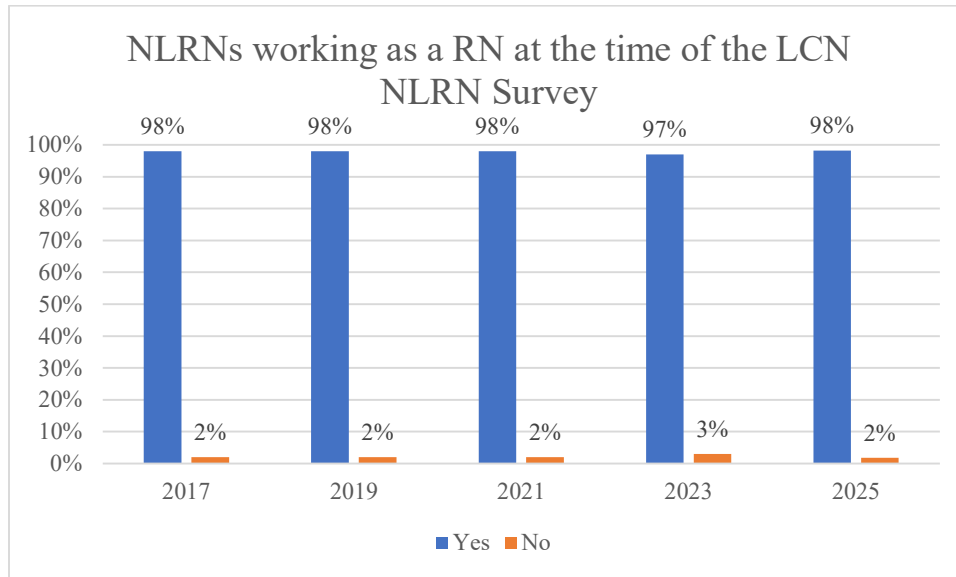


Figure 18. NLRNs that reported working at the time they completed the LCN NLRN Survey.

## Length of Employment as an RN

In 2025, the majority (67%) of the NLRNs had been working as an RN for more than a year at the time they participated in the survey, followed by 10% that had been working ten to twelve months (Figure 19).

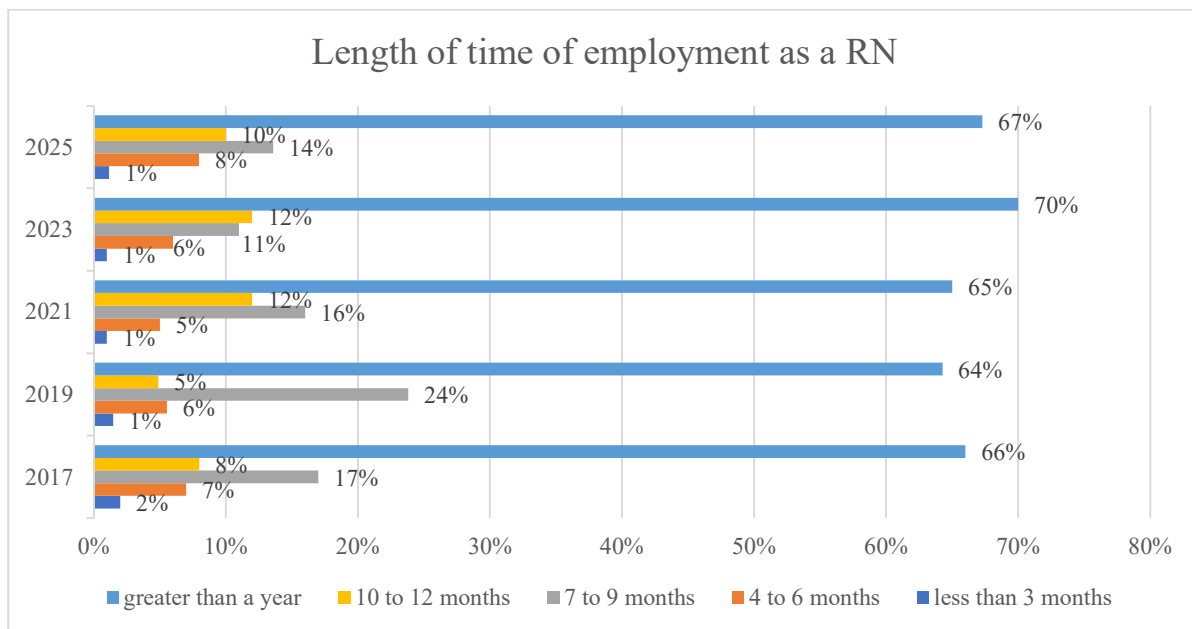


Figure 19. Length of time of employment reported by NLRNs completing the LCN NLRN Survey.

## Employment Status as an RN

The majority of employed NLRNs were working full-time as an RN at the time they completed the 2025 LCN NLRN Survey; two percent reported working part-time and one percent were working on a per diem basis (Figure 20).

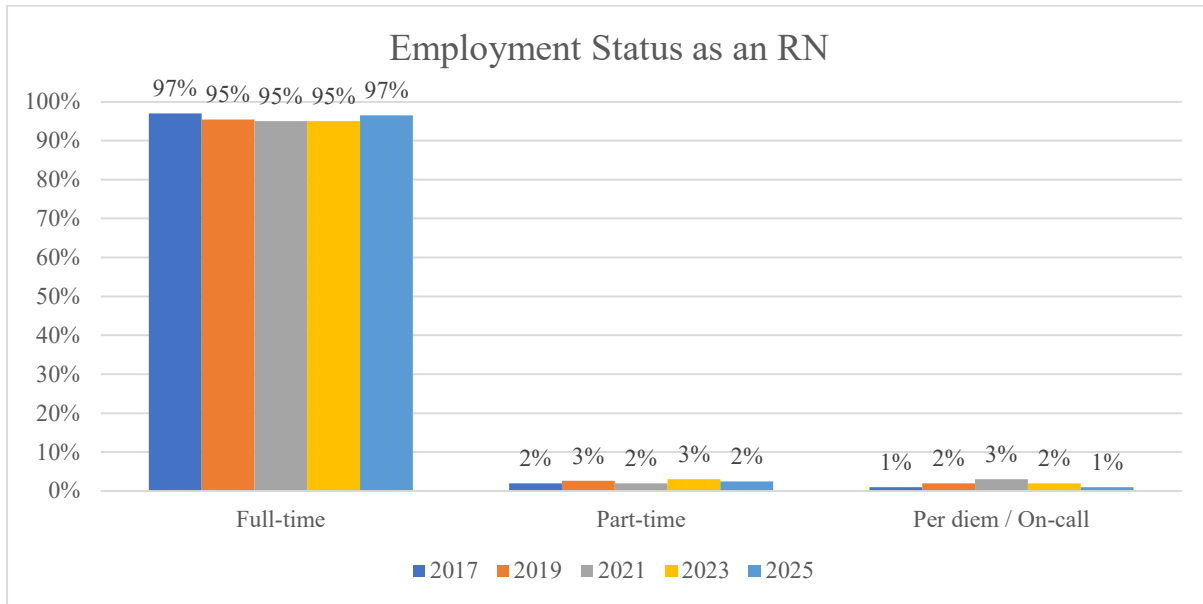


Figure 20. Employment status of NLRNs at the time of the survey.

## Length of Time to Find a Job as an RN

As seen in Figure 21, in 2025, 93% of the NLRNs reported finding a position as a RN in less than three months.

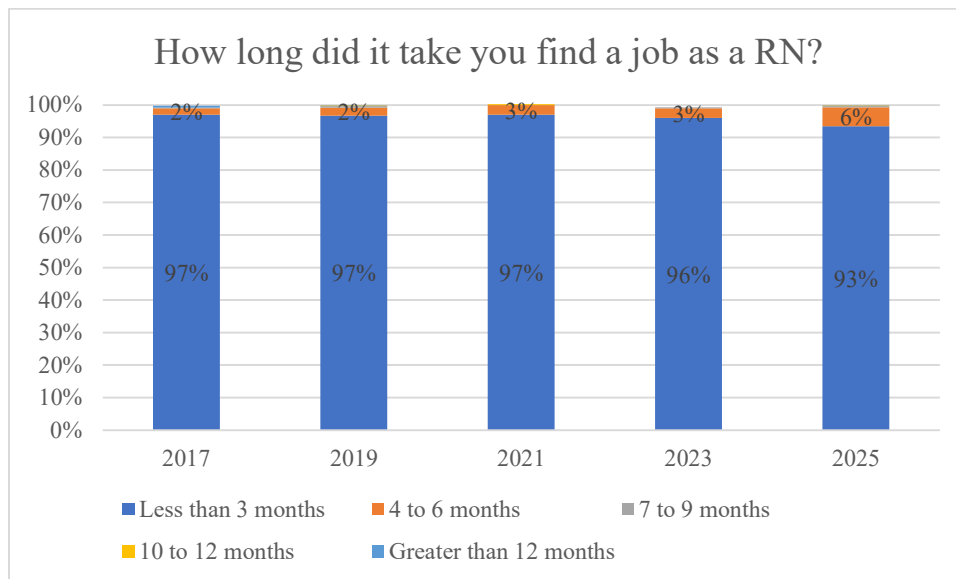


Figure 21. Length of time it took NLRNs to find a position as a RN.

## Job of Choice

As shown in Figure 22, the majority of NLRNs reported working in their job of choice throughout the past decade. However, the proportion of respondents indicating that they were *not* working in their job of choice has increased over time. Since 2017, this percentage has risen by three percentage points, with a more pronounced increase of nine percentage points occurring since 2023.

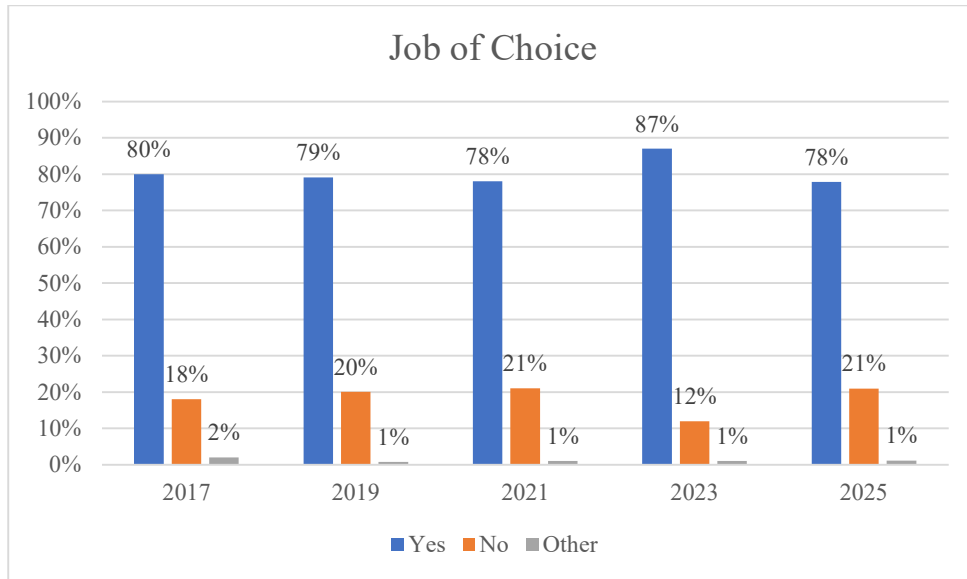


Figure 22. NLRNs reporting working in their job of choice.

## Number of Jobs Applied for Before Finding Employment as an RN

In 2025, 85% of the NLRNs reported having to submit less than three job applications before finding a position as a RN compared to 91% of the respondents in 2023, a difference of six percentage points (Figure 23).

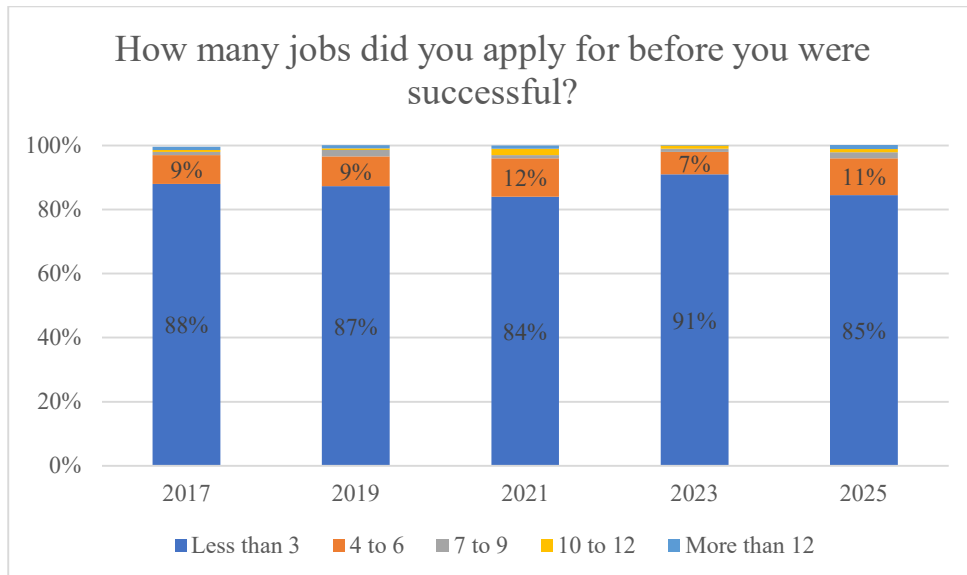


Figure 23. Number of jobs NLRNs applied for before finding a position as a RN.

## Methods Used by NLRNs to Find a Position as an RN

A variety of methods were used by NLRNs to find RN positions (Figure 24). In 2025, 41% reported previous employment, 37% of the NLRNs reported clinical experiences at healthcare facilities was helpful in finding employment as an RN, 30% reported hospital/health facility websites, and 19% indicated that knowing someone at the healthcare facility assisted them in finding a position. Job fairs (13%) and referrals (8%) were also identified as methods used for finding a position as an RN.

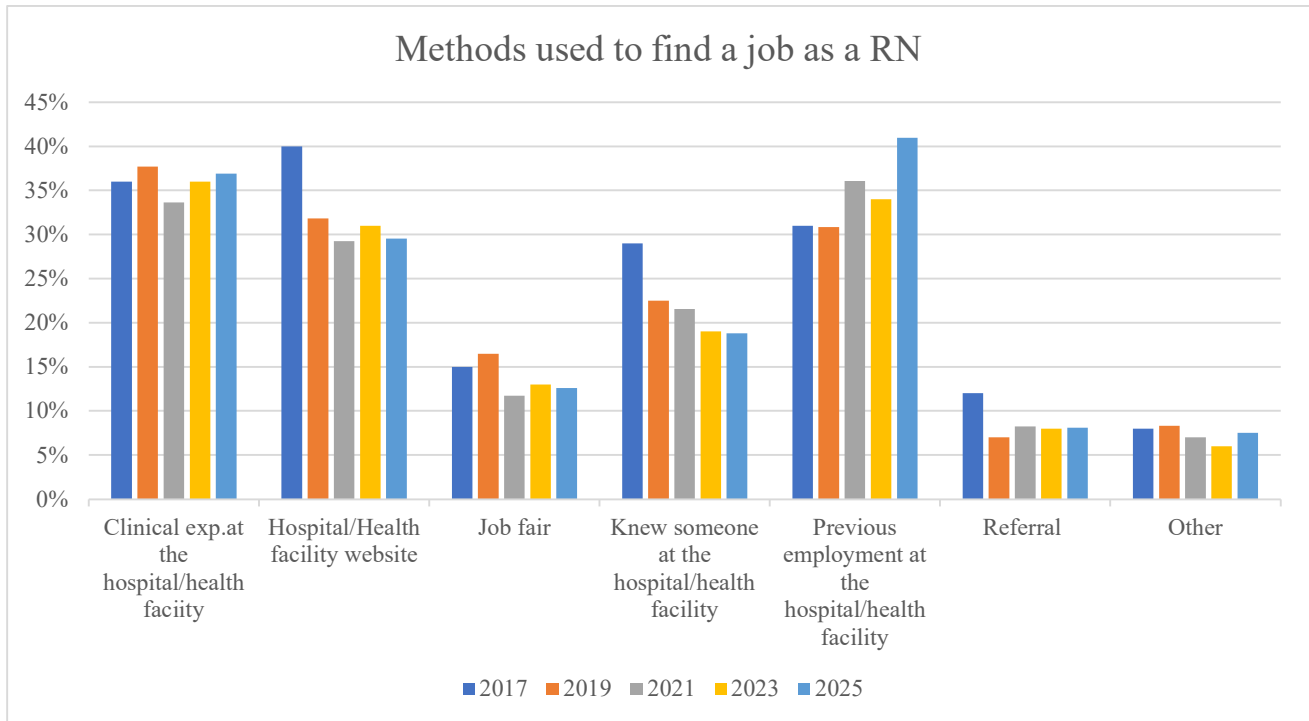


Figure 24. Methods used by NLRNs to find RN positions.

## Types of Healthcare Facilities in Which NLRNs Found Employment

As illustrated in Figure 25, the majority of NLRNs reported finding employment in acute care hospitals. In 2025, 71% of respondents reported working in an acute care hospital at the time of survey completion, representing a three-percentage point increase from 68% in 2023. Smaller proportions of NLRNs reported employment in other settings, including clinic or ambulatory care (6%), long-term care or skilled nursing facilities (6%), and home health, community health, or public health settings (4%).

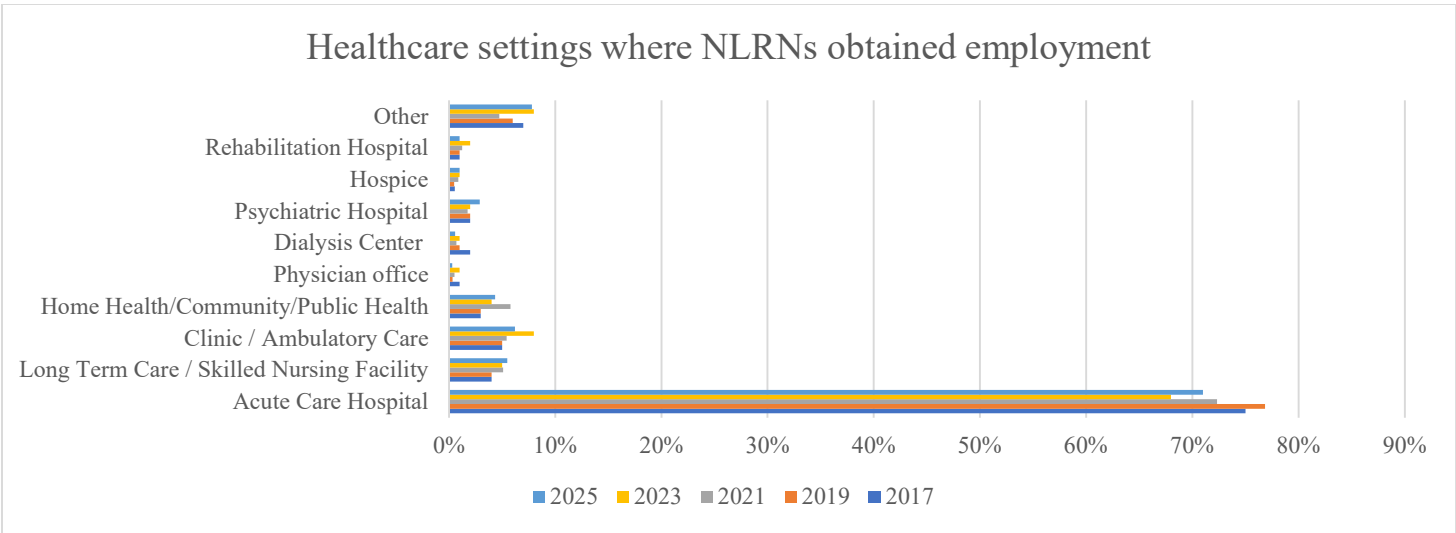


Figure 25. Types of healthcare facilities where NLRNs found employment.

**Starting Salaries for NLRNs**

As shown in Figure 26, in 2025, 3% of NLRNs reported a starting hourly wage of \$22–\$24, representing a five–percentage point decrease from 8% in 2023. At the same time, there was a notable shift toward higher starting wages: the proportion of NLRNs reporting a starting salary of \$25–\$27 per hour decreased by 14 percentage points, while those reporting a starting salary greater than \$28 per hour increased by 18 percentage points.

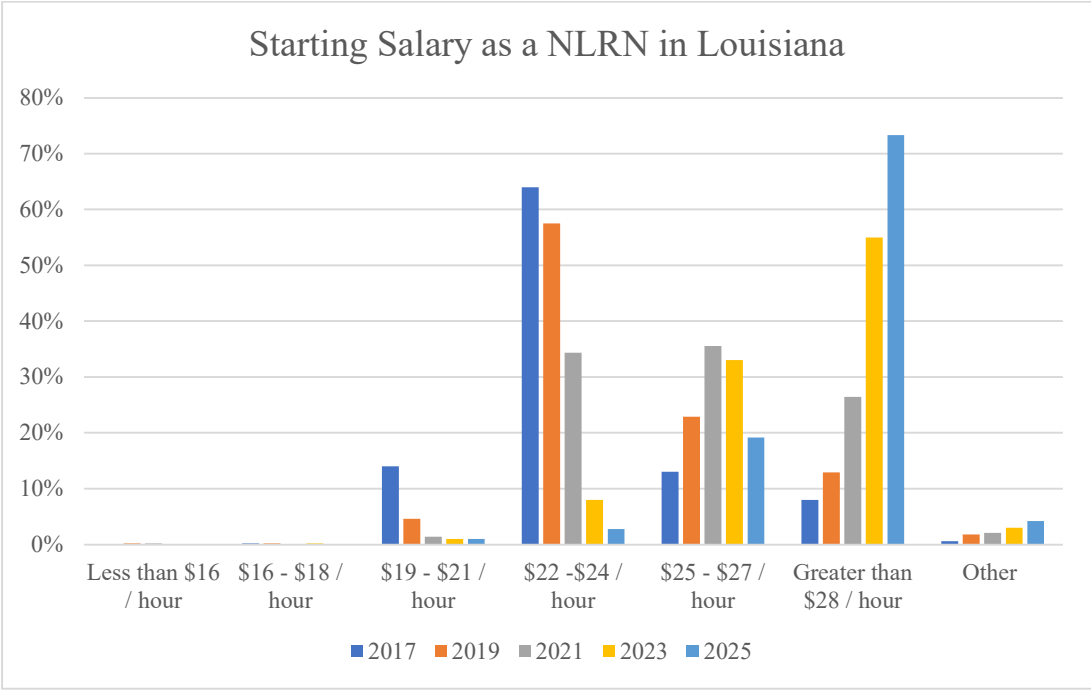


Figure 26. Starting salaries for NLRNs in Louisiana.

## Change of Employment Settings

In 2025, NLRNs were asked whether they had changed jobs since their initial employment as a registered nurse. More than one quarter of respondents (27%) reported changing jobs at least once since beginning their nursing careers (Figure 27). Among those who changed positions, the most frequently cited reason was an uncomfortable work environment, which included experiences of bullying, inadequate training, unsafe staff-to-patient ratios, and insufficient support from management or administration (75 respondents, 41%). Other reported reasons for changing employment included the pursuit of better opportunities (21 respondents, 12%), scheduling concerns (21 respondents, 12%), the need for improved pay or benefits (19 respondents, 10%), relocation (13 respondents, 7%), and commute-related issues (7 respondents, 4%). Additional reasons categorized as “other” (26 respondents, 14%) included dissatisfaction with the nursing specialty, organizational changes such as company acquisition, and personal factors.

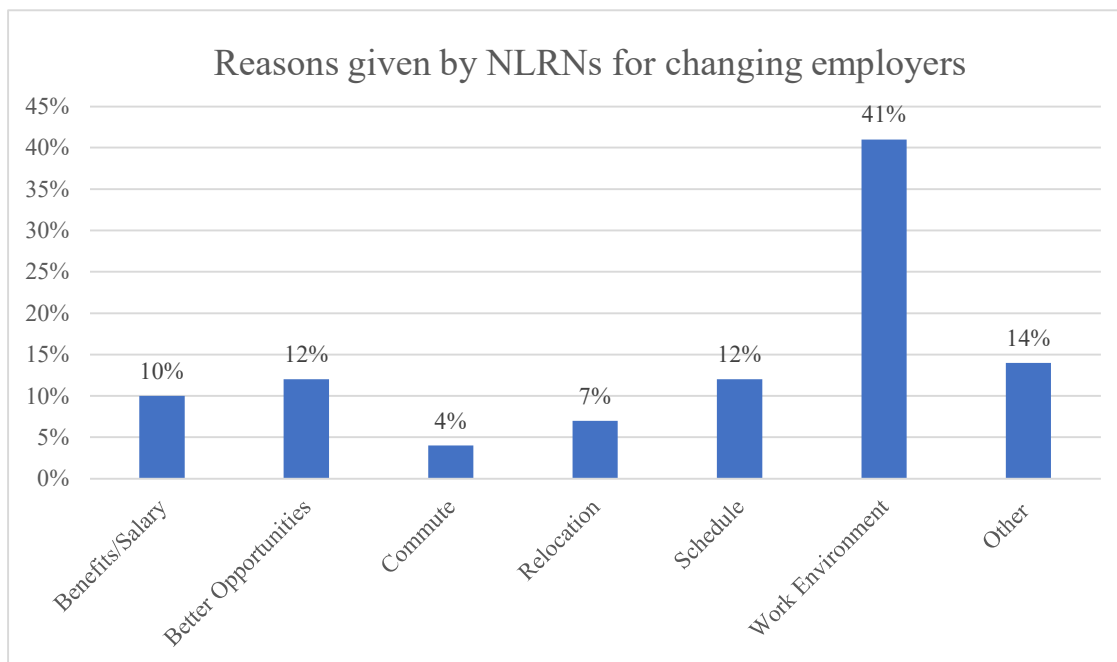


Figure 27. Reasons given by NLRNs for changing employers in 2025.

## NLRNs That Were Not Employed

In the 2025 LCN NLRN Survey, 2% of respondents reported being unemployed at the time of survey completion (Figure 28). Since 2013, NLRNs who were not employed have been asked to report the length of time they had been seeking RN employment, as well as reasons provided by potential employers for not extending job offers. In 2025, eight NLRNs indicated that they were not actively seeking employment, while two reported actively seeking employment for less than three months. The most cited reasons for not being hired were a lack of experience and limited availability of positions for new graduate nurses.

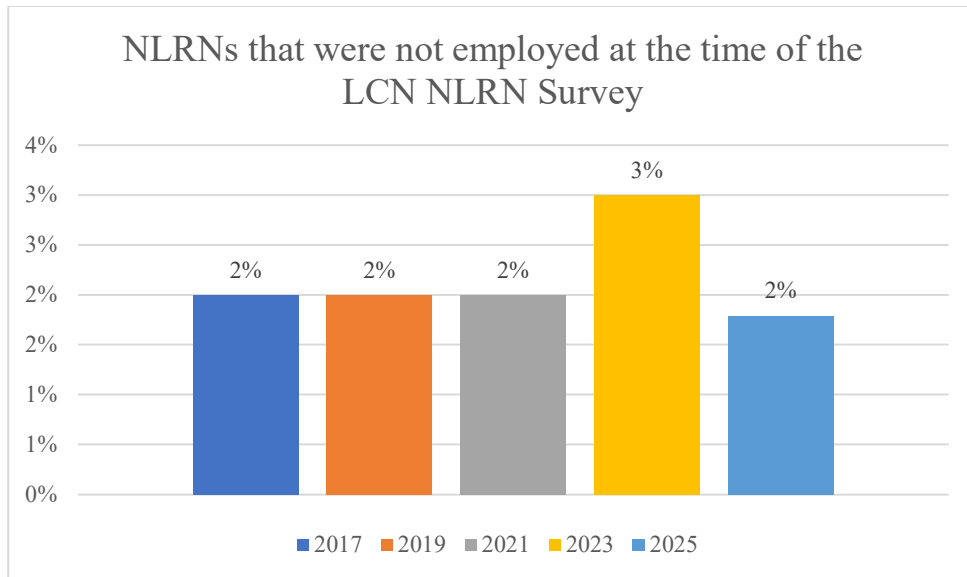


Figure 28. NLRNs that were not employed at the time they completed the LCN NLRN Survey.

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

Qualitative responses revealed several dominant themes, most notably concerns regarding compensation, staffing levels, burnout, and inadequate transition-to-practice support. While many respondents reported that employment was readily available, the quality of work environments and adequacy of compensation were frequently cited as factors influencing job satisfaction and retention. Nurse residency programs and supportive work environments were consistently identified as protective factors, whereas unsafe staffing ratios, workplace bullying, and low pay were commonly described as drivers of burnout and early career turnover. To maintain anonymity, the letter ‘X’ was used when NLRNs referred to specific health care agencies or cities. Full verbatim comments are provided in Addendum A.

## Summary and Recommendations (2025)

In the years the Louisiana Center for Nursing (LCN) has conducted the Newly Licensed Registered Nurse (NLRN) Survey, several positive trends continue to be demonstrated in the findings. Improvements noted in the 2025 survey include, but are not limited to, the following:

### Improvements

- Ninety-eight percent (98%) of NLRNs were employed at the time of survey completion, consistent with prior survey cycles.
- Racial and ethnic diversity among NLRNs remains strong, with 50% of respondents identifying as minorities.
- The proportion of NLRNs graduating from Louisiana nursing programs increased to 91%, supporting in-state workforce retention.
- The percentage of NLRNs graduating from associate degree programs increased from 44% in 2017 to 52% in 2025.
- Forty percent (40%) of NLRNs graduated from accelerated nursing programs, reflecting continued growth in alternative pathways into nursing.
- Eighty-five percent (85%) of NLRNs reported plans to advance their education, including baccalaureate, master's, and doctoral preparation.
- Participation in nurse residency or transition-to-practice programs increased substantially to 64% in 2025, compared to 15% in 2017 and 54% in 2023.
- The majority (93%) of NLRNs secured employment as an RN within three months of graduation.
- Starting salaries improved, with 73% of NLRNs reporting a starting wage greater than \$28 per hour, representing an 18-percentage-point increase since 2023.

During the same time period, several concerning trends and ongoing challenges were identified:

### Challenges / Areas of Concern

- NLRNs continue to be concentrated in major metropolitan areas of the state, contributing to persistent nursing shortages in rural and underserved regions.
- Education at the baccalaureate level continues to decline, decreasing from 54% in 2017 to 45% in 2025.
- More than one quarter (27%) of NLRNs reported changing employment settings at least once since initial licensure, often within the first two years of practice.
- The most common reason for job change was an uncomfortable or unsafe work environment, including bullying, inadequate training, unsafe nurse-to-patient ratios, and lack of managerial support.
- More than half (55%) of NLRNs who did not participate in a nurse residency program reported that such programs were not offered by their employer.
- Narrative comments revealed ongoing concerns related to burnout, staffing shortages, early leadership expectations, and emotional strain during transition to practice.
- Despite improvements in starting wages, dissatisfaction with compensation, limited raises, and pay inequities remain significant contributors to turnover intentions.

Recommendations that stem from the 2025 LCN NLRN Survey include, but are not limited to, the following:

- Implement and expand collaborative, innovative academic-practice partnerships between pre-RN nursing programs in universities and community colleges and healthcare systems to better prepare

NLRNs with the critical thinking, clinical, communication, and professional skills necessary to become a safe, effective, compassionate member of the nursing profession.

- Develop and sustain accredited, comprehensive nurse residency and transition-to-practice programs across all healthcare settings in Louisiana to ensure equitable access and a seamless transition from academia to professional nursing practice.
- Establish structured nurse mentoring and coaching programs that support NLRNs in developing competency, confidence, autonomy, and leadership skills during the early years of practice.
- Create and maintain work environments that are supportive, safe, and free from bullying, with clear policies that promote adequate orientation, ongoing education, and professional development opportunities for NLRNs.
- Utilize innovative workforce strategies, including flexible scheduling, improved staffing models, and reduced nurse-to-patient ratios on high-acuity and medical-surgical units, to reduce burnout and promote retention.
- Explore financial incentives such as student loan repayment, tuition assistance, and competitive salary structures as mechanisms to retain NLRNs at the bedside for a minimum of two years.
- Continue to administer the LCN NLRN Survey biennially to monitor employment trends, transition-to-practice experiences, and workforce challenges, and to inform educators, employers, policymakers, and other stakeholders as Louisiana's healthcare system and nursing workforce evolve.

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## Addendum A – Nurse Graduate Experience Comments

**Addendum A includes verbatim open-ended responses submitted by newly licensed registered nurses through the NLRN Survey. Comments are presented in respondents' original language and have not been edited for grammar, clarity, or length. Responses are grouped by broad thematic categories for readability only; no additional analysis or interpretation was applied. To protect respondent anonymity, identifying references to specific facilities or locations have been replaced with the letter "X."**

### Compensation and Cost of Living

- Cost of living vs. salary in X is incompatible. X needs to settle the contract with its nurses to recruit and RETAIN high quality nurses. I am a new grad with exactly one year of experience and I have precepted FOUR new grads. It is unsafe and frankly unfair to expect new grads to train new grads, I am failing my preceptees and therefore my patients and burning myself out, it is bad for all involved. We need to fix the system so that nurses don't go travel or apply to CRNA school after two years of experience, it is unsustainable.
- Low pay for the jobs we have to do
- Employment in Louisiana for new grad nurses can be quite challenging. Compensation is tough especially when compared to the amount of debt you are in as a new grad nurse fresh out of school. The pay is of the lowest compared to many other states, which makes it difficult to stay working in Louisiana as a nurse. I believe the job market could be improved as well as the compensation for new nurses residing in Louisiana.
- As a new graduate nurse, one of my primary concerns is finding a position that offers fair and competitive compensation. While I understand that many entry-level roles emphasize gaining experience, the financial realities of student loans, cost of living, and professional certification expenses make adequate pay a significant factor. Many hospitals now require residency programs or offer lower pay for training periods, which can make it challenging to balance financial stability with career growth. I want to ensure that I newly licensed registered nurses find an organization that values new nurses, offers mentorship and growth opportunities, and provides compensation that reflects the dedication and responsibility that come with patient care.
- The pay is not comparable to other states.
- The #1 reason it takes a while to find a decent job is because most employers want to pay new RN's the same pay we made as LPN's. That is very disheartening to say the least. It makes some of us feel as if we went to RN school for nothing.
- We need better pay and we need a union. I have worked in several areas. I've also worked in X and the difference between here in Louisiana and there at night and day difference I am considering moving to X because the pay is better and only that they protect their healthcare workers work here in Louisiana. We are threatened abuse, not compensated for taking all of that and yet still entitled to come back to work. We need a better system. How can we take care of these patients? If we are not being taken care of as healthcare workers, it's time for a change.
- As a novice nurse, finding employment, truly is not an issue. The issue, resides in the pay, that is offered to novice nurses. I understand, we have no experience in this prestigious field, but the fact of the matter is, sometimes the pay can be insulting and discouraging.
- My concern is the pay. It's not good considering the loans we have to make during school and the cost of livings Then the deferment is for only 6 months. That is not long enough.
- Louisiana as state can pay their nurses more for all the hard work and multiple hats we wear.
- The pay is horrible and working conditions are not safe at times. The hospitals are paying less and requiring more.

- The salary was a culture shock. When you're in nursing school you hear about the good money nurses make, when in reality to make a living as a nurse, you need to move out of the south. Louisiana has one of the lowest pay rates for nurses & we get our pay capped after a certain point.
- The pay in Louisiana for nurses especially new nurses is very low.
- The pay in Louisiana is diabolical compared to other states. I felt compelled to move to X right away due to offers in X vs. Louisiana. The pay difference is very unfortunate.
- The pay should be higher
- Louisiana employers for nurses are underpaying them. The burnout is entirely too high and the quality of care has decreased. As a healthcare worker it is sad that there are various hospitals around the state that I refuse to receive care from. Pay your nurses what they are worth
- Bump up the pay to catch up with inflation.
- The pay is comical. The problem isn't the hourly wage for new graduates, it's the fact that it pretty much stays that same wage even after 2-3 years of experience.
- I believe the employment may be there, but the pay is not well. In my opinion, nurses are underpaid for everything that we have to do and endure.
- Transition LPN to RN nurses don't get the same opportunities as a new grad RN based on my experience with my employer. After 4 years of school, all I received was a raise in pay of \$1.02.
- Please increase starting pay because compensation is not adequate for daily cost of living nor work environment.
- The pay seems low for the amount of work, effort and time it took to successfully complete nursing school and pass the NCLEX. Also the amount of work, expectations, and responsibility is high as well. Not anything i didnt except but the financial burden for school does not match up to the pay rate.
- The pay is not enough for Louisiana market
- RN's are underpaid and hospitals have a lot of responibilifes, understaff and underpaid. RN's need higher pay
- The pay is hardly enough to make it worth the struggles people are dealing with. I was lucky to find the pay I have, or else I would certainly try to move to a better paying state with unionized nursing protections. The care we are able to give patients due to staffing shortages is frightening.
- The pay is not enough. Even after completion of nurse residency programs and orientation, it is not enough. Minuscule yearly raises for outstanding performance by nurses, is not enough.
- We need higher pay. Cost of living is atrocious and making less then \$28/ hr with over 30,000 in debt isn't feasible. Doesn't make all the missed family time, schooling, long hours of studying worth it.
- We are at the bottom of the barrel where pay is concerned! Continually asked to do more and hold more responsibility with no increase in pay! Do better Louisiana!
- Salary not compatible to labor performed impedes new nurse from getting out of debt and experience burnout
- Low pay, not enough training
- Pay needs to be increased
- Salary is too low. Extremely difficult to get raises. No reward for becoming valuable asset & learning facility, staff & processes. Have to quit and go find new employment and then return in 6 months to get a raise. No reward for being loyal. New hires starting more than any seasoned nurses. At 12% of my salary range is pitiful.
- Please consider increased hourly wages for all nurses regardless of experience
- Louisiana nurses are underpaid. I made more money as a LPN than I make as a RN. I advanced my career thinking it would financially help me provide for my kids, however, I've realized overworking myself for overtime to care for sick people will eventually kill me here. The salary for nurses does not keep up with the rising economy and it's pathetic.
- Low pay
- I currently work in Med Surg post op.. short staff and underpaid for what is expected

- Nurses are grossly underpaid for the important work they do.
  - Pay should be more for the work required. We should be required more breaks & have a designated nurse to cover our patients for those breaks.
  - Finding a job isn't the problem. The base pay is the problem. It should be increased.
  - Louisiana is one of the worst paid nurses in the country. The Louisiana nursing field is struggling to keep up with the cost of living. Even with extensive saving, I am struggling to find a house I could afford to purchase. So not only are we underpaid but we are also under staffed. Burn out is increasing and people are leaving the field, especially bedside, at an increasing rate. We need help and support.
- 

### **Staffing Levels, Workload, and Patient Safety**

- Not enough seasoned nurses precepting new nurses
  - I wish that there was less of a narrative when in school stressing a nursing shortage. There isn't a shortage it is just that nurses are leaving bedside due to unsafe ratios and poor treatment. I only wish there was honesty in the programs to prepare you for what is to come.
  - One of the biggest challenges as a new RN is not having enough seasoned nurses to orient with and work alongside prior to being thrown to the wolves. Especially pushing the new RN to be in a position of leadership such as charge nurse when you're literally still trying to figure out how to be a RN. Nurse to pt ratios suck and being short staffed is an understatement.
  - I was working in a pediatric acute care unit, I found that patient to nurse ratios were unsafe. I also felt great ignorance when it came to taking care of really sick kids. There is so much information that I did not know and still do not know when it came to caring for those patients. Having 4 (sometimes 5) patients, you do not have time during your shift to deep dive into disease processes and diagnoses.
  - Be mindful of nurse to patient ratios when determining where you are going to work.
  - What I experienced was low paying wages after spending so much money to acquire the degree and poor staffing of the hospitals where it could easily lead to dangerous patient Nurse ratios and nurse ratios for acuity not being safe that mistake could have easily happened putting your new license on the line
  - Nurses should not be floated to other units without compensation
  - Unsafe staffing ratios
  - The care we are able to give patients due to staffing shortages is frightening.
  - Alarming high turnover rates caused by short staffing, leading to unsafe nurse-patient ratios, make it easy to find a job within hospitals.
  - Its just the hospital with the unsafe ratios. As a new grad i honestly don't even know about nursing anymore. Its like you don't get respected as a nurse. You try you very best and still feel like nothing. I only been in nursing for 8months and i want to change where i work. I am currently in process of doing so
  - Retention of skilled nurses to train new nurses is a problem. This is because of both pay and working conditions. I am lucky to work on a floor with nurses who have 10+ years, but I know some classmates whose most senior coworker is only 5+ years out of school. This concerns me greatly for the current and future safety of nursing.
  - Finding employment isn't an issue but at some facilities there seems to be a lack of support and poorly staffed
- 

### **Burnout, Stress, and Workforce Attrition**

- I did not, went into my first job totally cold, and I was so lost, even though everyone was super helpful and kind.

- It's really tough finding a job, especially if experience is limited. everyone wants someone with experience but in order to get experience someone has to hire you to gain experience. It really sucks.
- Finding employment is the easy part. Finding a job that had a healthy, balanced work environment is the hard part. I am on my third nursing job in less than 2 years. The first ICU job paid well (FT no benefits) and my team is parked well together, but we were overworked with no CNAs. I felt burnt out quick. However, the culture is what kept me. I left that job because I moved back closer to home. My second job didn't pay well and had a terrible culture. I was full time only 2 months before going PRN. My current job is at an LTAC. I do not like my coworkers, but the workload is healthier and the pay is exponentially higher. Every job has its issues. You just have to decide which factors are most important.
- Burn out
- Absolutely getting burnt out but grateful to have a degree that I can move to different areas
- As a newly licensed nurse, I am beyond burned out. We are all over worked and under paid. The hospital I work for has continuously added to our list of duties, asks us to come in sick even though we have susceptible patients, will not allow us to use our PTO when we want, and the lists goes on. I had a child and was forced to use my PTO for my maternity leave, and have been chastised for breast feeding since returning to work. I never take breaks, pump while I'm working, and have worked extra numerous times, but after looking into other facilities, I have discovered this is nursing everywhere and as much as I love caring for others, I'm starting to wonder if I chose the right profession.
- Nursing in Louisiana is difficult, nurses are over worked and under paid and I would go to a state that has concrete staff to patient ratios and adequate pay but I can leave Louisiana just yet.
- I feel like a deer in headlights after graduating and had to catch up a lot
- It can be hard especially going onto units where they don't have the patience to train new nurses. I was blessed that the until I worked on as a tech needed nurses so I was offered a job while a tech but it isn't easy for a lot of people
- Wherever we work we're underpaid, over worked, and not taken care of. People will not stay in Louisiana or even in nursing because of burnout and lack of ability to provide for our families
- The anti-union attitude of hospitals in Louisiana has led to my burn out. I love the work but I want to go to a different state that has more protections because the administration and management make me hate the job here.

## Orientation, Training, and Transition to Practice

- Be sure to get a nurse tech job while in school. Even a few days a month would help. I did not, went into my first job totally cold, and I was so lost, even though everyone was super helpful and kind.
- This is my second year as an RN. I feel like jobs aren't really trying to train new nurses. They'll train you for about 2 weeks and then after that you're on your own.
- As a LPN for 9 years and transitioning to a RN it was hard to find employment.
- I believe a facility offering a nurse residency program is the best for newly licensed nurses. The staffing is better at most large facilities now and a lot of areas are focusing on mentoring and supporting staff don't listen to the negativity. Choose your area and go for it!
- Worked as ER RN from June 2024 to Sept 2025. Continuing ED in Jan 26
- There is a big gap between the knowledge and skills taught in nursing school and what knowledge is needed to be successful on the floor. I feel the professors teach based on their tests and student pass/fail rate. I did not feel adequately prepared to be successful on the floor after graduation. I was told repeatedly just to pass school and I would learn everything I needed "on the floor" the way my employer wanted things done. I have a compact license and this way of thinking certainly did not prepare me to work in other compact states.

- I greatly appreciate the called to care scholar program, but was not properly informed of the many stipulations that go with the program due to it being new when I started school. There was never any follow up informational sessions or any resources for me to ask questions.
- I started a MSN executive leadership program that was offered by my employer and will be graduating in December.
- X provided me with a chance to prove myself as a new nurse
- Networking is key in becoming a successful nurse. Find a job with the opportunity to grow. There is opportunity available everywhere!
- I feel that my school prepared me to take the NCLEX 100% but I was nowhere ready to work on a MedSurg floor after graduation
- Once a LPN, I still suggest new nurses with little to no hospital experience to start Med-Surg. The pace is a gentle nudge when one is unsure of specialty. They will get a little of everything. And shadowing other departments if allowed, is another opportunity to get a feel of other specialties one can prepare to transition into.
- It was challenging to find qualified mentorship within the X organization. Available positions were plentiful; compensation was generous for this area.
- Employers are not willing to give new graduates a chance to prove themselves in jobs outside of bedside care. If adequately trained, the new graduate can be efficient, and a great addition to the facility and community.
- Orientation and learning clinical skills, and practices, and best safe guidelines should be taught to new nurses rigorously and with more intention. I feel like I was a deer in headlights after graduating and had to catch up a lot.
- The hospital I work for has a nurse residency program that lasted a little over a year. It was awesome and crucial to our development. X, X nurse Residency program, and just the overall transitioning experience was amazing for me. I believe that experience should be the standard all over the state if it is not. I felt truly prepared and supported.
- I received a job offer while I worked as a nurse tech. I did not apply. However, I was placed at my current job after finishing a nurse residency with the X.
- As a newly registered nurse, I am transitioning well from student nurse to professional nurse. With continued experience, mentorship, and confidence, I will definitely develop into a competent and independent nurse.
- Better orientations and support from HR and department management is needed in X. More skills training needed for new nurses.
- Preceptors in more trauma areas. The lack of preceptors in the ER led me to be in woman's health.
- Current nursing school education does not provide you with all of the necessary skills and/or experiences needed to survive in today's nursing markets. More time should be spent on skills and clinical as opposed to constant demands of book work.
- I'm unsure of the difficulties around finding employment to provide an educated response to this question. I can say from my previous career, realistic job previews are helpful in determining fit and clinicals do not provide that experience if the nursing student is too inexperienced to effectively participate. Also, nurses at clinical are often uninterested in helping students. Often nursing students think they know what field they want without any real experience and are blindsided by the reality of the job. Personality and interest testing could be beneficial. Career classes not centered around nursing could also help as many nurses have no real life experience prior to graduation.
- If it's not a new grad Residency program than most jobs were not willing to give a new grad, the chance or opportunity to gain experience and knowledge without having prior experience, which is hard to have if you are a new grad.

- If you have no experience or less than 2 years experience it put you at a disadvantage of opportunities more employers should be willing the train you can't get experience until you're given the opportunity to learn.
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### **Work Environment, Culture, and Bullying**

- Bullying is real and prevalent
  - Relational aggression and workplace conflict often gets dismissed. The saying “nurses eat their young” gets condoned due to short staffing.
  - I am concerned about new nurses feeling confident and not feeling bullied.
  - Nurses should not post on social media it is decreasing the professionalism in our field.
  - Finding employment is the easy part. Finding a job that had a healthy, balanced work environment is the hard part. I am on my third nursing job in less than 2 years. The first ICU job paid well (FT no benefits) and my team is parked well together, but we were overworked with no CNAs. I felt burnt out quick. However, the culture is what kept me. I left that job because I moved back closer to home. My second job didn't pay well and had a terrible culture. I was full time only 2 months before going PRN. My current job is at an LTAC. I do not like my coworkers, but the workload is healthier and the pay is exponentially higher. Every job has its issues. You just have to decide which factors are most important. The new grads take a lot of heat from the established nurses, sometimes they don't give them a chance and write them off. The discouragement causes new grads to question their choice of being a nurse.
  - Louisiana hospitals, and X area in particular, should be ashamed of themselves about how they treat staff trying to organize for better working conditions and patient safety. I may be a newer nurse but I've worked in healthcare for 2 decades and the corporate/executive level greed is disgusting and only getting worse every year. The way these companies pretend to care about providing care while simultaneously preventing their employees from having a meaningful, financially stable, and balanced life is laughable. The way they cut costs to the bone and under-staff all hospital departments under the guise of financial needs is abhorrent and antithetical to what they claim to stand for. They need to remember that without us, they will have nothing.
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### **Employment Access and Hiring Practices**

- Hard time finding part time in the hospital
- It is incredibly hard to find employment surprisingly. I applied to countless jobs and either never got a call back, or my application was rejected because it didn't pass the software that the hospitals use to sift through applications. The only jobs that probably would've hired a new nurse was a struggling med surg unit that I would've left in 6 month or less from burnout. Hospitals don't want to train new grads and it's very sad, especially when they say they're dying for nurses to apply
- There are many choices for new grads in my area, and I would encourage anyone to do it.
- As someone who moved away from the area I competed nursing school/ clinicals at, It is very challenging to get a job in a specialized area. The people that had the best chances at those positions were those who did clinicals at the hospital/ unit, worked at the hospital/ unit prior as a tech, or know someone there personally.
- Most employers choose not to hire new grads due to inexperience.
- It is hard to find a job as a newly licensed RN. Every hospital or facility wants someone with experience and being a new grad, it was difficult trying to get into a specialty.
- Although I held a practical nursing license with over a decade of experience, the job market did not take into consideration my LPN nursing foundation and my RN education that's makes me a great candidate for jobs.

- It wasn't that bad for me to find a job as RN because I was already working as Nurse Extern in the same hospital to gain my hands on experience.
- Hello, after graduation with my Associates degree ,as a Registered Nurse, I found it was difficult to find employment. After completing multiple applications and proceeded going through one interview as a new grad, (besides my current job) I've learned that healthcare employers preferred someone with experience. This made it hard for me to find a job as a new grad, even though I felt I obtained a lot of knowledge and skills during school and experience as an LPN.
- Slim pickins. You really need to know people if you have ambitions or want a speciality. There is only one hospital that I would have considered working and I got it. Many of the other students in my class are either miserable, have quit their first job, or will quit their first job after 2 years.
- I have tried multiple times to work in a hospital setting, but it is really hard to get a job in a hospital.
- I was an LPN in an LPN to RN program. I was employed by a hospital as an LPN full-time during school. My hospital had a program to have nursing students assigned to units of their interest. Because I was already employed my hospital would not allow me to participate. When it came time for applying all the jobs were taken by students who were already shadowing that unit. I was not interested in the current unit for which I was employed. I only had one interview and got that job. I did not want to work in that unit but it was the only job that got back in touch with me. I started on an incredibly tough unit, the OR. We do not get exposure to the OR in my school. I got let go so fast bc they realized I knew nothing and the learning curve was so steep! I loved it, but...it's a complicated story. I then went to work as an L&D nurse, the only job I could get and it was interesting but incredibly stressful. I was so burned out when I resigned that I quit working for two months. I then learned about working from home and got a great job! I would say the road for LPNs to RNs is not easy!!!! I got 7 interviews as an LPN and only ONE as an RN. I'm much happier, but I am no longer bedside nursing Finding employment in Louisiana is a breeze compared to X. The hospitals in X are monopolies and require at least a year of experience for all of their positions unless they are new graduate positions. The new graduate positions are limited.
- Little to no opportunities for sponsorship for American-trained foreigner
- Most employers are requiring experienced nurses.
- easy to find a job. compensation is generally too low for cost of living / responsibilities / education / liability; support and training is largely facility / unit dependent.
- It's relatively easy especially being an Extern prior to graduation.
- Since I had been working at X prior to getting my RN, getting a job after graduation was very easy for me.
- Finding employment was not , I had a Secure job from receiving a X scholarship . New nurses should be welcomed and encouraged in the job setting.
- There are plenty of jobs out there. The biggest challenge is finding one that meets your needs.
- I didn't have a problem finding work. My reputation is very solid. I have an influx of regular employment offers even when not seeking to change jobs.
- Institutions seem to “play favorites”. In order to gain a position in certain places, you have to know someone.
- Finding a job initially out of nursing school was not hard due to me working as a nurse tech in the hospital that I was hired on for my first RN position. However, when I moved to a new parish and was searching for a job in my area, I found it very hard to find a job. I applied for over 30 jobs between June 2024-December 2024 and it took me 6 months to get hired on somewhere. I updated my resume, applied to jobs with no particular unit in mind, and out of my over 30 applications I got 4 interviews and 3 job offers in December of 2024 and accepted the job that offered the highest base pay.
- It can be a strenuous process due to low pay. and as the nurse to patient ratio increases it can be stressful for new grads to maintain mental and physical health while working in understaff environments.

- Apply early in the last semester of nursing school. Try to get a nurse tech position somewhere you like so you're guaranteed a job as a new grad RN
- Don't go to the nursing home as a new registered nurse. You are responsible for all the patient and the workers! Get med-Surg experience!
- Attend job fairs and ask to shadow a unit before you start to see if you will like it.
- Going to a facility to get a job before graduating and being labeled as a non rehire and only really having 2 choices in Louisiana (X or X).
- Not many options for specialties.
- Stop allowing new graduate nurses to work in specialties like ER and ICU.
- I feel there should be more opportunities in nursing in Louisiana.
- not enough growth/employment opportunities for unique nursing positions in Louisiana.

## **Equity, Discrimination, and Bias**

- As someone who has been in the nursing field for several years and personally experienced the challenges of obtaining employment as a new graduate nurse, I believe that finding a job in Louisiana often depends more on who you know rather than solely on merit or experience. I've witnessed situations where candidates with personal connections were offered positions over others with stronger clinical experience or qualifications. Additionally, I've noticed a pattern where many Black or African American nurses are often only offered night shift positions, even when day shifts are available, creating inequities in opportunities and work-life balance. Beyond hiring, I'm also concerned about the lack of structured support for new graduates once they enter the field. Many are not being adequately taught or supported during orientation. Instead, they experience bullying or a lack of patience from preceptors who should be guiding them. This creates a discouraging and high-stress environment that contributes to burnout and turnover. Finally, it's difficult for new graduates to gain experience when so many employers require prior experience for entry-level roles. Without transitional support or fair opportunities, many talented new nurses struggle to begin their careers. Facilities that invest in mentorship, structured preceptorship programs, and fair hiring practices will help strengthen Louisiana's nursing workforce overall.
- Little understanding of people with "neurodivergence" in a healthcare sector is sad
- Racism and discrimination and low pay rate
- I experienced a lot of racism during my time as a nurse. I overcame a lot of obstacles. I managed and done my best but I probably wouldn't rejoin the facility.
- Lack of access to robust healthcare facilities with a focus on advancing learning and promoting a culture of safety. The Catholic institutions here with all the money only care about advancing their checkbooks and taking advantage of poor Black residents' situations.
- Non but you should change the salary question to reflect a better realistic rate. Also, I hope the same thing that's happening with X BON happens with LSBN because no board should have that much power. Everyone working with LSBN is a power hungry individual. I had legal advice and I have had conversations with one person from the legislative branch.
- The process to initially obtain a nursing license was extremely difficult due to numerous oversights by the LSBN.
- Getting my authorization to test for nclex was delayed weeks because the offices at the RNP were not running smoothly or paying attention, i fell through the cracks and it took multiple phone calls & messages to lsbn offices and rnp to get the ATT processed. Additionally my employment start date was pushed back 4x and nearly rescinded until I hired an attorney to clear up a lazy form contract and lack of answers provided to myself and my employer by my case manager at the RNP. I shouldn't have to hire an attorney to be taken seriously when I've been compliant and in good standing for 3 years.

- Support for older nurses
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### **Geographic Mobility and Leaving Louisiana**

- As someone who moved away from the area I completed nursing school/ clinicals at, It is very challenging to get a job in a specialized area. The people that had the best chances at those positions were those who did clinicals at the hospital/ unit, worked at the hospital/ unit prior as a tech, or know someone there personally.
  - After graduating I moved out of Louisiana and did not do any of my job searching for nursing jobs in Louisiana. I was hired into a nursing position in X but left this position after 6 months.
  - The pay in Louisiana is diabolical compared to other states. I felt compelled to move to X right away due to offers in X vs. Louisiana. The pay difference is very unfortunate.
  - I moved out of Louisiana when I first graduated because the pay is so low. If I were to move back I would have to take a 40% salary cut
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### **Positive Experiences and Professional Fulfillment**

- I believe a facility offering a nurse residency program is the best for newly licensed nurses. The staffing is better at most large facilities now and a lot of areas are focusing on mentoring and supporting staff don't listen to the negativity. Choose your area and go for it!
  - I love being a nurse — it truly feels like my dream career. Helping people brings me so much fulfillment, and each day offers a new opportunity to learn and grow in this profession.
  - I feel very fortunate to be in my dream specialty right after I graduated nursing school. I have a lot of fulfillment and sense of purpose with my job. However, it is a lot more difficult, demanding, and draining than I thought. I enjoy my job very much and I don't plan on leaving any time soon!
  - Get a license. Commit yourself to compassion, effort, and drive, you can work anywhere you desire.
  - My previous employment experience prior to graduation greatly assisted me to find a role that is a good fit for me, as the traditional inpatient night shift new grad experience does not interest me or work for my lifestyle. I would have struggled to find a good fit in a clinic without extensive prior experience in clinics in unlicensed capacities and excellent professional references.
  - I am unable to share anything negative. My process wasn't long or unfair. I learned a lot from my preceptor. I was always educated when I had a question. If she didn't know the answer she would call and learn where to look for the correct response. I am grateful for my experience. I am still learning today.
  - No problem there's a great demand for RN s in Louisiana
  - No concerns. But I am very please that the State Board of Nursing has elected to make all new RNs to have the compact licensure.
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### **Advice to Future New Graduates**

- Take your time, it's not always about the money
- If your in this for the money your going to be disappointed at first. Do it bc you love it. Whatever you thought you wanted to do in nursing school, you may not like it now. Thats OK. Apply for what you want, get experience and keep learning
- Getting married right out of college, I needed a job that worked hours and non-holidays to have family time. And many jobs now require participation in procedures that are against my knowledge of human nature.
- I think we need more opportunities in clinic settings! Not all of want to be in the hospital.

- Apply for the specialty that you want to go in don't just choose a specialty because everyone says you're supposed to start in a specific specialty.
- Please have more job fairs that are open to new RNs
- Find a job that fits your schedule and your needs, because your performance will be affected if the job does not fit your lifestyle. If your dream is ICU, but your lifestyle doesn't afford for you to work a 12 hour shift, you may need to apply to different departments to accommodate you. Once your lifestyle is open for a 12 hour shift, I'm sure positions will still be open!
- More jobs should offer to pay off student loans as an incentive for students or future employees
- It is much harder to find a job than they tell you. Unless med surg is what you want it takes time.