



# HR NO. 155 STUDY GROUP



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# Overview of House Resolution No. 155

## Legislative Charge

### 2022 Regular Session House Resolution No. 155 by Representative Turner

HR No. 155 forms a study group to evaluate options and make recommendations for reforming health care workforce training and development for the State of Louisiana and to provide a report of its findings to the members of the House of Representatives of the Louisiana Legislature and the David R. Poynter Legislative Research Library no later than thirty days prior to the convening of the 2023 Regular Session. The legislative authority for the study group will terminate on July 1, 2023.

#### The HR No. 155 Study Group is composed of the following 11 members:

1. The Secretary of the Louisiana Department of Health was represented by Nicole Coarsey.
2. One member appointed by the chairman of the Board of Supervisors of Community and Technical Colleges was represented by Dr. Larissa Littleton-Steib.
3. One member appointed by the chairman of the Board of Supervisors of Louisiana State University and Agricultural and Mechanical College was represented by Dr. Demetrius Porche.
4. One member appointed by the chairman of the Board of Supervisors of Southern University and Agricultural and Mechanical College was represented by Dr. Kelly Smith.
5. One member appointed by the chairman of the Board of Supervisors for the University of Louisiana System was represented by Cami Geisman.
6. One member appointed by the chairman of the board of directors of the Louisiana Association of Independent Colleges and Universities was represented by Dr. Tina Holland.
7. One member appointed by the president of the Louisiana Hospital Association was represented by Michele Sutton.
8. One member appointed by the president of the Louisiana State Nurses Association was represented by Dr. Ahnyel Burkes.

9. One member appointed by the executive director of the Louisiana State Medical Society was represented by Dr. Jeff Williams.
10. One member appointed by the executive director of the Louisiana Nursing Home Association was represented by Mark Berger.
11. One member appointed by the executive director of the Louisiana Association of Nurse Practitioners was represented by Dr. Jennifer Lemoine

#### In developing its recommendations, the HR No. 155 Study Group must consider the following:

- Louisiana's health care professionals are indispensable to our families and communities and because health care workforce needs are ever-changing our state must implement reforms to create a dynamic system for identifying and fulfilling these needs.
- Fostering the training of sufficient numbers of health care professionals such as physician assistants and nurse practitioners, as well as allied health professionals who work in primary care settings, will assist in making primary care services more accessible to the people of our state
- In conjunction with existing programs for the training of family physicians, renewing efforts to increase the ranks of highly trained physician assistants, nurses, and allied health professionals practicing in Louisiana will lead to a much-improved health care delivery system for our state.
- Community hospitals, rural hospitals, and other health systems offering health care workforce training in affiliation or association with accredited institutions of higher education will help in meeting the need for health care in our state's many health professional shortage areas and medically underserved communities.

- Louisiana has a pronounced shortage of nurses, and this shortage has been exacerbated by the COVID-19 pandemic. Stimulating a greater supply of nurses and improving career ladders for these essential health care workers are vital public health priorities of this state. Louisiana would benefit from a thorough study which identifies the parties who have responsibility for oversight of educational programs that produce health care professionals, and yields recommendations concerning the extent to which health care professional licensing boards should have an influence on the structure and operation of such programs.

The ideal study would look broadly across the careers that require undergraduate credentialing, both in Louisiana and across other states, to establish what level of consistency of approach is appropriate for the teaching and training of nurses and other essential health care professionals; and whereas, it is necessary to determine where oversight lies currently.

**The HR No. 155 Study Group is charged with examining the following priorities:**

1. Health care workforce training and development priorities for Louisiana.
2. Optimal uses of funds appropriated by the legislature for health care education and training.
3. Standards and guidelines for health professions education and training programs funded through legislative appropriations.
4. Outcomes data from health professions education and training programs.
5. Systems for prioritizing health professions education and training needs of Louisiana communities.
6. Options for developing a statewide health professions education and training funding strategy.
7. Sources of funding to stimulate expansion of health professions education and training.
8. Sources of technical assistance and support for establishing new health professions education and training programs in Louisiana.
9. Means for establishing and enhancing health professions career ladders and pathways.
10. Means for induction of new workers into Louisiana's health care workforce and for retention of the state's existing health care workforce.
11. Inefficiencies in current health care professional licensure and credentialing systems and impediments to increasing the number of health care workers produced.
12. The extent to which health care professional licensing boards should have an influence on the structure and operation of educational programs that produce health care professionals.





# HR No. 155 Study Group Meetings

The first meeting of the HR No. 155 Study Group was held on Thursday, August 18, 2022, at 9 a.m. Representative Turner was present and provided the charge of the study group. Immediately following Representative Turner's charge, the work of the study group began.

The HR 155 Study Group also met on the following dates:

- Meeting 2: Monday, September 26, 2022 at 9 a.m. at the Louisiana Hospital Association.
- Meeting 3: Wednesday, October 31, 2022 at 9 a.m. at the Louisiana Hospital Association.
- Meeting 4: Monday, November 28, 2022 at 9 a.m. at the Louisiana Hospital Association.
- Meeting 5: Monday, February 6, 2023 at 9 a.m. at the Louisiana Hospital Association Board Room. Representative Turner was present to discuss findings and recommendations.

On Wednesday, March 8, 2023, a majority of the HR No. 155 Study Group members approved the HR No. 155 Study Group Report via electronic vote.

Dr. Larissa Littleton-Steib, Chancellor of Delgado Community College and Michele Sutton, CEO of North Oaks Health System served as co-chairs of the HR No. 155 Study Group.

## Meeting Agendas, Minutes, and Materials

Visit <https://tinyurl.com/ykfdjkza> or use the links in the table below to access meeting content.

	Date	Content
1	August 18, 2022	Agenda Minutes Materials
2	September 26, 2022	Agenda Minutes Materials
3	October 31, 2022	Agenda Minutes Materials
4	November 28, 2022	Agenda Minutes Materials
5	February 6, 2023	Agenda Minutes Materials

# HR No. 155 Study Group Work, Recommendations, and Findings

The study group aligned the twelve priorities referenced in the House Resolution into three workgroups:

- Workforce Development Workgroup
- Education, Licensure/Credentialing Boards Workgroup
- Funding Workgroup

The study group reviewed and analyzed reports from numerous sources including but not limited to the Louisiana Center for Nursing, Louisiana Workforce Commission Data, Louisiana Health Works Commission, Louisiana Legislation related to health care funding, Texas legislatively authorized funding for health care initiatives, Alabama legislatively authorized funding for health care, Louisiana State Board of Nursing 2021 Annual Report, 2021 Nursing Supply Report and surveys prepared by the HR No. 155 Study Group and disseminated to 57 hospitals and long care health facilities.

## WORKFORCE WORKGROUP

The Workforce Workgroup analyzed the current and future workforce needs across the state for Registered Nurses, Advanced Practice Registered Nurses, Licensed Practical Nurses, Nursing Assistants, and allied health professionals. This workgroup reviewed the last three years of health care workforce needs (2019-2021) and also the future health care workforce needs for the next three years (2023-2026). This information provided the members of the study group with an understanding of past workforce gaps and projected workforce needs. The Workforce Workgroup conducted an extensive review related to the following priorities:

**This workgroup conducted an extensive review of the following priorities:**

<b>Priority 1</b>	Health care workforce training and development priorities for Louisiana.
<b>Priority 5</b>	Systems for prioritizing health professions education and training needs of Louisiana communities.
<b>Priority 9</b>	Means for establishing and enhancing health professions career ladders and pathways.

Dr. Ahnyel Burkes, Dr. Kelly Smith and Dr. Jennifer Lemoine served on the Workforce Workgroup.



## Findings

- The Louisiana Center for Nursing (LCN) launched a survey in 2019 to determine Louisiana's demand for Registered Nurses, Advanced Practice Registered Nurses, Licensed Practical Nurses, and Nursing Assistants.<sup>1</sup> This survey was deployed to major health care industries such as hospitals, long care facilities, home health agencies, hospices, and public health facilities. The results of this survey indicated that Louisiana health care facilities have 9,284 (RN, NP, CRNA, CNS, CNM, LPN, NA) vacancies.
- The U.S. Bureau of Labor Statistics projects more than 275,000 additional nurses will be needed by 2030. Additionally, according to the U.S. Bureau of Labor Statistics employment opportunities for nurses will grow at a 9 percent faster rate than all other occupations.
- According to recent data provided by the Louisiana Workforce Commission, there are currently 9,000 nursing and allied health vacancies in the following health care areas listed in the chart on page 7.

<sup>1</sup> Louisiana State Board of Nursing. (2021). Nurse Supply Report. Louisiana Center for Nursing. Home. <http://lcn.lsbn.state.la.us/Portals/0/Documents/2021NurseSupplyReport.pdf>

Occupation	Vacancies
Registered Nursing	6,568
Practical Nursing	1,419
Physician Assistant	103
Nurse Practitioner	362
Cardiovascular Technician	60
Diagnostic Medical Sonography	160
Dialysis Technician	28
Electrocardiography	81
Emergency Medical Technician	134
Health Information Technology	8
Medical Coding	52
Medical Laboratory Technician	137
Medical Registration Specialist	1005
MRI	116
Nuclear Medicine Technology	95
Occupational Therapy Assistant	55
Ophthalmic Medical Assistant	16
Pharmacy Technician	373
Phlebotomy	164
Physical Therapist Assistant	158
Polysomnographic Technology	18
Radiation Therapy	39
Radiologic Technology	543
Respiratory Care Technology	325
Surgical Technologists	446

*Of important note, the study group agreed at its September 26, 2022 meeting to research and provide recommendations for the nursing and allied health positions listed in the chart.*

- According to the 2021 Nursing Supply Report, roughly 9,500<sup>2</sup> (18%) of Registered Nurses currently working in Louisiana indicated that they would be leaving their current positions. The following reasons were provided:
  - ❑ 2,413 indicated that they will retire
  - ❑ 1,856 cited salary / pay
  - ❑ 1,192 indicated school
  - ❑ 796 cited current work environment
  - ❑ 959 career change
  - ❑ 536 starting / raising a family
  - ❑ 217 caring for a family member
  - ❑ 855 selected other as the reason
- A significant number of nursing and allied health professionals are relocating to other states such as Texas, Alabama, and Mississippi. These states pay more, have better state tax structure, and what is perceived to be a better quality of life.
- A significant number of nurses and allied health professionals are becoming traveling nurses because of the increased pay. Some health care facilities have reported that employees resign and return to facilities as contract nurses.
- The industry is also facing what has been called the “great resignation.”
- Supply and demand of the health care workforce are at critical levels within the state and across the nation; however, data related to actual and future workforce needs in Louisiana (nurses, allied health professions, etc.) remains inconsistent.
- Faculty shortages within the state are limiting student capacity at a time when the need for nurses and other health care providers continues to grow.
- The growth of new academic educational programs in-state and out-of state has further stressed the availability of adequate numbers of faculty to meet the educational demand.
- Schools of nursing are forming academic-to-practice partnerships and are working collaboratively with other stakeholders to bridge the faculty gap.
- Colorado, Georgia, Hawaii, Maryland, South Carolina, and Virginia offer a tax incentive for preceptors. Legislation is pending in New Mexico, New York, Oregon, and Rhode Island.
- In 2021 males represented 12% of the RN workforce, whereas females represent 88% of Louisiana’s workforce.
- In 2021 whites represented 79% of the RN Workforce, whereas minorities represented 21% of Louisiana’s workforce.

## Recommendations

1. Provide retention stipends for nurses staying and working in the state (all nurses, regardless of degree, role, or practice setting).
2. Support nursing education through state legislative funding.

<sup>2</sup> Louisiana State Board of Nursing. (2020). A snapshot of findings from the 2019 nurse employer survey (NES). Louisiana Center for Nursing > Home. <http://lcn.lsbns.state.la.us/>

- Preceptor Tax Credit/Incentive (NPs, PAs, etc.)
  - Faculty support—loan repayment or tax credit (including clinical adjunct faculty). Funds commensurate with time commitments.
3. Develop new nurse faculty fellowship programs.
  4. LSBME, LSBPNE and LSBN should require educational programs to secure specialized accreditation from the appropriate accreditation agency; therefore, the attainment of national accreditation can serve as an indicator of regulatory compliance limiting additional or duplicative states level regulations.
  5. Fund prep courses and exam review courses to increase potential applicants' success on nursing admission exams.
  6. Encourage funding of examination review courses to ensure that students completing undergraduate nursing programs are successful on their first attempt at NCLEX-RN.
  7. Standardize pre-requisite courses for nursing curriculum aligned with the LA Board of Regents general education requirements in higher education.
  8. Nursing programs must conduct self-assessments on admission practices to ensure holistic policies that advance diversity.
  9. Develop a centralized database where state schools must submit a list of qualified applicants that were denied admittance due to lack of capacity annually.
  10. Provide a 5-year retention stipend to keep qualified faculty.
  11. Create health care apprenticeship models, which allow students to earn while learning.
  12. Universities, community colleges, and hospitals should provide options for evening / night clinical training and support accelerated nursing programs when feasible.
  13. Universities and community colleges should provide part-time educational programs. Nursing and health care programs are based on a traditional model which requires students to be full time and unemployed.
  14. Increase dual enrollment models and allow students in dual enrollment to begin before 18 years old throughout the state for LPN (Delgado, Northshore, and Nunez are piloting such a program now).
  15. Develop accelerated nursing degree programs for those with degrees in other areas.

16. Create seamless educational career pathways for CNA-LPN, MA-LPN, LPN-RN, EMT-RN, Rad Tech to RN, and Respiratory Tech to RN.
17. Prometric testing is expensive—should consider other options or removal of the prometric requirement in Louisiana.
18. Eliminate the requirement that limits candidates' number of NCLEX attempts and align with the national recommendation of eight times within a year with a 45-day period for remediation.

## **EDUCATION AND LICENSURE/CREDENTIALING BOARDS WORKGROUP**

The Education and Licensure / Credentialing Boards Workgroup analyzed all educational health care programs in the state of Louisiana and provided data related to the number of students accepted, number of students not accepted into programs, graduation rates, retention rates, and licensure passage rates for the last three years.

### **The questions answered are:**

- What are the requirements of licensure and credentialing boards related to health care programs?
- Given the dire workforce need, what impediments do these licensure and credentialing boards present and what can the resolution be?
- On the education side, what can programs do to increase the number of students accepted into the programs?



This workgroup conducted an extensive review of the following priorities:

Priority 4	Outcomes data from health professions education and training programs.
Priority 8	Sources of technical assistance and support for establishing new health professions education and training programs in Louisiana.
Priority 10	Means for induction of new workers into Louisiana’s health care workforce and retention of the state’s existing health care workforce.
Priority 11	Inefficiencies in current health care professional licensure and credentialing systems and impediments to increasing the number of health care workers produced.
Priority 12	The extent to which health care professional licensing boards should influence the structure and operation of educational programs that produce health care professionals.

Jeff Williams, Dr. Demetrius Porche, Dr. Tina Holland, and Dr. Jennifer Lemoine served on the Education and Licensure/Credentialing Boards Workgroup.

## Findings

- According to a survey created by the HR No. 155 Study Group and disseminated to health care facilities, the respondents provided the following:
  - ❑ RN and allied health programs are not graduating enough students to keep up with the rapid retirement / resignation rates of current clinical staff.
  - ❑ The ease of nursing licensure across state lines brought in by the contract labor makes it really easy for our local nurses to leave for travel assignments.
  - ❑ Current market has allowed the travel / agency staffing companies to monopolize the current employee base by offering salaries that are unsustainable in our hospitals driving critical bedside nurses to “roving” positions for a higher dollar amount rather than making the commitment to a hospital to ensure competent and safe nursing practice.

- ❑ It takes a lengthy amount of time for new RN / LPN graduates to receive their testing dates. It also takes a lengthy amount of time for the state board to post their active status for verification on the state board website for employers to verify.
  - ❑ Neighboring states don’t require state licenses for clinical laboratory personnel, which can create a barrier for recruitment.
  - ❑ There is a high cost associated with test preparation and licensure.
  - ❑ Low reading levels of high school graduates are a barrier to student success.
  - ❑ Students must maintain an income while going through training / clinical rotation.
  - ❑ Most programs are not flexible enough and allow limited students in educational programs; therefore, we are not able to meet the demand.
- The Louisiana State Board of Nursing Annual Report provides data on the number of applicants, admissions, enrollment, and graduates of Nursing Education Programs in Louisiana. The information below can be found in the chart on page 10.
  - ❑ In 2021, 5,004 applied to nursing schools in Louisiana. Of those that applied in 2021, 3,717 were admitted and of those admitted 2,438 graduated. However, 1,287 applicants were qualified but were not admitted to any Nursing Education Program in Louisiana in 2021.
  - ❑ From 2005 - 2021, 53,662 applicants were admitted to a Louisiana nursing program. Of the number accepted 35,490 graduated. However, during that same period 2005 - 2021, 24,902 applicants were qualified but were not accepted into any Louisiana program.

- According to a 2021 Snapshot of Nursing Education Capacity and Nursing Supply in Louisiana<sup>3</sup> report, the reasons why qualified applicants are not admitted into nursing programs are:
  - ❑ Qualified faculty are not available.
  - ❑ Faculty salaries are not competitive.

3 Louisiana State Board of Nursing. (2022). 2021 Snapshot of nursing education capacity and nursing supply in Louisiana. Louisiana Center for Nursing > Home. [lcn.lsbnp.state.la.us/Portals/0/Documents/2021EducSupplySnapshot.pdf](https://lcn.lsbnp.state.la.us/Portals/0/Documents/2021EducSupplySnapshot.pdf)

**Appendix C2**  
**Applicants, Admissions, Enrollment, and Graduates of Nursing Education Programs in Louisiana (2005-2021)**

YEAR	APPLICANTS	ADMISSIONS	ENROLLMENT Clinical Nursing Courses	ENROLLMENT All Nursing Majors	QUALIFIED APPLICANTS NOT ADMITTED	GRADUATES
2021	5,004	3,717	7,063	14,097	1,287	2,438
2020	4,992	3,611	6,973	14,725	1,381	2,148
2019	4,889	3,390	6,476	14,170	1,499	2,009
2018	4,591	3,198	5,884	14,906	1,393	1,885
2017	4,401	2,995	5,470	14,166	1,406	1,877
2016	3,860	2,541	5,466	16,813	1,319	2,064
2015	4,088	2,712	5,599	12,420	1,376	2,074
2014	4,351	2,956	5,836	12,575	1,395	2,081
2013	4,661	2,904	5,780	14,050	1,757	2,274
2012	4,544	2,979	6,214	13,245	1,566	2,281
2011	4,705	3,252	6,114	15,988	1,453	2,281
2010	4,737	3,384	6,175	14,779	1,353	2,239
2009	4,898	3,306	6,077	15,232	1,592	2,230
2008	5,110	3,420	6,311	13,797	1,690	2,113
2007	4,489	3,030	5,723	14,113	1,459	1,946
2006	4,909	3,317	5,534	14,785	1,592	1,828
2005	4,334	2,950	4,627	13,346	1,384	1,722

❑ Budgeted faculty positions are not available.

❑ Classroom space is limited.

- According to the annual report of the Louisiana State Board of Nursing, NCLEX-RN passage rates between the period of January 1 - December 31, 2021, approximately 89% of first-time candidates passed the exam.
- Louisiana registered nursing candidates can only take the NCLEX-RN exam four times and if they do not pass on the fourth try they must wait three years to test again.
- This study group was not able to find applicant, enrollment of student success rates of PN or CNA students.
- Currently, no state body captures applications, enrollment, graduates, and passage rates of students enrolled in allied health programs. Training providers would have this information and it was not available to the study group.

## Recommendations

1. Request LSBN to conduct a study that will review the student-to-instructor ratio to determine optimal numbers while ensuring quality education and patient safety.
2. Create a centralized portal and a unique identifier for nursing school applicants so that qualified and accepted students are only counted one time when reviewing enrollment and training figures. The study group was not certain if the number of applicants provided in the chart above was a duplicated number because one student could have submitted applications to several nursing programs.
3. Utilize the national Nursing Centralized Application Service (NCAS) program or create an in-state version or something similar at no charge to any college / university or nursing program.
4. Incentivize faculty to ensure we have enough qualified faculty through tax credits or tuition reimbursement.
5. Embrace apprenticeship models.
6. Programs are designed for students to be full time and unable to work. The state should consider providing student educational stipends for preparation as a health care provider.
7. Provide support to educational institutions to provide summer enrichment programs that recruit middle and high school students into the health care profession.
8. Academic nursing educational programs will certify or verify the nursing students level of competency and scope of practice based on their academic program achievements collaboratively with the health care facility. This process of academic program credentialing will permit nursing students to work in a health care setting at scope of practice commensurate with their current level of educational attainment.
9. Maximize existing educational capacity statewide (both public and private institutions) by providing a mechanism for “overflow” applicants at public institutions to enroll in private programs with capacity. Subsidize tuition from the state per an agreement between public and private institutions.
10. Increase the amount of clinical practice time that can be in a preceptor experience.
11. Permit precepting of BSN students by an RN if there is a graduate-prepared nurse monitoring the preceptor using models such as dedicated educational units.

- 12.** Permit graduate nurse educator students to function as graduate assistants without counting toward the BSN exemption requirement.
- 13.** LSBPNE and LSBN should provide complete curriculum autonomy for academic programs that are nationally accredited without the need to approve substantive changes for programs that have not been on probation or suspension.
- 14.** LSBN and LSBPNE regulation should only monitor admission, graduation, program outcomes, and faculty outcomes annually.
- 15.** Each nursing program should be treated as one program even if there are multiple sites. This would loosen the burden of dues and fees to the PN board.
- 16.** Request the Louisiana State Board of Nursing review the interstate nursing compact and determine whether it has been positive for the state as it pertains to the hiring and retention of nurses.
- 17.** Expand the overall number and availability of statewide testing sites related licensing examinations for all allied health professions, where applicable.
- 18.** Request that the Louisiana State Board of Nursing and other state licensing boards review the potential benefits related to easing practice restrictions for retired licensees.
- 19.** The state should consider redesigning academic programs so that they facilitate ease of articulation between health care professional careers, such as RT to RN, etc.
- 20.** Request health care facilities develop health career mobility pathways and educational institutions to develop academic articulation pathways to match these career mobility pathways.
- 21.** Ask LDH to review the current number of nursing schools in the state and determine if we have the appropriate number to accept, train, and graduate an optimal number of nurses for current and future needs.
- 22.** The state must make it a priority to identify and retain faculty in the state while also increasing the overall number of clinical sites utilized for training.
- 23.** The state should explore collaborative arrangements at the high school level, creating health care specific programs for students.
- 24.** Allow registered nursing candidates who do not successfully pass the NCLEX-RN the opportunity to take the NCLEX-PN; this would allow nursing students to go right to work.

- 25.** Request LSBPNE and institutions of higher education to conduct a study to determine if there are opportunities for students enrolled in RN programs to meet the LPN standards and sit for the NCLEX PN.

## FUNDING WORKGROUP

The Funding Workgroup reviewed current funding legislative funding as well as prior funding appropriated by the Louisiana Legislature for the training of health care professionals. Additionally, the funding workgroup reviewed the legislative funding that neighboring states provided for the training of health care professionals.

**This workgroup conducted an extensive review of the following priorities:**

<b>Priority 2</b>	Optimal uses of funds appropriated by the legislature for health care education and training.
<b>Priority 3</b>	Standards and guidelines for health professions education and training programs funded through legislative appropriations.
<b>Priority 6</b>	Options for developing a statewide health professions education and training funding strategy.
<b>Priority 7</b>	Sources of funding to stimulate the expansion of health professions education and training.

Study group members of the Funding Workgroup were Mark Berger, Nicole Coarsey, and Cami Geisman.

## Findings

### Currently Appropriated by Louisiana Legislature

Our research indicates that current appropriation of funding in Louisiana to support training is intended to support physicians only.

#### 2022 Regular Session

##### HB 406, Act 167<sup>4</sup>

#### Rural Primary Care Physicians Development Fund

Provides for the transfer, deposit, and use of monies among state funds. Included in this bill:

<sup>4</sup> 2022 Louisiana Regular Session HB 406/Act 167 <https://legis.la.gov/Legis/BillInfo.aspx?i=242034>

Notwithstanding any provision of law to the contrary, the state treasurer is hereby authorized and directed to transfer \$8,020,902 from the Louisiana Rescue Plan Fund to the Rural Primary Care Physicians Development Fund, as established in this Act.

#### SUBPART S. RURAL PRIMARY CARE PHYSICIANS DEVELOPMENT FUND

##### \$100.146. Rural Primary Care Physicians Development Fund; creation

- A.** There is hereby established in the state treasury as a special fund the Rural Primary Care Physicians Development Fund, hereafter referred to in this Section as the fund. Monies in the fund shall be invested in the same manner as monies in the state general fund. Interest earned on the investment of monies in the fund shall be credited to the fund. Until December 1, 2024, unexpended and unencumbered monies in the fund at the end of the fiscal year shall remain in the fund. Shall be used by the Louisiana Department of Health to fund the Health Professional Development Program established pursuant to R.S. 40:1205.1 et seq.
- B.** The provisions of this Section shall terminate on December 31, 2026.

#### **Previously Appropriated by Louisiana Legislature**

Research showed that previously, the Louisiana Legislature allocated funds for:

##### **2021 Regular Session SB 229 / Act 109<sup>5</sup>**

##### **Health Care Employment Reinvestment Opportunity (HERO) Fund**

This program received \$5 million in 2021. No funds were allocated in 2022.

The American Rescue Plan Act of 2021 allocated \$3.011 billion to Louisiana from the Coronavirus State Fiscal Recovery Fund. In the 2021 Regular Session, HB642 / Act 410 provided for the disbursement of monies received from this allocation.

Health Care Employment Reinvestment Opportunity (HERO) Fund – SB 229 / Act 109 contains the program to expand capacity for nursing education programs. Subject to legislative appropriation and the approval

of the Board of Regents, the Louisiana Health Works Commission is hereby authorized and directed to determine how monies in the fund are allocated and expended through a multi-year plan, solely and exclusively for the following purposes and in the following priorities:

- a.** Meet the current and growing employment demands for nursing and allied health professionals by increasing the capacity of nursing and allied health training programs through supporting initiatives such as increasing faculty positions and clinical preceptors in nursing and allied health schools.
- b.** Support the nursing and allied health professions by providing incentives that financially support student financial stipends and tuition forgiveness contingent upon employment in Louisiana health care facilities or nursing or allied health schools.
- c.** Provide incentives for nursing and allied health care professionals to practice in Louisiana with an emphasis on medically underserved areas of the state.

The provisions of this Section shall terminate on July 1, 2026, or when all of the monies in the fund have been expended, whichever occurs first. Any monies remaining in the fund on July 1, 2026, shall be transferred by the State Treasurer to the state general fund.

##### **2017 Regular Session**

##### **HB 427 / Act 342<sup>6</sup>**

##### **Small Town Health Professionals Credit**

The Small Town Health Professionals credit allowed for approved applications to receive a nonrefundable tax credit with no carryforward equal to the lesser of the tax due or thirty-six hundred dollars (\$3,600), unless subject to proration, for the tax period deemed eligible. In the event the taxpayer was subject to proration due to the credit cap provisions, the taxpayer would only be eligible for a credit equal to the pro rata amount for the tax period deemed eligible.

The total amount of tax credits certified by the Louisiana Department of Health and granted by the Department of Revenue in any calendar year shall not exceed one million five hundred thousand dollars.

No taxpayer shall receive the credit provided pursuant to this Subsection for more than five years.

<sup>5</sup> 2021 Louisiana Regular Session SB 229/Act 109 <https://legis.la.gov/Legis/BillInfo.aspx?s=21RS&b=SB229&sbi=y>

<sup>6</sup> 2017 Louisiana Regular Session HB 427/Act 342 <http://www.legis.la.gov/Legis/BillInfo.aspx?s=17RS&b=HB427&sbi=y>



No credit shall be certified pursuant to the provisions of this Subsection for applications received by the Louisiana Department of Health on or after January 1, 2021.

Applications were open to certified medical primary care health professionals including: 1) physicians possessing an unrestricted license by the State of Louisiana to practice medicine; 2) dentists licensed by the State of Louisiana to practice dentistry; 3) primary care nurse practitioners licensed by the State of Louisiana; 4) Doctors of Optometry.

In addition, the area of the primary office of a practitioner practicing as either a doctor or nurse practitioner must be designated a primary care high-needs geographic shortage area (HPSA), or for a practitioner practicing as a dentist, a Dental HPSA, by the U.S. Department of Health and Human Services Health Resources and Services Bureau of Health Workforce, Division of Policy and Shortage Designation, as per Section 332 of the Public Health Services Act. As always, the primary care health professional must accept Medicaid and Medicare payments for services rendered.

### *Capital Outlay*

It was discovered that in 2022 the Louisiana legislature invested in multiple construction projects that will expand the University of Louisiana System nursing school capacity:

- ❑ \$20 million expansion of nursing facility at Nicholls in Thibodaux
- ❑ \$10 million expansion of SELU nursing in Baton Rouge
- ❑ \$31.9 million nursing building SELU nursing in Hammond

### **Legislative Funding of Neighboring States**

This group researched neighboring states to determine if legislative funding had been provided for the training of health care professionals. None was found, but the group did identify several programs in other states:

#### **1. Arizona recently passed House Bill 2691<sup>7</sup>**

- ❑ Allocates up to \$15 million toward a nurse education investment pilot program
- ❑ Remains in effect for the next three years.

- 2.** Washington introduced similar legislation in 2022. It distributed \$38 million to create and expand nursing programs throughout the state.
- 3.** Montana is funneling \$3.9 million in funding from the U.S. Health Resources Services Administration into Montana State University's nursing college and its partners.
- 4.** Connecticut also recently announced its decision to use \$35 million in federal funding to fuel health care education.
- 5.** The State University of New York (SUNY) partnered with ECMC Hospital in Buffalo, NY to offer up to 50 students \$1,500 per year to cover student expenses that federal and state grants won't cover.

### **Current Grant Funding**

This workgroup is aware of grant funding and federal programs to support the training, recruitment, and retention of the health care workforce. Program details are listed below.

### **State Loan Repayment Program (SLRP)<sup>8</sup>**

Administered by the Louisiana Department of Health, the purpose of the Louisiana State Loan Repayment Program (SLRP) is to encourage primary care practitioners to serve in health professional shortage areas. For the purpose of recruitment under this program, eligible primary care practitioners include:

- Physicians (allopathic or osteopathic)
- Dentists (DDS or DMD general or pediatric)
- Primary care physician assistants
- Primary care certified nurse practitioners
- Certified nurse midwives
- Registered clinical dental hygienists
- Licensed clinical or counseling psychologists (Ph.D. or equivalent required)
- Health service psychologists (Ph.D. or equivalent required)
- Psychiatric nurse specialists
- Licensed professional counselors (Master's or Ph.D. required)

<sup>7</sup> Arizona HB 2691 <https://www.azleg.gov/legtext/55leg/2r/bills/hb2691p.pdf>

<sup>8</sup> Louisiana State Loan Repayment Program <https://wellaheadla.com/health-care-access/louisiana-primary-care-office/state-loan-repayment-program/>

- Marriage and family therapists (Master's or Ph.D. required)
- Licensed clinical social workers (Master's or Ph.D. required)
- Alcohol and substance abuse counselors (Master's or Ph.D. required)

The mission of the program is to alleviate, and ultimately overcome, the state's problem of a substantial mal-distribution of primary care health professionals in rural and inner-city areas.

### Rural Health Scholars Program<sup>9</sup>

Administered by the Louisiana Department of Health, the Rural Health Scholars Program encourages health care professional students to practice in Louisiana's health professional shortage areas (HPSAs) by building partnerships between rural and underserved health care facilities and colleges and universities. Each year, students will participate in a short-term rotation to gain experience in a rural health care setting.

## Federal Programs

### National Health Service Corps (NHSC) Loan and Scholarship Program<sup>10</sup>

The National Health Service Corps (NHSC) offers tax-free loan repayment assistance to support qualified clinicians who work at an NHSC-approved site in a designated HPSA. Qualified clinicians include primary care physicians, nurse practitioners, certified nurse-midwives, physician assistants, dentists, dental hygienists, and behavioral/mental health providers (psychiatrists, health service psychologists, licensed clinical social workers, marriage and family therapists, psychiatric nurse specialists, and licensed professional counselors) to provide culturally competent, interdisciplinary primary health care services to underserved populations located in designated HPSAs. There are currently three (3) programs: NHSC Scholarship

Program, NHSC Loan Repayment Program, and the NHSC Student to Service Loan Repayment Program.

## Current Funding Opportunities

### DOL Nursing Expansion Grant Program - FOA-ETA-22-16<sup>11</sup>

Closing date: January 6, 2023

The purpose of this grant opportunity is to address bottlenecks in training the United States nursing workforce and to expand and diversify the pipeline of qualified nursing professionals who can fill quality jobs in health care. Applicants will apply for one of two training tracks:

1. *The Nurse Education Professional Track* will increase the number of nursing instructors and educators by training new or upskilling experienced nurses into the advanced postsecondary credentialing necessary to become nursing instructors or educators.
2. *The Nursing Career Pathways Track* will train participants as frontline health care professionals and paraprofessionals, including direct care workers, to advance along a career pathway and attain postsecondary credentials needed for middle- to high-skilled nursing occupations.

This grant program is grounded in the principles of worker-centered sector strategies, where employers; education and training providers; labor unions, labor-management partnerships, and other worker organizations; workforce development entities; and workers collaboratively address nursing occupation needs in real-time and prepare for the future of work with a focus on equity, job quality, and attracting, training, hiring, and retaining skilled workers, especially from underserved communities.

### Rural Residency Planning and Development (RRPD) Program<sup>12</sup>

Closing date: January 27, 2023

This notice announces the opportunity to apply for funding under the Health Resources and Services Administration (HRSA) Rural Residency Planning and Development (RRPD) Program. The purpose of this program is to improve and expand access to health care in rural areas by developing new, sustainable rural

9 WAL Rural Health Scholars Program <https://wellaheadla.com/health-care-access/louisiana-primary-care-office/rural-health-scholars-program/>

10 NHSC Loans and Scholarships <https://bhwh.hrsa.gov/loansscholarships>

11 DOL Nursing Expansion Grant Program - FOA-ETA-22-16 <https://www.dol.gov/agencies/eta/grants/apply/find-opportunities>

12 Rural Residency Planning and Development (RRPD) Program <https://www.hrsa.gov/grants/find-funding/HRSA-23-037>

residency programs or rural track programs (RTPs) that are accredited by the Accreditation Council for Graduate Medical Education (ACMGE), to address the physician workforce shortages and challenges faced by rural communities. This program provides start-up funding to RRPD award recipients to create new rural residency programs that will ultimately be sustainable long-term through viable and stable funding mechanisms, such as Medicare, Medicaid, and other public or private funding sources.

For the purposes of this notice of funding opportunity, rural residencies are accredited allopathic and osteopathic physician residency programs that primarily train residents in rural training sites for greater than 50 percent of their total time in residency, and focus on producing physicians who will practice in rural communities. This includes ACGME RTP designation Types 1 and 2.

There are two pathways for this program: General Primary Care and High Need Specialty Pathway and Maternal Health and Obstetrics Pathway.

***General Primary Care and High Need Specialty Pathway:***

This pathway supports the development of new rural residency training programs in family medicine, internal medicine, preventive medicine<sup>1</sup>, psychiatry, and general surgery.

***Maternal Health and Obstetrics Pathway:*** This pathway supports the development of new rural residency programs with a focus on obstetrical training to broaden residents' training and scope of practice to provide high quality, evidence-based maternity care and obstetrical services in rural areas: (1) obstetrics-gynecology rural residency program or RTP, or (2) family medicine rural residency program or RTP with enhanced obstetrical training. Enhanced obstetrical residency training must provide family medicine residents with extensive clinical experience in comprehensive maternity care, including dedicated training on labor and delivery and operative obstetrics. These programs must have the faculty clinical expertise to prepare family medicine residents for the independent practice of obstetrics in rural communities.

## Developmental-Behavioral Pediatrics Training Program<sup>13</sup>

Closing date: January 19, 2023

This notice announces the opportunity to apply for funding under the Developmental-Behavioral Pediatrics

(DBP) Training Program. By expanding the DBP workforce, children with a wide range of developmental and behavioral concerns will have increased access to evaluation and services that address medical and psychosocial aspects of development. Through this award, programs will:

- Prepare DBP fellows and other long-term trainees (LTTs) for leadership roles as teachers, investigators, and clinicians. Build workforce capacity to evaluate for, diagnose or rule out developmental disabilities (DD) including autism and other behavioral health concerns.
- Prepare trainees to participate in clinical care and research training across the broad range of behavioral and developmental health concerns.
- Provide pediatric practitioners, residents, and medical students with essential psychosocial knowledge and clinical expertise.
- Provide technical assistance (TA) to strengthen systems of care for children who may have autism/DD and their families.

TA recipients may include state Title V Maternal and Child Health Services Block Grant agencies and community agencies. Each recipient will accomplish this purpose through five overarching objectives:

**Objective 1:** Recruit and train 10 LTTs, including 5 DBP fellows and 5 other LTTs, over the 5-year period of performance.

**Objective 2:** Conduct one activity per year to address equity and improve access to DBP services.

**Objective 3:** Provide training to a minimum of 200 short- and medium-term trainees per year.

**Objective 4:** Train a minimum of 150 practicing providers through continuing education per year.

**Objective 5:** Provide a minimum of 10 technical assistance (TA) activities per year to strengthen systems of care for children who may have autism/DD and their families.

<sup>13</sup> Developmental-Behavioral Pediatrics Training Program <https://www.hrsa.gov/grants/find-funding/HRSA-23-070>

# Recommendations

1. Provide larger budgets for instructor salaries. Part of the reason there is currently a shortage of nurses<sup>14</sup> is because nursing programs have limited capacities. If universities and community colleges had larger budgets for hiring additional instructors, they could accept more students into their nursing programs. This would result in an increased number of new nurses entering the health care workforce.
2. Develop a central repository of all state and federal funding of health care workforce training, recruitment, and retention programs.
3. Provide relocation assistance to recruit faculty from other states.
4. Provide tax incentives for direct patient care or nurse educators.
5. Develop a strategy for recruitment and retention utilizing economic development existing allocation incentives enterprise zones.
6. Develop a centralized funding repository of state and federal funding of health care workforce training, recruitment, and retention programs (Health Works) and collaborative grant opportunities for faculty (Health Works).
7. Continue to support the expansion of health care programs in high wage, high demand jobs. Ensure that programs are using the dollars to increase the number of entry level graduates (not just graduate / doctoral students such as NPs, CRNA, etc.)
8. Consider supporting the development and maintenance of a clinical application portal for all health care at the undergraduate level. This will prevent duplication of clinical applications and reflect a true number of clinical applicants accepted and reflect the true number of those turned away who meet minimum admission criteria / standards.
9. Consider investing additional funding in Adult Education programs as they are charged with addressing low literacy and numeracy and align short-term non-credit industry- based credentials (health care focus).
10. Consider rebranding nursing to attract minorities and males into health care. Develop a media campaign to highlight the benefits of males and minorities serving in the nurse role.

11. Conduct further research to discover other programs being administered supporting faculty recruitment and retention efforts.
  - ❑ Ochsner Nurse Scholars<sup>15</sup>
  - ❑ Northshore Technical Community College (NTCC) Nursing Cohort for High School Dual Enrolled Students<sup>16</sup>
12. Provide a stipend program for health care educators to remain in Louisiana.
13. Linking Industry to Nursing Education (LINE) Fund—Florida provides matching funds to institutions that partner with health care providers to recruit faculty and clinical preceptors and increase the capacity of nurse education programs.
14. PIPELINE fund—Florida rewards higher education institutions that meet nursing education program performance metrics—\$100 million to establish the Prepping Institutions, Programs, Employers, and Learners through Incentives for Nursing Education (PIPELINE) program to financially reward colleges and universities for their nursing education programs, based on student success.



14 Nurse Journal 8/24/2022 <https://nursejournal.org/articles/how-are-states-addressing-the-nursing-shortage/>

15 Ochsner Nurse Scholars <https://www.ochsner.org/ochsnerscholars>

16 Northshore Technical Community College (NTCC) Nursing Cohort for High School Dual Enrolled Students <https://www.northshorecollege.edu/news/1744738/nursing-cohort-for-high-school-dual-enrolled-students>



# Conclusions

- There is no 'one-size-fits-all' approach to increasing allied health workforce supply, and the reality is that it will require a combination of all of the initiatives mentioned above, and more.
- New training models must be developed, such as expanding dual enrollment and health care apprenticeship models.
- Health care careers must be rebranded to attract individuals to the industry.
- Ways must be identified to attract qualified individuals to (or back to) the professions.
- Unless pragmatic solutions are implemented to recruit and retain faculty, shortages in the healthcare workforce, particularly the nursing workforce, will persist and may worsen.
- Preceptor tax incentives/credits may be one solution to decrease to preceptor shortage in Louisiana.
- Collaboration among key stakeholders (academia, health care systems, the LDH, the Louisiana Legislature, etc.) is paramount in the development of short and long-term solutions to strengthen the healthcare workforce.
- There is an opportunity to increase admissions and the number of qualified applicants.
- This is a large-scale change where everyone's buy-in is needed: regulatory bodies, Board of Regents, nursing deans, faculty, health care stakeholders, accrediting bodies, and administration.
- There are very few programs for the training, recruitment, and retention of healthcare providers supported by legislative funding.
- LDH currently supports rural healthcare provider recruitment and retention efforts through federal grant programs and state matches; however, this should be marketed in a way to reach more individuals.
- The legislature made a significant investment in physical infrastructure for nursing last year. More investment in nursing faculty would have a more immediate impact on capacity.
- With no central repository of program funding information, research was difficult and this report should not be considered inclusive of all work currently being accomplished.
- The study group was not able to find information on applicants, admissions, and graduate / licensure passage rates for all of the allied health programs because this information is housed with individual colleges or licensure agencies. This information should be collected from training providers and reviewed annually.
- We must continue to work together across organizations to develop out of the box solutions because we are in a staffing crisis in Louisiana that puts all citizens at risk for access to healthcare. If ever there were a time to relax or change regulations for healthcare providers, it is now.



## Future Work

Any significant change to address allied health shortages will require, at a minimum, additional funding, regulatory changes, and legislation.

**The following list includes other steps that should be considered:**

- 1.** Continue to identify funding opportunities to support the increase of instructors/faculty.
- 2.** Continue to identify funding opportunities to support the recruitment and retention of the health care workforce.
- 3.** Work with other task forces and workgroups to develop a comprehensive database of all state and federal funding of healthcare workforce training, recruitment, and retention programs.
- 4.** Investigate paid clinical time (ex: Oklahoma).
- 5.** Develop a statewide apprenticeship program and health care sector partnerships.
- 6.** Partner with the Louisiana Legislature and LDH to explore feasible options for tax incentives / credits for preceptors.
- 7.** Opportunity to form coalitions with nursing associations, research, and campaigns to highlight nursing and nursing education as an attractive career choice in our state.
- 8.** Support is needed from nursing organizations, health care communities, and the Louisiana Center for Nursing to develop a repository of qualified applicants potentially eligible for admission to nursing programs.
- 9.** Implement professional development and peer learning to increase knowledge and buy-in for holistic admission review practices.
- 10.** Standardize pre-requisite courses for nursing curriculums.
- 11.** Support licensing changes to allow RN students to take PN licensure exam mid-program or after failing RN exam.
- 12.** Create a committee that will consist of licensure boards, health care providers, higher education representatives, committees related to healthcare, and healthcare workers that would meet semi-annually to ensure collaboration and a shared vision and understanding of the workforce challenges.



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