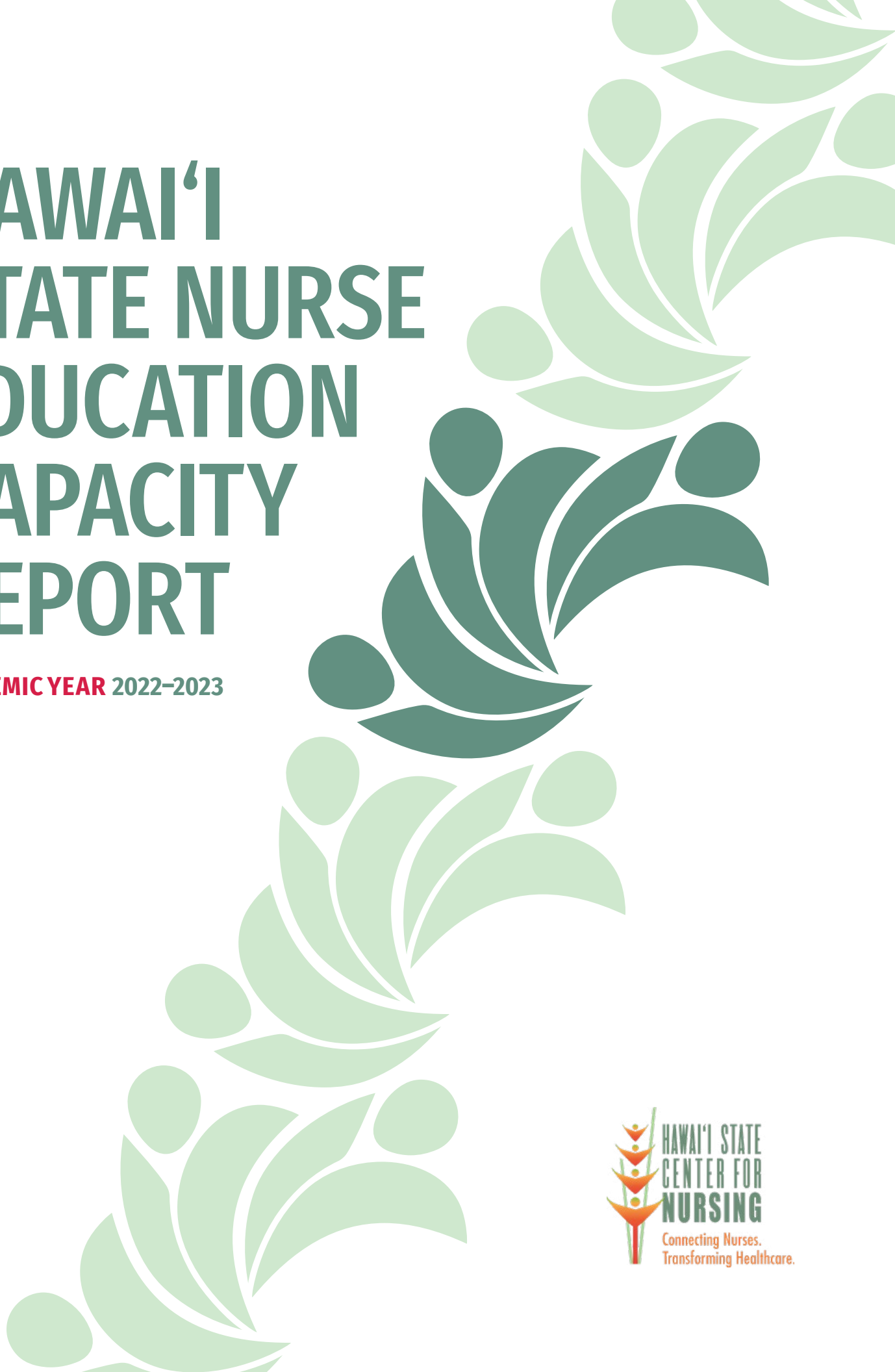


HAWAI'I STATE NURSE EDUCATION CAPACITY REPORT

ACADEMIC YEAR 2022–2023



Hawai'i State Nurse Education Capacity Report

ACADEMIC YEAR 2022-2023

If you require this report in an alternate format, please contact us at hscndata@hawaii.edu.

Report Citation Information:

Hawai'i State Center for Nursing (2024). Hawai'i State Nurse Education Capacity Report, Academic Year 2022-2023.

This report was prepared by Carrie M. Oliveira, Ph.D., Associate Specialist for Nursing Workforce Research at the Hawai'i State Center for Nursing (carrieol@hawaii.edu/808-956-3959).



The Hawai'i State Center for Nursing monitors the state of the nursing workforce in Hawai'i through the collection and reporting of workforce supply, education capacity, and employer demand data. These three research activities assist entities in the public and private sectors with the development and implementation of initiatives designed to develop a robust nursing workforce that meets the healthcare needs of the people of Hawai'i now and in the future.

HAWAI'I STATE CENTER FOR NURSING

2528 McCarthy Mall
Webster Hall 402,
Honolulu, Hawai'i, 96822
(808) 956-5211

ACKNOWLEDGEMENTS

The Hawai'i State Center for Nursing would like to thank the deans, directors, department chairs, and support staff at all of Hawai'i's schools of nursing. This report would not have been possible without their participation in our survey.

[Chaminade University, School of Nursing](#)

[Hawai'i Community College, Nursing and Allied Health](#)

[Hawai'i Pacific University School of Nursing](#)

[Kapi'olani Community College, Nursing Department](#)

[Kaua'i Community College, Nursing Program](#)

[University of Hawai'i at Hilo, School of Nursing](#)

[University of Hawai'i at Mānoa Nancy Atmospera-Walch School of Nursing](#)

[University of Hawai'i Maui College, Nursing Program](#)

The Researcher at the Hawai'i State Center for Nursing would also like to acknowledge the following individuals and organizations for their contributions of insight, graphics, editorial review, and survey instrumentation:

Laura Reichhardt, MS, APRN, AGPCNP-BC, FAAN,
Director,
Hawai'i State Center for Nursing

Druscilla Santiago,
Graphic Designer,
Hawai'i State Center for Nursing

**National Forum of State
Nursing Workforce Centers**



Contents

LIST OF ABBREVIATIONS	1
INTRODUCTION	2
Purpose of this Report	2
Data Dashboards	2
Inclusive Language	2
Accessibility	2
KEY FINDINGS	3
Pre-License Programs	3
Post-License Programs.	3
Nursing Faculty	4
Challenges Affecting Schools of Nursing	4
Quality Indicators for Nurse Education Programs	4
OVERVIEW OF NURSE EDUCATION PROGRAMS OFFERED IN HAWAI’I	5
Accreditation, Board Approval, & Tax Classification of Schools of Nursing.	5
Types of Nursing Programs Available in Hawai’i	6
PRE-LICENSE PROGRAMS	8
Enrollment Capacity & Demand, and New Enrollments	8
Graduates	9
POST-LICENSE PROGRAMS.	11
Enrollment Capacity & Demand, and New Enrollments	11
Graduates	13
NURSE FACULTY	15
Faculty Positions and Vacancies	15
CHALLENGES AFFECTING HAWAI’I’S NURSE EDUCATION PROGRAMS	18
NSCBN Evidence-Based Quality Indicators for Nurse Education Programs.	20
APPENDICES	22
Appendix A – Glossary of Nurse Education Programs Offered in Hawai’i	23
Appendix B – Method for 2022-2023 Nurse Education Capacity Survey	24
Appendix C – Program Admissions by Semester, AY 2022-2023.	25
REFERENCES	26

List of Tables

Table 1. Accreditation Status and Federal Tax Classification of Hawai'i Schools of Nursing	5
Table 2. Academic Awards in Nursing Offered by Institution	7
Table 3. Graduate Nurse Education Programs with at Least One Graduate in AY 22-23	7
Table 4. Pre-License Programs: Openings, Applicants, Admissions & New Enrollments	9
Table 5. Pre-License Programs: Graduates.	9
Table 6. Pre-License Programs: Student Demographic Characteristics	10
Table 7. Post-License Programs: Openings, Applications, Admissions, and New Enrollments	12
Table 8. Post-License Programs: Graduates	13
Table 9. Post-License Programs: Student Demographic Characteristics.	14
Table 10. Nurse Faculty: Total Positions, Filled Positions, and Vacancies	15
Table 11. Nurse Faculty: Demographic Characteristics	16
Table 12. Factors that Adversely Affect Nurse Education Programs	19
Table 13. Tactics Used by Nurse Education Programs to Address Adverse Impacts	20
Table 14. Faculty-Related NCSBN Pre-License Program Approval Guidelines.	21



List of Abbreviations

Abbreviation	Definition
ADN	associate degree program in nursing
AGPCNP	adult-gerontology primary care nurse practitioner
APRN	advanced practice registered nurse
AY	academic year
AY 21-22	academic year 2021-2022
AY 22-23	academic year 2022-2023
BSN	baccalaureate degree program in nursing
DNP	Doctor of Nursing Practice
FNP	family nurse practitioner
GEPN	graduate entry program in nursing
HBON	Hawai'i Board of Nursing
HSCN or The Center	Hawai'i State Center for Nursing
LPN	licensed practical nurse
MSN	master's degree program in nursing
NCSBN	National Council of State Boards of Nursing
NCLEX	National Council Licensure Examination
NP	nurse practitioner
RN	registered nurse
The Forum	National Forum of State Nursing Workforce Centers
UH	University of Hawai'i

Introduction

PURPOSE OF THIS REPORT

This report summarizes data from the 2022-2023 Hawai'i Nurse Education Capacity Survey. The survey collects data from nursing schools located in Hawai'i about their capacity to provide pre- and post-license nursing education.

Schools report the number of new students they have the capacity to enroll, the number of applications submitted by prospective students, and number of graduates who completed their programs. Schools also provide information about their faculty including the number of vacancies and the demographic characteristics of faculty in full- and part-time positions. The survey also collects data about the factors that adversely impact schools' capacity and the extent to which they meet several evidence-based quality measures for nurse education programs. A detailed description of the survey method is provided in the appendix of this report.

By producing this report annually, the Hawai'i State Center for Nursing can make schools, employers, and workforce planners aware of changes in the demand for nurse education, schools' enrollment caps or graduates, and the availability of academic programs to support the stability of the statewide nursing workforce.

DATA DASHBOARDS

Historical education capacity data related to LPN programs, pre-license RN programs, and nursing faculty are available in interactive online dashboards on the [Center's website](#).

INCLUSIVE LANGUAGE

Throughout this report, the term "Filipino/a" refers to persons of any gender who have ethnic ancestry originating in the Philippine Islands. The term "Latino/a" refers to persons of any gender with ethnic ancestry originating in Latin America. We have chosen these terms in an attempt to be simultaneously gender inclusive and culturally sensitive.

ACCESSIBILITY

The Center has made a concerted effort to make this document compliant with guidelines for producing accessible electronic documents as provided by the U.S. Department of Health and Human Services. There may, however, be tables in the report that are difficult to interpret using screen readers or other assistive technology. If you have difficulty accessing any of the content of this report, please contact the Hawai'i State Center for Nursing at hscndata@hawaii.edu to request the content of this report in an alternate format.

Key Findings

PRE-LICENSE PROGRAMS

- ✦ LPN program capacity increased by 119% as compared to AY 21-22. As a result, more than 80% of LPN program applicants were admitted.
- ✦ ADN, BSN, and GEPN programs respectively received 3.1, 2.2, and 3.4 fully qualified applications for each available seat for new students. This continues a multi-year trend of enrollment demand significantly exceeding capacity for new students in pre-license RN programs.
- ✦ Pre-license program graduates increased in AY 22-23 as compared to the previous year. LPN programs graduated 54 students which was a 69% increase. RN programs (ADN & BSN) graduated 422 students, a 5% increase. 46 students completed the accelerated RN year of the state's only GEPN program, a 4% increase.
- ✦ Men accounted for a larger proportion of BSN (16%) and GEPN (31%) program students than the proportion of men currently working in Hawai'i's nursing workforce (14%).

POST-LICENSE PROGRAMS

- ✦ There was a decline in enrollment demand and graduation in RN-to-BSN programs as compared to AY 21-22.
- ✦ Enrollment demand, new student enrollment, and graduations increased for MSN programs as compared to AY 21-22.
- ✦ As compared to AY 21-22, DNP program enrollment capacity, enrollment demand, and admissions all increased, but new enrollments decreased. This may be due to the increase in the number of schools offering DNP programs in the state in the past five years.
- ✦ Of the 59 graduates from MSN and DNP programs 45 (76%) completed programs that prepared them for practice as NPs.

NURSING FACULTY

- ✎ The state's eight schools of nursing employ a total of 129 full-time faculty. This is a 7% increase in filled full-time faculty positions as compared to AY 21-22.
- ✎ The full-time faculty vacancy rate is 13% which is 5 percentage points higher than the national full-time faculty vacancy rate of 8%.
- ✎ The part-time faculty vacancy rate is 2%.
- ✎ 33% of full-time nursing faculty are over the age of 60 which is older, on average, than Hawai'i's nursing workforce as a whole.
- ✎ Part-time faculty are relatively younger than full-time faculty. If they obtain the necessary minimum education for faculty roles, their teaching experience and likely longevity in the workforce make part-time faculty ideal candidates for future full-time faculty roles.

CHALLENGES AFFECTING SCHOOLS OF NURSING

- ✎ 50% of schools reported that hiring full-time or clinical faculty is the most significant challenge affecting their programs.
- ✎ 75% of schools reported that they have difficulty securing sites for clinical placements. 50% of schools reported that they have insufficient resources to offer simulated clinical experiences.
- ✎ Schools' most common response to the difficulty of hiring faculty is to limit admissions cohort sizes. Several schools also report having existing faculty, and sometimes program administrators, teach overloads.

QUALITY INDICATORS FOR NURSE EDUCATION PROGRAMS

- ✎ All of Hawai'i's schools of nursing meet nearly all of the NCSBN quality indicators for pre-licensure programs.
- ✎ The two indicators that most schools do not meet are having certified simulation faculty and requiring that faculty have formal training in various aspects of teaching.
- ✎ Hawai'i's schools of nursing maintain quality educational programs despite being resource constrained.

Overview of Nurse Education Programs Offered in Hawai'i

ACCREDITATION, BOARD APPROVAL, & TAX CLASSIFICATION OF SCHOOLS OF NURSING

Since AY 2018-2019, Hawai'i has had eight schools of nursing with a physical location in Hawai'i that offer pre-license nurse education with approval by the Hawai'i Board of Nursing. Of the eight schools, four are universities that confer baccalaureate and graduate degrees. The remaining four are community colleges that confer associate degrees. O'ahu is home to four nursing schools including three universities and one community college. Hawai'i Island has two nursing schools including one university and one community college. Kaua'i and Maui each have one community college with a nursing program.

Of the eight schools that offer nursing education, six are affiliated with the University of Hawai'i System which is the only public post-secondary education system in the state. The remaining two schools are not-for-profit private universities both of which are located on O'ahu. There are no for-profit nursing schools with a physical campus in Hawai'i.

TABLE 1. ACCREDITATION STATUS AND FEDERAL TAX CLASSIFICATION OF HAWAI'I SCHOOLS OF NURSING

School Name	Accreditation		Federal Tax Classification		
	ACEN	CCNE	Public	Not for Profit	For Profit
Number of Schools (State)	4	4	6	2	0
City & County of Honolulu					
Chaminade University		●		●	
Hawai'i Pacific University		●		●	
Kapi'olani Community College	●		●		
University of Hawai'i at Mānoa		●	●		
County of Hawai'i					
Hawai'i Community College	●		●		
University of Hawai'i at Hilo		●	●		
County of Maui					
University of Hawai'i Maui College	●		●		
County of Kaua'i					
Kaua'i Community College	●		●		

TYPES OF NURSING PROGRAMS AVAILABLE IN HAWAI'I

Individuals who are interested in becoming nurses can select from four types of pre-license undergraduate nursing programs. Kapi'olani Community College and University of Hawai'i Maui College offer LPN programs. Prior to AY 21-22, UH Maui College prepared LPNs via its ADN program whereby students would pause their enrollment in the ADN program and work for a year as an LPN prior to returning to complete the second year of the RN curriculum. Beginning in AY 21-22, UH Maui College launched a regular LPN program which had resources and admissions requirements that were separate from the RN program. The UH Maui College LPN program offsets a decrease in statewide LPN education capacity resulting from Hawai'i Community College's decision to pause new enrollments to its LPN program beginning in AY 21-22.

Individuals interested in becoming RNs can choose to enroll in an ADN program or a BSN program. The ADN is the only option available for pre-license RN education on Kaua'i and in Maui County. Prospective nursing students on O'ahu and Hawai'i Island have the option to enroll in either ADN or BSN programs.

Also available on O'ahu is the state's only graduate entry program in nursing (GEPN). The GEPN provides an educational pathway into nursing for individuals with degrees in non-nursing fields. Qualified GEPN applicants are admitted directly into a graduate program in nursing (MS, DNP, or PhD). Upon the completion of an accelerated year-long RN program, GEPN students immediately transition into their selected graduate program track. According to the 2023 Hawai'i Nursing Workforce Supply Survey, 20% of the APRNs who work in Hawai'i were initially educated in a GEPN program (Hawai'i State Center for Nursing, 2023).

Nurses who wish to advance their education or expand their scope of practice have several options for post-license education from Hawai'i's schools of nursing. LPNs can advance to the RN role by enrolling in an ADN program, some of which have bridge options that provide modified admissions requirements for LPNs as compared to applicants with no nursing background. LPN-to-BSN programs are also an option for LPNs who wish to advance to the RN role with a baccalaureate degree.

RNs with baccalaureate degrees can advance their practice through the completion of graduate education programs in nursing. They may choose to develop an RN specialization such as advanced population health nursing, they may become experts in practice or leadership via DNP programs, or they may become APRNs. Table 3 shows all the graduate program tracks from which students graduated in AY 22-23.

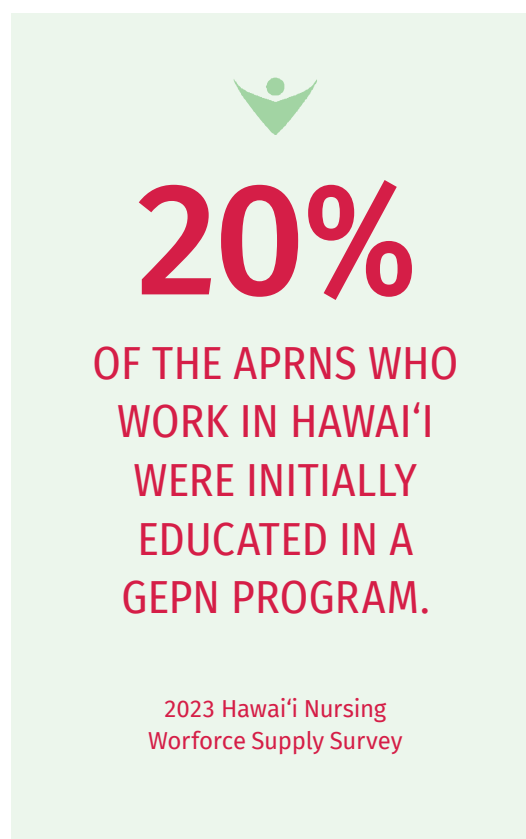


TABLE 2. ACADEMIC AWARDS IN NURSING OFFERED BY INSTITUTION

School Name	LPN. Cert.	ADN	BSN	MSN	DNP	PhD
Number of Schools (State)	2	4	4	2	4	1
City & County of Honolulu						
Chaminade University			●		●	
Hawai'i Pacific University			●	●	●	
Kapi'olani Community College	●	●				
University of Hawai'i at Mānoa			●	●	●	●
County of Hawai'i						
Hawai'i Community College		●				
University of Hawai'i at Hilo			●		●	
County of Maui						
University of Hawai'i Maui College	●	●				
County of Kaua'i						
Kaua'i Community College		●				

TABLE 3. GRADUATE NURSE EDUCATION PROGRAMS WITH AT LEAST ONE GRADUATE IN AY 22-23

	Chaminade University	Hawai'i Pacific University	University of Hawai'i, Hilo	University of Hawai'i, Mānoa
Master's Degree Programs				
Specialty RN				
Advanced Population Health				●
APRN				
Adult-Gerontology Acute Care NP		●		
Family NP		●		
Doctor of Nursing Practice Programs				
General/Executive DNP				
Post-Master's DNP		●		●
Executive Leader	●		●	
APRN				
Adult-Gerontology Primary Care NP				●
Family NP	●		●	●
Psychiatric-Mental Health NP	●			
PhD Programs				
PhD in Nursing				●

Pre-License Programs

ENROLLMENT CAPACITY & DEMAND, AND NEW ENROLLMENTS

LPN programs closed the gap between the number of qualified applicants and the number of seats available for new students as compared to prior academic years. This was due to a combination of a trend of declining enrollment demand for LPN programs and a simultaneous 119% increase in seats available for new students. More than 80% of LPN program applicants were offered admission which is the highest admission rate of all types of pre-license programs. In total, 62 new students enrolled in LPN programs in AY 22-23 which is an increase of 94% over AY 21-22.

In AY 22-23, Hawai'i's pre-license RN (ADN and BSN) programs continued a multi-year trend of enrollment demand substantially exceeding capacity for new students. ADN programs reported a 7% decrease in the number of seats they had for new students as compared to AY 21-22. Although they reported receiving 26% fewer fully qualified applications than in the previous academic year, ADN programs received 3.1 times as many applications as they had seats for new students. As a result, more than 60% of ADN applications received a denial of admission. Pre-license BSN programs reported that they increased capacity for new students by 19% in AY 22-23 as compared to the previous academic year. The increase in capacity for new students was not enough to keep pace with the 37% increase in fully qualified applications BSN programs received. As a result, 40% of fully qualified applications received a denial of admission. A total of 468 new students enrolled in pre-license RN programs which is a 6% increase as compared to AY 21-22.

Enrollment demand for the state's only GEPN program also exceeded enrollment capacity. The program received nearly 3.5 fully qualified applications per available new student seat, resulting in 62% of applications being denied admission. A total of 48 new students enrolled in the GEPN program which was the program's full capacity. There was no change in the number of new students enrolled in AY 22-23 as compared to the previous academic year.

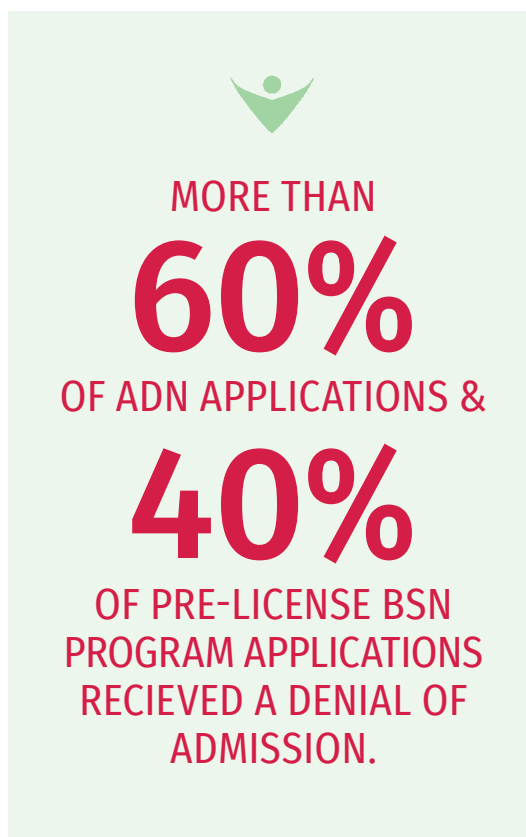


TABLE 4. PRE-LICENSE PROGRAMS: OPENINGS, APPLICANTS, ADMISSIONS & NEW ENROLLMENTS

	LPN	ADN	BSN	GEPN
Available Openings	70	126	413	48
Qualified Applications	77	385	905	162
Applications Received per Available Opening (Qualified Applications Received / Available Openings)	1.1	3.1	2.2	3.4
Admissions Offered	62	112	545	61
Acceptance Rate (Admissions Offered / Qualified Applications Received)	81%	29%	60%	38%
New Students Enrolled	62	112	356	48

GRADUATES

Because the typical duration of an LPN program is one academic year, increases in enrollments in any year will result in commensurate increases in graduations during the same year. The rapid expansion of LPN program capacity in AY 22-23 enabled the graduation of 54 students which was a 69% increase as compared to AY 21-22.

A total of 422 students graduated from ADN and pre-license BSN programs in AY 22-23, a 5% increase as compared to AY 21-22. The net increase in pre-license RN graduations was the combined effect of a 9% decrease in graduates from ADN programs and a 12% increase in graduates from BSN programs.

In AY 22-23, 46 students completed the GEPN program, which means they finished the accelerated RN portion of the program. The number of GEPN completers decreased by 4% as compared to AY 21-22.

TABLE 5. PRE-LICENSE PROGRAMS: GRADUATES

	LPN	ADN	BSN	GEPN
Program Graduates	54	127	295	46
% Graduates from Neighbor Island Schools	57%	65%	10%	0%

There are no GEPN programs on Neighbor Islands.

TABLE 6. PRE-LICENSE PROGRAMS: STUDENT DEMOGRAPHIC CHARACTERISTICS

Demographic Characteristic	LPN		ADN		BSN		GEPN	
	#	%	#	%	#	%	#	%
Gender Total	62	100%	128	100%	1026	100%	49	100%
Female	57	92%	110	86%	860	84%	33	67%
Male	5	8%	18	14%	165	16%	15	31%
Other/Nonbinary	0	0%	0	0%	0	0%	0	0%
Unknown/Missing	0	0%	0	0%	1	0%	1	2%
Race/Ethnicity Total	62	100%	128	100%	1026	100%	49	100%
American Indian or Alaska Native	0	0%	0	0%	2	0%	4	8%
Chinese	2	3%	13	10%	18	2%	3	6%
Filipino/a	35	56%	45	35%	150	15%	4	8%
Japanese	2	3%	7	5%	14	1%	3	6%
Other Asian	10	16%	9	7%	258	25%	4	8%
Black or African American	0	0%	1	1%	12	1%	1	2%
Hispanic or Latino/a	1	2%	4	3%	104	10%	2	4%
Middle Eastern or North African	0	0%	0	0%	0	0%	0	0%
Native Hawaiian	0	0%	10	8%	65	6%	8	16%
Other Pacific Islander	0	0%	2	2%	12	1%	0	0%
White	12	19%	27	21%	97	9%	9	18%
Two or More Races	0	0%	10	8%	195	19%	11	22%
Some Other Race	0	0%	0	0%	0	0%	0	0%
Unknown	0	0%	0	0%	99	10%	0	0%
Age Total	62	100%	128	100%	1026	100%	49	100%
20 Years or Younger	1	2%	3	2%	310	30%	0	0%
21 Years to 25 Years	20	32%	33	26%	381	37%	19	39%
26 Years to 30 Years	6	10%	34	27%	187	18%	15	31%
31 Years to 40 Years	1	2%	18	14%	116	11%	13	27%
41 Years to 50 Years	0	0%	6	5%	27	3%	2	4%
51 Years to 60 Years	0	0%	4	3%	5	0%	0	0%
61 Years and Older	0	0%	0	0%	0	0%	0	0%
Unknown/Missing	34	55%	30	23%	0	0%	0	0%

Post-License Programs

ENROLLMENT CAPACITY & DEMAND, AND NEW ENROLLMENTS

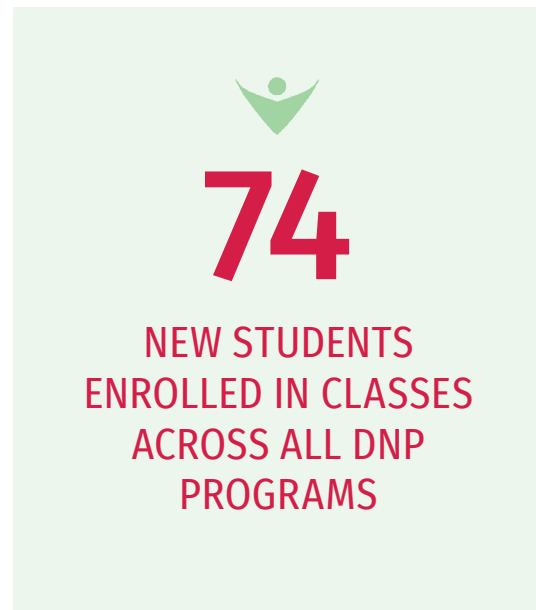
Post-license nurse education programs serve two primary functions. The first is to provide the educational preparation necessary for a nurse to advance their licensure and scope of practice from one level to the next (e.g., RN to APRN). The second is that they allow nurses to deepen their expertise in a specific area within their current scope of practice (e.g., advanced population health nursing or nurse education).

LPN-to-BSN programs provide an academic pathway for LPNs to advance to RN practice via a baccalaureate program rather than an ADN program which is the typical LPN-to-RN pathway. Hawai'i Pacific University offers the only LPN-to-BSN program in the state, however no new students were admitted to the program in AY 22-23.

RN-to-BSN programs allow RNs who were initially educated in RN diploma or ADN programs to advance their education to the baccalaureate level. In AY 22-23, RN-to-BSN programs reported receiving 52 applications, a 52% decrease as compared to AY 21-22. Schools report that they have the capacity accommodate whatever demand exists for RN-to-BSN education, so declining enrollment demand is not the result of the unavailability of programs or seats for new students. The drop in applications resulted in a 39% decline in new student enrollment in RN-to-BSN programs in AY 22-23 as compared to the previous academic year.

Graduate degree programs in nursing provide several options for nurses' professional development and career advancement. MSN programs are available at the University of Hawai'i at Mānoa and Hawai'i Pacific University. HPU's MSN programs prepare nurses for practice as APRNs with specializations as family NPs or adult-gerontology acute care NPs. UH Mānoa's master's degree program provides RNs with a specialization in advanced population health nursing.

As compared to AY 21-22, capacity for new students in MSN programs increased by 42%, which allowed the admission of 79% of MSN program applicants. In AY 22-23, 89 new students enrolled in MSN programs, an increase of 35% as compared to AY 21-22.



DNP programs are available at all four universities that offer nursing education in the state. On O‘ahu, students can pursue preparation for practice as APRNs with specializations as family NPs, adult-gerontology primary care NPs, or psychiatric-mental health NPs. For RNs who want to pursue DNP education without becoming APRNs, O‘ahu schools of nursing also offer executive leadership and general post-master’s DNP programs. On Hawai‘i Island, DNP program track options include family NP and executive leadership.

As compared to AY 21-22, statewide DNP enrollment capacity increased by 4% in AY 22-23. The increase in DNP capacity resulted in a 5% increase in DNP admissions and allowed the admission of 85% of qualified applicants. Across all DNP programs, 74 new students enrolled in classes. Despite the increases in both capacity and admissions, new enrollments to DNP programs decreased by 8%.

The decrease in new student enrollments may be due to an increase in the availability of DNP programs in the state. Prospective students often apply to multiple schools to maximize their odds of admission and secure better financial aid or scholarships. As the number of DNP programs increases, the more options applicants have and the more likely they are to apply to multiple schools. As more applicants apply to multiple schools, statewide applications and admissions will increase. However, regardless of the number of programs an applicant is admitted to, most students will only enroll at one school. This, and the fact that some admits may choose not to enroll at any school because of financial or other reasons, may explain the gap between increasing admissions and declining enrollments.

University of Hawai‘i at Mānoa has the only nursing PhD program in the state. In AY 22-23, two students who had been admitted in a previous academic year were enrolled in at least one class, but the program did not offer admission to any new students.

TABLE 7. POST-LICENSE PROGRAMS: OPENINGS, APPLICATIONS, ADMISSIONS, AND NEW ENROLLMENTS

	LPN-to-BSN	RN-to-BSN	MSN	DNP	PhD
Available Openings	0	52*	121	122	0
Qualified Applications	0	52	154	130	0
Applications Received per Available Opening (<i>Qualified Applications Received / Available Openings</i>)	--	--	1.3	1.1	--
Admissions Offered	0	52	121	111	0
Acceptance Rate (<i>Admissions Offered / Qualified Applications Received</i>)	--	--	79%	85%	--
New Students Enrolled	0	52	89	74	0

**At least one institution reported that available seats for new students varied depending on enrollment demand and availability of clinical faculty. In these cases, the number of qualified applications received substitutes for the number of openings for new students. The ratio of applications per opening and the acceptance rate are not reported because of this substitution.*

GRADUATES

RN-to-BSN programs graduated 39% fewer graduates in AY 22-23 than in the previous academic year. Most RN-to-BSN programs take about two years to complete. Graduates completing an RN-to-BSN program in AY 22-23 would most likely have enrolled in AY 21-22. In AY 21-22, 66 students enrolled in RN-to-BSN programs statewide, which is twice the number of students who graduated in AY 22-23. Though the Education Capacity Survey does not ask schools to report retention in their programs, these data suggest that the average RN-to-BSN student takes longer than two years to complete a program or that programs have relatively high levels of attrition.

Graduations from MSN programs decreased by 30% in AY 22-23 as compared to AY 21-22. DNP graduations increased by 52%. The changes in graduations follow a recent historical trend of declining enrollment in MSN programs and increasing enrollment in DNP programs.

Among the graduates from MSN programs in AY 22-23, 15 (71%) completed a program that prepared them for practice as nurse practitioners. The remaining 29% completed a program that prepared them for practice in advanced population health nursing. Among DNP graduates, 30 (79%) completed an NP program. Across MSN and DNP programs that prepared students for practice as NPs, 41 (91%) completed programs with a primary care focus (family NP and adult-gerontology primary care NP).

TABLE 8. POST-LICENSE PROGRAMS: GRADUATES

	LPN-to-BSN	RN-to-BSN	MSN	DNP	PhD
Program Graduates	1	33	21	38	1
% Graduates from Neighbor Island Schools	0%	30%	0%	11%	0%

There are no MSN or PhD programs on Neighbor Islands. See Table 1 for types of programs offered in each county.

TABLE 9. POST-LICENSE PROGRAMS: STUDENT DEMOGRAPHIC CHARACTERISTICS

Demographic Characteristic	LPN-to-BSN		RN-to-BSN		MSN		DNP		PhD	
	#	%	#	%	#	%	#	%	#	%
Gender Total	7	100%	61	100%	157	100%	207	100%	2	100%
Female	6	86%	49	80%	129	82%	179	86%	2	100%
Male	1	14%	12	20%	28	18%	26	13%	0	0%
Other/Nonbinary	0	0%	0	0%	0	0%	0	0%	0	0%
Unknown/Missing	0	0%	0	0%	0	0%	2	1%	0	0%
Race/Ethnicity Total	7	100%	61	100%	157	100%	207	100%	2	100%
American Indian or Alaska Native	0	0%	2	3%	0	0%	3	1%	0	0%
Chinese	0	0%	0	0%	1	1%	8	4%	0	0%
Filipino/a	1	14%	13	21%	16	10%	12	6%	0	0%
Japanese	0	0%	2	3%	8	5%	9	4%	0	0%
Other Asian	1	14%	0	0%	4	3%	26	13%	0	0%
Black or African American	1	14%	0	0%	8	5%	12	6%	0	0%
Hispanic or Latino/a	3	43%	3	5%	21	13%	10	5%	0	0%
Middle Eastern or North African	0	0%	0	0%	0	0%	0	0%	0	0%
Native Hawaiian	0	0%	7	11%	2	1%	17	8%	1	50%
Other Pacific Islander	0	0%	2	3%	3	2%	4	2%	0	0%
White	0	0%	8	13%	64	41%	35	17%	1	50%
Two or More Races	1	14%	7	11%	29	18%	40	19%	0	0%
Some Other Race	0	0%	0	0%	0	0%	0	0%	0	0%
Unknown	0	0%	17	28%	1	1%	31	15%	0	0%
Age Total	7	100%	61	100%	157	100%	207	100%	2	100%
20 Years or Younger	0	0%	0	0%	0	0%	0	0%	0	0%
21 Years to 25 Years	0	0%	11	18%	9	6%	22	11%	0	0%
26 Years to 30 Years	4	57%	16	26%	40	25%	60	29%	0	0%
31 Years to 40 Years	3	43%	17	28%	61	39%	66	32%	1	50%
41 Years to 50 Years	0	0%	11	18%	40	25%	43	21%	0	0%
51 Years to 60 Years	0	0%	5	8%	5	3%	13	6%	0	0%
61 Years and Older	0	0%	1	2%	2	1%	3	1%	0	0%
Unknown/Missing	0	0%	0	0%	0	0%	0	0%	1	50%

Nurse Faculty

FACULTY POSITIONS AND VACANCIES

TABLE 10. NURSE FACULTY: TOTAL POSITIONS, FILLED POSITIONS, AND VACANCIES

Position Type	Full-Time		Part-Time		Total	
	#	%	#	%	#	%
Total Positions	149	100%	408	100%	557	100%
Filled Positions	129	87%	399	98%	528	95%
Vacant Positions	20	13%	9	2%	29	5%

In AY 22-23, there were 129 full-time faculty members providing education across Hawai'i's eight schools of nursing. This represents a 7% year-over-year increase in the number of filled full-time faculty positions.

Schools reported 20 vacant fully funded full-time positions for which recruitment was ongoing at the time of the survey. The 20 vacancies represent 13% of all full-time faculty positions in the state which is notably higher than the 2023 national full-time faculty vacancy rate of 8% (Byrne et al., 2023). Hawai'i's schools of nursing have reported for several years in a row that recruiting new full-time faculty and having funding to provide raises to retain existing faculty as one of their most impactful challenges.

Schools reported a total of 399 faculty employed in part-time positions. As compared to AY 21-22, this is a 144% increase. Most of this increase is the result of one university reporting a large increase in their part-time faculty positions. As such, it should not be interpreted as a sign of a statewide trend of significantly increased part-time faculty hiring. The vacancy rate for part-time positions was 2%. That the part-time faculty vacancy rate is substantially lower than the full-time faculty vacancy rate is consistent with a trend going back at least six academic years.

Worth noting is that 33% of the state's full-time nursing faculty are over the age of 60. In contrast, 16% of all RNs and 20% of all APRNs in the state's nursing workforce are over the age of 60 (Hawai'i State Center for Nursing, 2023). Because nursing faculty are older, on average, than the rest of the state's nursing workforce, nursing faculty are proportionally more likely to retire within the next 10 years.

In contrast, part-time faculty are considerably younger than full-time faculty. About 25% of part-time faculty are 40 years old or younger and only 13% are over the age of 60. Their experience as educators combined with potential for longevity in the workforce make part-time faculty an ideal population from which future full-time faculty could be recruited.

Successful recruitment of future nurse faculty requires providing them with adequate mentorship, career transition support, and training in adult learner strategies and pedagogy. The strategic recruitment of the next generation of nursing faculty is crucial to maintaining and growing Hawai'i's capacity to educate future nurses.

TABLE 11. NURSE FACULTY: DEMOGRAPHIC CHARACTERISTICS

Demographic Characteristic	Full-Time		Part-Time		Total	
	%	#	%	#	%	#
Gender	129	100%	399	100%	528	100%
Female	112	87%	318	80%	430	81%
Male	16	12%	67	17%	83	16%
Other/Nonbinary	0	0%	0	0%	0	0%
Unknown/Missing	1	1%	14	4%	15	3%
Race/Ethnicity	129	100%	399	100%	528	100%
American Indian or Alaska Native	1	1%	3	1%	4	1%
Chinese	2	2%	6	2%	8	2%
Filipino/a	14	11%	12	3%	26	5%
Japanese	6	5%	12	3%	18	3%
Other Asian	7	5%	112	28%	119	23%
Black or African American	6	5%	9	2%	15	3%
Hispanic or Latino/a	4	3%	2	1%	6	1%
Middle Eastern or North African	1	1%	0	0%	1	0%
Native Hawaiian	8	6%	39	10%	47	9%
Other Pacific Islander	1	1%	0	0%	1	0%
White	59	46%	120	30%	179	34%
Two or More Races	8	6%	28	7%	36	7%
Some Other Race	0	0%	2	1%	2	0%
Unknown	12	9%	54	14%	66	13%
Age	129	100%	399	100%	528	100%
30 Years or Younger	2	2%	22	6%	24	5%
31 Years to 40 Years	17	13%	110	28%	127	24%

TABLE 11. NURSE FACULTY: DEMOGRAPHIC CHARACTERISTICS CONTINUED

Demographic Characteristic	Full-Time		Part-Time		Total	
	%	#	%	#	%	#
41 Years to 50 Years	33	26%	133	33%	166	31%
51 Years to 55 Years	18	14%	41	10%	59	11%
56 Years to 60 Years	17	13%	26	7%	43	8%
61 Years to 65 Years	30	23%	20	5%	50	9%
66 Years to 70 Years	4	3%	23	6%	27	5%
71 Years and Older	8	6%	8	2%	16	3%
Unknown/Missing	0	0%	16	4%	16	3%
Highest Degree Earned	129	100%	399	100%	528	100%
ADN	0	0%	0	0%	0	0%
BSN	4	3%	143	36%	147	28%
Baccalaureate, Non-Nursing	0	0%	0	0%	0	0%
Master's Degree, Nursing	41	32%	120	30%	161	30%
Master's Degree, Non-Nursing	4	3%	5	1%	9	2%
DNP	44	34%	50	13%	94	18%
Doctoral Practice Degree, Non-Nursing	4	3%	1	0%	5	1%
PhD, Nursing	23	18%	11	3%	34	6%
PhD, Non-Nursing	7	5%	2	1%	9	2%
Unknown/Missing	2	2%	67	17%	69	13%

Challenges Affecting Hawai'i's Nurse Education Programs

The Center conducted its first Education Capacity survey after the completion of AY 2005-2006. In the nearly 20 years since the first survey, schools have consistently reported that difficulty hiring faculty and a shortage of clinical placements are the two factors that limit their capacity to grow their programs. This pattern continued in AY 22-23.

Historically, schools were more likely to report that they had difficulty hiring full-time rather than clinical faculty. However, AY 22-23 was the second year in a row in which a majority of schools reported having difficulty hiring clinical faculty. Moreover, 25% of schools reported that difficulty hiring clinical faculty was the single most significant challenge affecting their programs.

Securing quality clinical placements for students has been difficult, especially on O'ahu where four schools compete for a finite number of placements. In addition to, and sometimes in place of, live clinical experiences, schools can incorporate simulated clinical experiences into their curricula. Simulated immersions allow students to practice challenging skills, revisit errors, and have hands-on experiences that may not be possible in actual healthcare settings. Though simulation is a valuable pedagogical tool, 50% of schools report having insufficient resources to provide simulated clinical experiences. Schools' access to adequate space, functional manikins and other equipment, expert simulation technicians, and well-prepared faculty is as important to maintaining local nursing education capacity as the academic-practice partnerships that create opportunities for live clinical immersions.



TABLE 12. FACTORS THAT ADVERSELY AFFECT NURSE EDUCATION PROGRAMS

Challenges Affecting Programs	#1 Challenge	Affects Existing Programs	Affects New Program Development
Difficulty filling clinical faculty positions	25%	63%	75%
Difficulty filling full-time faculty positions	25%	63%	63%
Insufficient number of clinical training sites	13%	75%	75%
Insufficient resources (e.g., faculty, facilities, etc.) to provide simulated clinical experiences	13%	50%	50%
Lack of funding for new faculty lines or raises	13%	50%	38%
Insufficient number of preceptors for clinical training experiences	0%	75%	63%
Insufficient funding, faculty, or other resources for program maintenance or development	0%	50%	63%
Not affected by any challenge	0%	0%	13%

The sum of percentages in “Affects Existing Programs” and “Affects New Program Development” columns exceed 100% due to multiple responses from some schools.

In response to the factors that limit their capacity, 63% of schools reported limiting their admissions cohort sizes. Several schools anecdotally report that they have the resources to deliver didactic or theoretical instruction to more students than they admit. However, clinical cohort sizes are limited by most facilities to about six students. Admitting more students would require more clinical faculty. Given the lack of funding for additional faculty lines and difficulty hiring clinical faculty, it is infeasible for many schools to hire enough faculty to admit more students.

Half of schools indicated that they have addressed their challenges by some method not included among the options on the survey. A common theme across these additional responses include faculty working overloads to cover sections of didactic or clinical instruction for which additional faculty could not be hired. Some schools also reported that program and department administrators work overloads to teach while also fulfilling the administrative duties of running their departments. While overloading faculty and administrators to the maximum teaching load allowed by their contracts may provide a short-term solution to the ongoing problem of a faculty shortage, there is significant risk of declining job satisfaction or burnout for overworked faculty. This may make it difficult to retain faculty, which will exacerbate the existing faculty shortage. Breaking this pattern is a necessary step toward improving schools’ ability to recruit and retain qualified full- and part-time faculty.

TABLE 13. TACTICS USED BY NURSE EDUCATION PROGRAMS TO ADDRESS ADVERSE IMPACTS

Responses to Challenges	% Schools Reporting
Reduced admissions cohort sizes	63%
Other response	50%
Replacement of live clinical experiences with high-fidelity simulation	38%
Pursuit of alternate/supplemental funding sources	38%
Decreased frequency of new student admissions	13%
Payments to clinical sites	13%
Payments directly to preceptors	13%
Elimination of degree programs or program tracks	0%
Increased student tuition and/or fees	0%
Delayed or terminated development of new degree programs or program tracks	0%

The sum of the percentages exceeds 100% due to multiple responses from some schools.

NSCBN EVIDENCE-BASED QUALITY INDICATORS FOR NURSE EDUCATION PROGRAMS

Beginning in AY 20-21, the Center has included questions on the Education Capacity Survey that reflect the National Council of State Boards of Nursing’s (2020) quality indicators for nurse education programs. Data about the extent to which schools meet the quality indicators can provide insight into possible priorities for education-related workforce development activities.

Overall, the data remained mostly unchanged in AY 22-23 as compared to the previous year. Most schools formally support their faculty members’ integration into their role through formal orientation or mentorship, require that their clinical instructors have provided direct patient care within five years, and expect that their faculty will engage in professional development activities related to teaching.

There are two quality indicators that the majority of schools did not meet: that faculty are required to have formal training in teaching and curriculum design and that their simulation faculty are certified. Only 13% of schools (equivalent to one school) reported meeting either of those indicators. This, however, is not a change from AY 21-22. These data suggest that despite their ongoing difficulty recruiting and retaining faculty and navigating a highly constrained clinical placement environment, Hawai‘i’s schools of nursing have the qualities that are shown to be associated with high quality nursing education.

TABLE 14. FACULTY-RELATED NCSBN PRE-LICENSE PROGRAM APPROVAL GUIDELINES

Faculty-Related Program Quality Indicators	% Schools Meeting Criterion
Proportion of Full-Time Faculty	
At least 35% of all faculty are full-time hires*	75%
Education and Experience Required for Faculty Role**	
Clinical faculty have direct patient care experience within the last five years.	75%
Simulation faculty are certified.	13%
Faculty are required to have had some formal training in teaching, curriculum design, assessments, teaching in multiple platforms, classroom management, etc.	25%
Transition to Role Support	
New clinical faculty members are provided formal orientation to their role	88%
New faculty members are formally mentored by an experienced faculty member in your department	88%
Professional Development and Lifelong Learning	
Faculty members are required or expected to complete continuing education or other professional development related to nursing education and adult learner pedagogy.	88%
Your department/institution hosts workshops/presentations/ etc. to support your faculty members' professional development.	88%

**Schools reported the total number of filled faculty lines by FTE status (part-time vs. full-time). Based on those data we determined whether a school met the 35% full-time faculty quality indicator. **The Guidelines include two additional criteria related to the minimum education for faculty by the type of program in which they teach. We did not ask schools to classify their faculty by program so we could not calculate the percentage of schools meeting each criterion.*

Appendices



APPENDIX A – GLOSSARY OF NURSE EDUCATION PROGRAMS OFFERED IN HAWAII

Term	Definition
Pre-license Programs	Nurse education programs that admit students with no prior education or experience in nursing.
LPN Program	A program of instruction that requires at least one year of full-time equivalent coursework generally within a high school, vocational/technical school, or community/junior college setting, the completion of which results in a diploma or certificate of completion and eligibility to apply for licensure as an LPN (see also Hawai'i Administrative Rules §16-89-11 and §16-89-12).
ADN Program, Generic/Traditional	A program of instruction that requires at least two years of full-time equivalent college academic work generally within a junior or community college, the completion of which results in an associate degree with a major in nursing and eligibility to apply for licensure as an RN. (See also Hawai'i Administrative Rules §16-89-10).
Pre-License BSN Program, Generic/Traditional*	A program of instruction to prepare generalist registered nurses that admits students with no previous nursing education, the completion of which results in a baccalaureate degree (e.g., BS, BSN, etc.) with a major in nursing and eligibility to apply for licensure as an RN. The program requires at least four years but not more than five years of full-time equivalent college course work within a senior college or university. (See also Hawai'i Administrative Rules §16-89-10).
Pre-License Graduate Entry (GEPN) Program*	A program of instruction that admits baccalaureate degrees in other disciplines and no previous nursing education. The program prepares graduates for entry into the profession, eligibility to apply for licensure as an RN, and upon completion, awards a graduate degree in nursing (e.g., MSN, DNP, PhD). (See also Hawai'i Administrative Rules §16-89-10).
Post-license Programs	Nurse education programs that require a prospective student to hold an active nursing license to be eligible for admission.
LPN to BSN Program*	A program for students licensed as LPNs the completion of which results in a baccalaureate degree (e.g., BS, BSN, etc.) with a major in nursing and eligibility to apply for licensure as an RN.
Post-License BSN (RN-to-BSN) Program	A post-license BSN program for students who are already licensed as RNs whose highest nursing education is a diploma or associate degree.
MSN Program *	A post-license master's program with emphasis on advanced clinical practice, including Nurse Practitioner, Nurse Anesthetist, Nurse Midwifery, and Clinical Nurse Specialist tracks. Includes RN-to-MSN and post-baccalaureate admissions pathways.
DNP Program*	A program of instruction that prepares graduates for the highest level of nursing practice beyond the initial preparation in the discipline. The DNP is the terminal practice degree. Includes post-baccalaureate and post-master's admissions pathways.
PhD Program*	A post-licensure doctoral program that culminates in the PhD in Nursing. Includes post-baccalaureate and post-master's admissions pathways.

**Italicized program titles, definitions, or parts of definitions are additions or modifications to those published in the source document published by the National Forum of State Nursing Workforce Centers (2020).*

APPENDIX B – METHOD FOR 2022-2023 NURSE EDUCATION CAPACITY SURVEY

INSTRUMENTATION

The data collection instrument for the Education Capacity Survey is based on the National Nursing Workforce Minimum Dataset for Education as published by the National Forum of State Nursing Workforce Centers (2020). The Forum recommends that states use the appropriate MDS for education, supply, and employment demand so that national dialogue about nursing workforce development can be informed by data that is collected at the state level.

In addition to the data points recommended by the Forum, the Center added questions related to graduate degree program tracks, challenges to program growth or sustainability, responses to those challenges, and NCSBN's quality indicators for nurse education programs.

The survey instrument was converted to a form fillable .pdf file with calculation and data validation to support schools in providing accurate data. The entire survey instrument is available on request by emailing hscndata@hawaii.edu.

PROCEDURE

The survey was sent via email by the Center's researcher to the Dean or Nursing Program Director on record for each of the eight schools of nursing with a physical campus in Hawai'i. Schools received the survey on April 30, 2024. Schools were given an initial submission deadline of May 31, 2024. Three schools requested additional time to complete the survey. The last survey was submitted on July 18, 2024. The Center's researcher corresponded with several schools to obtain missing data or to clarify their submissions through August 30, 2024.

APPENDIX C – PROGRAM ADMISSIONS BY SEMESTER, AY 2022-2023

	LPN			ADN			BSN			GEPN			LPN to BSN			RN to BSN			MSN			DNP			PhD					
# Programs	2			4			4			1			1			4			2			3			1					
Admissions Semesters*	F	S	I	F	S	I	F	S	I	F	S	I	F	S	I	F	S	I	F	S	I	F	S	I	F	S	I	F	S	I
Associate Degree-Granting Institutions																														
Hawai'i Community College				●																										
Kapi'olani Community College	●	●		●	●																									
Kaua'i Community College				●																										
University of Hawai'i Maui College		●		●																										
Baccalaureate Degree-Granting Institutions																														
Chaminade University							●	●														●	●							
Hawai'i Pacific University							●	●											●	●	●	●	●	●						
University of Hawai'i at Hilo							●									●	●					●								
University of Hawai'i at Mānoa							●			●						●	●		●			●								

*F = Fall Semester, S = Spring Semester, I = Summer Intersession.

A pink cell indicates that a school did not offer a given program during AY 22-23. A white cell indicates that a school operated the program during the AY but did not admit new students during the academic term. A dot indicates that a school admitted new students into the program for the indicated semester.

References

- Byrne, C., Keyt, J., & Fang, D. (2023). *Special Survey on Vacant Faculty Positions for Academic Year 2023-2024*. American Association of Colleges of Nursing. <https://www.aacnnursing.org/Portals/0/PDFs/Data/Vacancy23.pdf>
- Hawai'i State Center for Nursing. (2023). *2023 Hawai'i Nursing Workforce Supply: Statewide Data Tables by License* [Data Tables]. https://www.hawaiicenterfornursing.org/wp-content/uploads/2023/09/State-Data-Tables-v.Final_.pdf
- Healthcare Association of Hawai'i. (2022). *Hawai'i Healthcare Workforce Initiative 2022 Report*. https://static1.squarespace.com/static/5d703ec20712890001abe61f/t/6371dd4102fbca73ff8d0539/1668406609446/HAH_HWI2022Report-111122_LR.pdf
- National Council of State Boards of Nursing. (2020, February). *Pre-Licensure Nursing Education Approval Guidelines*. https://www.ncsbn.org/Guidelines_for_Prelicensure_Nursing_Program_Approval_FINAL.pdf
- National Forum of State Nursing Workforce Centers. (2020). *National Nursing Workforce Minimum Datasets: Education*. https://www.nursingworkforcecenters.org/wp-content/uploads/2021/03/Nurse_Education_MDS_Revised_December2020.pdf

