HAWAII STATE HEALTH PLANNING AND DEVELOPMENT AGENCY
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Tri-Isle Subarea Health Planning Council

-DRAFT-

Meeting Minutes
February 17, 2023
1:30 PM Hawaii Time
Virtual Zoom Meeting and Physical Location at
The Keoni Ana Building, 1177 Alakea Street, Suite 402

MEMBERS:	Edeluisa Baguio-Larena, Kathleen Hagan, Karen Holt, Francine Johansen, Bob Shroder
MEMBERS ABSENT:	Donna Butterfield
GUESTS:	Brian Hoyle
SHPDA:	Wendy Nihoa

ATTENDANCE RECORD OF APPOINTED MEMBERS

Date	12/11/20	5/7/21	7/2/21	10/1/21	11/12/21	2/4/22	5/13/22	8/12/22	12/2/22	2/17/23
Edeluisa Baguio-Larena	-	-	-	X	X	X	X	X	O	X
Donna Butterfield	-	-	-	-	-	X	X	X	X	O
Kathleen Hagan	X	X	X	X	X	X	X	X	X	X
Karen Holt, Chair	X	X	X	X	X	X	X	X	X	X
Francine Johansen	-	-	-	-	-	-	-	X	X	X
Robert “Bob” Shroder, Vice Chair	-	-	-	-	-	-	-	X	X	X

Legend: X=Present; O=Absent; /=No Meeting

TOPIC	DISCUSSION	ACTION
Call to Order	The meeting was called to order at 1:33 p.m. with K. Hagan, Chair, TISAC presiding.	
Roll Call/Introductions	Member, staff, and guest introductions.	
Presentation	"An Update on the West Maui Hospital Project" by Brian Hoyle, President/CEO of Newport Hospital Corporation. The presentation is attached to these minutes as "Attachment A". The presentation was followed by a Q&A and discussion. B. Hoyle noted current legislation – Senate Bill 1476 and House Bill 1255 (companion). These measures authorize the issuance of special purpose revenue bonds to assist in the construction of West Maui Hospital and Medical Center.	
Meeting Minutes	The minutes of the December 2, 2022 meeting was reviewed and unanimously approved. Public testimony – None.	
Administrator's Report	The Administrator's Report was distributed and reviewed.	
TISAC Bylaws	Continued discussion regarding the removal of Standing Committees listed under Article VII, Committees, Section 3, items a-e and replace with language which allows for "the formation of committees as needed". It was pointed out that Article VII, Committees, Section 1 states: "The Council *may* establish committees and task forces as needed to assist in carrying out its responsibilities". There was emphasis on "may" versus "shall". A motion was made and passed unanimously to form a Task Force to review the bylaws and make recommendations at the next meeting. TISAC members K. Holt, F. Johansen, K. Hagan volunteered to sit on the Task Force. Public testimony - None.	
Member Recruitment	Continued discussion on recruiting a member from/to represent Lanai. The new Executive Director of Lanai Community Health Center was suggested.	W. Nihoa to follow up with the new E.D., Lanai

Discussion of Speakers for 2023 (continued)	B. Shroder expressed continued interested in a presentation from Maui Memorial Strategic Plan; and will follow up with Maui Memorial. B. Shroder suggested hearing from the Department of Health (DOH), Director of Health. RE: Plans for the DOH, mental health, overall goals, major emphasis, directions and priorities. SHPDA to follow up with DOH on this request. K. Hagan mentioned release of the Hawaii State Center for Nursing 2021-2022 Annual Report; will forward a copy to SHPDA to add to the minutes. The report is hereby attached to these minutes as "Attachment B".	Community Health Center,. B. Shroder to follow up Chief Strategic Officer at Maui Memorial. W. Nihoa to request DOH Director to speak.
Meeting Logistics	Members expressed the inability to attend the next TISAC meeting previously scheduled for May 19, 2023. W. Nihoa will survey members to coordinate the next meeting date, the meeting time will remain 1:30 p.m.	W. Nihoa to survey members and coordinate the next TISAC Meeting date.
Announcements/Other Discussion	SHPDA: 2023 Hawaii Healthcare Workforce Summit to be held on September 9, 2023 (Saturday). Register at https://www.eventbrite.com/e/2023-hawaii-health-workforce-summit-tickets-432416568597	
Next Meeting/ Agenda	Date TBD, 1:30 p.m. via Zoom. Agenda: Discuss logistics for an in-person meeting; Update from Task Force on Bylaws; Future Speakers; Member Recruitment.	
Adjourn	The meeting was adjourned at 2:47 p.m.	

WEST MAUI HOSPITAL

Community Presentation

October 17, 2022

VISION

West Maui has no acute care hospital or skilled nursing care facilities and Maui's primary acute care hospital facility, Maui Memorial Medical Center is in Wailuku.

Newport Hospital Corporation (NHC), a California-based healthcare facility developer began the process in 2009 of acquiring the land, appropriate zoning and permits, and the Certificate of Need. The project site is 14.99 acres located in the Master Planned Community of Kaanapalii 2020 in Kaanapali, West Maui.

Phase I will consist of all the required off-site Infrastructure and the West Maui Hospital, a 5-6 bed Critical Access Hospital (CAH) that will be situated on 5.085 acres.

Phase II of the Project Development will consist of a potential Medical Office/Clinic Building + up to 150 Assisted Living Facility (ALF) units all on the remaining 9.908 acres of the West Maui Hospital and Medical Center (WMHMC) site.

The current plan is for the CAH land site to be long term NNN (Net of Property Taxes, Maintenance and Insurance Costs) Ground Leased to the non-profit West Maui Hospital Foundation (WMHF) 501(c)3 starting at approximately $800,000/year. The CAH building will be developed by NHC.

WEST MAUI HOSPITAL AND MEDICAL CENTER TIMELINE

2007 - 2009	Newport Hospital Corporation (NHC) pursues community engagement, site selection, CON Application and hearings. NHC obtains CON Approval for 25 bed Critical Access Hospital (CAH), plus 40 bed Skilled Nursing Facility (SNF
2009 – 2014	NHC continues site planning, preliminary building designs, entitlement processing.
2014 – 2015	NHC purchases the West Maui Hospital and Medical Center (WMHM) site and obtains Entitlements approvals, building and site plans developed for the 25 bed CAH, 40 bed SNF, and 40 unit Assisted Living Facility (ALF) buildings.
2016 - 2019	NHC starts construction and completion of site mass grading and in-ground infrastructure.
2020	Off-site infrastructure construction commenced.
2021 - 2022	Off-site infrastructure continues, all attempts at obtaining private financing have failed due to lack of any State or County financial support. WMHF is now proceeding with an application for USDA financing of the construction of the West Maui Hospital that will be greatly enhanced by State or County financial support.

WEST MAUI HOSPITAL AND MEDICAL CENTER FACILITIES AND SERVICES

West Maui Hospital

A single story, approximately 30,000 square foot licensed Critical Access Hospital that is expected to include:

- 5 licensed acute care beds
- 24-hour emergency department,
- 2-3 operating rooms,
- Radiology (*e.g.*, CT, MRI, X-ray) facilities,
- 24 hour pharmacy
- Laboratory
- Outpatient services

The services and specialties that the Hospital will offer:

- Cardiology
- Family Practice
- Gastroenterology
- General Surgery
- Gynecology
- Internal Medicine
- Orthopedics
- Urology

Medical Offices

One or two Medical Office Clinics to provide physician offices and additional outpatient services for the West Maui Hospital and West Maui Community at large.

Assisted Living Facilities

Up to 150 Assisted Living Units (including up to 30 designated Affordable Seniors Units) that will provide daily meals and other resident services including memory care, recreational/social activities, transportation, and skilled nursing/home services provided by the West Maui Hospital and or other local licensed providers.

LOCATION

The Hospital Facilities will be located on Kaka'alaneo Drive in the 6,000-acre Kaanapali 2020 Master Planned Community in the resort community of Kaanapali, Lahaina, which is centrally located in West Maui.

The site is less than 1,000 feet off of Maui Highway 30 ("Honoapi'ilani Highway"), the major north-to-south road through West Maui. This photograph depicts the location of the Hospital Facilities relative to the highway and neighboring development.

SERVICE AREA

The Foundation's service area is zip code 96761, which includes all of West Maui, and 96767, which is a Post Office box in Lahaina that serves additional local residents and certain residents of the islands of Lanai and Molokai.

PHOTOS

VIEW OF SITE FROM GROUND DURING GRADING 2017

From the middle of the site looking toward the Ocean.

SITE DURING GRADING 2017

Ariel view of the entire site as grading and installation of all on-site infrastructure (site water, sewer and draining systems) were being installed.

ARIEL VIEW OF SITE AT COMPLETION OF GRADING 2018

Site grading and infrastructure are complete and you can see piles of crushed rock are left in areas to allow for finish grading needed for construction of the site roads.

ARIEL VIEW OF KAANAPALI 2020 DEVELOPMENT

Looking toward the ocean from the custom home lots of the Coffee Farms gated community that are part of the 4,000+ acre Master Planned Community of Kaanapali 2020.

WEST MAUI HOSPITAL DEVELOPMENT COSTS

Development Item	Cost
Design & Engineering	$1,500,000
Building Construction	$20,000,000
Onsite Infrastructure Construction	$1,000,000
Offsite Infrastructure Construction	$4,000,000
Utilities Construction / Connection Fees	$500,000
Developer / Construction Management Fees	$500,000
Fixed Equipment	$7,000,000
Moveable Equipment	$2,000,000
Financing Costs + Interest	$1,500,000
Contingency	$500,000
TOTAL	**$38,500,000**

Hawaii State Grant in Aid Request:

Development Item	Cost
Design & Engineering	$1,500,000
Onsite Infrastructure Construction	$1,000,000
Offsite Infrastructure Construction	$4,000,000
Utilities Construction / Connection Fees	$500,000
TOTAL	**$7,000,000**

Newport Hospital Corporation has spent over $20 Million, to date, on the property acquisition, development, all governmental entitlements/CON, building/site planning, engineering, consulting, on/off-site construction and other related legal and financing fees.

HOW CAN THE COUNTY COUNCIL HELP US MAKE THE WEST MAUI HOSPITAL A REALITY?

PROVIDE SUPPORT FOR OUR GRANT IN AID REQUEST TO THE STATE AS FOLLOWS:

1. Draft a resolution of support and submit it to the State Legislators and Governor.
2. Write individual letters of support for the grant in aid request of $7 Million dollars.
3. Encourage the Administration to support this request for the grant in aid.

PROVIDE FUNDING AT THE COUNTY LEVEL AS FOLLOWS:

1. Direct grant for purchase of equipment and/or services.
2. Line item request in annual budget to assist with construction.
3. Provide matching funds.
4. Consider waiver of permit fees legislation.
5. Amend current budget to reallocate funds.

HOW CAN THE COUNTY ADVANCE THE TIMELINE?

1. Encourage the State to expedite all needed permits and waive fees, if possible.
2. Encourage the County departments to expedite permits that are within county control.
3. Where permits are stalled, for any reason, encourage that staff to work with applicant to complete all outstanding requirements.

THANK YOU FOR SUPPORTING CRITICALLY NEEDED INFRASTRUCTURE FOR WEST MAUI

HAWAI'I STATE CENTER FOR NURSING

Connecting Nurses. Transforming Healthcare.

FY 2021-2022 ANNUAL REPORT

A Report to Governor Josh Green and the Hawai'i State Legislature

Annual Report

2022

Hawai‘i State Center for Nursing

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HAWAIʻI STATE CENTER FOR NURSING
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EXECUTIVE SUMMARY

To Governor Joshua B. Green and State Legislators:

In the Fiscal Year 2021-2022 (FY 2022), the State contended with a growing nursing workforce shortage. There are too few licensed practical (LPN) and registered nurses (RN), and as the physician shortage grows, the demand for advanced practice registered nurses (APRN) only escalates. While the reliance on new nurses to meet the State's nursing needs increases, we also find ourselves with a deepening shortage of nurse faculty. Employers are hiring local nurses and new graduates at rates unseen in recent history, yet they still require a large number of travel nurses to cover nursing duties. Meanwhile, more residents utilize nursing services in acute, hospice, and community settings. The State is compromised in its ability to maintain nursing care due to the lack of nurses.

Hawaiʻi State Center for Nursing accomplished a tremendous amount of work aimed at increasing the knowledge about our nursing workforce, identifying strategies to resolve our nurse shortages, and implementing solutions to stabilize and innovate the nursing workforce. Our outputs were many; the work can be categorized in the below themes:

- Improve access and utilization of state nursing workforce data to support nursing recruitment and retention strategies.
- Design nursing recruitment and retention strategies based on local and national best practices and local nursing workforce data.
- Increase knowledge and skills related to evidence-based practice and evidence-based policy in order to adhere to high standard interventions and ensure quality outcomes.
- Maximize academic, practice, government, and private partnerships to yield impact on selected strategies.
- Engage in data-driven and standardized efforts to ensure quality and scalability of strategies and solutions.
- Match funding opportunities to the workforce needs to operationalize solutions.

In FY 2022, the Center sought a change to its license fee structure due to increased cost of business and a stagnant fee structure since 2003. We thank our nursing and healthcare community for supporting our initiative, and our elected officials for supporting our request. With Act 66, SLH 2022, the Center achieved financial stability for years in the future. We will be able to continue our work on behalf of the state. More importantly, these funds enable us to increase our efforts at a time when developing evidence-based strategies and implementing meaningful solutions to our nursing workforce needs is more dire than ever.

As we near 2023, there are clear trends:

- The pandemic's toll, baby boomer retirements, and shifts in our population distribution have caused significant increases in nursing demand coupled with decreased nurse availability. Nursing strategies and staffing models of the past may no longer be relevant today because of these changes. To move towards a stable nursing workforce, we need more research to understand these changes, and we need to rapidly test

and demonstrate the efficacy of new nursing education and employment models. Retention must focus on all points at which nurses leave the workforce, not just in early career and retirement.

- The wellbeing of nurses within the workplace and in their personal lives is a critical component of nursing recruitment and retention.

- Data-driven, standardized statewide initiatives like the Hawai‘i Clinical Placement Collaborative and the Hawai‘i Nurse Residency Collaborative remain valuable and have supported education and practice stability in a time of great uncertainty. The State should leverage its successful programs to achieve additional workforce goals.

- As the saying goes, *many hands make for light work*. Healthcare workforce adequacy is a shared priority and as such, has many vested and interested partners. Solutions should be collaborative and inclusive. Similarly, in the clinical settings, all team members should be encouraged to work to the fullest extent of their education and training to improve patient access to and quality of care.

As in 2021, the need to improve representation in nursing practice, and in nursing workforce strategy, remains. Therefore, the following solutions will be reiterated herein. Hawai‘i needs to improve representation within the nursing workforce, including expanding representation of underrepresented ethnic groups, growing nursing faculty, developing specialty nurses, and enhancing employment prospects for post-acute care nursing. Specific solutions may include:

- Address underrepresentation of persons of Native Hawaiian ancestry, Pacific Islanders, and other ethnic or underrepresented demographic backgrounds in nursing. This may be done by focusing support on academic access, providing cost of living support during academic enrollment, and adapting transition to practice programs to be culturally relevant. Efforts must be accessible in all settings of care, and be regionally accessible.

- Develop and deploy specialty training for practicing nurses to reduce the need for traveler nurses. Instead, grow the capacity for Hawai‘i to sustain its specialty nurse workforce needs. Specialty development in long term care, primary care and in rural settings remains a high need.

- Invest in nursing academia by developing transition-to-practice support for new nurse instructors and faculty, as well as secure funding for the expanded clinical instructor roles and improve faculty salary rates.

- Provide nursing professional development to build understanding about these barriers and opportunities. Build the capacity of nurses to address the state’s needs, together.

- In addition, it became clear that we must double down on the wellbeing of nurses and their colleagues. This includes investing in nursing safe staffing ratios, prevention of violence in the workplace, supporting nurses experiencing moral distress, and improving workload management.

It is with great honor that the Center continues to serve our call to action set forth in 2003. We are committed to convening partners, building trust, delivering outcomes, and supporting innovation to ensure high quality care is accessible to all the people of Hawai‘i.

Respectfully submitted by:

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

Anne Scharnhorst, DNP, RN, CNE
Chair, Advisory Board

The Center's Background

Established by the Legislature in 2003 by Act 198, the Center was founded "to address nursing workforce issues." This legislative mandate guides our endeavors.

Specifically, the Center shall:

1. Collect and analyze data and prepare and disseminate written reports and recommendations regarding the current and future status and trends of the nursing workforce;
2. Conduct research on best practices and quality outcomes;
3. Develop a plan for implementing strategies to recruit and retain nurses; and
4. Research, analyze and report data related to the retention of the nursing workforce.

The Governor appoints an Advisory Board that provides direction and supports accomplishments related to the Center's goals. Additionally, community partners throughout the State participate in implementing innovative programs to meet the needs of Hawai'i's nursing workforce and the community.

The Center is located at the University of Hawai'i at Mānoa Nancy Atmospera-Walch School of Nursing (NAWSON) and reports to its Dean, in addition to being guided by the Advisory Board. The Center currently has five full time staff and two part time staff. The Center achieves progress towards its mandates, mission and vision through statewide collaborative working groups, coalitions, and through direct efforts from the staff.

The Center is supported by the nurses of Hawai'i through the Center for Nursing Fee. With Act 66, Session Laws of Hawai'i 2022, starting July 1, 2022 each nurse will pay $60 upon the issuance of new licenses and at each license renewal period. This is a $20 increase in biennial nurse license fees for licensed nurses which was established by Act 198, SLH 2003. These funds are deposited into a "special fund" account for Center use. In addition, the Center receives support for programs from our in-state schools of nursing, health care facilities across the state, and through grants and funding opportunities from state and national partners. These funds comprise approximately half of the revenue of the Center and support expansion services and programs.

2022 Priorities

Fiscal Stability and Nursing Workforce Supply Survey Responses

For the Fiscal Year 2021-2022, the Hawai'i State Center for Nursing Advisory Board continued their priority established on January 30, 2021 to improve the financial stability of the Center.

In January, 2021 it was noted that starting in 2021, the expenses of the Center will begin to exceed the revenue. The root causes for the change in financial position were noted to be inflation and the increased cost of doing business. At this time, the Advisory Board formed a Subcommittee on Finance and Fees and to work on preparations to pursue an increase in licensing fees for the 2022 legislative session. The following Advisory Board members agreed to serve on the committee: Bonnie Castonguay, Rose Hata, Doreen Nakamura, Arthur Sampaga, Jr., Anne Scharnhorst. The newly formed committee agreed to meet regularly each month beginning in March.

The Subcommittee on Finance and Fees met regularly starting in March 2021. This Subcommittee found that the Center had diversified its revenue sources needed to maintain and grow staffing and programs. However, while these efforts support emerging issues and topics, an overabundance of grant funds detract from the Center's ability to work towards our mission and ultimate purpose. Nurse-driven fees sustain the Center's work to meet our legislative

mandates and our ultimate goal to support public safety by ensuring a robust nursing workforce across the Hawaiian Islands. The Center found that though Hawai'i has seen inflation in our cost of living, including a 176% increase for single family homes and 62% increase in minimum wage, had never been an increase in license fees. The Subcommittee recommended to the Board that the Center seek to increase the license fees from $40 per biennium to $60 per biennium. This fee increase was determined to help us sustain the staffing needed to maintain our programs and meet our mandates.

On May 19th, 2021 the Advisory Board received information about the status of the nursing workforce supply survey fielding. During the 2021 fielding period of the Nursing Workforce Supply Survey, PVL experienced technical errors on the nurse license renewal website due to a transition to a new vendor. As a result, the Center's survey link was not provided to nurses as planned and tested. If the error had not been corrected, for the first time in 14 years, the survey response rate would have been too low to produce valid results that were accurately representative of the state's nursing workforce. To rectify the problem, the Center mailed a postcard to all nurses licensed in Hawai'i asking for their participation in the survey. We also worked to improve general awareness of the survey by sending email newsletters and making several social media posts about the survey. Additionally, the Center worked with DCCA to send the survey link via email to all nurses who had completed the license renewal process. The subcommittee also determined that requiring nurses to complete the survey during license renewals would ensure the successful fielding of the survey in the future. Due to the challenging fielding period in 2021, the Advisory Board recognized the need to improve the nursing workforce survey fielding process and response rate.

On September 21, 2021, the Advisory Board committed to these activities as priorities for the FY2022 period by approving a draft bill, formulated by the Subcommittee on Finance and Fees, which proposed increasing the center for nursing fees collected with nurse license fees from $40 to $60 per biennium and making completing the nursing workforce supply survey a requirement.

The Senate introduced SB2274 and the House introduced HB1594. The bills, collectively, were heard by committee eight times in the legislative session. SB2274, SD2, HD1, CD1 was passed into law with Act 66, SLH 2022, enacting the change to the nurse license fees. The survey requirement was removed from the bill language during the conference committee; however, the Hawai'i Board of Nursing has committed to working with the Center to improve response rates. Their actions in response to the initial survey fielding problem yielded enough survey respondents to be representative of the state's nursing workforce and preserve the validity of the study's findings. The Board's commitment to future fielding is an invaluable collaborative effort that has ensured that the state has access to the information gleaned from this Nursing Workforce Supply Survey.

HAWAIʻI STATE CENTER FOR NURSING
Connecting Nurses. Transforming Healthcare.

Dear Hawai'i Nurses & Legislators,

Thank You

You helped to ensure that the Hawai'i State Center for Nursing's work continues into the future.

Act 066, SLH 2022 was signed into law by Governor Ige on June 17, 2022. This act increases funding for the Hawai'i State Center for Nursing. Starting July 1, 2022, every other year nurses will pay an increase in center for nursing fees from $40 to $60 in their nurse license fees.

These fees will support expert staff and programs to support nurses. Programs and initiatives include:

- Workforce Research
- Evidence-based Practice
- Continuing Nursing Education
- Nurse Residency Program
- Centralized Clinical Placement Collaborative
- Nursing Leadership Engagement
- Policy and Advocacy

Sincerely,
The Hawai'i State Center for Nursing

Want to learn more about the Center? Visit our website or subscribe to our newsletter!

Nursing Workforce Research

Overview and Research Steering Committee

The primary goal of the Center's workforce research activities is to collect, analyze, and disseminate data about the current status, changing trends, and likely future of Hawai'i's nursing workforce. Conducting workforce research is one of our legislative mandates and has resulted in the Center being the owner and steward of the most comprehensive and detailed data about nurses in the state.

The Center's workforce research activities are guided in part by our Research Steering Committee. The committee is composed of 10 individuals who teach or employ nurses or who are involved in health workforce development. The committee convened in October 2021 and provided guidance to the Center's researcher about how to improve the impact and usability of our data. As a result of the steering committee's feedback, we prioritized the early release of our data tables and infographics for their informational density and ease of use. We also increased our production of short reports that provided deeper coverage of topics important to our partners.

In total, the Center produced 15 reports, infographics, and webinars related to nursing workforce data during FY 2022.

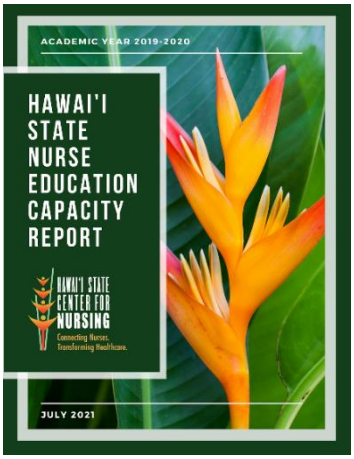
AY 2020 Hawai'i Nurse Education Capacity Survey

Each year, the Center conducts a survey of all in-state schools of nursing to assess enrollment demand for nursing education, schools' capacity to educate an adequate number of new nurses to sustain the workforce, and challenges that schools must address. We collected data about academic year (AY) 2019-2020 between February and May of 2021 and we released the final report in July.

The primary focus of the narrative of the report was schools' early and rapid responses to the pandemic including the termination of in-person classes and live clinical experiences.

Key findings from the report indicate:

- Enrollment demand for pre-license nurse education programs at all levels of practice (LPN, RN, and APRN) exceeded schools' capacity to admit students. On average, pre-license programs received three times as many applications than they had seats for new students.
- Local schools of nursing graduated 500 students, of which 80% were academically prepared for practice as RNs who comprise the largest subset of all nurses and the healthcare workforce.
- The statewide full-time nurse faculty vacancy rate increased from 7% to 16%. The majority of schools cited difficulty recruiting full-time faculty and insufficient funds for faculty compensation as two of their major challenges.



2021 Nursing Workforce Supply Survey

In each odd-numbered year, the Center conducts its biennial Nursing Workforce Supply Survey. The survey produces the most comprehensive and detailed dataset of characteristics of nurses employed in Hawai'i. The survey is completed by nurses when they

renew their licenses between April and June. The survey asks nurses to report on a wide range of information including demographic, education, and primary practice characteristics. The survey also collects information from nurses about their intention to leave their current position or the nursing profession.

The Workforce Supply Survey is the foundation of most of the Center's workforce reports and infographics. Some of our focus on the entire state. These include:

- Lifelong Learning Infographic (released September 2021) which details the numerous ways that Hawai'i's nurses commit themselves to continuing competency and professional development.

- 2021 Hawai'i Nursing Workforce Supply Survey Method (released October 2021). This is a technical report that describes the data collection, sample, margins of error, and count estimation method.

- Statewide Data Tables by License (released October 2021). These tables provide detailed frequency tables for nearly every variable collected on the Workforce Supply Survey for LPNs, RNs, and APRNs in the state.

- 2021 Hawai'i Nursing Workforce Supply Report (released December 2021). The report provides an overview and discussion of the state of the LPN, RN, and APRN workforces in Hawai'i. The report's narrative discussed some of the factors that have contributed to the current nursing workforce shortage in Hawai'i including the COVID-19 pandemic, constraints on education capacity, and the state's high cost of living.

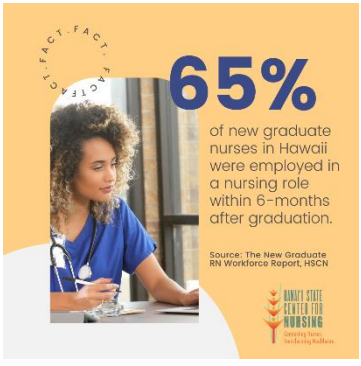
- Infographics by license for LPNs, RNs, and APRNs (released December, 2021). These colorful documents present key characteristics of Hawai'i's nurses at a glance.

The Workforce Supply Survey also allows us to produce detailed special reports that focus on smaller segments of the workforce or that focus on a narrow issue impacting nurses in Hawai'i.

- Ensuring the health of our Native Hawaiian population requires us to address barriers to care. One of those barriers is the underrepresentation of persons of Native Hawaiian ancestry in the state's workforce, especially at the APRN/primary care level of practice. We offered a webinar (released August 2021) that addressed the extent of and reasons for the underrepresentation of Native Hawaiians in nursing.

- Because of a growing concern about the wellbeing of healthcare workers across the country, we added questions to the Workforce Supply Survey in 2021 that focused on nursing wellbeing. We summarized data from these questions into a special report, Wellbeing of Hawai'i's Nurses During the COVID-19 Pandemic (released December 2021). We also released an accompanying infographic and presented the findings at a webinar we offered for continuing nursing education credit.

- To address many frequently asked questions about graduates of Hawai'i's nursing programs, we released a short report on The New Graduate RN Workforce (released April 2022). We summarized the key findings in an infographic and discussed them at a webinar.



Workforce Reports: Click here for more information

Best Practice and Quality Outcomes

In response to the mandate *to conduct research on best practices and quality outcomes*, the Center maintains two robust programs: Evidence-based Practice (EBP) Program and Nursing Professional Development Program. The EBP Program is one of the longest-standing programs of the Center, starting in 2009. This program includes workshops for clinicians and faculty, promotion of EBP to nurses and healthcare leadership. The Nursing Professional Development Program facilitates continuing competency activities, convenes workgroups related to simulation, academic progression, nursing professional certification, and facilitates workshops. Outcomes of the FY 2022 efforts are as follows.

Evidence-based Practice

Clinician Evidence-based Practice (EBP) Workshop and Internship

- The 2020 Clinician EBP cohort, which was held entirely online due to COVID-19 restrictions, finished in August 2021 with three teams consisting of 14 participants. Each of the teams completed the Internship at varying points in the EBP process with two teams ready to begin piloting their practice change. Topics included fall reduction on an adult in-patient behavioral health unit, decreasing restraint use on an in-patient child and adolescent behavioral health unit, and increasing safety and decreasing agitation of traumatic brain injury patients.
- The 2021 Clinician EBP Internship series began in June. Due to the COVID-19 Delta surge, the second internship meeting scheduled for August 2021 was postponed and the entire internship series was shifted; therefore, this cohort finished in June 2022. Three teams consisting of 12 participants attended with topics for clinical changes including increasing successful intravenous (IV) insertion rates, music therapy to reduce pain and length of stay in the postoperative period, and decreasing falls on an adult, in-patient oncology unit.
- Funding from the Hawai‘i Department of Labor and Industrial Relations (DLIR) was received to fund neighbor-island participants for the 2021 cohort. We were able to offer free tuition to two teams from Hawai‘i Island. The seven participants represent Hilo Medical Center and North Hawai‘i Community Hospital. Participants from North Hawai‘i Community Hospital were unable to complete an EBP practice change due to staffing adjustments.
- The Clinician Workshop and Internship series is on hiatus for 2022. The Center’s EBP team is currently strategizing with key stakeholders to develop a plan to move EBP forward statewide.

EBP Educators (previously EBP Champions)

- The EBP Educators continued meeting throughout FY 2022. This allowed for brainstorming and strategy sharing between schools of nursing across the state. Our educators collaborate to overcome barriers faced when integrating EBP into curricula.
- Educators continued to review the Johns Hopkins EBP tools that were introduced at the 2018 Clinician EBP Workshop. Many of our schools of nursing are electing to integrate these tools into their curricula. Educators also began a journal club where they read, appraised, and discussed articles related to best practices for teaching EBP.

Participants at the Educator EBP Workshop presenting after a group activity.

- DLIR funding was received to offer an Educator EBP Workshop in partnership with The Ohio State University, Helene Fuld Health Trust National Institute for Evidence-based Practice in Nursing and Healthcare. This workshop was originally slated for 2021 but, due to COVID-19, was postponed to March 2022. The workshop was a success and included over 60 nurse educators from clinical and academic settings. A key outcome from this workshop was the group's request to continue collaboration between clinical and academic nurse educators. Plans are underway to convene these two groups together on a regular basis.

EBP Collaborative

- The need for a website-based repository was identified to help organize EBP projects and make them more accessible and user-friendly. We are currently in the selection process for a website design company to develop the repository.

- This Collaborative continues to allow for the dissemination of EBP project process and outcomes across healthcare organizations. We meet several times throughout the year to discuss how a culture of EBP is being created for working nurses across the state.

Evidence-based Practice: Click here for more information

Nursing Professional Development

Continuing Nursing Education

The Center continued offering continuing nursing education (CNE) contact hours throughout FY 2022. Thirteen activities resulting in 1,583 contact hours were provided throughout FY 2022, serving 279 nurses. Since the program began in 2020, 45 number of activities have been provided.

- The Center began partnering with community organizations to increase the breadth of topics and reach of the Center's CNE program. Joint provider partners include Hawai'i Public Health Institute, Hawai'i Department of Health, The Hawai'i Pacific Basin AHEC and the University of Hawai'i at Mānoa Nancy Atmospera-Walch School of Nursing.

- The Center has found the CNE program is a wonderful tool to give nurses credit for the hard work they are doing in our already existing programs such as our Evidence-based Practice Internship Program.

- The CNE program also functions to disseminate nursing workforce research findings. Research-related CNE topics included the representation of Native Hawaiians in the Nursing Workforce, nurse wellbeing during the COVID-19 pandemic, and a look at the new graduate RN workforce in Hawai'i.

- Other CNE topics included engaging students in virtual simulation, the importance of national nursing certification, preventing falls on an acute care, adult, oncology unit, and youth mental health.

- In addition to providing continuing nursing education, the Center refined it's protocols and procedures to increase efficiency and streamline workflows. The Center developed policies intended to enable broader collaboration with joint providers. The goal is to expand access to high-quality nursing continuing professional development for nurses across the state and across specialties, settings, and roles.

- In July 2021, The Center submitted a self-study to apply for reaccreditation by ANCC. We were reaccredited as a CNE provider through 2025.

Continuing Nursing Education: Click here for more information

Hawai'i State Simulation Collaborative

- The Hawai'i State Simulation Collaborative (HSSC) continued to meet throughout FY 2021-2022. Simulation coordinators and nurse educators across academic and clinical settings came together to discuss challenges to simulation education and brainstorm solutions.

- The collaborative is currently working towards developing a financially feasible way to obtain updated mannequins for our academic partners, especially at the community college level.

- Webinars were provided to our partners on topics that included engaging students in virtual simulation, in situ simulation safety, and facilitating simulation to enhance clinical judgement. Participation was open to all HSSC members and the healthcare community at large. There were over 80 participants across the three events.

State Simulation Collaborative: Click here for more information

Success Pays Multi-Facility Cohort

- In FY 2022, six nurses enrolled in the Hawai'i Success Pays Multi-Facility Cohort, two submitted applications for ANCC's authorization to test for a certification exam and one successfully completed their certification exam.

- The focus in FY 2022 has been to increase interest and enrollment in the Success Pays program. A webinar featuring ANCC's Senior Certification Outreach Specialist was held in October 2021. This webinar focused on the importance of certification to the individual nurse and the importance of a highly certified workforce to an organization.

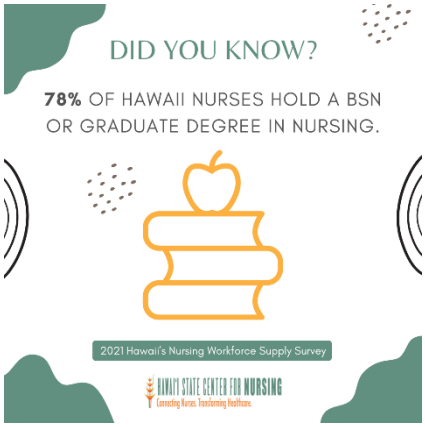
- COVID-19 created test scheduling constraints, especially for our partners on the neighbor islands where many of our smaller facilities are located. Testing is now available from home but the major barrier has been the technology requirements to register for this option.

- We reconvened our partners to determine if meeting ANCC's minimum cohort of 17 was feasible in 2022. Our partners were able to commit enough nurses to get certified to meet the minimum. Our goal is to have at least 17 new certification exams taken by June 2023.

Success Pays: Click here for more information

Hawai'i Academic Progression in Nursing (APIN)

- The Center developed a Lifelong Learning infographic that highlights how Hawai'i nurses are highly educated and dedicated to professional development.



- The Center's 2021 Supply Survey found that Hawai'i's nurses are 78% BSN+ prepared. This is compared to 59% nationally (Campaign for Action, 2021).

- The Center's 2021 Supply Survey also found that 7% of nurses in the workforce are also enrolled in nursing degree-leading programs.

- The Center continues to convene academic and employer nursing partners to discuss ongoing and potential academic-practice partnerships that provide opportunities for academic progression of our nurses.

Academic Progression in Nursing: Click here for more information

Recruitment and Retention

Responding to the mandate *to develop a plan for implementing strategies to recruit and retain nurses*, the Center aims to develop plans to address priority areas based on state workforce research and national best practices, continue nursing student clinical placement optimization through the Hawai'i Clinical Placement Collaborative (HCPC), and continue new graduate nurse transition to practice efforts through the Hawai'i Nurse Residency Program (HNRP). The Center explores emerging needs through the frequent convening of stakeholders including nurse executives, nursing deans and directors, as well as industry representatives.

Nurse Leaders Hui

The Hawai'i Nurse Leaders Hui is the collective of nurse executives and deans and directors of schools of nursing who meet to discuss relevant topics related to nursing recruitment and retention. Academic representatives met in November 2021 to identify strategies to address the faculty and instructor shortage in this state. Brainstorming items from this meeting prioritized statewide faculty transition to practice and just in time training, increasing academic-practice partnerships to optimize clinical access and develop joint-partnerships, and addressing faculty salary and compensation. The Nurse Leaders Hui met in December 2021 and prioritized the topics of academic capacity, specifically faculty shortages and clinical placement capacity; as well as nursing wellbeing and resilience as factors impacting retention.

Hawai'i Nurse Residency Program

Hawai'i Nurse Residency Program Curriculum

In response to partner requests, the Center engaged both Hawai'i Nurse Residency Program (HNRP) partners and other healthcare leaders. As a result, the Center formed the Hawai'i NRP Models Sub-committee and the APRN Transition to Practice Initiative Committee to review available tools and models for nurse transition to practice support and inform the expansion of transition-to-practice support in Hawai'i.

The Center worked to reduce the cost of new tools for Hawai'i NRP partners through vendor negotiation and the acquisition of grants. This produced an expected cost saving of $150,000 across partners and enabled the Center to recruit new partners in 2022. Ongoing annual savings of approximately 40% will improve the overall cost reasonableness of the Hawai'i NRP and make it possible for smaller organizations to implement NRPs and sustain them in the future.

The new vendor, HealthStream, LLC started providing services in 2020 and worked to onboard 10 hospital partners during 2021 and 2022.

- The transition to the new platform and tools has allowed partners to gain:
    - Access to evidence-based curricula which aligns to Quality and Safety Education for Nurses (QSEN) pre-licensure competencies,
    - Comprehensive Preceptor training, and
    - Advanced cohort data and analytics.

  The new curriculum also enables employers to offer specialty training to new graduate nurses, which helps employers meet the specialty nursing needs well documented in the 2019 HAH healthcare workforce demand survey.

- The new tools will continue to improve usability and standardization of quality across the state and reduce the human resources required for facilities to provide NRP support and training.

The Hawai'i Board of Nursing formally accepted the new HNRP curriculum in 2021 as a qualifying activity to meet the continuing competency requirements for nurse licensure.

Hawai‘i Nurse Residency Program Performance

The Center expanded the Hawai‘i NRP Collaborative to every county in the state, reducing the current gap in access to transition-to-practice support and nurse residency programs on neighbor islands.

- Funding assistance helped to expand HNRP to the county of Kaua'i. Kaua'i Veterans Memorial Hospital, a member of the Hawai‘i Health Systems Corporation (HHSC) a Critical Access Hospital, began its first NRP cohort in the summer of 2022.

- The HNRP expanded programs on the Island of Hawai‘i, increasing access for new graduates in the county.
    - North Hawai‘i Community Hospital began its second NRP cohort in 2022.
    - Kona Community Hospital, a member of the Hawai‘i Health Systems Corporation (HHSC) joined the HNRP and launched its inaugural NRP in 2022.
    - Partner Hilo Medical Center initiated a long-term care/post-acute cohort, making it the first NRP in the state in a community-based care setting.

- Maui Memorial Medical Center more than doubled NRP enrollments in its third year of HNRP operations in 2021.

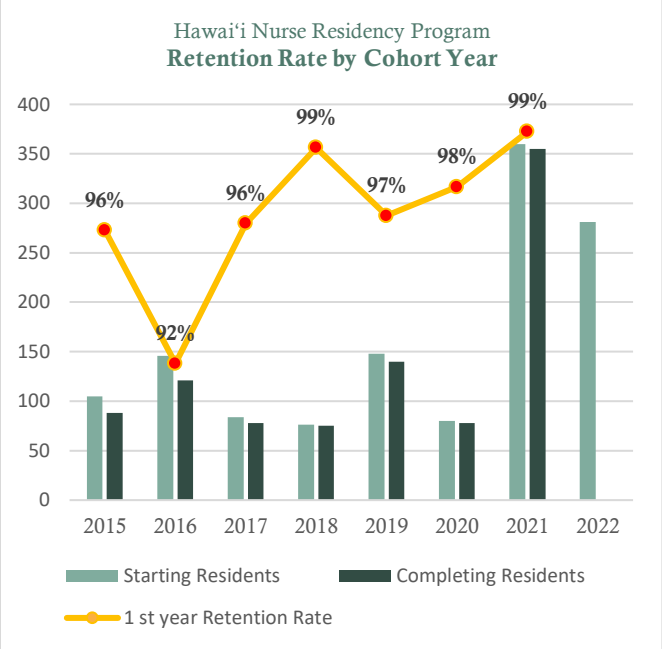


Figure 1 Retention Rates by Year (7 years)

- In 2022, 99% of residents who began an NRP in 2021 completed their respective programs, despite the additional pressure associated with the COVID-19 pandemic. These local retention rates are far higher than national new graduate retention rates which sharply declined to 73% (NSI Nursing Solutions, Inc., 2022)[1].
- More than 1,666 new graduate nurses have participated in HNRP partner programs, with more than 1,554 completing or still participating in HNRP programs. Hawai‘i organizations participating in the HNRP average a retention rate of 97% (7-year average) of their nurse residents.

- HNRP's new graduate nurse enrollment in 2021 increased by 351% from 2020. Enrollments in 2022 decreased by 28% compared to 2021; however, it is expected to equal FY 2021 enrollments by the end of 2022. Nursing shortages and critical hiring needs which have been exacerbated by the pandemic remain leading

[1] NSI Nursing Solutions, Inc. *2022 NSI National Health Care Retention & RN Staffing Report*.; 2022:10. Accessed May 16, 2022.

drivers of the increase in NRP enrollment in during FY 2022.

We will continue to strive to increase participation in the HNRP in FY 2023 to improve access to transition-to-practice support across the state, particularly for Critical Access Hospitals, long-term care and post-acute facilities, and in other community-based healthcare settings.

COVID-19 Response

Early pandemic response resulted in lower hospital census and reduction or slowing of nursing recruitment efforts. However, all of the HNRP partners reported the resumption of NRP programs and partners reported rapid increases to the hiring of new graduates in FY 2022.

- Some partners experienced delays to program administration in 2021; nonetheless, partners prioritized NRP programs and graduation as soon as COVID conditions improved.
- Partners adjusted the educational components of the residency training to ensure adherence to social distancing requirements and assigning cohorts of nurses to protect fragile patients and facilitate contact tracing.
- All partners reported providing additional mental health support for nurse residents during the COVID-19 pandemic.
- For many partners' programs, the overall duration of NRPs was extended and many residents' graduations delayed due to the pandemic.
- Nearly all partners reported increased hiring of new graduate nurses in FY 2022, citing critical staffing gaps due to COVID. In addition, partner facilities reported an increased need for transition-to-practice support for pandemic new hires and incumbent nurses transitioning to new roles due to COVID-related staffing pressures. This led to an increase in overall new graduate enrollment in NRPs.
- The HNRP programs may continue to be affected by COVID-19 into 2022.

Nurse Residency Program Extramural Funding Assistance

The Center was generously awarded a two-year grant in 2021 to support nurse residency programs in Hawai‘i. As a result of this funding, the HNRP saw a 75% overall increase in hospitals with residency programs for new graduate nurses in Hawai‘i, including a growth of 350% on neighbor islands by the close of the grant in September 2022. HNRPs integrated standardized, evidence-based critical opioid education for the first time, and led to a doubling of new nurse access to NRP entry-to-practice support.

Hawai‘i Department of Health Opoid Training Grant

On May 1, 2021 the Center was awarded a 15 month grant from the Hawai‘i State Department of Health, entitled "Hawai‘i Nurse Residency Program Enhancement" The Opioid Training Project grant assists the HNRP partners to transition to the utilization of HealthStream tools to support Nurse Residency Programs (NRPs) in Hawai‘i. In addition, the grant supports the delivery of standardized, evidence-based opioid education to new graduate nurses and incumbent nurses training to be preceptors as part of HNRP programs.

The Opioid Training Project aims to:

- Increase the number of trained new nursing professionals on evidence-based patient opioid practice standards;
- Increase the number of trained expert nursing professionals on evidence-based patient opioid practice standards;

- Enable hospitals to meet individual and community health needs regarding opioid best practices and care models; and

- Provide current and evidence-based opioid training content to increase healthcare provider knowledge and utilization.

Grant Outcome Highlights

By the close of the grant in September of 2022;

- Twelve Hawai'i hospitals started NRP cohorts which included evidence-based opioid education modules.
- Funding covered 80% of all training costs partners incurred for enrollments into Preceptor Pathway and Nurse Residency Pathway and opioid training during the period.
- Enrolled 418 expert nurses in preceptor training and evidence-based opioid education modules over 24% of enrollments on neighbor islands.
- A total of 489 new graduate nurse residents were enrolled into training during the grant period. Of those, 178 (36%) reside and work on neighbor islands.

The Opioid Training Project is expected to continue in FY 2023 with modifications to include additional substance use and abuse training.

Nurse Residency Program: Click here for more information

Hawai'i Clinical Placement Collaborative

Hawai'i Clinical Placement Collaborative (HCPC)

- The Center facilitated four regular meetings on a quarterly basis during FY 2022 for clinical and education coordinators and steering committee members. In addition, the Center conducted 12 specialty topic meetings for participating program partners and the larger clinical placement community as part of the Center's COVID-19 response.

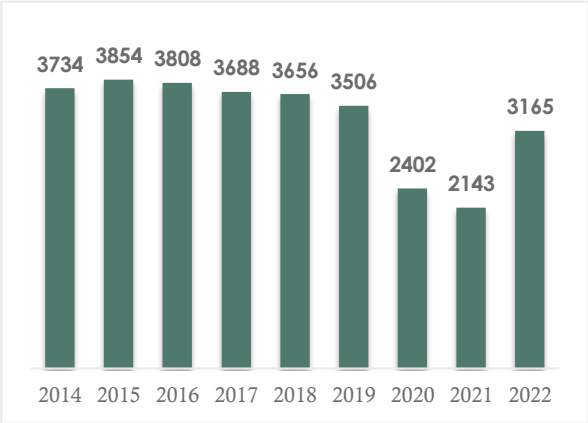


Figure 2 Total HCPC Student Clinical Placements by Year

- The Center provided two online training sessions for clinical partners, and academic partner coordinators, each, to ensure users are prepared and confident using the Centralized Clinical Placement System (CCPS) 2.0 system. We provided two topical training webinars during FY 2022 for HCPC partners to enable partners to stay abreast of CCPS 2.0 system changes and upgrades.

- Using data mined from CCPS 2.0, the Center developed custom partner reports for clinical facilities and schools, to improve resources available for partner planning and reporting. Custom clinical placement reports were issued to partners for the fourth time in FY 2022.

HCPC Performance

- During FY 2022, HCPC placed a total of 3,165 discrete student clinical placements using the CCPS 2.0 system, effectively streamlining the placement process for the pre-licensure and graduate nursing program students.

- Six schools of nursing from across the state placed pre-licensure nursing students in 2,099 clinical

rotations at 28 different hospitals and clinical facilities.

- Partners placed 286 students into one-on-one preceptor-led clinical rotations for students in pre-license programs and 44 students into APRN nursing programs.

- HCPC experienced an overall gain of 1,022 clinical education placements, an increase of 32.29% from FY 2021.

Department Type	Total Student Cohorts	Total Student Preceptors 1:1	Est. Total Student Hours
Adv. Preceptor/Mentor	0	44	31,010
Clinic	35	44	27,151
Critical Care	18	33	22,546
Emergency Department	0	38	21,498
Medical/Surgical	966	93	248,074
Obstetrics	724	11	38,096
Pediatrics	552	1	26,145
Peri-Operative	2	29	11,451
Post-Acute	156	0	8,437
Psychiatry	140	8	20,783
Specialty	40	3	5,422
Telemetry	202	26	58,135
TOTAL	2835	330	518,748

Figure 3 Student Hours by Department in 2022

- In 2022, the HCPC collaborative clinical partners facilitated over 518,748 hours of clinical education through CCPS clinical placements. Of those hours, 31,101 were APRN level student placements.

- Placements for preceptorships accounted for 175,011 hours of clinical education in FY 2022. This is an increase of 20.91% from FY 2021.

- The gain in both cohort placements and 1-to-1 preceptor placements indicates some recovery of clinical placement availability and a stabilization of access to clinical education due to the COVID-19 pandemic impacts on Hawai'i's health systems and academic institutions during 2020 and 2021.

- Despite the gains, placements remain at a deficit of 341 clinical placements from those during pre-pandemic 2019.

COVID-19 Response

Many facilities temporarily suspended or halted clinical opportunities for students due to the COVID-19 pandemic. Reasons for the changes included social distancing requirements, isolation, and quarantine measures, preservation of limited surge personal protective equipment, the conservative protection of high-risk patients, low patient census, and unit loss due to the management of active COVID-19 patients.

In an effort to help the HCPC prepare for and negotiate COVID-19 and its impacts on clinical placement availability, the Center established weekly meetings for School and Facility coordinators beginning on March 13th, 2020. In FY 2022, meetings began to be held on a monthly basis as the clinical education environment stabilized. The purpose of the meetings is to support efforts to maintain quality nursing education programs, provide an opportunity for our partners to discuss the implications of COVID-19, communicate to the clinical placement community, stay abreast of policy and operational changes, and strategize short- and long-term mitigation plans, share resources. HCPC COVID-19 activities and outcomes included:

- Collaboration for the balanced distribution of clinical placements across partners to ensure equal access to critical education opportunities;

- Production of bi-weekly reports which included policy updates and interpretation, clinical and educational publications and resources, upcoming webinar and training opportunities, and clinical education partner updates;

- The development of alternate clinical placement opportunities;

- Dissemination of resources and best practices for the transition to virtual teaching and the increased use of simulation for clinical education;

- Collaboration for the development of critical clinical placement plans and policy;
- Maximization of student and faculty participation in Surge Recruitment Surveying;
- Establishment of minimum COVID-19 education requirements for clinical placement participation;
- Establishment of student management controls and communication plans across the academic and facility continuum to enable adequate and timely contact tracing efforts; and
- Leveraging of Center policy activities to support critical nursing education activities and the preservation of the nursing workforce pipeline, which included license waivers, travel exemptions, access to NCLEX testing, and Hawai‘i BON authorization.

COVID-19 will continue to have significant effects on our health systems, communities, and educational institutions and will continue to have impacts on nursing clinical education into FY 2023. The Clinical Placement Collaborative will continue its efforts to minimize the disruption to nursing clinical education and increase access to clinical education opportunities and ensure safe and responsible clinical rotations.

Clinical Placement Collaborative: Click here for more information

Improving Visibility of and Advancing the Center and Hawai'i Nursing Initiatives

In response to the mandate *to research, analyze and report* data related to the retention of the nursing workforce, the Center aims to improve the visibility of the Center's work and initiatives and to utilize key partners to amplify reporting of outcomes. Through enhanced visibility of its programs and initiatives, the Center believes that the public, policy makers, and nursing and health care leaders will be better equipped to make decisions to enable nurses to meet the health care demands of today and the future.

Center for Nursing Strategic Initiatives

The Center leads work on a number of nursing workforce initiatives. These initiatives engage the nursing community, identify needs in our state, and identify solutions to help our state meet these needs.

Center Advisory Board Finance and Fees Subcommittee

The Center Finance and Fees Subcommittee met three times in FY2022, on July 2, August 6, and October 1, 2021. In September 2021, the Subcommittee proposed draft legislation to the Advisory Board, which was formally approved on September 21, 2021. This draft legislation was introduced by Representative Johanson with HB 1594, and by Senator Baker with SB 2274. The Subcommittee also produced two documents to support the basis for the draft legislation. An information brief and an infographic on the Center's impacts, to date. These documents are posted on the Center for Nursing License Fees – a 2022 Legislative Initiative webpage on the Center for Nursing's website. On June 17, 2022, Governor David Ige signed Act 66 into law, increasing the center for nursing fees from $40 to $60 per biennium.

Finance and Fees Subcommittee: Click here for more information

Hawai'i Chief Nurse Officer Collective

Starting in August 2021 with the precipice of the COVID-19 pandemic's first Delta surge, chief nursing officers in the state requested regular phone calls to enable information and resource sharing, efficient access to state updates, identify trends and engage in anticipatory planning, and facilitate communication among nurse leaders. The calls started as weekly calls, and continue today. These calls occur every other week in periods of patient surges or staffing crisis and lessen in frequency as urgency declines. Fifty-seven nurse leaders are included in these calls.

Outcomes include informing the Healthcare Association of Hawai'i of specific nursing and healthcare staffing needs that supported FEMA staffing requests, sharing of staff to prevent workforce blackouts, engagement in crisis standards of care education and organizational strategy. This collective also created a position statement in support of community vaccinations. As a result of this effort, the Center coordinated a food donation campaign to boost nurse and healthcare worker morale. This collective also requested special attention to two critical topics affecting recruitment and retention, specialty development and wellness. The Center launched a specialty nurse needs assessment and developed the Wellness, Recruitment, and Retention task group in response.

Specialty Needs in Nursing

The Center conducted a needs assessment to determine the specialties in nursing that are most critically in demand, and the volume of training needs, statewide. The survey was completed in Winter 2022 by 14 nurse leaders from 11 distinct healthcare organizations across all islands and from diverse settings, and systems. The Assessment of Specialty Nurse Needs for Hawai'i found that there is significant need for specialty development for incumbent nurses. Critical Care-ICU, Perianesthesia and Perioperative specialties, Emergency Room, and Behavioral Health

are the specialties with the greatest needs across the state. The Center further concluded that the establishment of a multi-organization specialty-transition-to-practice program requires organizational commitment, coordination and agreement on curriculum, clinical and simulation experiences, logistical agreements related to sharing of nurse experts as prospective educators, and other considerations.

The Center held a convening of statewide partners to share the outcomes of the needs assessment. Nurse leaders conveyed that their organizations could not wait to develop a statewide approach to address the highest priority areas, and therefore developed strategies to meet their needs, internally. Discussion about the needs assessment findings and changes in the current environment found that:

- High priority needs are being addressed,
- School of Nursing partnerships can help,
- Specialty development for primary care and post-acute care persist, and
- Our collective voice to name needs in nursing and healthcare is more important than ever.

Wellness, Recruitment, and Retention Task Group

Findings from the 2021 Nursing Workforce Supply survey and research conducted by Dr. Holly Fontenot, UH Manoa Nancy Atmospera-Walch School of Nursing faculty, identified concerning data related to nurse wellness, including that approximately one in four nurses felt so stressed out at work that they considered leaving the nursing profession. Similarly, members of the CNO Collective identified a grave concern for the nurses and healthcare workers within their organizations, and a need to support their wellbeing overall, and within the workplace. Center staff and key stakeholders included members of the CNO Collective, the Hawai'i Board of Nursing, representatives from nursing professional organizations, representatives from nursing professional bargaining groups, and advisory board members and staff of the Center joined to describe the current state of recruitment, retention, and wellbeing in the nursing workforce, describe factors that impact recruitment, retention and wellness using literature, local data, and other sources, and identify evidence-based solutions to address the challenges identified.

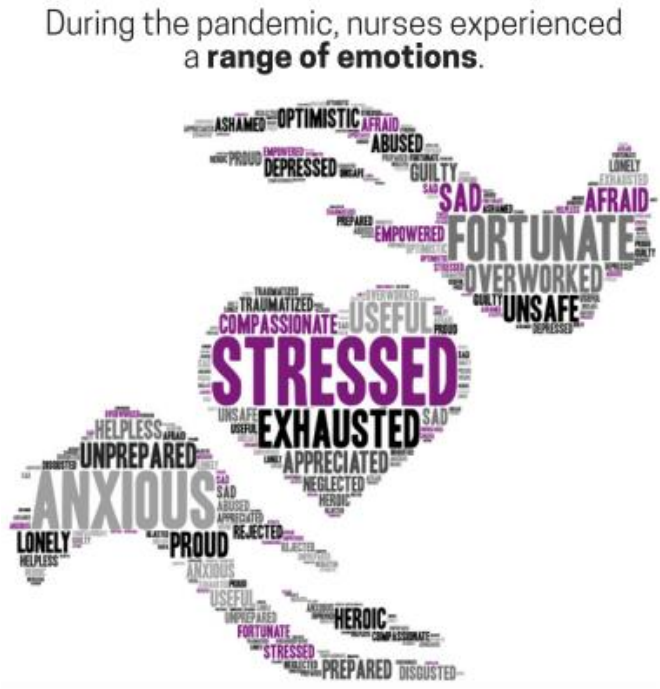


Image source: Hawai'i State Center for Nursing. (2021)

The Task Group identified key areas which impact recruitment, retention and wellness, including education capacity, licensing and onboarding, benefits and compensation, workload, workplace environment, workplace safety, and burnout. The Task Group continues to work on identifying solutions that will meaningfully address the challenges identified.

Nurse Faculty Shortage

In late summer of 2021, nurse faculty leaders across the state sounded the alarm that they were experiencing greater faculty shortages than even the academic year before. Hawai'i-based School of Nursing Deans and Directors met with the Center to quantify the change in the environment, determine new faculty staffing

needs as a result of the change in the environment, and determine solutions that would help address the needs. As a result of this work, school of nursing leadership identified training products to establish a training pathway into nursing faculty positions including Just-In-Time training for new clinical instructors, professional development for experienced faculty, and certificate based and graduate education in nursing

emphasizing nursing education. In addition, unmet lecturer and faculty needs were quantified.

The Center submitted multiple proposals for funding, including to the Governor for consideration to include in the state budget. The of proposals submitted, the proposal to Governor Ige was funded. This funding, as established in Act 248, SLH 2022, the Supplemental Appropriations Act of 2022, allocates $1.75 million in funds to the University of Hawai'i System for 39 lecturer positions statewide, and 40 Just-In-Time training positions for nursing clinical instructors. The 39 lecturer positions are allocated based on identified need within the University of Hawai'i system in October 2021, and include 12 positions for UH Hilo, 9 positions for Kapiolani Community College, 8 position for UH Manoa NAWSON, 4 positions for Hawai'i Community College, and 3 positions each for Maui College and Kauai Community College. The 40 Just-In-Time training positions will be coordinated by the Center and offered to any resident of Hawai'i who is employed as a clinical instructor. The Just-In-Time training is a curriculum developed and implemented by the Connecticut Center for Nursing.

Figure 4 Gov. Ige is joined by UH President David Lassner, Center for Nursing Director, UH nursing leaders and students, lawmakers and healthcare representatives.

APRN and Provider Scope of Practice Review

The State House leadership and representatives inquired about Advanced Practice Registered Nurses (APRN) scope of practice authority with HR 99, SLH 2021 and HR 139, SLH 2022. Responding to these resolutions will improve the state's understanding of APRN scope, remaining barriers to care that patients experience due to scope of practice barriers, and potential actions necessary at the state, organizational, and education levels. The House recommended an interprofessional approach to this effort. The Center identified the working group members and plans to state the work in the following fiscal year.

APRN Policy and Practice Task Force

The APRN Policy and Practice Task Force is composed of APRNs (CNM, CNP, CNM, CNRA) across the state and across all settings of care who work collaboratively with the Hawai'i State Center for Nursing to accomplish the goals of the Task Force. The Task Force was established to address professional issues relating to APRNs, provide historical background of the APRN movement in Hawai'i, keep

all stakeholders apprised of who APRNs, and provide a central venue for APRNs to share concerns and update information. In 2021, the Task Force prioritized focusing the work through three pillars: education, practice considerations, and policy.

In 2021, members of the APRN Practice and Policy Task Force worked with the Hawai'i Department of Human Services (DHS) to propose amended language to the Hawai'i Administrative Rules Chapter 17-1737 as it related to the Med-QUEST Scope and Contents of the Fee for Service Medical Assistance Program. The Administrative Rules were found to include an incomplete list of APRN types, limiting access to care by these licensed professionals. Members also worked with the Hawai'i Board of Nursing (HBON) to propose changes to the Joint Formulary guidelines for APRNS with prescriptive authority, as detailed in the Hawai'i Administrative Rules Chapter 89 at is relates to Nurses. Taskforce felt the exclusionary formulary is obsolete and recommended removing it from the HAR 89 entirely. Protections to the public as it relates to prescribing are well established and maintained by the Narcotics Enforcement Division and duplicating work in the nurse practice act is not essential. Recommendations by the Taskforce were received by DHS and HBON, respectively; the individual state departments have not formally adopted these changes.

Members of this group also worked with the Hawai'i Board of Nursing and the Hawai'i Association of Professional Nurses to draft an APRN decision making framework, designed after similar frameworks provided by the Ohio and Oregon boards of nursing. This framework is intended to serve as a guide for APRNs to determine whether a specific procedure or activity is within their scope of practice and is appropriate for the APRN to perform based on their unique education, training, certification, skills, and competencies.

APRN Policy & Practice Task Force: Click here for more information

Preceptor Tax Credit Assurance Committee

The Preceptor Tax Credit Assurance Committee approved 559 tax credits for 253 preceptors for the 2021 tax year. 58% of the maximum potential tax credits were awarded. Reasons that the maximum credit was not provided include preceptors being specialists and not primary providers, precepting less than the minimum allowable hours or more than the maximum allowable hours, and not registering to the program. However, the state has still experienced gains to the preceptor community. Since 2019, there was a 29% increase in the registered preceptors who taught at least one rotation, and 43 tax credit recipients indicated they had never precepted prior to registering for this program. The Preceptor Tax Credits are both increasing overall preceptors and providers who are new to precepting. The 2021 Preceptor Tax Credit Annual Report details additional outcomes.

Preceptor Tax Credit: Click here for more information

Statewide Initiatives

Healthcare Workforce Initiative

The Healthcare Workforce Initiative is a statewide undertaking led by the Chamber of Commerce, Hawai'i, the HAH, and others. The Center engaged in activities related to improving clinical placement access to healthcare students and improving the education and training capacity of Licensed Practical Nurses (LPN).

Increasing Access to Healthcare Clinical Placements

The Center continued meetings with statewide partners including HAH, academic partners and

healthcare facility partners to address expanding the Hawai‘i Centralized Clinical Placement Collaborative to be used by other health professions to improve access to healthcare education, overall. A pilot was designed and the work effort focused on determining which professions and statewide regions engage in the pilot and securing funding for the pilot. As of this writing, a shift in partners required restarting partner negotiations and funding for the pilot has not been secured.

LPN Innovation Team

Hawai‘i’s LPN workforce is rapidly shrinking despite steady demand for LPNs, especially in post-acute/long-term care settings. To address the shortage and support a pathway into an LPN career for working CNAs, the HAH convened the LPN Innovation Team. The team includes members from HAH, local employers, community colleges, and the Center for Nursing.

Since June 2021, the Center’s Director and Researcher have supported the Team by providing insights about the state of the nursing workforce and data-related logistical support.

Hawai‘i State Rural Health Association

The Center’s Director serves as a board member at large for the Hawai‘i State Rural Health Association (HSRHA). The Center supported HSRHA to identify barriers to Certified Nurse Aide (CNA) development in rural areas, define known root causes and impacts as a result of these barriers, and rank the priorities for future action. As a result, the HSRHA members initiated a collaborative effort with the Health Workforce Initiative (see above). Through this collaborative effort, Lāna‘i successfully launched the first certified nurse aide training since 2016. This effort included the HSRHA, Lāna‘i Kinaole, Hale Makua, UH Maui College, the HAH, and the Center. Importantly, due to the COVID-19 pandemic, UH Maui College had to virtualize much of its CNA training in the last year. This provided an opportunity to train students in multiple locations, as well as train local instructors. The training program started September 20th, with a mixed cohort of five Lāna‘i students and six Maui island students and Lāna‘i now has their own lead instructor on island. This collaborative also identified barriers, including minimum requirements of past work experience for nurse educators, as described in administrative rules, which, if amended, would improve the pool of qualified instructors, particularly in rural communities and islands with smaller populations.

Hawai‘i Department of Labor and Industrial Relations Healthcare Workforce Advisory Committee

The Center’s Director continued service to the Director of the Hawai‘i Department of Labor and Industrial Relations as an active member of the Healthcare Workforce Advisory Committee. The Healthcare Workforce Advisory Board did not distribute mini-grants in FY 2022 due to fiscal constraints related to COVID, but was able to continue mini-grants issued in FY 2021. These mini-grants supported rural health professional loan repayments, training of Kauai high school students to become community health workers, support of the LPN pathways sustainability and community health workers capacity building on Maui, expand workforce development of medical reimbursement specialists at Leeward Community College, and training of nurse educators to prepared Hawai‘i’s nursing workforce for Evidence-based Practice.

UHealthy Hawai‘i

The Center's Director continued to work with UH System and representatives from UH health science programs on the UHealthy Hawai'i initiative, to identify challenges in delivering healthcare education and opportunities to improve healthcare profession education and training. Activities included identifying and proposing opportunities to increase the number of LPN program completers through formats, recruitment, employer partnerships, student support, capacity, coordination and alignment. Other efforts included seeking information about needed new faculty positions in order to grow the capacity of nursing education programs to produce more nursing graduates.

National Initiatives

The Center supports work on a number of nursing workforce initiatives. These initiatives engage the nursing community, identify needs in our state, and identify solutions to help our state meet these needs.

National Forum of State Nursing Workforce Centers

The Center's Director and Researcher continue to be active members of the National Forum of State Nursing Workforce Centers, the national member organization for state nursing workforce centers.

In June, our Director, Researcher, and one advisory board member attended the Forum's annual conference in Las Vegas. Numerous presentations covered key workforce issues such as nursing shortages and maldistribution, nursing wellbeing, and issues related to diversity, equity, inclusion in healthcare and the nursing workforce. The Center director presented on Hawai'i's preceptor tax credit program and sat on two panel discussions, one on state efforts to address faculty shortages and another on the value of state nursing workforce data.

The Center's Researcher is an active member of the Forum's Research Committee. The committee's membership includes other state's workforce researchers and provides an opportunity for them to share insights, findings, and challenges in collecting nursing workforce data. The Center's Researcher further supports the National Forum of State Nursing Workforce Centers through analysis of the national member survey which improves knowledge and understanding of the function and roles of the members organizations collectively, and within each of their states.

Nurses on Boards Coalition

The Center Director serves as state representative for the National Nurses on Boards Coalition. Hawai'i exceeded its goal for nurses serving on local, state, and national non-nursing boards by 157%. Communication to 55 nurses reporting interest in serving on boards about how to apply to Governor-appointed Boards and Commissions with the goal of increasing nurse representation in decision making and leadership roles throughout the state.

AARP Removing Barriers Learning Collective

The Center Director participates in the AARP Removing Barriers Learning Collective which hosts monthly meetings that discuss federal and state activities focused on improving access to care by removing barriers to APRN practice. In August 2021, the Center Director and Hawai'i Keiki program

director Dr. Deborah Mattheus presented to this national audience about the Hawai‘i Keiki program. The presentation described how lifting scope of practice barriers for APRNs has opened up the opportunity for health services to be delivered by APRNs in schools throughout the State of Hawai‘i. This intergovernmental partnership is centered around APRNs, who can assess, diagnose, prescribe medication and make referrals to specialists as well as communicate with the students' Primary Care Provider (PCP). Where there is a shortage of PCP in rural communities, the APRN in schools provides those much needed services for students, keeping them healthy and ready to learn. The APRN also provides services for students with urgent health concerns, those with chronic medical conditions requiring follow-up care as well as acting as a health resource for the school and community. During the COVID-19 pandemic, this resource became even more vital, as school-based APRNS shifted to telehealth work, adding care to more public school children during a time that uncovered gaps in access to care for children and vulnerable people even further.

Hawai‘i Action Coalition (HAC)

Center staff reviewed the nine recommendations and over 50 sub-recommendations of the National Academy of Medicine released the Future of Nursing 2020-2030 Report to assess for our role in responding, leading, or informing upon the recommendations. These recommendation assessments will be used to drive actions, establish priorities, and adapt our work to help our state move towards improved health equity.

Hawai‘i Action Coalition members improved equity and access to care through the expansion of the Hawai‘i Keiki program (see description, above).

Hawai‘i Action Coalition: Click here for more information

Appendices

Appendix 1

The Center's Advisory Board

Board Membership 2022
Voting Members

Anne Scharnhorst, DNP, RN, CNE (Chairperson)
Professor of Nursing
University of Hawai'i Maui College

Bonnie Castonguay, MBA, RN, CMC (Vice Chairperson)
Co-founder and President
Hoʻokele Health Innovations, LLC

Linda Beechinor, DNP, APRN
Executive Director and Vice President
Hawai'i - American Nurses Association (Hawai'i-ANA)

Gloria Fernandez, DNP, RN, PHNA-BC
Quality Assurance Coordinator
Hawai'i State Department of Health, Public Health Nursing Branch

Rhoberta Haley, PhD, RN
Dean, School of Nursing and Health Professions
Chaminade University of Honolulu

Rose Hata, DNP, MBA, RN, APRN, CCRN, CCNS, NEA-BC
Director, Queen Emma Nursing Institute
The Queen's Medical Center

Doreen Nakamura, DNP, MBA, RN, NEA-BC, CCM
Retired, Health Insurance Executive

Arthur Sampaga, Jr., RN, MSN, CCRN, CHEP, CNML
Chief Nursing Officer, East Hawaiʻi Region
Hilo Medical Center

Julio Zamarripa, MSN, RN
Director of Medical Subspecialties
Hawai'i Pacific Health

Ex-Officio Members

Clementina Ceria-Ulep, PhD, MSN, RN
Interim Dean and Professor, Nancy Atmospera-Walch School of Nursing
University of Hawaiʻi at Mānoa

HSCN Executive

Laura Reichhardt, MS, APRN, AGPCNP-BC
Director
Hawaiʻi State Center for Nursing

The HSCN Advisory Board

The Center Advisory Board is organized to actively champion professional nursing in Hawaiʻi and to engage the community in issues affecting professional nursing to improve healthcare and the health of our people. Voting members are appointed by the Governor of the State of Hawaiʻi and represent a full range of expertise and experience. Together they leverage their knowledge and talents to support the major functions of the Center and the nursing workforce of Hawaiʻi.

Advisory Board Activities

The Center Advisory Board convened four regular Advisory Board meetings in 2022. Members also participated in a half-day strategic planning session conducted on October 1st, undertaking training on business strategies to move health initiatives forward.

Members of the Center's Advisory Board are active in many of the Center's subcommittees and priority groups and regularly attend Center meetings and special events.

HSCN Advisory Board Group Meeting Photo 2022

Appendix 2

2018-2023 Strategic Plan

2018-2023 Strategic Plan

Mandate 1: Collect and analyze data and to prepare and disseminate written reports and recommendations regarding the current and future status and trends of the nursing workforce.

Objectives:

- Continue the workforce supply survey and educational capacity survey.
- Revise the education capacity survey.
- Determine demand and future projections of nursing workforce needs.
- Promote nursing through accessible data.
- Establish workforce research steering committee to inform strategic efforts and emerging research opportunities.

Status to date: Meets and exceeds outcomes related to objectives. Expanded scope and impact of nursing workforce research through specialty topic reporting, partnerships with healthcare workforce research entities, and community input.

Mandate 2: Conduct research on best practices and quality outcomes.

Objectives:

- Continue evidence-based practice (EBP) workshop for clinicians and faculty.
- Promote evidence-based practice to nurses and healthcare leadership.
- Investigate the Center's role in offering continuing competency activities.
- Resume an evidence-based practice steering committee.

Status to date: Continues to meet and expand outcomes related to objectives. Revised evidence-based practice workshop strategy due to pandemic effects and changes to learning design frameworks and need to assess new information relative to teaching EBP practices.

Mandate 3: Develop a plan for implementing strategies to recruit and retain nurses.

Objectives:

- Develop plans to address priority areas based on state workforce research and national best practices.
- Continue nursing student clinical placement optimization through the Centralized Clinical Placement System.
- Continue new graduate nurse transition to practice efforts through the Hawai'i Nurse Residency Program.

Status to date: Meets and exceeds outcomes related to objectives. Development of nursing workforce and nursing faculty shortages increases importance of developing plans to address state nursing workforce needs based on state workforce research and national best practices.

Mandate 4: Research, analyze, and report data related to the retention of the nursing workforce.

Objectives:

- Improve visibility of Center's work and initiatives.
- Utilize key partners to amplify reporting outcomes.

Status to date: Meets objectives.

Goal 1: Engage in Communication and Public Awareness Strategies to support strong nursing workforce and Center initiatives.

Objectives:

- Expand partnerships to achieve priorities, mandates and goal outcomes.
- Diversify funding sources for Center initiative.

- Advocate for sound nursing and health policy development using data-driven strategies.
- Engage with national initiatives to ensure Hawai‘i’s nursing and healthcare is grounded in national best practices and aims.

Status to date: Meets objectives. Improved connections to the community have elevated the value of HSCN’s work and enhanced HSCN’s awareness of and responsiveness to statewide needs.

Appendix 3

Infographics

ADVANCED PRACTICE REGISTERED NURSES (APRNs) 2021 HAWAII NURSING WORKFORCE SUPPLY

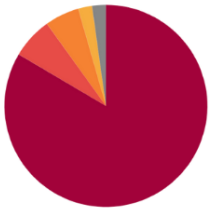
APRNs are RNs who have advanced education, training, and certification. They care for patients by assessing health conditions, diagnosing illnesses, and providing treatments which may include the prescription of medication.

LICENSURE

OF APRNS IN HAWAII

There are **1,234** licensed APRNs living and working in Hawaii.

APRN ROLES

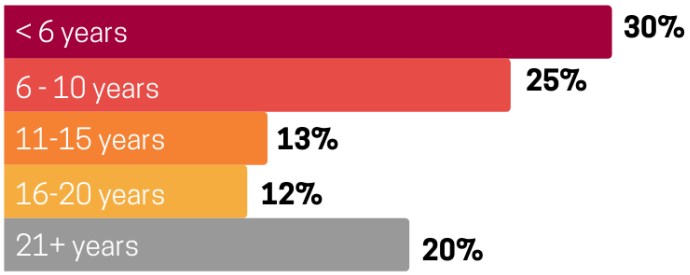


- Nurse Practitioner - **76%**
- Clinical Nurse Specialist - **6%**
- Certified Nurse Midwife - **5%**
- Certified RN Anesthetist - **2%**
- Multi-Certified - **2%**

PRESCRIPTIVE AUTHORITY

9 in 10 APRNs have prescriptive authority. **92%** of nurse practitioners have prescriptive authortiy.

OF YEARS LICENSED



TOP NP CERTIFICATIONS

Family Nurse Practitioner **59%**

Pediatric, Primary Care **12%**

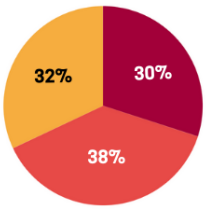
Adult Gerontology, Primary Care **12%**

DEMOGRAPHICS

10% of advanced practice registered nurses are male.

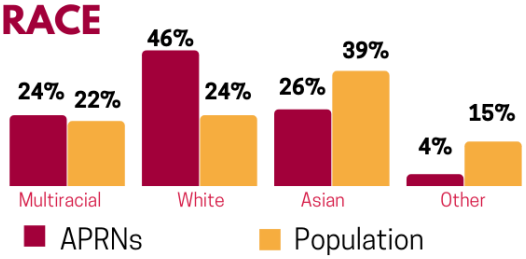
AGE

- Millenial (25 - 40)
- Generation X (41 - 56)
- Baby Boomer (57 - 75)



16% of APRNs plan to retire in the next five years.

RACE



11% report having Native Hawaiian ancestry.

EDUCATION

1 in 4 APRNs are doctorally prepared. Of these, majority have received their DNP.

WORK SETTINGS

- Ambulatory Care - **50%**
- Other - **26%**
- Hospital- **20%**
- Home Health/Hospice - **4%**

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The data contained in this infographic are excerpts from the 2021 Hawai'i Nursing Workforce Supply survey and report. For additional inforgraphics and reports, visit https://www.hawaiicenterfornursing.org/data-reports/. If you require this information in an alternate format, please email hscndata@hawaii.edu.

2021 HAWAII NURSE WELLBEING IN THE COVID-19 PANDEMIC

This infographic highlights key statistics related to the impact of the COVID-19 pandemic on Hawaii's nurses and their overall wellbeing.

*"In the past 12 months" is relative to the data collection period which occurred between April 2021 - June 2021.

COVID-19 PATIENTS

53% of all nurses have taken care of **COVID-19 patients.**

3 in 4 nurses employed **in hospitals** have cared for COVID-19 patients.

LEADERSHIP SUPPORT

In the past 12 months*...

66% of nurses **felt valued or appreciated** at work.

1 in 2 nurses felt their supervisor/manager **expressed genuine concern for their well-being.**

WORKPLACE VIOLENCE

In the past 12 months*...

37% of nurses experienced some type of **workplace violence.**

31% of nurses experienced **verbal or physical violence** from a patient or visitor.

23% of nurses experienced **bullying, verbal abuse, or other forms of incivility** at work.

STRESS & BURNOUT

In the past 12 months*...

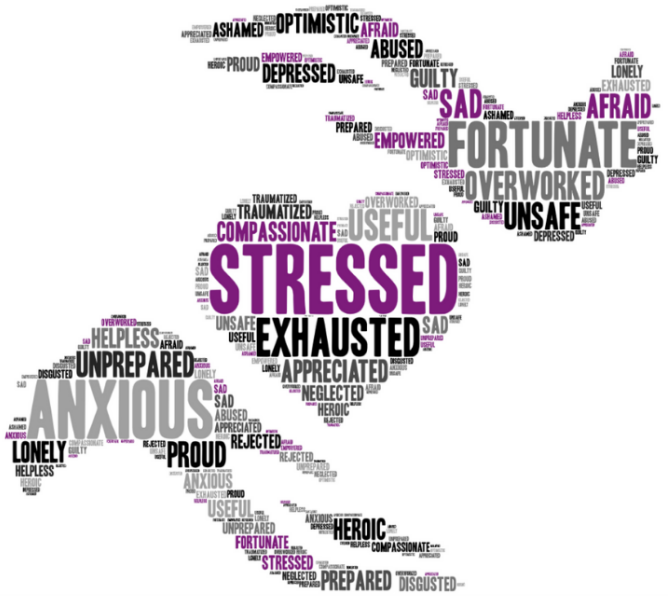
70% of nurses reported feeling **stressed** at work.

1 in 4 nurses felt so stressed out at work, they considered **leaving the nursing profession**.

17% of nurses looked into seeking **mental health services** due to stress at work.

EMOTIONS

During the pandemic, nurses experienced a **range of emotions**.



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2021 LIFELONG LEARNING
HAWAII NURSING WORKFORCE SUPPLY

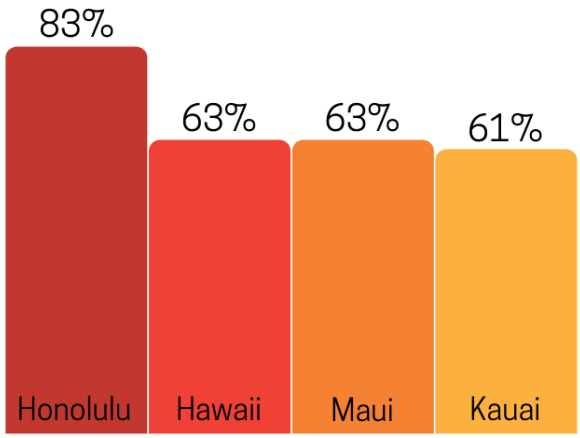
Engaging in lifelong learning and ongoing professional development ensures that Hawaii's nurses have the most up-to-date information to provide safe, quality care to the people of Hawaii.

BSN+ PREPAREDNESS

78% of Hawaii nurses are prepared at the baccalaureate level or higher.

The national rate is **59%** (Campaign for Action, 2021).

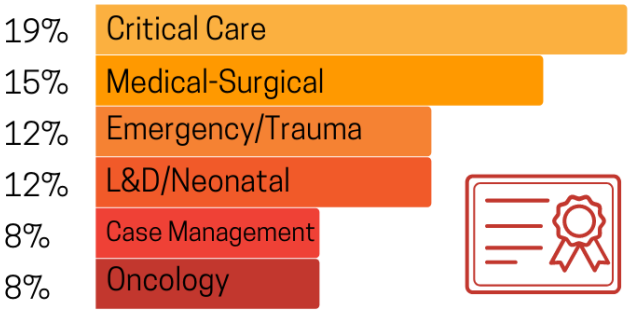
BSN + BY COUNTY



CERTIFICATION

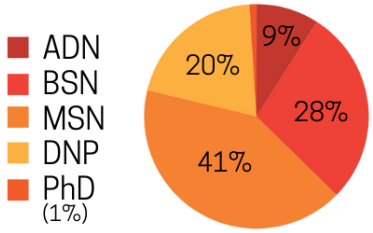
1 in 3 registered nurses hold a national certification.

TOP CERTIFICATIONS



ACADEMIC PROGRESSION

PROGRAM TYPES



7% of nurses are enrolled in nursing degree-leading programs.

CONTINUING COMPETENCY

We asked nurses to tell us about all continuing competency activities they completed.

85% completed 30 continuing education contact hours.

7% spent 120+ hours precepting nursing students.

23% of all nurses who graduated within the last 10 years completed a nurse residency program.

EBP EDUCATION

57% of nurses have received formal education on evidence-based practice. Recent graduates are more likely to have received EBP education.

Graduated before 2009 | Graduated 2009+

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LICENSED PRACTICAL NURSES (LPNs)
2021 HAWAII NURSING WORKFORCE SUPPLY

LPNs are a vital part of the healthcare team. They work under the direction of registered nurses (RNs) and other healthcare professionals to provide basic healthcare which includes patient monitoring, medication administration, bathing, and feeding.

LICENSURE

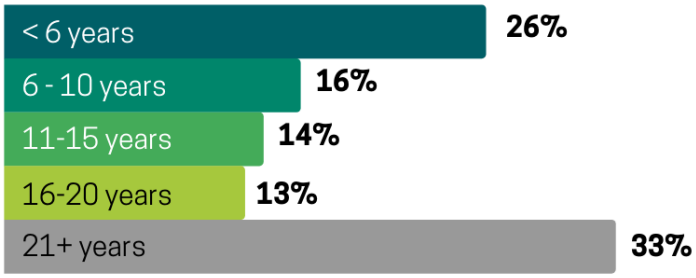
OF LPNs IN HAWAII

There are **1,287** licensed LPNs living and working in Hawaii.

% BY COUNTY

Honolulu	Hawaii	Maui	Kauai
58%	17%	18%	7%

OF YEARS LICENSED



EDUCATION

59% of LPNs were educated in the state of Hawaii.

11% of LPNs are enrolled in a nursing degree-leading program.

HIGHEST DEGREE EARNED

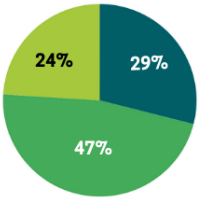
- LPN Certificate - **69%**
- Diploma - **4%**
- Associate Degree - **9%**
- Baccalaureate Degree - **18%**

DEMOGRAPHICS

9% of licensed practical nurses are male.

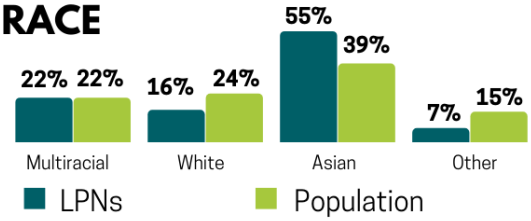
AGE

- Millenial (25 - 40)
- Generation X (41 - 56)
- Baby Boomer (57 - 75)



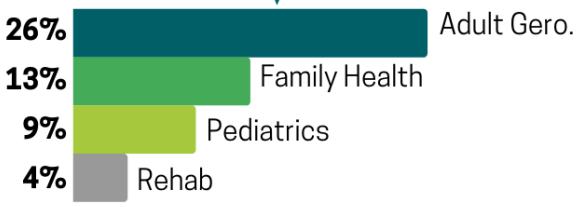
10% of LPNs plan to retire in the next five years.

RACE



15% report having Native Hawaiian ancestry.

PRACTICE SPECIALTIES



WORK SETTINGS

- Ambulatory - **35%**
- Post-Acute - **32%**
- Other - **17%**
- Home Health/Hospice - **11%**
- Hospital - **4%**

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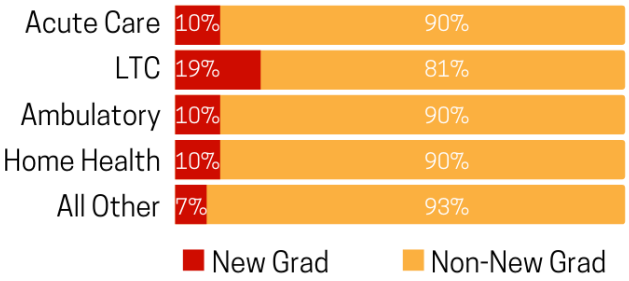
HAWAII'S NEW GRADUATE RN WORKFORCE
FREQUENTLY ASKED QUESTIONS (FAQS)
2021 HAWAII NURSING WORKFORCE SUPPLY

This infographic summarizes answers to frequently asked questions about Hawaii's new graduate RN workforce. We focus on RNs who live and work in Hawaii and who graduated from their pre-licensure RN education program between 2017 and 2021.

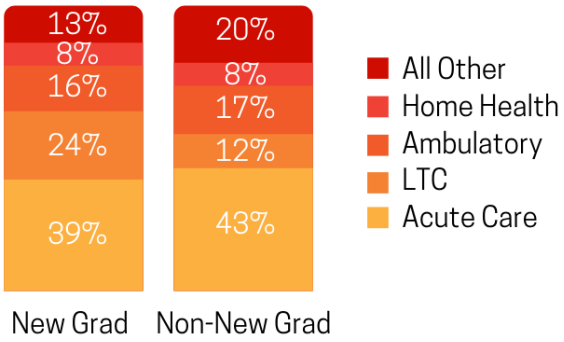
How many new grad RNs are in the Hawaii workforce and where do they work?

11% of RNs are new grads.

Proportion of New Grad RNs in Each Practice Setting Type



Primary Practice Setting for New Grad RNs vs. Non-New Grad RNs

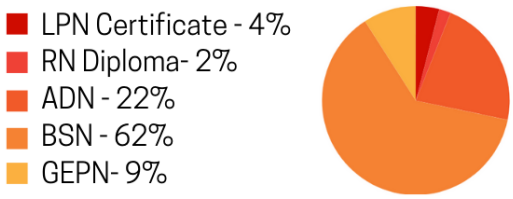


What is the educational background of the new grad RN workforce?

3 in 4 new grad RNs were educated in the state of Hawaii.

10% of new grad RNs are enrolled in a nursing degree-leading program.

Initial Degree Earned

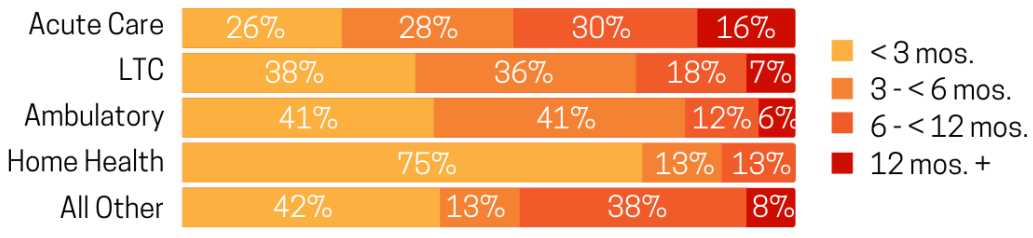


How long does it take for new grad RNs to enter the workforce?

83% of new grad RNs were licensed within 6 months of graduation.

65% of new grad RNs entered the workforce within 6 months of graduation.

Time Elapsed Between Graduation and First Nursing Job Attainment by Initial Job Setting



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REGISTERED NURSES (RNs)
2021 HAWAII NURSING WORKFORCE SUPPLY

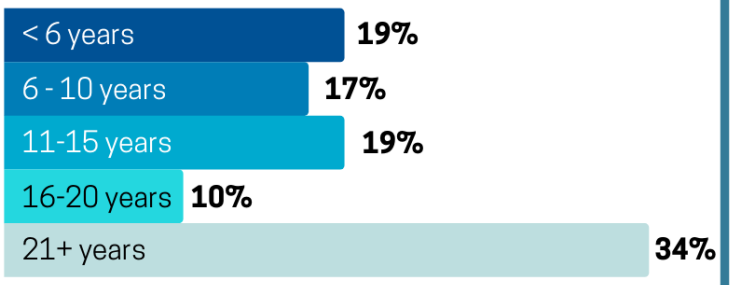
RNs are a critical part of the healthcare team that works to develop and implement a patients' plan of care for optimal health. They conduct comprehensive assessments, establish nursing diagnoses, and provide education to patients and caregivers.

LICENSURE

OF RNs IN HAWAII

There are **15,072** licensed RNs living and working in Hawaii.

OF YEARS LICENSED



EDUCATION

54% of RNs were educated in the state of Hawaii.

7% of RNs are enrolled in a nursing degree-leading program.

HIGHEST DEGREE EARNED

- Diploma - **4%**
- Associate Degree - **20%**
- Baccalaureate Degree - **64%**
- Graduate Degree - **11%**

TOP RN CERTIFICATIONS

Critical Care **19%**

Med-Surg **15%**

OB/Mother-Baby **12%**

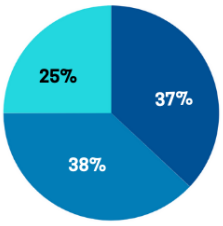
ED/Trauma **12%**

DEMOGRAPHICS

12% of registered nurses are male.

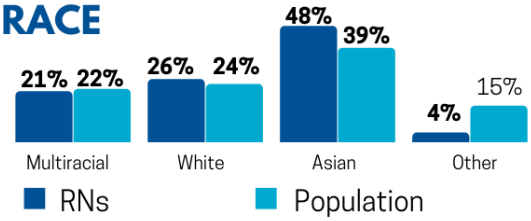
AGE

- Millenial (25 - 40)
- Generation X (41 - 56)
- Baby Boomer (57 - 75)



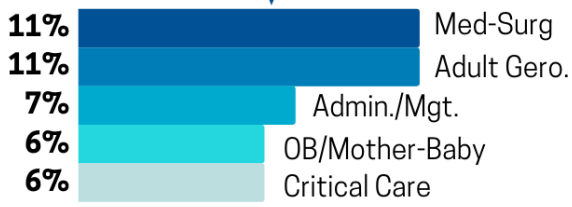
16% of RNs plan to retire in the next five years.

RACE



12% report having Native Hawaiian ancestry.

TOP SPECIALTIES



WORK SETTINGS

- Hospital - **42%**
- Other - **20%**
- Ambulatory - **17%**
- Post-Acute - **13%**
- Home Health - **8%**

HAWAI'I STATE CENTER FOR NURSING
Connecting Nurses. Transforming Healthcare.

The data contained in this infographic are excerpts from the 2021 Hawai'i Nursing Workforce Supply survey and report. For additional inforgraphics and reports, visit https://www.hawaiicenterfornursing.org/data-reports/. If you require this information in an alternate format, please email hscndata@hawaii.edu.

Appendix 4

Policy Outcomes

GOV. MSG. NO. 1166

EXECUTIVE CHAMBERS
HONOLULU

DAVID Y. IGE
GOVERNOR

JUN 17 2022

The Honorable Ronald D. Kouchi,
President
and Members of the Senate
Thirty-First State Legislature
State Capitol, Room 409
Honolulu, Hawai'i 96813

The Honorable Scott K. Saiki,
Speaker and Members of the
House of Representatives
Thirty-First State Legislature
State Capitol, Room 431
Honolulu, Hawai'i 96813

Dear President Kouchi, Speaker Saiki, and Members of the Legislature:

This is to inform you that on JUN 17 2022, the following bill was signed into law:

SB2274 SD2 HD1 CD1 RELATING TO THE CENTER FOR NURSING.
ACT 066

Sincerely,

David Y. Ige

DAVID Y. IGE
Governor, State of Hawai'i

Approved by the Governor
on JUN 17 2022

THE SENATE
THIRTY-FIRST LEGISLATURE, 2022
STATE OF HAWAII

ACT 066

S.B. NO. 2274 S.D. 2 H.D. 1 C.D. 1

A BILL FOR AN ACT

RELATING TO THE CENTER FOR NURSING.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

SECTION 1. The legislature finds that Act 198, Session Laws of Hawaii 2003 (Act 198), established the Hawaii state center for nursing to collect and analyze data and prepare and disseminate written reports and recommendations regarding the current and future status and trends of the nursing workforce; conduct research on best practices and quality outcomes; develop a plan for implementing strategies to recruit and retain nurses; and research, analyze, and report data related to the retention of the nursing workforce. Act 198 also requires nurses to fund the activities of the Hawaii state center for nursing through an additional fee assessed upon the issuance and renewal of each nurse license.

The purpose of this Act is to increase the center for nursing fee from $40 to $60 per licensing biennium.

SECTION 2. Section 457-9.5, Hawaii Revised Statutes, is amended by amending subsection (a) to read as follows:

"[~~(~~] (a) [~~)~~] Upon the issuance of a new license and at each license renewal period, each nurse shall pay an additional fee

of [~~$40,~~] $60, which shall be deposited in a separate account in the compliance resolution fund established pursuant to section 26-9(o)."

SECTION 3. Statutory material to be repealed is bracketed and stricken. New statutory material is underscored.

SECTION 4. This Act shall take effect on July 1, 2022.

S.B. NO. 2274 S.D. 2 H.D. 1 C.D. 1

APPROVED this 17 day of June , 2022

GOVERNOR OF THE STATE OF HAWAII

THE SENATE OF THE STATE OF HAWAI'I

Date: May 3, 2022
Honolulu, Hawaii 96813

We hereby certify that the foregoing Bill this day passed Final Reading in the Senate of the Thirty-First Legislature of the State of Hawai'i, Regular Session of 2022.

President of the Senate

Clerk of the Senate

226-22

SB No. 2274, SD 2, HD 1, CD 1

THE HOUSE OF REPRESENTATIVES OF THE STATE OF HAWAII

Date: May 3, 2022
Honolulu, Hawaii

We hereby certify that the above-referenced Bill on this day passed Final Reading in the House of Representatives of the Thirty-First Legislature of the State of Hawaii, Regular Session of 2022.

Scott K. Saiki
Speaker
House of Representatives

Brian L. Takeshita
Chief Clerk
House of Representatives