EXECUTIVE SUMMARY

The nation relies on both 2- and 4-year institutions of higher education for the majority of its registered nurses (RNs), who are authorized to practice as RNs after achieving either an associate or bachelor’s-level nursing degree and passing a national licensure exam. Due to job growth and retirements, the nation is projected to need more than 1 million additional RNs by 2018. Yet, recently, schools of nursing received thousands of qualified applications that could not be processed for enrollment due primarily to a shortage of RNs educated at the graduate level who are prepared to serve as faculty.

No national plan is in place to enable schools of nursing to expand enrollments to meet the demands of students or the workforce. Further exacerbating the situation, the nursing profession continues to be fragmented after 50 years of debate focused on whether all RNs should be required to attain bachelor’s-level nursing degrees. During these five decades, research has been inconclusive in demonstrating the value of shifting the education of all RNs to the bachelor’s level.

However, nursing research and practice have demonstrated that the nation depends on the successes of both associate and bachelor’s-level schools of nursing, because they contribute individually to collectively building a strong nursing workforce. The most recent data, summarized in this brief, reveal the following:

- The majority of the nation’s new RNs are educated in ADN programs.
- All schools of nursing teach students the competencies necessary for RN practice, as measured by National Certification Licensing Examination (NCLEX) pass rates.
- ADN programs provide the nation its greatest number of minority RNs.
- Employers are equally likely to hire ADN- and BSN-prepared RNs.
- ADN programs educate the majority of RNs in rural settings.