

TESTIMONY FOR SENATE EDUCATION COMMITTEE

Opposition to House Bill 4496
January 25, 2012, NOON

Good afternoon. My name is Sue Idczak, PhD, RN, CNE and I am the Director of Nursing at Siena Heights University. I am also here on behalf of the Michigan Association of Colleges of Nursing (MACN), an organization that represents 21 of the state's four-year nursing programs, to express our opposition to House Bill 4496. You have a packet of my testimony as well as reports I reference in my testimony today.

I would like to begin by thanking Chairman Phil Pavlov and members of the Senate Education committee for allowing me the opportunity to testify and express concerns regarding House Bill 4496, as it pertains to nursing education.

As a nurse for 34 years; 19 in practice; 15 as a nurse educator – I am very qualified to address you on the topic of baccalaureate nursing education. I am the founding director and creator of the Bachelors' of Science in Nursing (BSN) program for Siena Heights University. Located in Adrian MI, Siena Heights offers a traditional baccalaureate program, and an RN to BSN degree completion program. Siena Heights Nursing will graduate our first cohort of 18 traditional students in May 2012, many of whom are in attendance at this hearing today. Siena Nursing has 38 other undergraduate students enrolled to become nurses. The Siena RN to BSN degree program has graduated 28 RNs and another 22 RNs are in process to earn the BSN degree. One hundred three of these 106 Siena Nurses are Michigan residents.

Contrary to previous legislative testimony on House Bill 4496, it is important for committee members to understand this legislation is not intended to increase the RN workforce. While it is desirable for Michigan to have more BSN prepared RN's, it is not an accurate statement to suggest that this legislation would, in any way, impact a future nursing shortage, nor would it serve as a solution to the bottleneck that exists in nursing education today. In fact, if signed into law, it would only exacerbate the problems that face our existing nursing programs by creating unnecessary duplication, worsen existing nursing faculty shortages and clinical placement availability, and increase educational costs for taxpayers and students, alike. **BSN completion programs do not produce new nurses into the workforce.**

Proponents of this legislation argue that student access from associate degree nursing programs into bachelor degree nursing programs, is non-existent. This is simply untrue. There are currently **59 nursing programs in Michigan** that offer either a bachelor's in science in nursing (BSN) or an associate's degree in nursing (ADN). **Twenty four of those nursing programs offer a Bachelor's of Science in Nursing, 20 of which offer an RN to BSN completion program. RN to BSN degree completion programs are offered in classrooms or on-line through distance learning and most of the programs are currently under-enrolled and under capacity.** You could be an associate degree prepared registered nurse (RN) living and working in Roscommon, Alpena, Livonia,

Dearborn or anywhere else in the state and enroll into one of multiple Michigan universities' online or traditional classroom BSN completion programs.

According to the Michigan Center for Nursing, community colleges and universities alike, turn down applicants for nursing school because of 1) insufficient funding, 2) limited clinical space, and 3) the shortage of qualified nursing faculty. In fact, a recent survey released by the Center stated **associate degree nursing programs in Michigan turned away 52% of qualified nursing school applicants during 2009-2010 academic years**. If community colleges cannot address the current barriers in their existing nursing programs, wouldn't offering new programs only exacerbate the problem? Waiting lists at most of the state's community colleges are commonplace, with some reporting more than 1,000 students waiting for access to nursing programs. The Michigan Community College Association has reaffirmed that nursing programs at community colleges turn away qualified applicants because of insufficient classroom and clinical faculty, as well as clinical infrastructure.

We are all acutely aware of the current fiscal crisis facing the State of Michigan. Nursing schools in Michigan are already faced with limited resources- due to budget cuts and restraints. During recent years, community colleges and universities alike have taken deep cuts. Key programs such as nursing scholarships and the Michigan Nursing Corps have been eliminated, reducing funds for nursing programs and student support in our state.

A recent House Fiscal analysis of HB 4496 highlights the financial impact and states that this legislation would increase operating costs of community colleges that offer bachelor degree programs. These additional costs include salaries and benefits for additional faculty, staff and administration, information technology, accreditation, and other support services. As a point of reference, nursing accreditation expense is costly. The two national nursing accreditation bodies are the National League for Nursing Accrediting Commission and the Commission on Collegiate Nursing Education. In the NLNAC* 2011-2012 Fee Schedule, estimated per program cost is \$13,520 for initial accreditation and an annual fee of \$2125. Per CCNE** 2010/11 Fee Schedule, estimated per program cost is \$10,500 for initial accreditation and an annual fee of \$2090. These costs do not include the costs associated with maintaining national professional nursing accreditation.

According to reports published by the Michigan Community College Association, all 28 community colleges have nursing programs. In every case, that program is either the most costly or nearly the most costly program and must be subsidized by other instructional programs. The MCCA report actually cited that the larger the nursing program, the greater the financial loss to the college. Furthermore, the single greatest factor in the high cost of nursing programs at the community college level is the cost of faculty. According to a 2008 published report by the Voorhees Group, which surveyed Michigan's community colleges on their interest to offer bachelor's degrees, 17 of the 21 community colleges that responded had an interest to offer a Bachelor's degree in Nursing. Other areas of interest in offering bachelor's degrees included other health-

related degrees, business-related fields, manufacturing technologies, education, criminal justice and construction.

Secondly, there is a **growing shortage of qualified faculty** which directly limits the ability for nursing schools in Michigan to expand. In 2008, the Michigan State Board of Nursing approved nearly 150 nursing faculty qualification waiver exceptions - meaning faculty who lacked required preparation and credentials. Most of these waivers submitted to the MI BON were from community colleges. The Michigan State Board of Nursing still approves approximately 100 waivers annually. Just as our population is aging, our nursing faculty is aging as well. 41% of full-time nursing faculty in Michigan are 56 yrs. or older, and 17% of nursing faculty are expected to retire in the next five years. The greatest shortage in nursing is in nursing education, where faculty must have advanced degrees to teach, either the MSN or PhD. Community colleges have stated a barrier is the decreasing number of advanced level nurses are available to teach; also claiming "community colleges don't have the funding to hire these nurses to teach".

As Director of Nursing at Siena Heights University, let me share our faculty story over the last four years. My first hire was an experienced PhD, or doctorally prepared nurse who has retired after 4 years at age 68. I have hired five MSN prepared faculty - four nurses with a Master of Science of Nursing (MSN) in Nursing Education, one MSN new to academe after 15 years in practice as a Nurse Practitioner. I have hired two seasoned faculty - one MSN prepared and one PhD nurse educator. The PhD faculty member chose to leave after one semester to teach in a MSN and PhD program. Another MSN faculty member left for higher pay at a much larger university. Of the last five hires at Siena Nursing, only two other MSNs and no PhD nurses applied for the open faculty positions. The learning curve has been steep in preparing and implementing courses in a new BSN program to achieve successful student learning outcomes. I am very proud of the Siena Nursing faculty who meet and exceed faculty role expectations in a baccalaureate nursing program. Siena Nursing's story is not unique. The nursing faculty shortage is real in Michigan.

Lastly, nursing schools in Michigan and across the nation are competing for limited clinical educational sites, and nursing preceptors (mandatory 10 to 1 student to faculty ratio). The Michigan Community College Association asserts one drawback to community colleges expanding their current programs is due to lack of clinical facilities for placement in specialty areas such as obstetrics and medical/surgical.

Another very key point to understand is accreditation. Obtaining a BSN degree from programs with **national professional nursing accreditation** ensures a seamless transition into graduate nursing programs and ensures quality and integrity of the program. **100% of BSN programs in MI are nationally accredited, and only 33% of the current ADN nursing programs offered in MI are nationally accredited.** National professional nursing accreditation bodies are recognized by the US Secretary of Education. Would community colleges offer unaccredited BSN programs and thereby limit the future ability of those students wishing to attend graduate nursing education programs? The two national nursing accrediting bodies are: NLNAC and CCNE

(National League for Nursing Accrediting Commission and the Commission on Collegiate Nursing Education). These bodies are NOT the same as REGIONAL, technical accreditation. Regional accreditation is a nongovernmental process conducted by representatives of postsecondary institutions and professional groups and focuses upon the quality and integrity of the total institution. The Higher Learning Association, North Central Association is a regional accreditation body. National nursing accreditation is a professional or specialized accreditation concerned only with programs of study in nursing. Both the NLNAC and CCNE are national nursing accreditation bodies who provide standards to evaluation the quality and integrity of nursing programs.

As a resident of Ohio, I am very familiar with a case where an institution lost national nursing accreditation. In Ohio, every nursing program must earn a national nursing accreditation. Owens Community College in Toledo, OH, had a change in administration of both the nursing program and the overall institution. The new administration saw opportunity to greatly increase student enrollment in the nursing program. Growth occurred too quickly, without maintaining quality and integrity of the nursing program. Too few qualified faculty and inadequate numbers of clinical facilities caused the program to decrease substantially in student success in the classroom and on national licensure examination. Owens Community College lost national nursing accreditation in 2009. Students filed a lawsuit against Owens Community College and the outcome is still pending. A former dean was called out of retirement and two years later is slowly working toward seeking re-accreditation from NLNAC.

As a Director who started a BSN program in 2007, I can describe the process to achieve national nursing accreditation. **First**, a Needs Assessment must be completed by the institution to prove the program should be created. An Internal Needs Assessment should evaluate if resources are present in the institution to support a change or new program. Areas to assess for fiscal resources, personnel, technology, and space include the following: Registrar, Admissions, Advising, Financial Aid, supporting faculty and courses, offices classrooms, and computing needs. The Board of Trustees must demonstrate support. An External Need Assessment should include survey research and/or focus groups to evaluate the actual need for another program in the community in general and the health care community in specific. **Second**, The Michigan Board of Nursing must initially approve a proposal for a new program in nursing. **Third**: The Higher Learning Commission, North Central Association, the regional accreditation body for the institution, must be notified and a "Change Request" document must be completed. Depending upon the degree of change needed, a site evaluation may or may not be required. An approval must be received from HLC-NCA before any new program can be initiated. **Fourth**: A national nursing accreditation body – either the NLNAC or CCNE – must be sent an Initial Proposal and timed for a Site Evaluation. Any BSN program must be accredited for any graduate of said BSN program to be admitted to any graduate program in nursing. National nursing accreditation means that four standards are met or exceeded in nursing education. I started at Siena Heights University in August, 2007 – working within the timeframes of all agencies described above to complete these four steps - two years and over \$20,000 in fees alone. Program approval and accreditation are time consuming due to the high standards that must be proven and

met. Michigan is fortunate to have 22 BSN accredited programs that educate excellent nurses.

Any new RN to BSN nursing program created by a community college would not have oversight by the state or by the Michigan Board of Nursing, as the Board of Nursing only approves and evaluates pre-licensure, or programs creating new to practice nurses. **The only oversight for an RN to BSN program is a national nursing accreditation body.**

One of the standards of accreditation in nursing education is faculty preparation and expertise. Faculty must be MSN or PhD prepared in a baccalaureate nursing program. For example, Grand Valley State University has 89.6% of their nursing faculty with earned doctorates; 56% of nursing faculty at Calvin College are doctorally prepared; 54% of Oakland University's nursing faculty have a doctorate while an additional 26% of faculty are enrolled in a doctoral program; and 55% of Wayne State University's full-time nursing faculty are doctorally prepared. The Dean/Director should be PhD prepared.

Michigan's public and private BSN granting nursing schools have an excellent and long history of collaboration with our community colleges and hospitals, and remain committed to educating the state's nursing workforce to meet nursing needs. For example, Siena Heights' RN to BSN degree completion program has a solid collaboration with Jackson Community College and Monroe Community College, as many of our nurses earned the ADN from these two institutions. Grand Valley State University's College of Nursing established collaboration with Muskegon Community College and Grand Rapids Community College; goals include the development of formal articulations and increased efficiency in the transition from the ADN to BSN degree. Other examples of articulation agreements include; Ferris State University, which has articulation agreements with Grand Rapids Community College, Muskegon Community College, Montcalm Community College, Kirtland Community College, and Delta College. Finlandia University has articulation agreements with Bay College and Gogebic Community College. Oakland University has articulation agreements with Henry Ford Community College, Macomb Community College, Mott Community College, Oakland Community College, Schoolcraft Community College, and St. Clair County Community College. Madonna University also has 6 articulation agreements, including Henry Ford Community College, Macomb Community College, Oakland Community College, Schoolcraft College, Washtenaw Community College, and Wayne County Community College.

I want to thank you for allowing me the opportunity to testify today. The Michigan Association of Colleges of Nursing Deans and Directors believe investing in Michigan's existing infrastructure and our nationally accredited four-year nursing programs is the most sensible and cost-effective measure to increase the number of BSN prepared nurses in the workforce. All of our state's nursing programs are committed to educating highly trained nurses to provide quality and safe patient care. We are hopeful the legislature will continue to support community colleges, independent and private colleges and universities alike, so we can continue to meet the critical need for additional nurses and nurse faculty in Michigan. Thank you.

**An Analysis of the Feasibility for the
Bachelor's Degree in Applied Science and Technology
in the State of Michigan**

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**Voorhees Group LLC
March 31, 2008**



Executive Summary

In response to Senate Bill No. 234, Voorhees Group LLC examined the feasibility of offering bachelors degrees in applied science and technology in Michigan community colleges. The agreed definition for this degree to be used in this study was:

A degree program that builds upon the technical content gained at the associate's level. The combination of technical and higher level courses prepare graduates for higher level job opportunities related to their area of technical specialty. The Bachelor of Applied Science and Technology degree is designed to provide students with the opportunity to complete a baccalaureate program.

The primary activities conducted as part of this study were

- A survey of the 28 community colleges in Michigan to determine their level of interest in offering such degrees and, if so, in which fields;
- A telephone survey of selected employers to determine their opinions about the desirability of this degree; and
- An analysis of public databases indicating current and projected workforce needs in Michigan, especially those occupations associated with a bachelor's degree, categorized by the community colleges in each workforce region.

The results of the community college survey show that

- Twenty-one (21) community colleges express an interest in offering applied bachelor's degrees.
- The most popular field is nursing, noted by 17 community colleges.
- Other fields of interest are other health areas, other business-related fields, manufacturing technologies, computer technologies, and other technology related fields.
- The financial requirements for implementing these degrees vary across community colleges.

There are reasons for and against implementing applied bachelor's degrees. Reasons against include the potential new drain on limited state resources, perceptions of degree quality, and the length of time needed to receive approval from accreditation agencies. The reasons for implementing applied bachelor's degrees include increasing the number of bachelor's degrees through improving geographic, financial, and academic accessibility.

Taking these issues into consideration and based on analysis of capacity, workforce data, and interviews undertaken with key stakeholders, Voorhees Group LLC recommends that Michigan implement applied baccalaureate degrees in its community colleges in a deliberate way. It is recommended that Michigan consider the principles below.

- A pilot project for a set amount of time (3-4 years) and a limited number of applied baccalaureate programs with an evaluation scheduled at a specified date.
- Approve only those programs that have a certain percent of matching employer funds, for example, ten percent of program costs.
- Do not assume any additional state funding. If state funding is provided, put aside a pool of funds for which community colleges could compete. An external, out-of-state expert panel should be used to determine the awardees in a competitive process similar to that now employed by the National Science Foundation.

Background

In December of 2004 the Cherry Commission on Higher Education and Economic Growth produced its final report. Included in the report was the following recommendation:

Universities that currently grant applied baccalaureate degrees must forge new partnerships with community colleges to expand the availability of this credential. In addition, the Michigan legislature must pass enabling legislation during the 2005-06 legislative session that defines the criteria and process by which Michigan community colleges may offer applied baccalaureate degrees in response to unmet economic, employer, or community needs in their service regions where partnership arrangements have failed to meet these needs.

By October of 2007 the legislature advanced a bill that called for a process by which the state's community colleges might satisfy certain criteria to offer stand-alone baccalaureate degrees in select areas.

From Substitute for Senate Bill No. 234, Sec. 408:

(1) From the funds appropriated in part 1, it is the intent of the legislature that the department identify ways to enhance local access to baccalaureate degree opportunities in applied sciences and applied technologies through better utilizing the existing capacity of community colleges. Funds in part 1 may be used by the department to commission an independent study to determine where in Michigan these programs would be most beneficial in meeting current and projected economic and workforce development needs, and where community college capacity exists to develop baccalaureate level programs quickly. The study should consider criteria such as the following:

- a. Regions that have historically been dependent on manufacturing and automotive related industries where workers have been displaced or are in transition.
- b. Communities that are significantly below the state average of working age adults with four-year degrees.
- c. Locations served by community colleges that have a strong track record for advanced technical training, workforce development programs, and employer partnerships.
- d. Communities that do not contain a public university already offering similar degree opportunities.

e. Locations where the community college has both faculty and facilities already in place that are capable of supporting baccalaureate level programs in applied technical fields.

f. Evidence of employer support and future employment opportunities for graduates of the programs.

(2) The department may commission and receive the study and present the report, not later than April 1, 2008, analyzing the study to the appropriations committees of the house and senate, the state budget office, and the fiscal agencies.

Why Now?

One might logically ask why there is now such a strong interest in Michigan for investigating the feasibility of community colleges offering bachelor's degrees. What are the forces driving this interest? Nationwide, applied baccalaureate degrees have increased in popularity and scope.

A February 2008 report by Michigan Futures, Inc. outlines some of the major issues behind the legislative interest. To quote some conclusions of that report:

It is the broad based knowledge economy where most of the good-paying job growth is occurring in the American economy. High education attainment industries in 2005 were 41% of national employment and 54% of the wages earned by American workers. The average wage in these industries is nearly \$53,000 as compared to nearly \$32,000 in all other industries.

Most importantly, high education attainment industries accounted for 75% of the job growth in America from 2001-2005. All of the growth and then some came from the high education attainment industries in the education and health care sectors. The remaining high education attainment industries – including all the new technology industries that are the focus of so much state and regional efforts – lost employment.

Our basic conclusion: What most distinguishes successful areas from Michigan is their concentration of talent, where talent is defined as a combination of knowledge, creativity and entrepreneurship. Quite simply, in a flattening world, the places with the greatest concentrations of talent win. States and regions without concentrations of talent will have great difficulty retaining or attracting knowledge-based enterprises, nor are they likely to be the place where new knowledge-based enterprises are created.

Michigan and its largest metropolitan [areas] are lagging in the transition to a knowledge-based economy. In 2006 Michigan ranked 26th in per capita income, an unprecedented drop of 10 places in a relatively short six year period. It ranked 37th in the share of wages from knowledge-based

industries and 34th in proportion of adults with a bachelor's degree or more...

Our best guess is that unless we substantially increase the proportion of college educated adults – particularly in our biggest metropolitan areas – Michigan will continue to trend downwards in the per capita income rankings towards the mid 30s.

It is assumed that recognition of forces such as those mentioned in the Michigan Futures report, along with others such as the aging of the population, resulting in retirements of educated workers creating need for replacements and thus even more demand for educated employees, were at least some of the reasoning behind the legislation that created the study at hand.

Scope of this Study

In the proposal developed by the Voorhees Group LLC in response to the Request for Proposals (RFP) by the Michigan Department of Labor and Economic Growth (DLEG), the following elements were outlined:

- determine where programs will be necessary to support projected economic and workforce needs,
- determine where community college capacity exists to develop these programs quickly, and
- develop a framework that can be used to address the types of applied baccalaureate degrees that should be considered throughout Michigan

The major activities were a survey of Michigan community colleges to determine the capacity (and desire, if any) to offer applied baccalaureate degrees as well as existing plans to offer them. A related activity included interviewing a representative sample of employers regarding the desirability and marketability of graduates of such programs. Last, public databases were accessed to evaluate demographic and labor markets within Michigan.

A final step was to map the expressed capacities of its community colleges and compare that to future requirements for rational implementation of applied baccalaureate degrees in Michigan that match local demographic and employment needs.

Methodology

The actual methodology used in conducting the survey was to build the survey instrument itself based on the original wording of Senate Bill No. 234 after on-site consultation on February 7, 2008 in Lansing, Michigan with staff from the Michigan Department of Labor and Economic Growth, the Michigan Community College Association and member presidents, and the Presidents Council of the State Universities of Michigan. Drafts were circulated for additional input, with the Community College Association assisting institutions with their responses. When the last response was received on the cutoff date of March 10, a total of 23 out of 28 community colleges had responded to the survey regarding their interest in applied bachelor's degrees. The

definition of an applied bachelor's degree used in the survey is provided below. Appendix A provides an example of the survey.

A degree program that builds upon the technical content gained at the associate's level. The combination of technical and higher level courses prepare graduates for higher level job opportunities related to their area of technical specialty. The Bachelor of Applied Science and Technology degree is designed to provide students with the opportunity to complete a baccalaureate program.

One of the questions on the survey requested the names and contact information of employers who are supportive of offering applied baccalaureate degree programs. That was to allow some verbal feedback from a handful of such employers in order to get their impressions regarding the proposal. During the period between March 5 and March 13, many attempts were made to contact employers listed by community colleges when telephone numbers and/or e-mail addresses were provided. Only eight were successfully contacted, though two others returned telephone calls later while the final report was being written, but too late for their input to be included. One pattern that was obvious was that those who were most likely to respond at all, and quickly, were those affiliated with hospitals. However, given the very small numbers of employers contacted, it was a biased convenience sample at best.

Concurrent with the survey activity, publicly-available, federal databases were accessed to determine the current and likely future workforce needs for various regions of the state and how those might correspond to the community college service areas.

Limitations

Any study has its limitations, and this study is no different. There is always the possibility that there are issues that have not been considered or that have not been weighed heavily enough, especially depending on one's perspective, despite consultation with the parties involved. Survey methodology has its own limits; it can fail to capture nuances, subtle differences between and among institutions as an example. In this case, however, probably the greatest limitation has to do with the employer data, since they were gathered from such a small sample. The sample was quite biased in the first place, since the employers were recommended by the community colleges as supporting the concept of the bachelor's degree. They were not intended to represent a random sample of employers. Had the sample been ten times as large, it still would not have been representative of all employers in Michigan. Instead, the idea was simply to get a sense from a few as to why they supported the applied bachelor's degree, and this was accomplished. Further generalizations should be approached with caution.

Bachelor's Degrees in Community Colleges

Bachelor's programs in community and technical colleges are increasing in number throughout the country. Community colleges nationwide have evolved three primary models to provide baccalaureate level education: (1) "2+2" programs where baccalaureate institutions offer on a community college campus one or more culminating years of the baccalaureate degree; (2) higher education centers, or "university centers"

where community colleges collaborate with baccalaureate institutions in developing and offering baccalaureate degrees; and (3) community colleges that offer the total baccalaureate degree program. The last option is growing in practice as community colleges seek more control over the content of their degrees to match community and employer needs.

Late in 2005, the Carnegie Foundation broadened the definition of accredited associate granting institutions to include those institutions that award both associate's and bachelor's degrees. Entitled, "Associate's Dominant," these institutions award bachelor's degrees in select fields, but the majority of degrees they award are at the associate's level. There are 159 such institutions in the United States, 42 of which operate in the public sector.¹ Most of these public institutions are now categorized as 4-year institutions because of this new authority to grant baccalaureate degrees, although most of their degree-granting activity remains at the associate degree level. It is interesting to note that the for-profit sector constitutes nearly half of the Associate's Dominant category, suggesting that direct competition for baccalaureate degrees by institutions that are primarily associate's degree institutions is beyond public policy.

Community colleges that offer bachelor degree programs primarily use them to address workforce needs, respond to economic pressures from employers, increase access to populations underserved by traditional bachelor degree-granting institutions, and maintain college affordability.² These reasons align well with Michigan's interests. Still, the notion of a community college offering its own bachelor's degrees seriously challenges the historical definitions of the community college role, at least within the traditional higher education establishment.

Two basic models have formed to meet the baccalaureate degree challenge. One involves collaboration between two- and four-year institutions. The second is the development of native community college bachelor's degrees. The notion of community colleges serving as the prime deliverer of bachelor's degrees is tied to the needs of working adults, especially those who experience restricted mobility because of job or family commitments, and students whose lower-division technical credits do not transfer in substantial amounts to an upper-division program. Different cultures and experiences mark 4-year colleges and universities. Universities tend to cater to full-time, traditionally-aged students (18 to 22 years of age) who are chiefly interested in an on-campus experience. In contrast, community colleges specialize in service to part-time students, older students, and especially to working-aged students.

Students who aspire to the bachelor's degree for a variety of reasons often find the door shut. Community colleges have reacted by revisiting their role in higher education and examining their vision and priorities. Within this context, community colleges have

¹Carnegie Foundation for Advancement of Teaching. Undergraduate Instructional Program Tables. Retrieved March 18, 2008, at <http://www.carnegiefoundation.org/classifications/index.asp?key=800>

²Levin, John S (2002, November) "Institutional Identity: The Community College as a Baccalaureate Degree Granting Institution," pp. 13-18. Paper presented at the Annual Meeting of the Association for the Study of Higher Education. ERIC Document No. ED474578

often found themselves caught between their wish to serve students with few alternatives and the bureaucracy which often marks traditional systems of higher education. Concerns about mission drift as frequently mentioned as a counter argument to the establishment of selected bachelor's degree programs at community colleges are perhaps routed in old thinking about program duplication and institutional competition than they are in meeting the needs of employers and the aspirations of students.

The Bachelor's Degree in Applied Science or Technology at Michigan Community Colleges

Just what is a bachelor's degree in applied science or technology? And why does it make sense to consider offering one at a community college?

The first question at looks to be a simple one, but in Michigan is not as simple as it looks, in part due to the autonomy enjoyed by each of the 28 community colleges in the state which has its own board of trustees, sets its own tuition and fees, etc. For example, one logical definition that one might use is that a bachelor's degree in applied science or technology is any program that grows out of an existing associate degree of applied science or technology, i.e., one that typically is not transferable to a traditional B.A. or B.S. program. That seems to make sense in that many, if not most, community colleges in Michigan have identified their vocational degree programs by titles such as Associate of Applied Science in Automotive Technology. However, not all community colleges in Michigan conform to this terminology. A few colleges label vocational programs as Associate of Science or Associate of Applied Arts and Sciences as opposed to Associate of Applied Science. If one were to limit bachelor's degree consideration only to those programs that are labeled as associate of applied science or technology programs, a range of other associate degree programs which might be considered for the baccalaureate degree would be eliminated despite their vocational or technical nature. Consequently, care must be taken in describing associate degree programs that can serve as foundations for the applied baccalaureate.

Defined narrowly, some believe that applied baccalaureate degrees should be confined to technical areas, such as engineering technology. On the other hand, Michigan community college presidents contacted for this study have expressed the belief that a broader definition is more apt and would include nursing and the health sciences and in some cases even teacher education.

Why consider offering bachelor's degrees at community colleges? Other states and Canadian provinces do it, but for different reasons. As an example, the state of Florida allows a number of community colleges to offer bachelor's degrees in fields such as nursing, law enforcement, and education for the simple reason that its universities are overflowing with students. Nevada endorses the applied baccalaureate in technical fields because of the proximity of the community college that offers them to the place that these degrees will be used. The population dynamics in Michigan are much different. We believe the primary reason to consider its induction in Michigan is access as discussed below and economic boost they may provide the state

Access usually is linked to geography, i.e., the community college is nearby and consequently easier to reach than a more distant institution of higher education. As part of the community, it often is more culturally accessible as well; adults in particular feel more comfortable attending classes there. As part of the community, it also tends to be more sensitive to community needs and more responsive to them, a second type of access. A third type of access is economic; community college tuition on average is more affordable than that of senior institutions. Even if they have to increase tuition as a result of offering bachelor's level programs, the community colleges argue that they can do so at a lower cost than senior institutions. So, if increasing the numbers of bachelor's degrees in communities across the state is a goal, then community colleges may be considered as partners in meeting that goal in part due to their access to many of the citizens of the state, and vice versa.

Michigan community colleges are not operating in a vacuum as they consider issues of access – far from it. The universities in Michigan have been quite aggressive about offering bachelor's level programs jointly with community colleges on their campuses, and some community colleges have joint programs with several senior institutions. In addition, if Michigan is like other states, the private, for-profit institutions of higher education can be expected to be aggressive in their efforts to grow their programs to the associate and bachelor's levels as well. This will be even more likely if the community colleges are denied the ability to offer bachelor's degrees. This is simply a reflection of the experience of other states, of trends elsewhere.

Analysis

Survey Results

An online survey was made available to all Michigan community colleges in March of 2008. Responses were received from twenty-three of the state's twenty-eight community colleges. Of the twenty-three responses, twenty-one indicate an interest in developing baccalaureate programs. Response frequencies appear in Table 1 below and are summarized below.

All respondents indicated that they were dependent on manufacturing and auto-related industries to some degree or another. They indicate a loss of jobs in these sectors within their service areas between 1,000 and 40,000. At least one community college indicates that each job loss is associated with a 2.5 multiplier effect as service-related positions also disappear in proportion to each manufacturing job. Their response has been to enroll displaced workers to developing new programs to match new workforce realities.

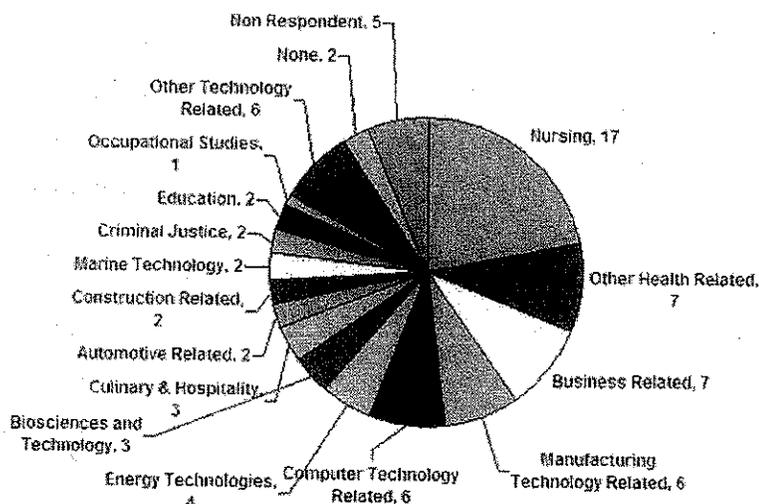
Respondents also indicate a range of education attainment within their service areas that often are less than the state average for baccalaureate degrees and higher taken from 2006 U.S. Census data (24.5 percent of those over 25 years of age). As expected, different jurisdictions within their service areas are associated with different levels of educational preparation. It appears that community colleges have a good grasp of where education needs exist in their geographical areas.

The issue of competition for bachelor's degrees with 4-year institutions also was addressed in the survey. Ten respondent community colleges indicate that there were no public universities within their service areas that currently offer baccalaureate degrees that could build on applied associate degrees. Macomb Community College in particular noted that they are one of the most populated counties in the United States lacking a public baccalaureate university. Nine community colleges further indicate they do not participate in a university center in which they cooperate with private and public universities in the areas of degree articulation.

Several community colleges also have documented student interest in earning bachelor's degrees. The proportion of their students who indicate an interest in transfer programs was also reported by several institutions and, where reported, appears to range from fifty to sixty percent.

The largest applied baccalaureate interest among Michigan community colleges is in the area of nursing (see figure below). This interest is borne out by workforce and education attainment data presented below. What this indicates is that Associate degree nurses are finding jobs, the bachelor's degree in nursing is a credential that is required for career advancement. Consideration of the category

Frequency of Applied Baccalaureate Programs Mentioned by Michigan Community Colleges



“other health-related,” degrees marks healthcare as an area of significant interest. Degrees that will require concentrated coursework in math and science (manufacturing, computer technology, energy technology, and biosciences) occupy another important niche. Education was mentioned by two colleges.

Community colleges also indicate faculty and facilities capacity to offer new applied baccalaureate programs. Most felt they met the threshold expressed by the Higher Learning Commission of the North Central Association of Colleges and Schools for the proportion of program faculty with a master's degree. In

general, those requirements are that faculty teaching in undergraduate programs should hold a degree at least one level above that of the program in which they are teaching, although limited exceptions can be made based on a case-by-case basis for faculty with significant work experience in a program's area of instruction. More than half of those community colleges expressing an interest indicated they presently had faculty who could teach in their applied baccalaureate programs. The remainder indicated that they would need to make new hires, but also indicated that they could accomplish this without huge difficulty. Most respondents indicated that new staff would have to be hired to accommodate the program. One program indicated that if it were to create a baccalaureate nursing program, that it may be difficult to find a Ph.D. program administrator.

Most indicated that technology was in place to support their choice of baccalaureate programs, however several indicated that technology would need to be updated. Only six community colleges indicated that space would present a problem for a new program, and at least one indicated that new programs could be accommodated with creative scheduling. Most indicated that other infrastructure costs could be absorbed. However, one college reported that if the program were scheduled in the evening or weekends that additional utility costs would arise. Finally, other additional costs would include marketing, recruitment, and costs associated with curriculum development. Nearly all community colleges indicated that they would incur costs for curriculum development. It should be noted, on balance, that these infrastructure issues would be present in creating any new program.

The impact on faculty contracts and workload issues would need to be addressed in fifteen of the twenty-one community colleges expressing an interest in developing applied baccalaureate programs. The underlying issue is that generally, university faculty have higher salaries and a different workload than their community college peers. The extent to which this model would carry over for faculty hired by the community college to teach upper-division courses would need consideration at each participating college. The remaining six community colleges do not anticipate any outstanding issues that would affect faculty or union contracts and indicated that such issues would be addressed through the normal negotiation or problem resolution process.

Increased tuition charges to students would vary. At least one community college indicated that introduction of baccalaureate programs themselves would not be a critical financing decision, but the overall efforts by the college to better serve its community would also need to consider the whole range of programs. Several indicated that they would need to charge a higher tuition for upper division courses but would prefer to keep lower-division tuition costs at their present levels. Even with the increased tuition costs for upper-division coursework, several indicated that the overall cost to students would be less expensive than what they would find at 4-year institutions.

| Survey Topic | Yes | No | Unknown | N/A |
|--|------------|-----------|----------------|------------|
| Availability of Resources | | | | |
| Sufficient Number of Faculty | 14 | 4 | 3 | 2 |
| Available Technology | 18 | 3 | 0 | 2 |
| Sufficient Space | 15 | 6 | 0 | 2 |
| Need to Increase Tuition | 11 | 3 | 7 | 2 |
| Increased Utility Cost | 9 | 12 | 0 | 2 |
| Need Increased Support Staff | 15 | 2 | 4 | 2 |
| Increased Employee Benefit Cost | 14 | 4 | 3 | 2 |
| Other Costs | 12 | 7 | 1 | 2 |
| Need to Address Specific Issues | | | | |
| Union | 11 | 8 | 2 | 2 |
| Faculty Workload Guidelines | 15 | 6 | 0 | 2 |
| Support Staff | 14 | 7 | 0 | 2 |
| Faculty Contract | 10 | 11 | 0 | 2 |
| Curriculum Development | 19 | 2 | 0 | 2 |
| Course Availability | 14 | 3 | 4 | 2 |
| Other Issues | 9 | 6 | 4 | 2 |

Workforce Data

The demand for baccalaureate degree workers and current population estimates were tested for each of Michigan's regions as defined by the Department of Labor and Economic Growth. The regions, community colleges, and counties used for this analysis appear below.

| |
|---|
| Detroit Area |
| Macomb Community College (Macomb County) |
| St. Claire County Community College (St. Claire County) |
| Oakland Community College (Oakland County) |
| Henry Ford Community College (Wayne County) |
| Highland Park Community College (Wayne County) |
| Schoolcraft College (Wayne County) |
| Wayne County Community College (Wayne County) |
| Monroe County Community College (Monroe County) |
| Grand Rapids Area |
| Grand Rapids Community College (Kent County) |
| Lansing MSA Area |
| Lansing Community College (Ingham County) |
| Ann Arbor Area |
| Washtenaw Community College (Washtenaw County) |

| |
|---|
| Saginaw Area |
| Delta College (Saginaw County) |
| Flint Area |
| Mott Community College (Genesee County) |
| Jackson Area |
| Jackson Community College (Jackson County) |
| Kalamazoo Area |
| Kalamazoo Valley Community College (Kalamazoo County) |
| Glen Oaks Community College (St. Joseph County) |
| Muskegon Area |
| Muskegon Community College (Muskegon County) |
| Northwest Lower Peninsula |
| North Central Michigan College (Emmet County) |
| Northwestern Michigan College (Grand Traverse County) |
| Battle Creek Area |
| Kellogg Community College (Calhoun County) |
| Benton Harbor Area |
| Lake Michigan College (Berrien County) |
| Southwestern Michigan College (Cass County) |
| Central Michigan Area |
| Montcalm Community College (Montcalm County) |
| East Central Michigan Area |
| Mid Michigan Community College (Clare County) |
| Kirkland Community College (Roscommon County) |
| Upper Peninsula |
| Bay de Noc Community College (Delta County) |
| Gogebic Community College (Gogebic County) |
| West Central Michigan Area |
| West Shore Community College (Mason County) |
| Northeast Lower Peninsula Area |
| Alpena Community College (Alpena County) |

Workforce data demonstrate that many regions in Michigan could benefit from access to locally determined applied baccalaureate programs. Workforce data show shortages in education--specifically special and secondary education--and business-related occupations. While these occupations are generally in demand statewide, the demand for technical baccalaureate programs is strongest for those areas with higher population density. Regional data are arrayed in Appendix B and demonstrate the variation in demand for workers holding the baccalaureate degree. We highlight these data below.

Demand for technical baccalaureates. The three Detroit-area counties (Macomb, Oakland and Wayne Counties) and the eight community colleges that serve them have the largest population of residents who have either completed some college or have an associate degree and thus would be educationally ready to begin a baccalaureate program. A key difference in the Detroit area compared to other areas is that, in addition to education and business programs mentioned

above, the demand for engineers will be high over the next ten years. The Ann Arbor region also will experience high demand for engineers over this time period. Genesee County also will have strong demand for computer and mathematical-related occupations.

Demand for business and education baccalaureates. These degrees are in the largest demand in Kent County (Grand Rapids Community College), Ingham County (Lansing Community College) and Washtenaw County (Washtenaw Community College). Business demand includes accountants, auditors, and business operations specialists.

Demand for healthcare baccalaureates. Michigan indicates an annual need for more than 3,400 registered nurses annually through 2014. The associate degree is the entry requirement for the profession, but most employers interviewed for this study (below) and comments made by individual community colleges surveyed (above) indicate a strong demand for baccalaureate degree nurses. These sources indicate that associate degree nurses do not advance into supervisory positions at the same rate as baccalaureate degree nurses.

Employer Interviews

A select number of employers suggested by the Department of Labor and Economic Growth and community college presidents were interviewed for this study to determine how the applied baccalaureate degree might fit in their future hiring plans. Representatives from these industries were interviewed: healthcare, automotive technology, manufacturing technology, and computer technology. Whereas, the receptivity to creating new bachelor's degrees varied, there was agreement expressed that many training needs go unfilled in Michigan and the demand for certain bachelor-level employees with technical skills is high. Interviewees also agreed that possession of a bachelors degree rounds out a current or prospective employee, allowing them to see the larger picture that the employer is trying to address.

Healthcare. One healthcare employer mentioned impending retirements and changing technology as factors that will drive demand over the next five years. Estimates from one healthcare employer are that upwards of twenty-five percent of their current employees will retire within five years. Another healthcare employer indicated that a baccalaureate degree in addition to a respiratory therapy degree is required for leadership teams formed in his healthcare system. This interviewee indicated that projections are that eighty percent of their leadership teams will need to be replaced over the next five to ten years.

There appears to be support among health care employers for a laddering system starting at the community college where nurses could earn the associate degree and then begin working and go on to earn a bachelor's degree. One interviewee indicated that The Proposal for Educational Advancement of the Nursing Profession in Michigan prepared by a statewide task force clearly

advocates for the BSN to be a practicing standard. The concept of applied baccalaureate degrees might also be used in other healthcare areas where, as in the respiratory therapy example above, technical skills at the associate degree would be supplemented with management skills earned at the upper division. While there is recognition that the university system has been helpful in healthcare areas, there is some skepticism among employers that it can meet future demand.

Technical areas. Based on another interview, it appears that the auto industry is very supportive of the current associate of applied science degrees turned out by community colleges. There is a perception, however, that those employees who earn an applied baccalaureate degree would get "kicked upstairs" into management positions thereby possibly causing shortages in workers with technical backgrounds. Most associate degree students in automotive areas are financed by dealers who want graduates to remain with them after they complete their studies. As it now stands, they can be promoted into management positions with the associate degree and do not need to have bachelor's degrees.

Yet another interviewee in the manufacturing sector indicated that the associate degree is adequate at hiring but that there needs to be an allowance for growth beyond that. Manufacturing extends beyond the automotive fields to other technology areas and that these skills need to be integrated in baccalaureate programs. Employees with these skills are well compensated and in short supply. At the same time, the perception of this individual was that senior higher education institutions do not produce the numbers needed to fill the demands of the manufacturing labor market in Michigan. One underlying factor is the shift among United States manufacturers to small and medium-sized companies.

Another employer in the manufacturing field indicated that the most difficult positions for them to fill are sales engineers, because they require both technical knowledge and a sales focus. Currently they have to develop their own sales engineers in-house, but would prefer that much more of their education and training be done at the community college, perhaps at the bachelor's level. The college could develop such a bachelor's program tailored to a niche market such as theirs and aimed at those holding associate degrees.

Information technology. Demand for graduates with skills in this area is high, and it will continue to be a growth area among employers. One interviewee indicated that there are fifteen unfilled openings in this job classification within a single healthcare employer in the southeast portion of the state. While there is no single occupational forecast category for "information technology," it is clear that demand is high, allowing for the 3,000 annual vacancies in the field of "computer and mathematical occupations."

Discussion

Michigan is posed to make a fundamental decision about the future of higher education within its borders. Below we discuss the pros and cons of implementing applied baccalaureate degrees in its community colleges.

Reasons Against Bachelor's Degree Approval

- While it is not realistic to think that all 28 community colleges would launch baccalaureate programs, those that do will add to the number of programs eligible for state funding. There is some risk in spreading already scarce financial resources even thinner.
- Universities are offering bachelor's degree programs at the existing centers already. Allowing the community colleges to offer bachelor's degrees might weaken demand for those programs and damage institutional cooperative relationships.
- There is no central agency in Michigan that might oversee the quality aspects of implementing applied baccalaureate degrees.
- The process of starting new applied baccalaureate programs is likely to be quite lengthy. The time needed to gain approval from the Higher Learning Commission for change in institutional degree status and the possible time needed to receive specialized accreditation for select programs, e.g., nursing, do not bode well for the quick establishment of programs as stated in the RFP.
- This could establish a two-tiered system in Michigan for bachelor's degrees – one at community colleges and another at universities.

Reasons in Favor of Bachelor's Degree Approval

- A range of baccalaureate programs would be more geographically accessible to a much wider variety of students, including working adults, than is the case presently.
- Applied baccalaureate programs also would be accessible financially, since their costs are presumed to be below those of the senior institutions even if community colleges must charge higher rates for upper-division classes.
- The community colleges are likely to know the specific needs of their communities and to offer a narrow range of baccalaureate programs that would rely, in part, on employer support. This would lead to customized programs that fit identified employer needs.
- An applied baccalaureate at a community college might better fit student needs than those currently available at senior institutions.
- The independent nature of community college boards in Michigan may translate into tighter oversight of baccalaureate programs, since these boards would be solely responsible for approving any baccalaureate programs and would need to exercise fiscal and programmatic supervision for the program. The result may be a range of programs that more precisely meet local market needs, since each college's board is independent and must approve any new program, it is unlikely

to do so if the program cannot be shown to be academically and financially strategic for the institution.

- The for-profit sector is nimble in meeting market needs. If the community colleges are not permitted to offer bachelor's degrees, experience in other states shows that for-profit institutions will attempt to fill part of the void that has been shown to exist in Michigan at the bachelor's level. While this may fill a need, it may not be in the interest of the public sector to forfeit this opportunity.

Meeting the Criteria of Senate Bill 234

Given the data presented above and the results of interviews with community college and university personnel, it appears that Michigan would do well to interpret Senate Bill 234 in a broad way. For example, if the geography suggested by this bill were the only jurisdictions which were permitted to offer an applied baccalaureate degree, Michigan might be limited to the southeastern part of the state and particular the Detroit metropolitan area where manufacturing jobs in the auto industry have been lost in large numbers. Still other areas in Michigan also are dependent upon manufacturing and even supplying the auto industry as indicated by the workforce data presented in the report appendices and by the responses made by individual community colleges. Other needs for baccalaureate degrees include nursing, education, and other health-related fields which are not directly dependent upon manufacturing and the auto industries.

Senate Bill 234 also appears to limit degree establishment to those areas that are significantly below the state average for working adults without 4-year degrees. This would appear to focus on communities that are now underserved by the current providers of baccalaureate degrees. However, we believe that Michigan's needs may be broader, since there is no guarantee that communities and sub-regions that are well-served by baccalaureate institutions have access to particular baccalaureate programs that meet local market need. Interviews conducted for this study indicate that community colleges and universities agree that duplication of programs is not desirable. However, it may not be realistic to force a dialog between these different levels of higher education, since the legislation clearly provides 4-year institutions and universities the upper hand in any negotiations.

Senate Bill 234 also limits applied baccalaureate degree development to those locations where capacity to offer these programs already exist. While we believe it would be most expedient to permit only those high-capacity community colleges to implement the applied baccalaureate degree, we are concerned that it may be used to limit justified degree development in other colleges based on documented need, especially if the cost for such a program could be defrayed by tuition increases and/or private support from employers or other sources of non-tax support. As an example, does it make sense to continue to import nurses from Canada rather than to educate more Michigan citizens in nursing when community colleges are willing and able to produce more of them at the bachelor's level with additional local resources?

Recommendations

Based on our analysis, we believe that an expanded menu of targeted applied baccalaureate degrees would be helpful for the state and its citizens. We also understand that it will take time for Michigan to develop applied baccalaureate degree programs and that these programs should be selected carefully to match documented market needs. We offer the criteria below for consideration to guide future decisions. We also are aware that there is no central approval agency for Michigan that will review the applicability of these criteria. Nonetheless, we believe them to be important. In brief, community colleges should expect to answer these questions prior to program implementation.

1. How the program supports the role and mission of the community college.
2. The existence of cooperating employers who will provide either hard or soft dollar resources and the extent of each source. Also, an estimate of how many program graduates will be hired by cooperating employers and/or those current employees who will advance as a result of program completion.
3. How the program's quality will be monitored.
4. How students will move through the program in an expedited fashion.
5. A timeline by which the institution will seek approval of the Higher Learning Commission of the North Central Association of Colleges and Schools.
6. How the program will provide access and success for diverse student populations.
7. A demonstration of how the need for the program is balanced against the costs it will incur, including an estimate of annual program cost, tuition to be charged, and any subsidy required to operate the program.
8. How the community college ensures that the program does not duplicate existing programs offered by other higher education institutions.

We also recommend these steps as Michigan begins to offer baccalaureate programs.

1. Offer the first programs on a pilot basis only for a set amount of time (e.g., 3 to 4 years) and a limited number of programs. Have an external evaluation done at the end of that period to determine whether or not the experiment was a success.
2. During the pilot process, allow only those programs to be started that have matching funds from employers at a predefined level, e.g., ten percent. This would guarantee that only the most serious employer-supported programs would be put forward in the initial phase.
3. Use the workforce and education data provided in this report to frame the types of programs that might be most useful in each region, but permit the market in the region to drive the demand for particular degrees given the criteria suggested above.
4. If some state funding is made available to assist in getting the bachelor's degree programs started, consider a statewide competitive process utilizing a panel of independent external evaluators from outside of Michigan to evaluate the funding proposals to eliminate political pressure, similar to the procedures used in funding by the National Science Foundation.
5. Investigate the current system of funding public higher education in Michigan for its impact on offering applied baccalaureate degrees with an eye to how to fund this model. Traditional methods of funding are predicated on sharp differences

between public 2-year colleges and 4-year colleges; an applied baccalaureate degree will blur these distinctions creating inevitable questions about funding adequacy.

6. Similarly, pre-implementation discussions should be held about the role of financial aid in assisting students to complete these degrees. Most often students will be working adults with dependent family members. Their needs may be qualitatively different from traditional aged students (18 to 24 year-olds) since their attendance patterns will be part-time.

Addressing and Resolving a Statewide Crisis:

Michigan's Nursing Shortage

A report in response to P.A. 255 of 2008 Sec. 246
Nursing Shortage Workgroup – Michigan Community College Association
December 31, 2008

Michigan Community College Association
12/31/2008

Executive Summary

Like much of the nation, Michigan's demand for nurses is outpacing the production of nurses at the state's community colleges and universities. Both college and university nursing programs continue to investigate and develop ways to increase the number of nurses entering the workforce, but there exist many barriers to increasing program capacities at these institutions.

Community colleges in Michigan educate about two-thirds of the state's licensed nurses, and as such, the Michigan Legislature has requested the Michigan Community College Association to convene a workgroup comprised of representatives from the universities and the healthcare industry and report on how the nursing shortage is being addressed. This report reflects this requested effort.

Section 1 of this report offers a glimpse at what other states have done to address their own shortages of nurses, and discusses organizations in Michigan that have been created to address the same. Additionally, Section 1 includes a brief discussion of the economic impact that the nursing profession has on the state.

Section 2 of this report focuses upon the pipeline issues that nursing programs face in producing more nurses and some of the creative partnerships between colleges, universities and the healthcare industry that are intended to increase nursing numbers.

LEGISLATIVE CHARGE

P.A. 255 of 2008, Sec. 246 requires that a workgroup comprised of representatives from community colleges, state universities, and the health care community address and resolve the nursing shortage in Michigan.

The workgroup is required to submit a report to the house and senate appropriation subcommittees on community colleges, the house and senate fiscal agencies, and the Department of Labor and Economic Growth no later than December 31, 2008.

The workgroup is comprised of:

- Michigan Community College Association
- President's Council, State Universities of Michigan
- Michigan Health and Hospital Association

INTRODUCTION

The nursing shortage has been widely documented. According to the Michigan Department of Community Health, the state is expected to have a shortage of about 7,000 RN's by 2010, and about 18,000 by 2015¹. Nursing programs at community colleges and other institutions continue to turn away qualified applicants because of a lack of classroom and clinical faculty, as well as clinical infrastructure. In fact, in 2007, Michigan nursing education programs turned away more than 4,000 qualified applicants due to the programs' lack of capacity. Making matters worse, more than half of the faculty at most Michigan nursing schools and colleges are

¹ The Nursing Agenda for Michigan: 2005-2010 – Actions to Avert a Crisis; Coalition of Michigan Organizations of Nursing, 2006

eligible to retire.² Moreover, the senior population in Michigan is expected to grow by about 25% by 2015. Thus, healthcare needs are set to increase while the ability to deliver healthcare services is expected to decrease.

Key factors contributing to the nursing shortage include an aging nursing population, a decreasing number of advanced level nurses available to teach in nursing schools, and program costs exceeding revenues. This report provides an overview of these factors and some of the ways that Michigan's community colleges, universities and health care industry are addressing and resolving the issue.

STATE INITIATIVES ADDRESSING NURSING SHORTAGES

The nursing shortage is not unique to Michigan. Nationally, several states have enacted legislation addressing the shortage of both practicing nurses and nursing educators. The initiatives have focused on several fronts, from increasing the capacity of nursing programs to developing long-term nursing workforce plans. The following examples were compiled by the American Association of Colleges of Nursing:

- In April 2006, Maryland awarded \$6 million in grants through the Nurse Support Program (NSP). The legislatively-created NSP aims to expand the pool of nurses by increasing the capacity of nursing programs in two phases: first, funding for graduate nursing faculty scholarships, new nursing faculty fellowships, and state nursing scholarship grants. The second phase focuses on increasing the pipeline for nurse faculty

² Michigan Department of Community Health

through a competitive institutional grants initiative. The state's Health Services Cost Review Commission generates funding for this initiative by levying a 0.1 percent increase to the rate structure of all Maryland hospitals. The change generates approximately \$8.8 million annually.³

- In July 2006, the Illinois General Assembly enacted the Nurse Educator Assistance Act. This Act provides up to \$5,000 in loan repayment and \$10,000 in scholarship funds to nursing students enrolled in graduate nursing programs. The legislation was aimed at attracting promising students to the nursing educator role and provides opportunities for those making mid-career decisions to enter the nursing educator profession. Additionally, the law created the Illinois Center for Nursing to address recruitment, retention and nurse utilization.⁴
- In 2006, the state legislature in Colorado passed two bills focused on their nurse faculty shortage. The legislation targeted both the financial barriers to graduate education and the salary differential for nursing working in academia versus practice. Labeled the Nursing Teacher Loan Forgiveness Program and the Nursing Faculty Fellowship Program, the laws allowed for up to \$20,000 in loan forgiveness for student's pursuing master's or doctoral degrees in exchange for a 5-year commitment to teach at a Colorado nursing

³ State Legislative Initiatives to Address the Nursing Shortage, American Association of Colleges of Nursing, October 2006

⁴ State Legislative Initiatives to Address the Nursing Shortage, American Association of Colleges of Nursing, October 2006

school, and to assist nursing schools in filling faculty vacancies through fellowship payment of up to \$10,000 per year.⁵

Around the country, state level nursing organizations and institutions have worked together, launching joint nursing shortage relief strategies. These collaborations typically involve a number of stakeholders, from nursing schools, nursing centers, hospital associations, businesses and higher education agencies. In Michigan, various coalitions and task forces have taken to the issue.

Coalition of Michigan Organizations of Nursing (COMON)

In 2006, a coalition representing Michigan's nursing community presented the Governor with a strategic plan for assuring a nursing workforce adequate in numbers to meet the health care needs of the state. Called the Coalition of Michigan Organizations of Nursing (COMON), the group produced short-range recommendations, mid-range recommendations, and long-range recommendations for nursing education, healthcare systems, regulatory and licensure changes, and work environment changes. The full report, *The Nursing Agenda for Michigan: 2005-2010; Actions to Avert a Crisis*, can be found online at www.michigan.gov/mdch/ocne.

Task Force on Nursing Education

To assist in implementing the steps suggested by the Coalition of Michigan Organizations of Nursing with respect to regulation, the Department of Community Health convened the Task Force on Nursing Education (TFNE) in 2007. Composed of representatives of nursing education programs at all levels, professional nursing practice organizations, plus representatives from the

⁵ *Id.* at 3

Michigan State Board of Nursing and others, the TFNE makes recommendations to the Director of the Department of Community Health regarding needed changes in statutes, rules, and policies in order to enhance the education of licensed nurses and expand the capacity of nursing education system in Michigan.

Michigan Nursing Corp

During the 2007 State of the State address, Gov. Jennifer Granholm unveiled the creation of a Michigan Nursing Corps to specifically confront the state's looming critical shortage of nurses. The governor said that the Corps, will address the key obstacle to educating greater numbers of nurses – a shortage of faculty – by preparing additional nurse educators to train new nurses by the year 2010.

Since then, the initiative has been spearheaded by Michigan Chief Nurse Executive Jeanette Wrona Klemczak, the Nursing Corps supports community colleges and universities with existing, accredited baccalaureate, master's and doctoral nursing education programs, aimed at increasing nursing faculty, thus adding new nurses into the workforce.

The framework for the Nursing Corps initiative has been outlined through Gov. Granholm's executive budget recommendation. Appropriation for the initiative has been placed in the Department of Labor and Economic Growth's (DLEG) budget.

The state will award grants to university and colleges, as well as hospitals that partner with nursing schools, for the purpose of accelerated nursing education programs that increase the capacity of nursing faculty and add new nurses to the workforce.

Since the creation of the MNC, the Legislature allocated \$1.5 million for the initial phase of the Corps; with an additional \$5 million dollars for fiscal year 2009, which began October 1, 2008.

Supporting funding of the Nursing Corp Initiative is critical to providing additional funding necessary to universities and college nursing programs for the purpose of accelerated nursing education which will increase the capacity of nursing faculty and add new nurses to the workforce.

Below are the current Michigan Nursing Corp Initiative awardees:

| Proposals For Award - Michigan Nursing Corps | | | |
|---|---------------------------------|-------------------------------|---------------------------------|
| No. | Applicant | Partnering Institution | Total Recommended Amount |
| MNC1 | William Beaumont Hospital | Oakland University | \$125,000 |
| MNC2 | DMC | Oakland Comm College | \$300,500 |
| MNC3 | Northern Michigan University | | \$360,000 |
| MNC4 | Saginaw Valley State University | Covenant Healthcare | \$124,920 |
| MNC5 | University of Detroit Mercy | Trinity Health | \$258,280 |
| MNC6 | Wayne State University | | \$331,300 |
| | | | \$1,500,000 |

NURSING: THE ECONOMIC IMPACT

According to the Michigan Department for Community Health, every \$1 invested in nursing programs return \$162 in economic value to Michigan's communities. Each RN in Michigan brings \$75,000 of economic value annually to the community in which he or she works and resides. Overall, \$10.5 billion is contributed to the state and local economies by RN's.

The aforementioned statistics showing the economic impact of nursing reflect the most current calculations from the MDCH. According to the department, nurse salaries have risen since these calculations due to the increased demand, as have the number of nurses.

PIPELINE ISSUES: FACULTY, CLINICAL SITES AND PROGRAM COSTS

In addition to increasing the number of qualified faculty to teach at Michigan nursing schools, improving clinical site access and increasing program capacity are also vital components to how Michigan will resolve the nursing shortage.

Increasing Capacity and Student Numbers

Nursing education is expensive, both for students and for the institutions that provide the training they need to perform in the workforce. The increasing use of technology in clinical settings has increased the cost of nursing laboratories that colleges must provide to ensure students experience a work-like environment. Further, compensating Masters-trained faculty is an issue. While the aforementioned Nursing Corp initiative can fund the education of Masters degree nurses, community colleges don't have the funding to hire these nurses to teach.

According to Charlene McPeak, Dean of Health and Human Services at Macomb Community College in Macomb, Michigan, nursing program costs exceed their revenue from

tuition, fees and state aid by about \$1 million. Because of costs exceeding revenues at this level, Macomb Community College's nursing program can admit only 120 out of more than 1,000 applicants each year.

Macomb Community College has looked at expanding its nursing program via capital improvement projects aimed at providing larger classrooms that could accommodate more students, as well as increasing simulation capacity in order to provide students the chance at practicing clinical skills in a state-of-the-art educational facility. To date, Macomb's nursing program has not found the funding to expand in this manner.

In 2002 when the nursing shortage crisis was becoming apparent, Bay College, located in Escanaba, Michigan, requested and was awarded a temporary increase in the number of seats in the nursing program. The increase added an additional ten seats in the practical nurse portion (from 70 to 80) and ten seats in the A.D.N. completion portion (from 50 to 60). This temporary increase was approved for the 2002 and 2003 academic years. Bay then requested to extend this temporary increase to the 2004 academic year and was approved, with the understanding that additional increases must be permanent increases.

Late in 2004 Bay partnered with MIWorks! to write for and received the Regional Skills Alliance seed grant to permanently increase the number of seats in the nursing program. Concurrently the nursing program was experiencing a bottleneck with students progressing to the A.D.N. portion at a higher rate than ever before. To remedy this situation Bay provided an outreach program with a portion of the RSA seed money, and admitted 20 LPN's in the 2005/6 academic year to complete their A.D.N. by December of 2006. During this time period Bay de Noc Community College received a land donation in Dickinson County for the sole purpose of building a college. It was at this time a decision was made to bring a full-time permanent

nursing program to Dickinson County. Proposals were generated and approved to add 20 permanent full time seats in the practical nurse portion and 20 in the A.D.N. completion program at the Dickinson campus beginning in 2007.

Table Illustrating Program Increases – Bay College, Escanaba, Michigan

| Academic Year | PN Seats Added | A.D.N. Completion Seats Added | Total perYear |
|---------------|-----------------------------------|----------------------------------|----------------------------------|
| 2002/3 | 10 temporary | 10 temporary | 20 temporary |
| 2003/4 | 10 temporary | 10 temporary | 20 temporary |
| 2004/5 | 10 temporary | 10 temporary | 20 temporary |
| 2005/6 | | 10 temporary | 10 temporary |
| 2006/7 | | | |
| 2007/8 | 20 permanent- Dickinson Campus | 20 permanent Dickinson Campus | 40 permanent Dickinson Campus |

During the time of program expansions, Bay de Noc Community College submitted an application for initial accreditation with the National League for Nursing Accreditation, Inc (NLNAC). The site visit for the initial accreditation was in October of 2004, and Bay's nursing program received full approval for accreditation.

Along with the temporary and permanent increase in program seats, the College made the commitment to add the necessary full time faculty to accommodate the program expansions. The College, Michigan Board of Nursing, NLNAC, and MIWorks! have been very

accommodating in supporting Bay College to fulfill the needs of future shortages of health care workers in the State of Michigan. Recently, Bay had a request to bring an outreach A.D.N. completion program to the Newberry area, and are discussing the possibility of doing this. The biggest drawback to another program expansion is the lack of available clinical facilities for placement in specialty areas, such as obstetrics and medical/surgical.

Addressing Clinical Education Needs - Human Patient Simulation

The Human Patient Simulator is an excellent learning tool for many health programs, including training in anesthesia, respiratory, nursing and critical care. Nursing programs as well as other health care programs have found that the use of human patient simulators has increased student's critical thinking abilities. Human Patient simulators offer students a realistic simulated patient experience not found in static mannequins. Simulated experiences allow students to practice in a safe and controlled environment in which mistakes can be made and corrected without any harm to a live person. A variety of simulated health scenarios may be selected by the course instructor that provides students with experiences that may not be readily available in clinical agencies. The course instructor can set up a simulation that addresses common health problems as well as emergency situations. With specific scenarios, the instructor can construct a set of specific learning objectives that fit the overall course objectives and that test the student's knowledge of disease processes and nursing interventions. Simulators are available in adult, child and infant models and are programmed to address health issues relevant to the age of the simulated patient.

Practice on human patient simulators has helped students to perform more effectively in clinical situations. In one case, a student had practiced an emergency code drill in the Human

Patient Simulator Lab. The very next day, the student was assigned to the Emergency Department of a busy urban hospital. The patient for whom she was caring suffered a cardiac arrest. The student immediately began life saving measures and the patient survived. The staff in the Emergency Department commented that they had never seen a Nursing student react so promptly and with such confidence and skill as this student had. The student credited her practice on the Human Patient Simulator as the reason that she was able to respond so effectively.

Clinical simulation can be used in lieu of certain clinical requirements for nursing education, especially if the clinical experiences are not readily available. The financial investment associated with this technology is substantial – a Human Patient Simulator costs about \$250,000. At Monroe County Community College in Monroe, the nursing program hopes to acquire a simulator in the near future.

COMMUNITY COLLEGE, UNIVERSITY AND THE HEALTHCARE INDUSTRY- PARTNERSHIPS

Across the state, community colleges, four-year universities and hospitals have forged partnerships to increase the number of nurses in the Michigan workforce. For instance, Lake Superior State University School of Nursing has a direct partnership with Bay de Noc Community College and North Central Michigan Community College, and continues to expand these partnership opportunities to others through increased distance learning initiatives as well. Below are some examples of such partnerships, addressing nursing education pipeline issues such as clinical placement and nursing student attrition.

Oakland Community College / Detroit Medical Center Nursing Partnership

In April, 2008, an agreement was reached between the Detroit Medical Center (DMC) system and Oakland Community College that stipulated that the DMC would provide clinical placements in all areas of Oakland Community College's nursing program, as well as two full-time clinical faculty. The agreement called for Oakland Community College to admit 50 nursing students. The program possesses the same curriculum as the college's ADN program, with the same amount of contact and credit hours required.

In May, 2008, a 15-month accelerated track was developed, and 60 students were admitted by Oakland Community College. Students were selected from the same pool as the ADN program, and will graduate in August, 2009. As of November, 2008, the retention rate is at 100 percent – no student has left the program.

The OCC/DMC model provides a consistent, supportive and interactive model that allows the student nurse transition into a professional nurse as he or she progresses through the clinical training and education. This collaboration allows for nursing students to gain clinical experience at one of the largest health systems in Michigan, an experience that will allow them to encounter a diverse group of sometimes medically complex patients.

ACE PASSPORT and ACE PLACEMENT – Southeastern Michigan

ACE PASSPORT and ACE PLACEMENT are unique regional collaborations of diverse organizations that are all interested in enhancing the efficiency and effectiveness of clinical

placements for students studying to become part of Michigan's healthcare workforce. These systems have been launched initially with nursing students, but are intended to be used for other healthcare professions' students as well.

ACE PASSPORT, launched June, 2008, is a Web-based learning system which enables healthcare students to acquire knowledge about HIPAA, OSHA and Blood Borne Pathogens, all of which are essential, prior to their entering the clinical environment for rotations and which are required by regulatory agencies. The system also tracks whether the student has completed certain other requirements prior to the start of their rotations, such as inoculations, background checks, etc. Currently, more than 2,500 students are registered in the system with an anticipated year-end target of 3,000 students. Under ACE PASSPORT, the student only needs to have their knowledge of these subjects tested on an annual basis – and this is accepted at all participating providers.

ACE PLACEMENT, launched in July, 2008, is a Web-based clearing house for clinical placements for healthcare students. This system eases the administrative burden between educational institutions and providers of finding, requesting, modifying and accepting clinical placements for students. This reduces faculty and clinical coordinator staff time and has proved to utilize existing clinical placements more fully and create new opportunities for placements. Currently, the system has over 1,400 placements for nursing students in Southeastern Michigan for Fall 08 and Winter 09 semesters. All of this will assist in growing Michigan's healthcare workforce to meet our state's needs in the future.

Nurse Preceptor Initiative – East Central Michigan

The Nurse Preceptor Initiative was created to address and reduce nurse vacancy rates and improve the retention rates of newly hired nurses. Funding from a federal grant enabled the East Central Michigan Healthcare Foundation (ECMHF) to establish the program, which trains existing nursing staff to become mentors to new nurses (on staff for 3 years or less). Targeted at reducing nursing turnover rates, the initiative is using the \$800,000 award over a three-year period to train the mentors, or “preceptors.”

The program will train nurses from among 14 counties in east central Michigan. Under the grant award terms, 430 nurses will be trained as preceptors after this initial three-year period. An additional 24 public health nurses will be trained as well, and nursing students will be provided the opportunity to “job shadow” with experienced nursing staff. The ECMHF will collect evaluation forms from each participant and the number of those trained – as well as the vacancy and turnover rates in participating hospitals to follow any improvements.

Nursing Programs at the University Level

University of Michigan School Of Nursing is the largest nursing program in the state with over 650 baccalaureate students [generic, RN studies and second career]; and the largest total enrollment [just under 1000 students]; further-UM SON has the largest PhD program in the state preparing future faculty [currently 78 PhD students and several post doctoral fellows].

UM-SON is also being highlighted by Hugh Downs' National Public Television programming on medical issues regarding what they are doing for the nurse shortage and the

faculty shortages. In order to enhance the clinical preparedness and leadership of baccalaureate grads, they have embarked on an Initiative for Excellence in Clinical Education with the UMHS that will provide the enhanced training on evidence based practice, practice leadership, and quality and safety issues so important in meeting current and future needs of health care. As well, their PhD program also promotes teaching emphasis with our partnership with Rackham and CRLT so that their PhD graduates have experience and training in higher education teaching that will support their faculty roles upon graduation. Because of their large research program, UM-SOIN also are the leader in the state in terms of advancing the knowledge base to support better practices in health care.

Wayne State University College of Nursing recently added Doctorate of Nursing Practice (DNP) program, which emphasizes the development of the student's capacity to impact the clinical setting as leaders and educators and to utilize clinical research to improve and transform health care. Along with its long-standing PhD program, WSU CON has long been a leader in preparing nurse educators and leaders in this state, in order to alleviate the bottleneck and train more nurse faculty. In an effort to offset state cutbacks and the increasing demand by students for entry into the Wayne State University College of Nursing, the school began collaborating with health care partners to support the College of Nursing's efforts to increase the number of students in entering classes. This effort has resulted in meaningful partnerships with area healthcare leaders that understand the importance of educating additional nurses, all of which have a vested interest in preparing the most highly qualified nursing professionals. These partner institutions include the Detroit Medical Center, William Beaumont Hospitals, Henry Ford Health

System and St. John's Health System. These resources offer every health care specialty, providing many opportunities for nursing students to learn and grown in their profession.

CONCLUSION

In March, 2007, the Michigan Community College Association submitted to the Legislature a report concerning the expansion of nursing programs at community colleges throughout the state. A workgroup was formed consisting of statewide nursing, healthcare, education and regulatory organizations to analyze the factors inhibiting the ability of community colleges to expand their nursing programs. Four critical factors were identified:

- 1) High cost of offering nursing programs
- 2) Availability of qualified nursing faculty
- 3) Availability of clinical sites for clinical training
- 4) Attrition of students who are admitted but fail to graduate from these nursing programs

To address these critical factors, the workgroup recommended various courses of action, including the expansion of Associate Degree nursing programs through mitigating the barriers addressed above. This report showcases a few of the ways that community colleges are doing just that, as well as the efforts by the universities and healthcare industries to increase the number of nurses in Michigan's workforce. All three groups are essential in the production of nurses necessary to remedy the current shortage crisis.

While the four critical factors remain substantial barriers to the production of qualified nurses, our colleges, universities and health care industry groups continue to try and develop ways to mitigate them. The demand for nurses will only increase, and future discussion and

consideration of all the issues affecting the ability for our nursing colleges and healthcare industry to meet this demand are warranted. The MCCA and its members, in collaboration with the university and healthcare industry partners, appreciate the opportunity to submit this report – and look forward to continuing the effort to resolve this crisis.