

Nurse Support Program II FY 2028 Technical Assistance Competitive Institutional Grants



Thank you for joining us today ~ We will begin soon!

Laura Schenk, Kimberly Ford & Alicia Gainey- MHEC
Erin Schurmann- HSCRC
September 30th & October 2nd, 2026

HSCRC and MHEC Contacts

NSP I: Benjamin Quintanilla

benjamin.quintanilla@maryland.gov

HSCRC: Erin Schurmann

erin.schurmann@maryland.gov

NSP II: Laura Schenk, Kimberly Ford &
Alicia Gainey

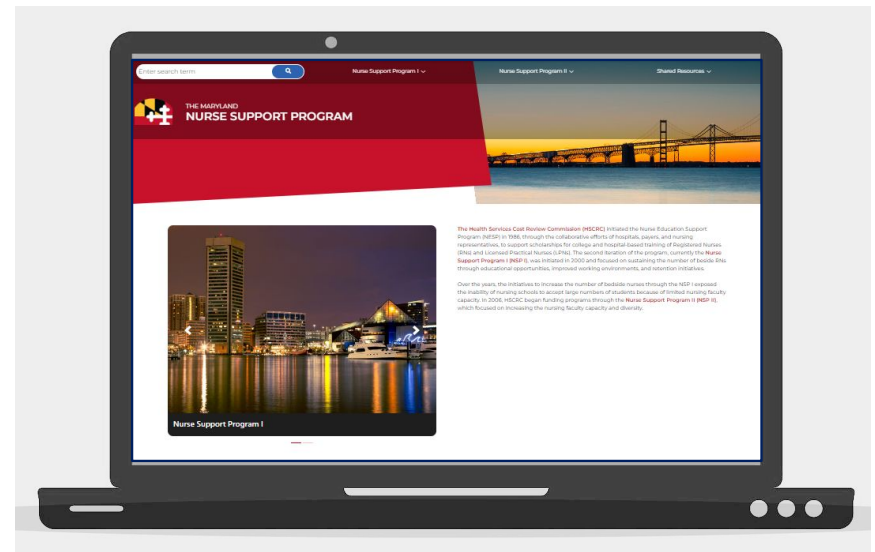
laura.schenk1@maryland.gov

kimberly.ford@maryland.gov

alicia.gainey@maryland.gov

For more information about Nurse Support Program I and II:

Visit our website! → nursesupport.maryland.gov



Background



HSCRC: Who We Are



The Maryland Health Services Cost Review Commission (HSCRC) is an independent state agency responsible for regulating the quality and cost of hospital services to ensure all Marylanders have access to high value healthcare.

HSCRC's vision is to enhance the quality of healthcare and patient experience, improve population health and health outcomes, and reduce the total cost of care for Marylanders.

The HSCRC establishes rates for all hospital services and helps develop the State's innovative efforts to transform the delivery system and achieve goals under the Maryland Health Model.

AHEAD Model

States Advancing All-Payer Health Equity Approaches and Development (AHEAD) Model

2024-2034

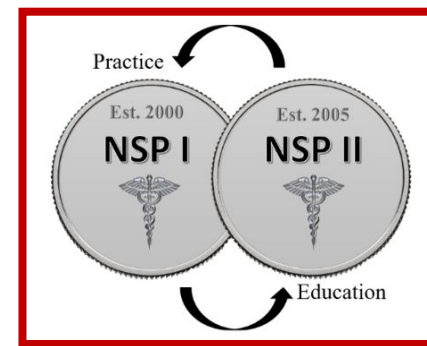
Under the AHEAD Model, states will take accountability for population health, health equity improvements, and all-payer and Medicare fee-for-service total cost of care growth.

States will engage with hospital and primary care providers to redesign care delivery to focus on keeping people healthy and out of the hospital.



Image Source: <https://www.cms.gov/files/document/ahead-infographic.pdf>

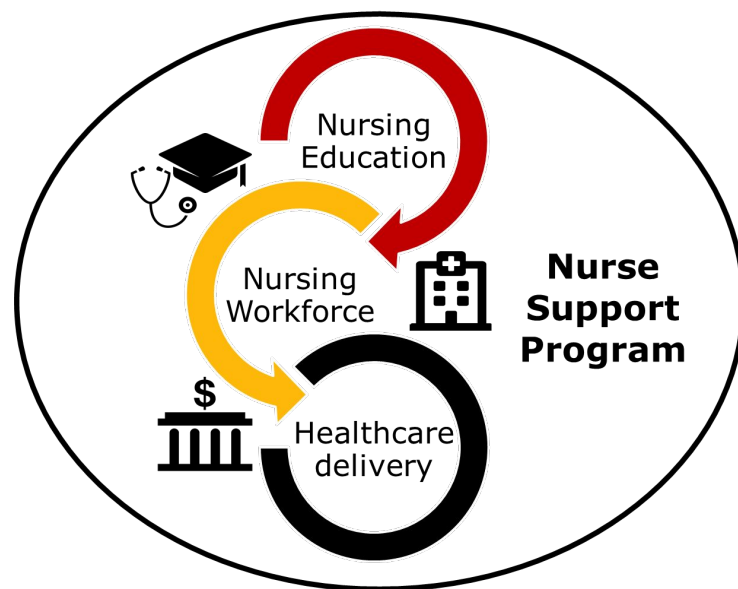
NSP I & NSP II: Two Sides of the Coin



Nurse Support Program I	Nurse Support Program II
<i>What is the program?</i>	
- Administered by Maryland Health Services Cost Review Commission (HSCRC) - Non-competitive - Funding for hospitals - Grant projects that address individual hospital needs	- Administered by Maryland Higher Education Commission (MHEC) - Competitive - Funding for schools of nursing, students and faculty - Competitive institutional grants - Statewide initiatives
<i>What are the goals of the program?</i>	
- Retention and recruitment - Higher levels of education - Improved clinical competencies - Evidenced-based research	- Increase capacity and diversity - Expand the pipeline - Address barriers - Promote innovation

NSP II: Overview

- Established in 2005 to increase Maryland's academic capacity for nursing education
- Administered by the Maryland Higher Education Commission (MHEC)
- Funded through pooled assessments totaling up to 0.1 % of hospital regulated gross patient revenue
- Goal: to increase nursing graduates and mitigate barriers to nursing education through institutional and faculty focused initiatives.



Maryland Higher Education Commission (MHEC)

- Selected to Administer NSP II
- Relationship with MD colleges/universities
- Higher Education Coordinating Board
- Expertise in Grants and Scholarships
- Receives hospital payments to fund NSP II
- Non-lapsing funds- all remain with NSP II



NSP II provides for **Competitive Institutional Grants** and **Statewide Faculty initiatives**.

Statute for NSP II

Annotated Code of Maryland, Education Article

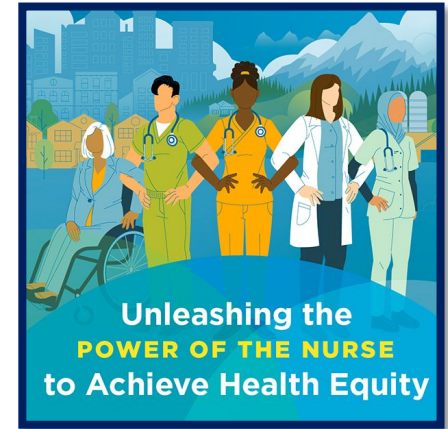
§ 11-405. Nurse Support Program Assistance Fund

(a) "Fund" defined.- In this section, "Fund" means the Nurse Support Program Assistance Fund. (b) Established; status; administration; investments.- 1. There is a Nurse Support Program Fund in the Commission. 2. The fund is a **continuing, nonlapsing fund** that is not subject to §7-302 of the State Finance and Procurement Article 3. The Treasurer shall separately hold and the Comptroller shall account for the fund 4. The fund shall be invested and reinvested in the same manner as other State funds 5. Any investment earnings of the fund shall be paid into the fund (c) Composition.- The Fund consists of revenue generated through an increase, as approved by the Health Services Cost Review Commission, to the rate structure of all hospitals in accordance with § 19-211 of the Health - General Article. (d) Expenditures.- Expenditures from the Fund shall be made by an appropriation in the annual State budget or by approved budget amendment as provided under § 7-209 of the State Finance and Procurement Article (e) Use of money; guidelines.- The money in the Fund shall be used for **competitive grants** and **statewide grants** to increase the number of qualified **bedside** nurses in Maryland hospitals in accordance with guidelines established by the Commission and the Health Services Cost Review Commission. (f) **Guideline provision for minority recruitment**. - The guidelines established under subsection (e) of this section shall provide that a portion of the competitive grants and statewide grants be used to attract and retain minorities to nursing and nurse faculty careers in Maryland. [2006, chs. 221, 222.][2016]

NSP II Foundational Goals

Informed by the Institute of Medicine's *Future of Nursing*

- 80% of nurses with a BSN by 2020
- Double the number of nurses with a doctorate by 2020
- Ensure that nurses engage in lifelong learning
- Build an infrastructure for nursing workforce data
- Prepare & enable nurses to lead change/advance health



Added after the FY 2020 program evaluation:

- Double the number of nurse faculty with the NLN CNE® credential
- Work with NSP I Leadership to find solutions to mutual priorities
- Increase participation in NSP II funded statewide initiatives

NSP II Program Evaluation

Completed in February 2025 with permanent funding approved!

Continued goals:

- Increase the # of newly licensed RNs and RN higher degrees
- Strengthen the faculty workforce & educational capacity
- Underrepresented groups in nursing

Added focus areas:

- AHEAD model goals related to Community/Population health
- Academic-Practice partnerships for pipelines/pathways to nursing
- Strengthen Evidence-Based Practice (EBP) of new graduates
- Promote Competency-Based Education (CBE)

FY 2028 Major Revisions

- **Electronic submissions** - mailed copies no longer required!
- **Initiative #1** - must address clinical placement capacity
- **Personnel effort** - mandatory disclosure table
- **P.D. Resource grant** - may now include indirect cost recovery
- **Ceremonies** - verbal/written recognition encouraged

Link to Summary of Revisions:

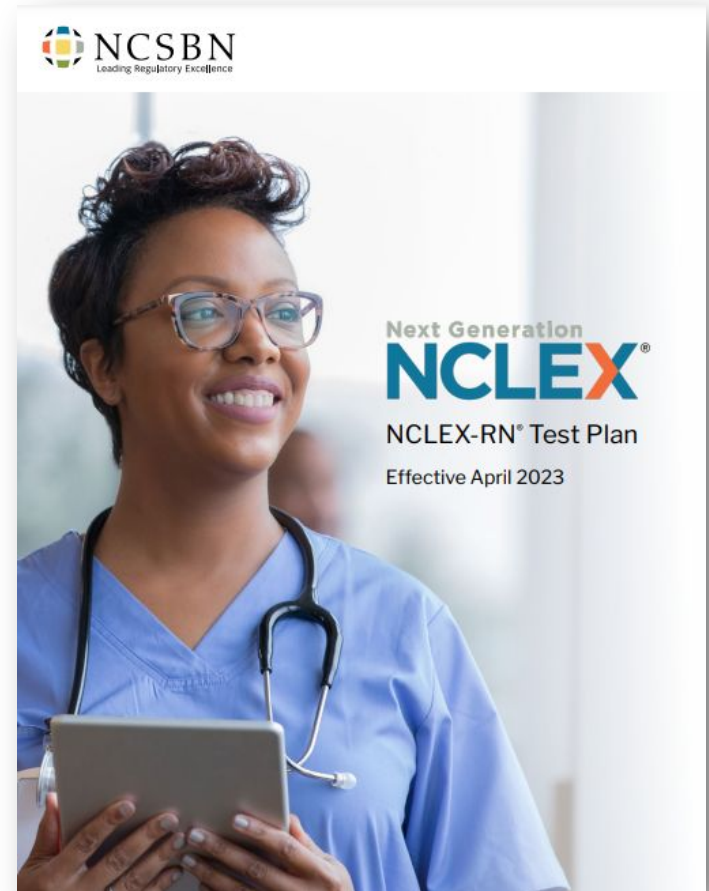
https://nursesupport.maryland.gov/Documents/NSP%20II/Forms/FY2028_RFA_Simplified_Comparison.pdf

Nursing trends



NSP II measures entry level RNs

- Researchers agree that monitoring changes in RN entry is the single most important factor that affects nursing workforce projections (Auerbach, et al., 2017, pg. 294)
- NSP monitors NCLEX-RN pass rates and trends through each fiscal year through the Maryland Board of Nursing

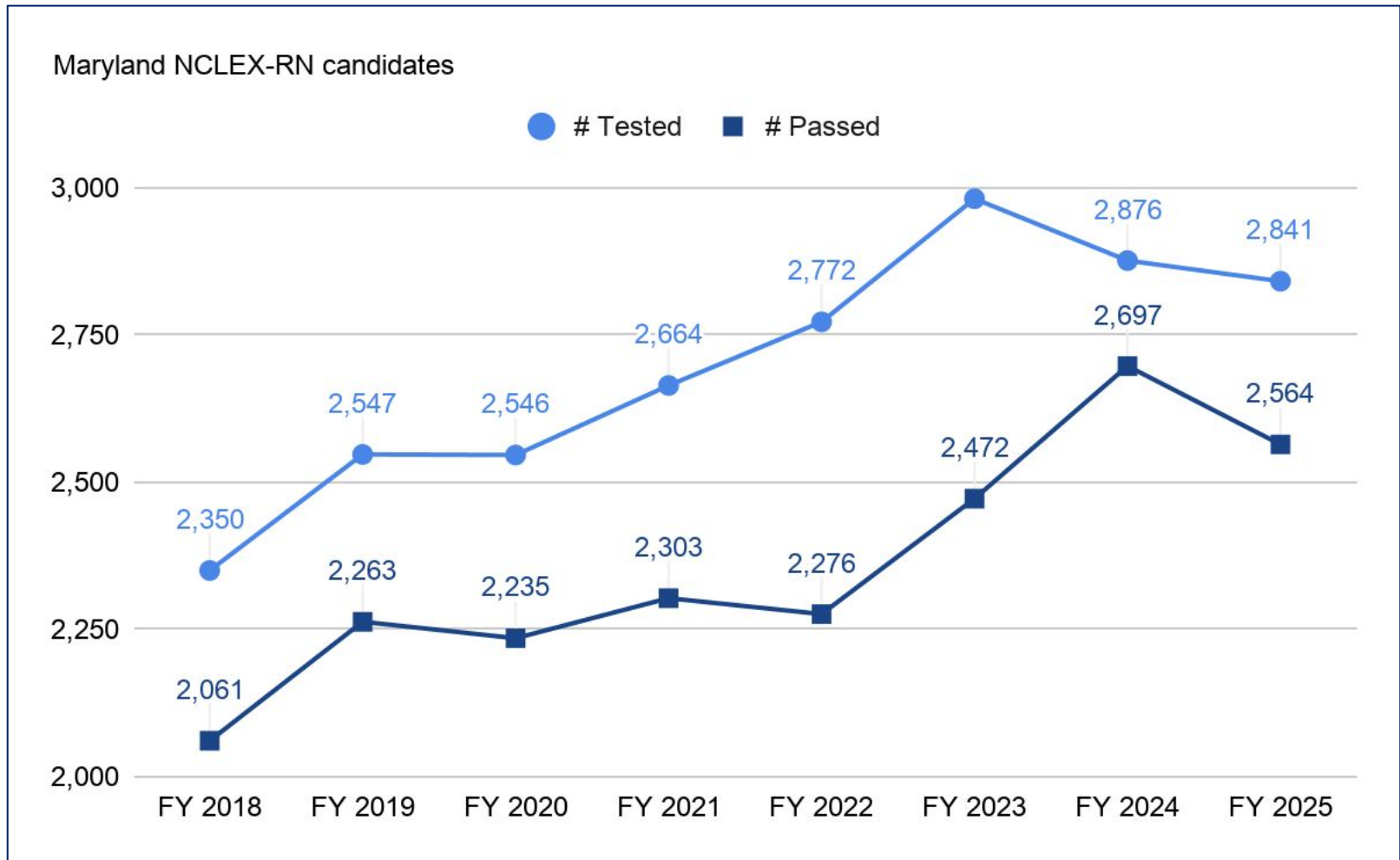


NCLEX-RN Pass Rates

FY 2021 – FY 2025

Fiscal Year	Maryland BSN Programs		Maryland ADN Programs		Maryland MS Entry Programs		Total All Maryland Programs		Passing Rates	
	No. Tested	Passed	No. Tested	Passed	No. Tested	Passed	No. Tested	Passed	MD	US
FY 2021	926	755	1,376	1,218	362	330	2,664	2,303	86.45%	84.48%
FY 2022	965	747	1,433	1,205	374	324	2,772	2,276	82.11%	80.83%
FY 2023	1,027	796	1,542	1,324	412	352	2,981	2,472	82.93%	83.21%
FY 2024	1,007	912	1,472	1,407	397	378	2,876	2,697	93.78%	92.18%
FY 2025	946	840	1,552	1,412	343	312	2,841	2,564	90.25%	88.27%

Maryland's First Time NCLEX-RN Rates, FY 2018 – 2025



Source: Maryland Board of Nursing, National Council State Boards of Nursing, and Pearson Vue. All Maryland RN 1st time candidates who graduated from a Maryland nursing program and tested in any US jurisdiction.

NCSBN Workforce Research 2023

Examining the Impact of the COVID-19 Pandemic on Burnout & Stress Among U.S. Nurses:

- 100,000 nurses left during the pandemic
- One-fifth of nurses intend to leave by 2027
- Issues: feeling emotionally drained (50.8%), used up (56.4%), fatigued (49.7%), burned out (45.1%), at the end of the rope(29.4%)
- These issues were most pronounced with nurses with 10 or fewer years of experience

US Critical Staffing Shortages

According to [HHS data](#) posted September 18, 2023.

Average number of hospitals in each state and DC experiencing critical staffing shortages since January 1, 2020, ranked in descending order:

1. Michigan
2. California
3. South Carolina
4. Maryland
5. Wisconsin

Nursing workforce projections are rebounding to pre-pandemic levels, but there is a **shift in nurse employment to non-hospital settings**. (Auerbach et al., 2024)

NCSBN 2024 National Nursing Workforce Study

[2024 National Nursing Workforce Study:](#)

- Workforce may be rebounding toward pre-pandemic levels.
- Increased diversity, particularly among Latino/Hispanic nurses.
- Over 70% of RNs hold a BSN or higher.
- Nurse-reported workloads decreased by 20–25%.
- Hospital employment lowest recorded (53.3%); more nurses working in other settings.
- 2 in 5 nurses plan to leave or retire within 5 years.
- Stress and burnout remain major reasons for leaving.

Informing Grant Priorities: NSP I & NSP II Hospital Site Visits

What Hospitals Are Experiencing:

- **Readiness Gaps:** High reliance on new grads with needs in clinical judgment, communication, and professionalism.
- **Specialty Vacancies:** Acute, persistent shortages in behavioral health and specialty care.
- **Transition Needs:** Critical demand for structured onboarding, simulation, and extended transition support.

High-Impact Strategies:

- Build formal academic-practice partnerships and specialty pipelines
- Expand competency-based education (CBE) and clinical simulation
- Embed mentorship, resilience, and wellbeing into transition programs

Technical Assistance



FY 2028 NSP II Competitive Institutional Grants

Request for Applications (RFA)

Link to FY 2028 RFA:

<https://nursesupport.maryland.gov/Documents/NSP%20II/Forms/FY2028RFA.pdf>



NURSE SUPPORT PROGRAM II

Request for Applications

FY 2028

Competitive Institutional Grants

DUE DATE:

Emailed by Thursday, January 28, 2027

All proposals must be emailed to:

Laura Schenk, NSP II Grant Administrator:
laura.schenk1@maryland.gov,

Kimberly Ford, NSP II Assistant Grant Administrator:
kimberly.ford@maryland.gov &

Alicia Gainey, NSP II Grants Specialist:
alicia.gainey@maryland.gov

***Mailed proposals are not required**
***Hand-delivered proposals cannot be accepted**

For more information:
nursesupport.maryland.gov

Joshua Sharfstein, MD
Chairman

James N. Elliott, MD
Vice-Chairman

Jonathan Blum, MPP

Ricardo R. Johnson

David N. Maine, MD

Nicki McGinn, JD

Farzaneh Sabi, MD

Jonathan Kromm, PhD
Executive Director

William Henderson
Director
Medical Economics & Data Analytics

Gerard J. Schmith
Director
Revenue & Regulation Compliance

Claudine Williams
Director
Healthcare Data Management & Integrity

The Health Services Cost Review Commission is an independent agency of the State of Maryland
P: 410.764.2605 F: 410.358.6217 4160 Patterson Avenue | Baltimore, MD 21215 hsccr.maryland.gov

Key Items on the Cover Sheet

Lead Applicant Institution/Organization: Your Institution

Project Title: Be brief (6 words or less)

Partnership Members: Include your hospitals and fellow nursing program partners (partners matter) w/ MOUs

Project Duration: up to 5 yrs, depending on grant type

Funding Requested: be realistic ~ \$10mil/30 SONs

Value of Match (Funds, In-Kind, Etc.): Required

Signatures required of Project Director, Grants, Accounting & Dean Approval
(all different people)

Projected and Actual Outcomes

Projected Outcomes: (Identify below the number of **additional** outcomes expected from funding)

Proposed/ Final Outcomes

Projected Increase (# of Additional)

Describe Degrees/Results quantitatively (with measurable numbers)

Nursing Pre-Licensure Graduates

Nursing Higher Degrees Completed (describe)

Nursing Faculty at Doctoral Level

Collaborative, Statewide or

Community/Population Health Results (specify)

Measured annually and as final outcome (met/not met)

Select one Type & one Initiative

Type of Grant (choose only **ONE**):

☐ Planning

☐ Implementation

☐ Continuation

☐ Resource Grant: (*if applicable*):

☐ P.D. Resource Grant

☐ S.S. Resource Grant

Type of Competitive Grant Initiative (choose only **ONE**):

1. Initiative to Increase Nursing Pre-Licensure Enrollments & Graduates
2. Initiative to Advance the Education of Students & RNs to BSN, MSN, & Doctoral Level
3. Initiative to Increase the Number of Doctoral-Prepared Nursing Faculty
4. Initiative to Build Collaborations between Education & Practice
5. Initiative to Increase Capacity Statewide
6. Initiative to Increase Cohen Scholars as Future Faculty & Clinical Educators
7. Initiative to Increase education that advances practice in community health settings/
advances population health

Professional Development (P.D.) Resource Grants

- For full-time nurse faculty members
- Complements existing institutional support
- 1 year; up to \$50,000 award per nursing program
- Schools are limited to one (1) P.D. resource grant per year

Ineligible Expenditures*:

International travel, rental car fees, first-class airfare, food that exceeds the MD per diem rate, course fees, journal subscriptions, professional membership dues, and/ or certification fees.

*This list is not exhaustive

New for FY 2028: Up to 8% indirect cost recovery is allowable

Student Success (S.S.) Resource Grants

- For time-limited resources to improve student outcomes
- Must provide evidence of demonstrated need (NCLEX-RN pass rates, graduation rates, retention data, etc.)
- 1 year; up to \$100,000 award per nursing program
- Schools are limited to one (1) S.S. resource grant per year

Ineligible Expenditures*: scholarships, tuition, routine operating costs (such as utilities, office supplies, or existing staff salaries), capital expenditures, indirect costs/ overhead, and any expenses already supported by institutional resources.

*This list is not exhaustive

Body of the Proposal

- Stick to the page limits and number the 15 pages to review
- (Budget/MDT not included in 15 pg.- budget, MDT, CVs are final –not 50pgs.)
- Abstract needs to be clear and brief (so we can put it on the website verbatim instead of editing it down)
- Include PPT
- Tell us on the first full page exactly what is needed and what you can do if funded. Provide all assessments of how you arrived at it.
- Do not bury the main points on pg. 8 where we might not see it.
- Do not send a bigger packet than is needed. Simple and clear is more likely to be funded than fuzzy and long winded. (RNs are direct and brief)
- Watch the budget. If we can divide \$500,000 by 2 graduates as the outcome= it's not worth it, so can you.
- Finally, your program's requirements in open door acceptance, retention, DEI, etc. are not our funding focus. Our focus is “additional” graduates.

Mandatory Dissemination

Required- to be planned and funded (\$) each year

- Conference presentations (Poster or Podium)
- Journal Publications
- Podcasts

Must be outside of your Institution/Organization

Must be included in all annual/final reports

Must be included in the budget - **under “Mandatory Dissemination Activities”**
not “Travel”

Examples on the NSP II website:

<https://nursesupport.maryland.gov/Pages/nsp-ii-dissemination.aspx>

Disseminate in Maryland

Attend conferences:

- Maryland Nurses Association (**MNA**) Annual Convention
- Maryland Action Coalition (**MDAC**) Annual Summit
- Maryland Association of Associate Degree Nursing Directors (**MAADND**) Annual Statewide Conference

Publish articles in:

- ***The Maryland Nurse Journal***
(official publication of MNA)



Mandatory Data Tables (due every year)

Required Data Set for all Programs

Faculty: Calculate FTEs using the following formula: FTE calculation: 1 FTE = 15 credits or 600 hours per semester or as defined by your institution for Nursing Program Faculty **as of October 15th of the most recent year.**

Equivalents (Total FTEs) and a breakdown of their education

Faculty vacancies & faculty retention rates (if known)

Faculty with NLN CNE® credential

Link to online MDT instructions:

https://nursesupport.maryland.gov/Documents/NSP%20II/Forms/NSPIIOnlineMDTInstructions_2027.pdf

Important: # graduates

Graduates per academic year (as appropriate)

- ADN
- BSN
- Master Entry
- RN-BSN
- RN-MSN
- MS
- DNP
- PhD

We expect to see “additional graduates” on the cover sheet. This is the baseline year and you will propose increasing by specific measurable #'s with the grant funding proposal.

Person completing Data Tables

Note: The Dean/Director or designee already submits this information to the MBON and accrediting bodies each year. We expect it to match. Any questions, refer to your Dean/Director of the nursing program.

- Name of person completing Mandatory Data Table Form:
- Institution:
- Contact Info:
- Phone:
- Email address:
- Missing Mandatory Data Table = No review of proposal

Budgets- annual and total years

Separate Application Annual Budget Requests for **each year**:

Nurse Support Program II – Competitive Grant Program Application Annual Budget Request

Institution: _____
Partner Institutions or Organizations: _____
Project Title: _____
Year # of grant & FY 202__ : _____

	SOURCE OF FUNDS		
	COLUMN 1 NSP II FUNDS REQUESTED*	COLUMN 2 INSTITUTION'S MATCH FUNDS	COLUMN 3 OTHER FUNDS**
A. Salaries & Wages			
Professional Personnel			
List each by name and title			
1			
2			
3			
4			
Other Personnel (list by job category & note # of each)			
5			
6			
7			
8			
Total Salaries and Wages	\$ -	\$ -	\$ -
B. Fringe Benefits			
C. Travel			
D. Participant Support Costs (specify)			
1. (REQUIRED) Mandatory Dissemination Activities			
Total Participant Costs	\$ -	\$ -	\$ -
E. Other Costs			
1. Materials and Supplies			
2. Consultant Services			
3. Computer Services			
4. Other (specify)			
Total Other Costs	\$ -	\$ -	\$ -
F. Total Direct Costs (A through E)	\$ -	\$ -	\$ -
G. Indirect Costs (cannot exceed 8% of F)	\$ -	\$ -	\$ -
H. Total (F & G)	\$ -	\$ -	\$ -

*Include all grant-funded expenses, including for sub-contracts, in this column. Identify cooperating organizations, agencies, institutions, etc., and funds requested for them (through project sub-contracts) on separate page(s); use the column 1 format for each. ** If any of these cooperating parties, or another agency, is committing funds for this project, indicate the specific breakdown and explanation of such funds for each on a separate sheet, while putting the totals for appropriate categories here in column 3 and summarizing the match in the budget narrative.

Total Application Budget Summary for **all years**:

Nurse Support Program II - Competitive Grant Program Application Budget Summary								
Lead Institution: _____								
Partner Institutions or Organizations: _____								
Project Title: _____								
Total Grant Funds Requested: \$ _____								
Total Requested Funds	Year 1	Year 2	Year 3	Year 4	Total Amount of Funds	Total Institution Funds Over Match or In Kind Contribution	Other Funds	
	FY 202__	FY 202__	FY 202__	FY 202__				
A. Salaries & Wages								
Professional Personnel : List by name & title								
1								
2								
3								
4								
Other Personnel:								
List by job category & note number of each								
5								
6								
7								
8								
Total Salaries & Wages	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
B. Fringe Benefits								
C. Travel								
D. Participant Support Costs								
1. (REQUIRED) Mandatory Dissemination Activities								
E. Other Costs								
1. Materials and Supplies								
2. Consultant Services								
3. Computer Services								
4. Other costs (list)								
Total Other Costs	\$ -	\$ -	\$ -		\$ -	\$ -	\$ -	\$ -
F. Total Direct Costs (A through E)	\$ -	\$ -	\$ -		\$ -	\$ -	\$ -	\$ -
G. Indirect Costs (cannot exceed 8% of F)	\$ -	\$ -	\$ -		\$ -			
H. Total Costs	\$ -	\$ -	\$ -		\$ -	\$ -	\$ -	\$ -
I certify that the financial information presented in this report is accurate. (original signatures required, no photocopies)								
Project Director:	Signature _____				Date _____			
Financial Officer:	Signature _____				Date _____			

Budget Narrative

SAMPLE BUDGET NARRATIVE

(annual reports should include narratives that match the proposal)

Nurse Support Program II – Competitive Institutional Grants

Lead Institution: _____

Project Title: _____

Year # of grant & FY 202__: _____

(These partial examples are provided only to demonstrate the format requested for the budget narrative. This is an annual and final report requirement.)

Salaries & Wages

Professional Personnel: (RN PERSONNEL IS THE MOST HIGHLY FUNDED LINE ITEM)

Column 1: Dr. Jill Smith, the project director, will spend 10% of her time in project activities during the academic year. Maryland State University requests only the amount it will cost the university to pay an adjunct to replace Dr. Smith in one course. Request = \$4,900

Column 2: The university will contribute the difference between the \$4,900 requested and 10% of Dr. Smith's 10-month annual salary as in-kind cost share valued at \$3,100. Match = \$3,100

Other Personnel:

Budget Narrative: Personnel Effort Disclosure

Key Personnel Effort Disclosure: Required if named on multiple NSP II grants

Example:

Personnel Name & Role	Grant Award # / Title	Status (Active or Pending)	% Effort Committed
e.g., Mary Smith, PD	NSP II Grant #25-001, <i>Title</i>	Active	20%
e.g., Mary Smith, PD	Current NSP II Proposal, <i>Title</i>	Pending	15%
Total NSP II Effort			35%

Reminders: Budget Provisions

- A 3% annual increase in salaries and direct costs is allowed to offset inflation.
- All salary increases for grant personnel (up to 3% annually) should be included in the original approved budget.
- Requests to amend budgets to include annual salary increases beyond 3% will not be considered.
- Budget amendment requests may only be submitted once per fiscal year.

Demonstrate a budget transition towards **self-sufficiency**.

If sustainability is not addressed in proposals whose initiatives are expected to continue when the grant ends, the proposal may be rejected by the review panel.

Ineligible Costs

- Entertaining (excludes light fare or luncheons for faculty recruitment sessions, professional development sessions, conferences, etc.);
- Existing programming that is fully funded;
- Non-instructional equipment;
- Clinical Simulation or Virtual Reality equipment, materials, supplies, high fidelity or other manikins as this is addressed by the MCSRC;
- Standardized patients;
- Student funds for electronic resources or reimbursements for testing, ex: HESI, Kaplan, ATI, Nurse Tim, UWorld, Review Courses, licensure, and other student fees;
- Duplicating previously funded projects;
- Construction and renovation of facilities; phone lines; Furniture; Capital equipment for new facilities;
- Secondary school student programs;
- Marketing/ institutional promotional items;
- Student retention/ academic success (with the exception of S.S. resource);
- Activities that generate revenue;
- Incentives

Start with a tight budget

The NSP II Review Panel intends to fund as many of the proposals as possible.

If we can see where to cut your budget and the Panel can see where there is excess, then you can too. Don't send it in, unless you want to give up your chance to be funded.

Excess budgets &/or significant revisions will disqualify your work just like late submission.

Think about Evaluation

Start with the end in mind.

NSP II focuses on Nursing Graduates (you should too)

Personnel is the primary intent of NSP II funding.

- Nurse Faculty to Teach
- Clinical Nurse Instructors to Teach
- Nurse grant managers to direct projects

Additional Cohorts + Increasing Enrollments = Increased Graduates

Additional priorities are: Faculty development, instructional technology, curriculum development, consultants, dissemination, instructional technology, resources for underrepresented groups in nursing

FY 2028 Grant Submission Guidelines

100% Electronic Submission! No physical paper or hand-delivered copies

Submission Deadline: **Thursday, January 28, 2027.**

Required Email Application Package:

- PDF Application
- Excel Budgets
- 5-slide PowerPoint Presentation

Submit via Email To:

- laura.schenk1@maryland.gov
- kimberly.ford@maryland.gov
- alicia.gainey@maryland.gov



Review Process

Evaluation Criteria:

**Review the detailed rubric in the RFA!*

<i>Criteria</i>	<i>Maximum Points</i>
Abstract and Brief PPT	5
Overview of Proposed Initiative	13
Project Goals & Objectives	13
Scope of Proposed Initiative (Plan of Operation)	13
Management Plan	13
Evaluation Plan	13
Budget & Cost Effectiveness	30
Total	100

Questions?



References

- Annotated Code of Maryland, Education Article § 11-405. Nurse Support Program Assistance Fund, [2006, chs. 221, 222.][2016].
- Auerbach, D. I., Chattopadhyay, A., Zangoro, G., Staiger, D. O. & Buerhaus, P. I. (2017). Improving nursing workforce forecasts: Comparative analysis of the cohort supply model and the health workforce simulation model. *Nursing Economics*, 35(6), 283-326.
- Centers for Medicare & Medicaid Services, States Advancing All-Payer Health Equity Approaches and Development (AHEAD) Model, <https://www.cms.gov/priorities/innovation/innovation-models/ahead>
- Health Services Cost Review Commission, <https://hscrc.maryland.gov>
- Maryland Higher Education Commission, Nurse Support Program II, www.nursesupport.org
- Maryland Board of Nursing. National Council State Boards of Nursing, and Pearson Vue. All Maryland RN 1st time candidates who graduated from a Maryland nursing program and tested in any U.S. jurisdiction.

References

<https://mbon.maryland.gov/Pages/education-nclex-stats.aspx>

<https://nursesupport.org/assets/files/1/files/nspii/mbon-fy-2021-maryland-nursing-workforce-shortage-survey.pdf>

National Council State Board of Nursing, NCSBN Research Projects Significant Nursing Workforce Shortages and Crisis (April, 2023). Accessed at <https://www.ncsbn.org/news/ncsbn-research-projects-significant-nursing-workforce-shortages-and-crisis#:~:text=The%20data%20reveals%20that%20100%2C000,if%20solutions%20are%20not%20enacted.>

Nursing Education Perspectives, Sept/Oct 2022, 43(5)

Zhang, X., Tai, D., Pforsich, H. & Lin, V. (2018). US registered nurse workforce report card and shortage forecast: A revisit. *American Journal of Medical Quality*, 33(3), 229- 236. DOI: 10.1177/1062860617738328