Nurse Support Program II
FY 2025 Technical Assistance Meeting
Competitive Institutional Grants

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September 20 & 21, 2023

HSCRC and MHEC Contacts

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For more information about Nurse Support Program I and II:

www.nursesupport.org
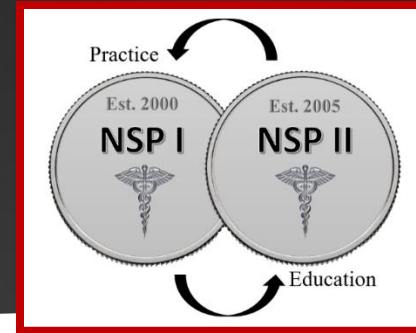
HSCRC - Who We Are

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 health care 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.

NSP I & NSP II:
Two Sides of the Coin

Nurse Support Program I	Nurse Support Program II
What is the program?	
• 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
What are the goals of the program?	
• Retention and recruitment • Higher levels of education • Improved clinical competencies • Evidenced-based research	• Increase capacity and diversity • Expand the pipeline • Address barriers • Promote innovation

Nurse Support Program 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 Program Evaluation

Review the NSP II Program Evaluation 12/11/ 2019

https://hscrc.maryland.gov/Documents/December%202019%20Public%20Pre-Meeting%20Materialsv2.pdf

Next program evaluation due: FY 2025

Goals remain unchanged:

► Increase the # of newly licensed RNs and RN higher degrees

► Strengthen the faculty workforce & educational capacity

NSP II Foundational Goals

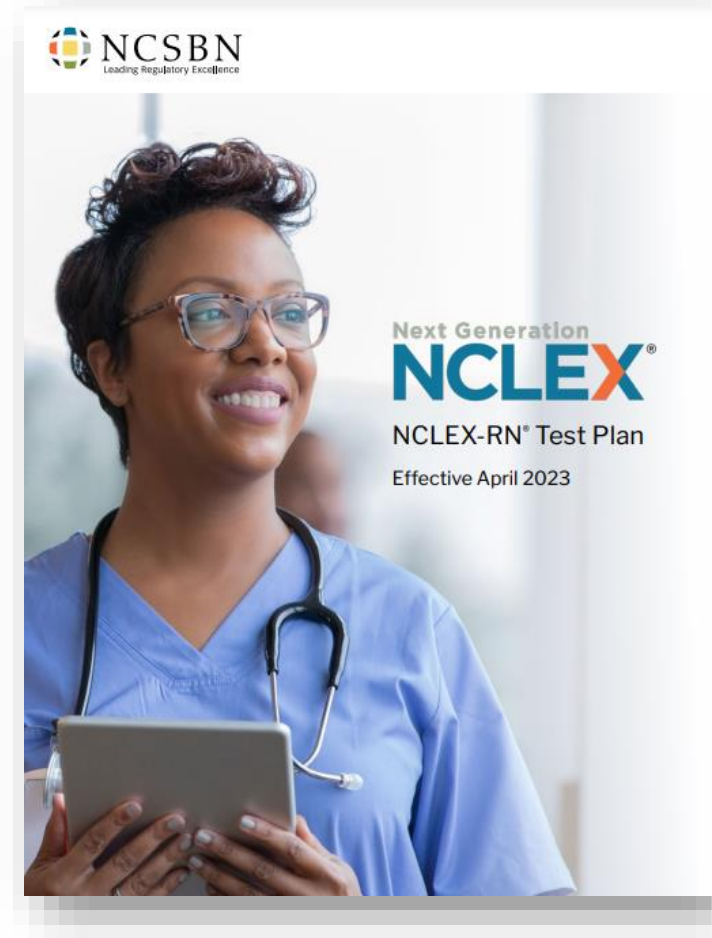Informed by the Institute of Medicine's *Future of Nursing*

► 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 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

NCSBN
Leading Regulatory Excellence

Next Generation
NCLEX®
NCLEX-RN® Test Plan
Effective April 2023

NCLEX-RN Pass Rates FY 2015 – FY 2022 (pending FY 2023)

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 2015	1,207	930	1,658	1,355	70	64	2,935	2,349	80.03%	82.53%
FY 2016	1,158	957	1,557	1,291	44	37	2,759	2,285	82.82%	83.94%
FY 2017	961	806	1,457	1,252	163	150	2,581	2,208	85.55%	86.22%
FY 2018	773	676	1,316	1,145	261	240	2,350	2,061	87.70%	87.81%
FY 2019	867	743	1,375	1,245	305	275	2,547	2,263	88.85%	88.36%
FY 2020	775	650	1,467	1,299	304	286	2,546	2,235	87.78%	87.93%
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%

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

NSP I and NSP II Synergy

The State cited with the nation's best nursing supply vs. demand balance utilized three best practices:

1. Funding a permanent nursing workforce center to study the state level dynamics,

2. Expanding enrollments in nursing programs, and

3. Providing incentives for newly licensed nurses who practice in facilities for more than two years after graduation.

(Zhang, X, et al., 2018)

MNWC RN Workforce Survey 2021

[Analysis of COVID-19's Impact on Maryland Nursing Workforce](#):

Maryland Nursing Workforce Center surveyed nearly 2,000 nurses

- 48% had experienced sleep disturbances
- 49% had symptoms of burnout
- 62% reported an intent to leave their current nursing job

New graduates and less-experienced nurses felt higher levels of anxiety, stress, & burnout and expressed a greater intent to leave.

Top factors affecting willingness to stay:

      Financial incentives (83%)
      Improved staffing conditions (74%)

MHA Workforce Report 2022

[MHA State of Maryland's Health Care Workforce Report](#):

- ► 62% thought about leaving nursing recently
- ► #1 reason: feeling overworked, burned out, unappreciated
- ► Without intervention, shortages could double or even triple by 2035

[Recommendations for Policymakers](#):

- ► Expand Maryland's workforce pipeline
- ► Remove barriers to health care education
- ► Retain the health care workforce
- ► Leverage talent with new care models

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

Maryland Action Coalition Goals

[MDAC 2022-25 Strategic Plan](#):

Aligned with the National Academy of Medicine's Future of Nursing 2020 – 2030 Charting a Path To Achieve Health Equity

Three Major Strategic Foci:

1. Nursing Leadership (Nurse Leadership Institute)

2. Nursing Workforce (NSP I & NSP II Initiatives)

3. Nurse Retention (NSP Advisory Group Focus; MNWC)

Key MD Legislation for RNs in 2023

▶ **SB 960/HB 611 – State Board of Nursing – Sunset Extension, Licensure Exceptions, and Board Operations and Membership:** MBON operations transferred to Secretary of Health with amendment for Executive Director to be a RN; Nurse graduates have 2 attempts to pass NCLEX-RN

▶ **SB 187/HB 454 – Health Occupations – Licenses, Certificates, and Registrations – Lawful Presence and Identification Numbers:** Removes barriers to licensure/certification for international nurses who don't have SSN or TIN

▶ **SB 213/HB 278: Health Occupations – Clinical Nurse Specialists – Prescribing:** Provides prescriptive authority for CNS for drugs & durable medical equipment

Expected to return in future legislative sessions:

▶ **SB 774/HB 1160– Maryland Pathway to Nursing Program and Advisory Committee:** Support CNA to LPN to RN students

FY 2025 NSP II Competitive Institutional Grants

Request for Applications (RFA)

Link to RFA: nursesupport.org/competitive-institutional-grants

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 4 yrs

Funding Requested: be realistic ~ $10mil/28 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	
Nursing Pre-Licensure Graduates	_____
Nursing Higher Degrees Completed (describe)	_____
Nursing Faculty at Doctoral Level	_____
Collaborative or Statewide 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   ☐ P.D. 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

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

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.org/nurse-support-programii/dissemination/

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 (addendum 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

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:**

Total Application Budget Summary for all years:

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: _____

(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:

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;

► 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;

► Student retention/ academic success.

► Activities that generate revenue

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 faculty for NGN

Proposals are Due 1/25/24

All proposals must be postmarked* & emailed by Thurs, Jan. 25th

All proposals must be sent to:

Maryland Higher Education Commission

Attn: NSP II Competitive Institutional Grants

6 N. Liberty Street, 10th floor

Baltimore, MD 21201

All proposals must be emailed to:

laura.schenk1@maryland.gov & kimberly.ford@maryland.gov

*Hand-delivered proposals cannot be accepted

Link to RFA: nursesupport.org/competitive-institutional-grants

Questions ?

Please visit the NSP II funded programs that are open to you:

- Lead Nursing Forward www.leadnursingforward.org

- Nurse Leadership Institute

- Maryland Clinical Simulation Resource Consortium

- Maryland Nursing Workforce Center

- Next Generation NCLEX-RN Tools- Dr. Diane Billings Consultant

- Universal Student Onboarding with Hospitals- MNRC and MNWC Project

- Faculty Academy and Mentoring Initiative for Clinical Educators

- Institute for Educators Clinical Educator Programs

- R-3: Renewal, Resilience, Retention

https://nursesupport.org/nurse-support-program-ii/grants/statewide-initiatives/

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.

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.

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

References

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