

Healthcare Workforce Shortages and Policy: Implications for Maternal and Child Health in Nevada

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Enduring Access to Care and Population Health Issues ...

- Insurance coverage and access to care
- Affordability and rising cost-sharing regardless of insurance coverage
- Health care spending and cost containment, esp. Medicaid
- Prescription drug costs, spending, and price transparency
- Mental and behavioral health crisis
- Opioid and methamphetamine epidemics
- Post-pandemic public health system in Nevada, esp. PHE “unwinding”

... Opportunities to Address Provider Shortages

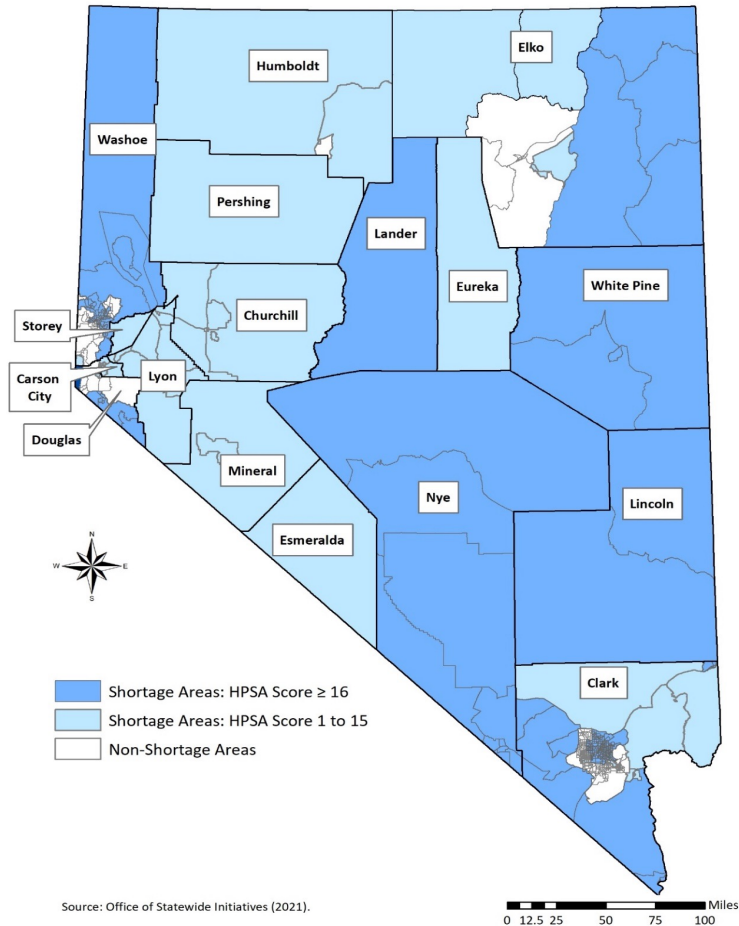
- Health workforce development to address provider shortages in primary care and a wide-range of health care specialty areas
- Need for targeted strategies to address geographic maldistribution of the health workforce and medically underserved areas of the state
- Health workforce development = economic development and diversification

Health Workforce Demand in Nevada

- Population growth, aging, and diversification
- Gains in public and private insurance coverage
- Economic growth and diversification
- Current and emerging population health needs
- Health system and technological change

Health Workforce Supply in Nevada

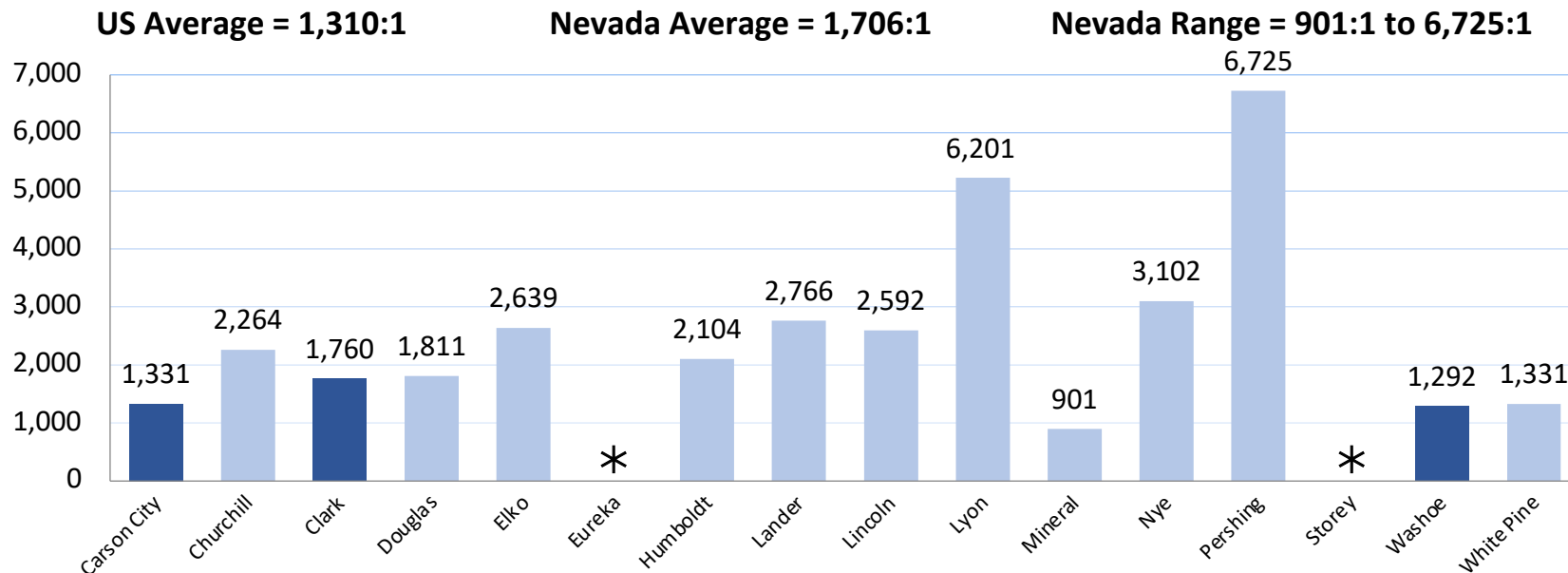
- Persistent workforce shortages in medicine, nursing, behavioral health, public health, and many other health professions
- Steady growth of licensed health professionals, yet “treading water” in per capita growth of licensees in many professions
- Aging health workforce serving an aging population
- Diversity mismatch between providers and populations
- Geographic maldistribution of health professionals



Primary Care Workforce Shortages

- 1.95 million Nevadans reside in a primary care health professional shortage area (HPSA) or 57.6% of the state's population
- 11 of 14 rural and frontier areas of Nevada are single-county primary care HPSAs

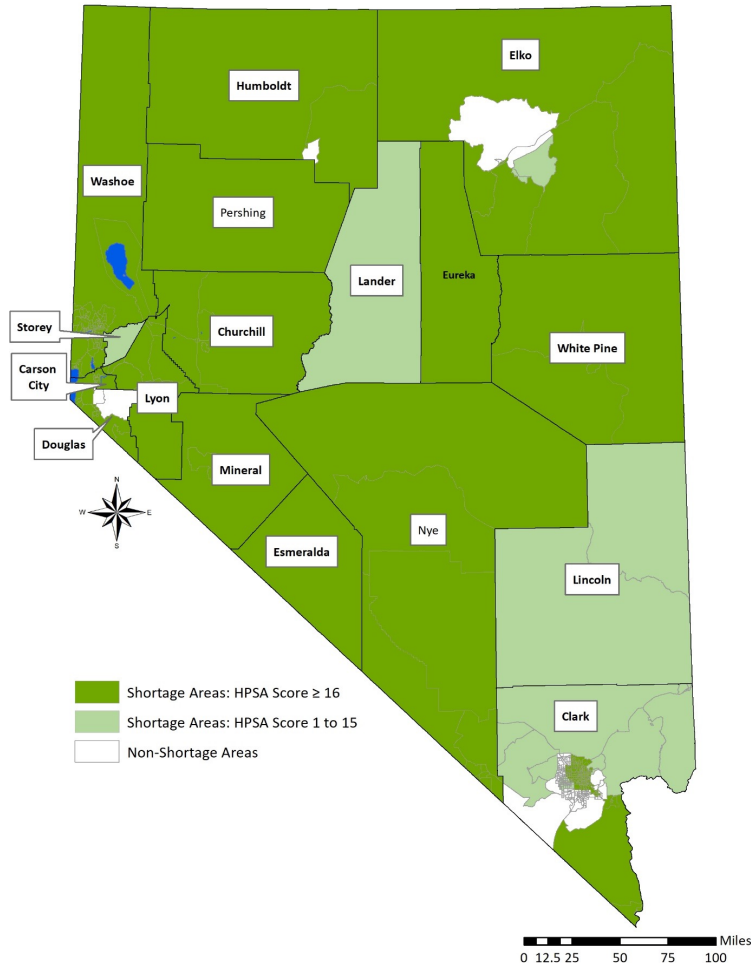
Ratio of Population to Primary Care Physicians



Source: Area Health Resource File/American Medical Association (2019). * = No primary care physicians in Eureka and Storey Counties in 2019

Note: Primary care physicians include family medicine, general internal medicine, and pediatric physicians.

Dental Workforce Shortages



Source: Office of Statewide Initiatives (2021).

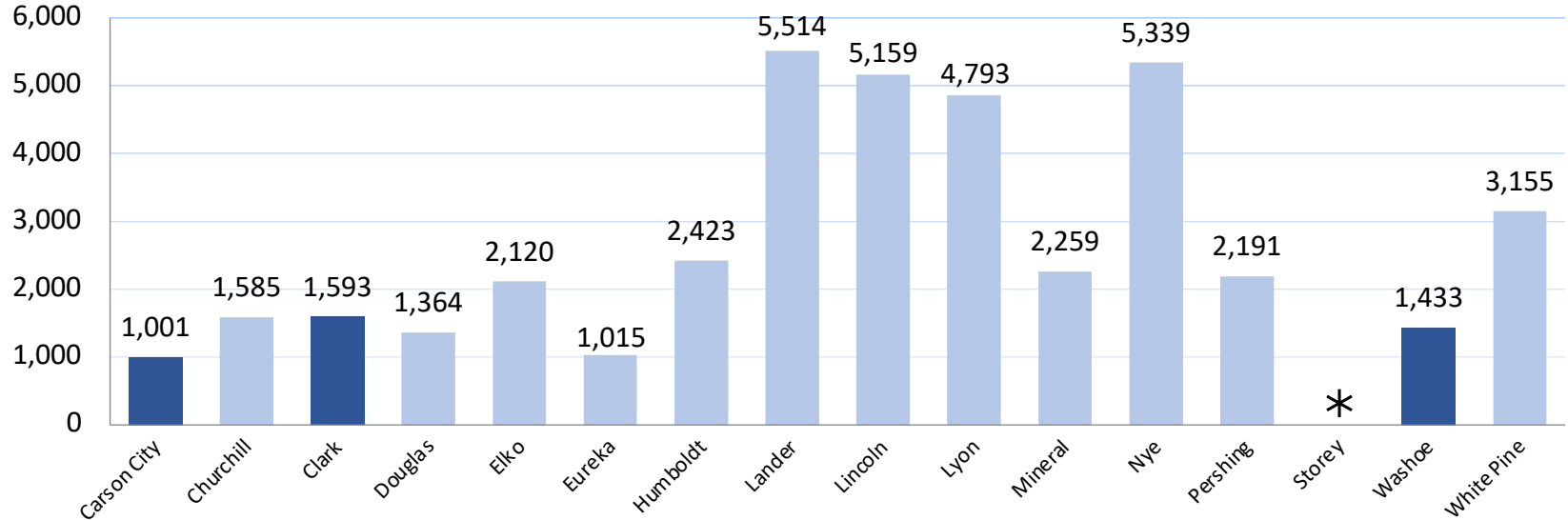
- 2.2 million Nevadans reside in a dental HPSA or 70.0% of the state's population
- 12 single-county dental HPSAs in Nevada, including 11 of 14 rural and frontier counties of Nevada

Ratio of Population to Dentists

US Average = 1,400:1

Nevada Average = 1,601:1

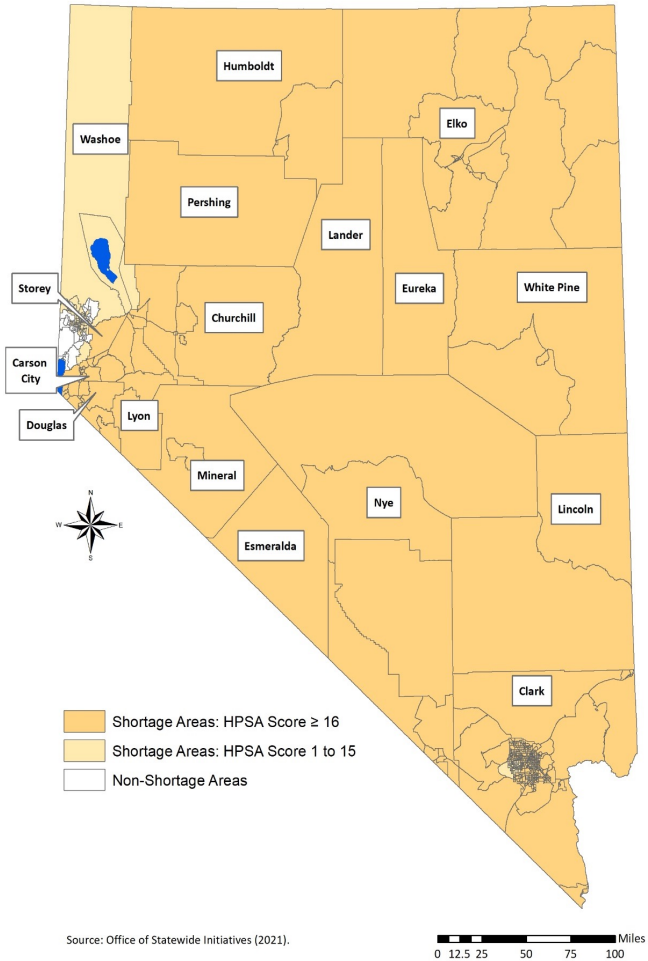
Nevada Range = 1,001:1 to 5,514:1



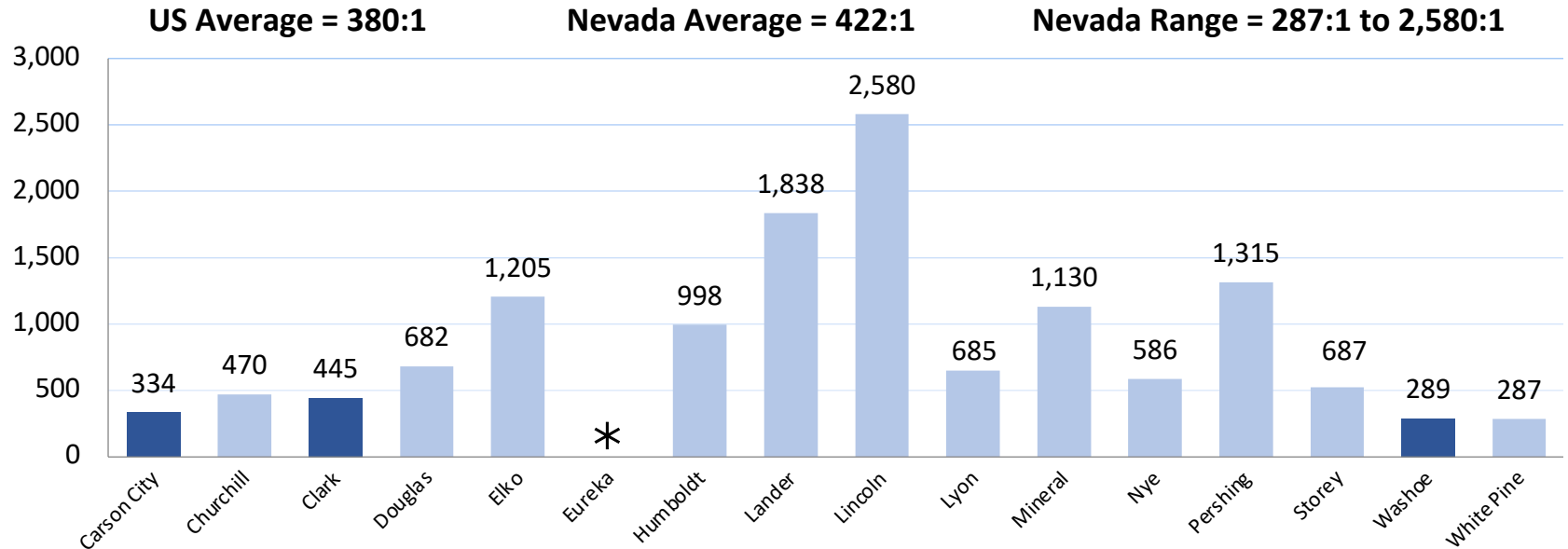
Source: Area Health Resource File/National Provider Identification File (2020). * = No dentists in 2020

Mental Health Workforce Shortages

- 2.8 million Nevadans reside in a mental HPSA or 74.1% of the state's population
- 15 single-county mental HPSAs in Nevada, including all 14 rural and frontier counties of Nevada



Ratio of Population to Mental Health Providers



Source: Centers for Medicare and Medicaid Services/National Provider Identification File (2021). * = No mental health providers in 2020

Note: Mental health providers are defined as psychiatrists, psychologists, licensed clinical social workers, counselors, marriage and family therapists, mental health providers that treat alcohol and other drug abuse, and advanced practice nurses specializing in mental health care.

What it Takes to be Average – Nursing

To meet national population-to-provider averages, Nevada would need an additional:

- 3,439 licensed practical nurses (LPNs)
- 4,290 registered nurses (RNs)
- 5,719 certified nursing assistants (CNAs)
- 323 certified registered nurse anesthetists (CRNAs)
- 817 nurse practitioners (NPs)

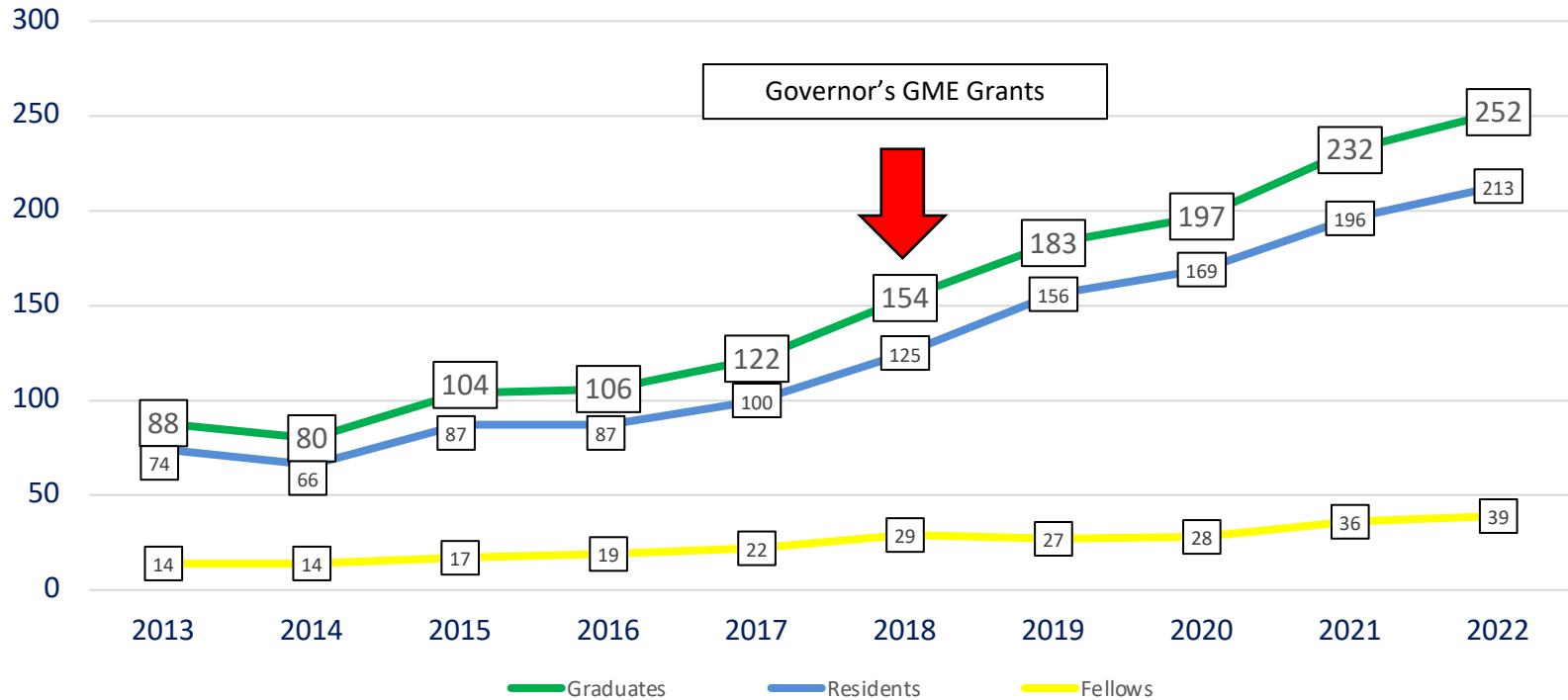
Addressing Health Workforce Shortages

1. “Grow your own” – Increase the number and diversity of health care education graduates
2. Stretch the existing health care workforce
3. Beg, steal, borrow, or barter health care workers from other states (and countries)

1. Grow Your Own (and Keep those You Grow)

- Expand publicly supported health care education programs
- Create new publicly supported health care education programs
- Support innovative industry-higher education partnerships and programs
- Apprenticeships and new paths to licensure
- Broaden and expand GME programs for physicians
- Create residency and fellowship programs for advanced practice clinicians
- Scholarship programs for current health care students
- Loan repayment and forgiveness programs for health care graduates
- Support and expand health care career pipeline programs and STEM
- Maximize use of federal health workforce development programs

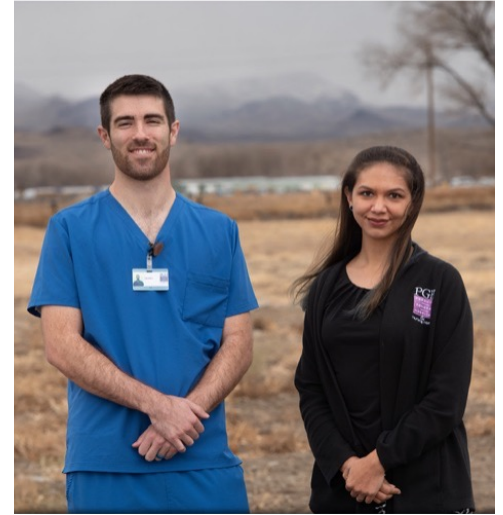
GME Graduation in Nevada – 2012 to 2022



Source: Griswold, T. et al. 2022. *GME Trends in Nevada – 2022*. Nevada Health Workforce Research Center.

Loan Repayment for Health Professionals

- Since 1989, Nevada Health Service Corps (NHSC) has supported over 200 practitioners in every Nevada county
- Over the past five years, 70.4% of NHSC-supported health professionals have remained in Nevada
- Currently, 46 NHSC-supported physicians and other health professionals are practicing in 11 Nevada counties, including Clark and Washoe
- SB233 appropriated \$500,000 in state match to \$500,000 in federal support for NHSC during the current biennium

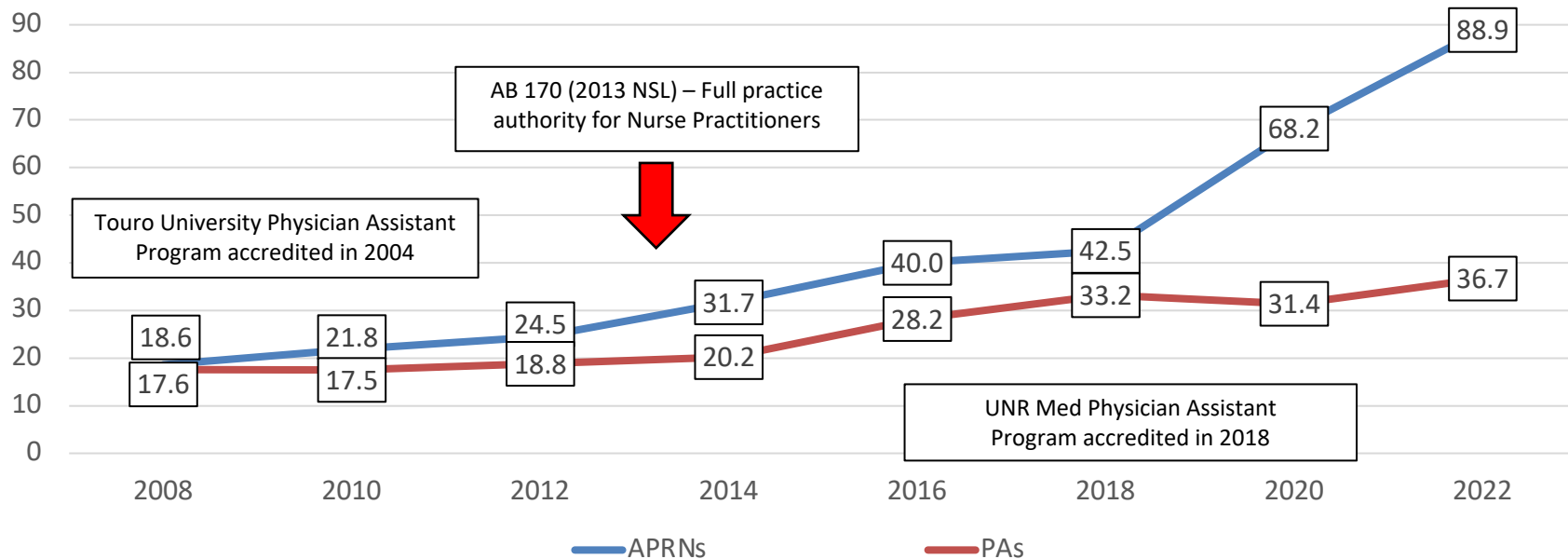


2. Stretch the Existing Health Care Workforce

- Expand team-based models of care across a range of health care settings
- Increase utilization of non-physician clinicians practicing at the top of their scope of practice to improve the efficiency and effectiveness of care
- Explore expanding the scope of practice of current health professionals
- Preserve and expand what worked during the public health emergency
- Support and reimburse traditional telemedicine consultations
- Support and reimburse ECHO telehealth applications
- Address a wide range of work environment issues, including salary, benefits, childcare, internal career ladders, hybrid work options, CE/CME

Scope of Practice and New Programs for Advanced Practice Clinicians

Number of Licensees per 100,000 Population



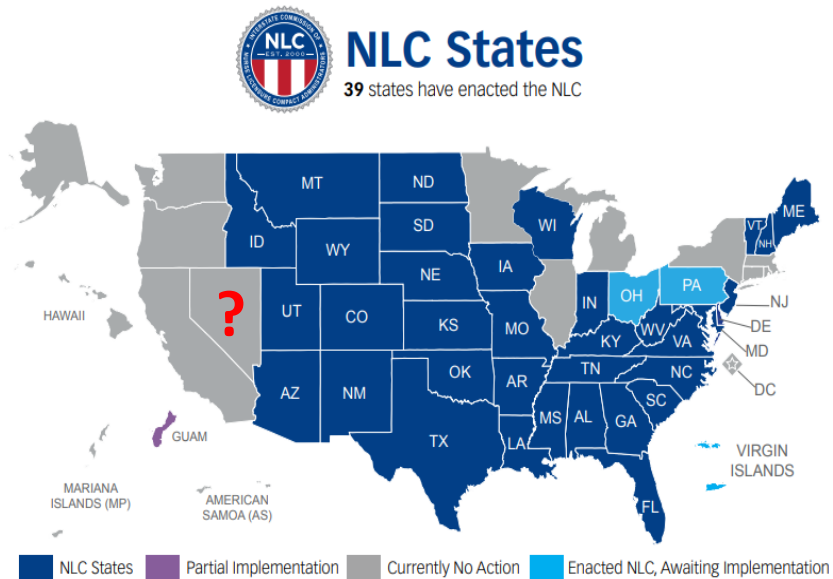
Source: Packham, et al., *Health Workforce in Nevada: A Chartbook* (Forthcoming 2023), Nevada Health Workforce Research Center.

3. Beg, Steal, Borrow or Barter

- Licensure compacts and reciprocity
- Foreign trained health professionals, e.g., J-1 Visa Waiver Program
- State and County Medical Reserve Corps (SERV-NV)
- Battle Born Medical Corps (Directive 11)
- Re-engage inactive licensees and recent retirees
- Underemployed immigrants and resettled refugees
- Traveling nurses and agencies
- Signing bonuses and other financial incentives
- Poaching from other health facilities

Nurse Licensure Compact (NLC)

- Enables nurses to practice in-person or remotely to patients located across the country without having to obtain additional licenses.
- Allows nurses to quickly cross state borders and provide vital services during disasters.
- Facilitates telenursing and online education.
- Makes practicing across state borders affordable and convenient.
- Removes a burdensome expense for organizations that employ nurses and may share the cost of multiple licenses.



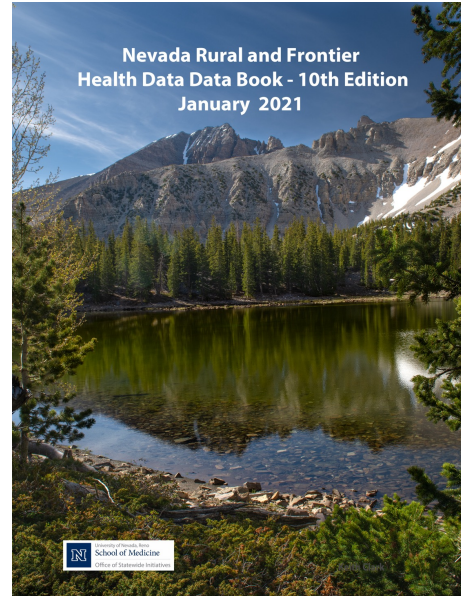
Nevada Health Workforce Research Center

NEVADA INSTANT ATLAS

Nevada's County-Level Health Database

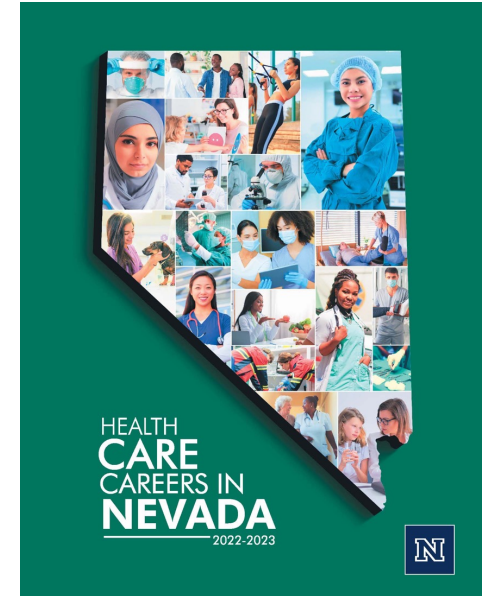


<https://med.unr.edu/statewide/nevada-instant-atlas>



Nevada Rural and Frontier Health Data Data Book - 10th Edition January 2021

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HEALTH CARE CAREERS IN NEVADA 2022-2023

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Questions?

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Overarching NPHA Advocacy and Policy Priorities

The mission of the Nevada Public Health Association (NPHA) is to serve as the voice for public health in Nevada in order to improve health and achieve health equity in Nevada. In keeping with its mission and our vision of a healthy Nevada, NPHA organizes its advocacy and policy activities around five overarching advocacy and policy priorities:

- Building public health infrastructure and capacity
- Creating health equity
- Ensuring the right to health and health care
- Promoting evidence-based policymaking
- Advocating for Health in All Policies

As an affiliate of the American Public Health Association (APHA), NPHA's overarching goals and related advocacy efforts are closely aligned with APHA's advocacy and policy agenda.

2022 NPHA Advocacy Agenda

During 2022 and consistent with NPHA's overarching advocacy and policy goals, NPHA will focus its advocacy efforts on the following issue areas and current policy priorities:

- Advocating for permanent sources of flexible funding for public health to address current and emerging threats to public health, including pandemic preparedness
- Building public health capacity, infrastructure, and preparedness in Nevada, including the establishment of independent city, county or regional health districts in rural areas of the state
- Supporting efforts to expand and diversify dedicated revenue streams to support public health, health care, and human services in Nevada
- Ensuring access to affordable, high-quality clinical and preventive health services for all Nevada residents, including oral health services, substance use treatment, and behavioral health care
- Supporting policies and budget recommendations to reduce greenhouse gas emissions and mitigate the effects of climate change, including implementation of the State Climate Strategy
- Advocating for education on reproductive health, sexually transmitted infections, and healthy relationships in Nevada's public schools

- Advocating for sustained and stable funding for evidence-based tobacco and e-cigarette prevention and control, and comprehensive smoke-free workplaces
- Supporting evidence-based gun violence prevention and firearm safety measures, including advocacy for the enforcement of existing policy on background checks on all gun purchases
- Promoting healthy lifestyles through the support of nutritious eating and active living, including policy that supports the creation of built environments and complete streets that integrates physical activity into daily life, increases access to healthy foods, and eliminates food deserts
- Protecting and promoting maternal, child, and adolescent health in Nevada, including advocacy for increased access to reproductive services for women
- Supporting efforts to increase access to recommended immunizations for all ages and efforts to address vaccine hesitancy and misinformation
- Support for evidence-based injury prevention in Nevada, including funding for programs and policies to reduce transportation-related injuries
- Advocating for HIV and sexually transmitted infections modernization and reform
- Supporting efforts to mitigate and reduce intimate partner violence and domestic violence
- Supporting the spectrum of prevention and treatment for mental and behavioral health disorders, including addiction and substance use disorders
- Promoting an effective public health framework for regulating legal cannabis sales and use in Nevada
- Advocating for funding and policy to ensure a qualified and culturally-competent public health, behavioral health, and clinical workforce
- Advocating for policy measures that address health equity and the social determinants of health in Nevada

NPHA has the flexibility to educate, inform and act, when appropriate, on other pressing public health issues that may not easily be categorized under the overarching NPHA advocacy and policy priorities and our 2022 advocacy agenda and current policy efforts.

NPHA Advocacy and Policy Committee

The NPHA Board of Directors established its Advocacy and Policy Committee (APC) to oversee the development and implementation of the association's advocacy, legislative, and policy activities.

For additional information about the Nevada Public Health Association and the work of the NPHA Advocacy and Policy Committee in 2022, visit www.nphaonline.org or contact NPHA Policy Director, Dr. John Packham at john.f.packham@gmail.com.

Approved by the NPHA Board of Directors on January 11, 2022

Addressing Nevada’s Nursing Workforce Shortages: A Call to Action

DECEMBER 2022

**Prepared by John Packham, PhD, Naisha Shamim, and Tabor Griswold, PhD
Nevada Health Workforce Research Center, Office of Statewide Initiatives,
University of Nevada, Reno School of Medicine**

A Call to Action

Nevada policymakers and nursing stakeholders must expand the nursing workforce supply to meet the evolving health care needs of Nevada residents and the growing demand for registered nurses in our state across a wide range of health care settings. The nursing shortage threatens access to health care in Nevada when available hospital beds and service lines are reduced or, worse, closed due to inadequate staffing. The nursing shortage also results in added costs borne by Nevada citizens and health care employers, including productivity losses due to instability in the existing workforce, premiums paid to traveling nurses and extended overtime for existing nursing staff, additional recruitment costs, training and onboarding costs for new hires, and patient safety failures and medical errors when facilities are understaffed.

In the simplest terms, the nursing shortage refers to a demand for registered nurses by employers in Nevada in excess of the available supply registered nurses. Despite temporary, pandemic-induced disruptions in demand for health care services over the past three years, population growth and aging, continued insurance coverage expansion, and a recovering economy will drive steady demand for health care services and, thus, the need for additional registered nurses in Nevada in the coming decade. Nevada has recently made steady progress in expanding the supply of licensed health professionals across the state, including impressive

gains in both the number and per capita number of registered nurses and advanced practice nurses over the past decade. However, hospitals and other employers of nurses in Nevada continue to report high vacancy rates and turnover for registered nurses, as well as ongoing reliance on expensive travel nurses. Nevada’s nursing workforce shortage is compounded by an aging nursing workforce and ongoing labor market volatility associated with the pandemic-fueled “Great Resignation.”

Analysis by the Nevada Health Workforce Research Center (the Center) reveals persistent, widespread health professional shortages in Nevada. For example, despite steady growth in the number of new nursing graduates from Nevada nursing programs and registered nurses moving to Nevada from other states over the past decade, the Center estimates that Nevada currently needs over four thousand additional registered nurses simply to meet the national population-to-RN average. Additionally, the Center estimates that 1.9 million Nevadans or 67% of the state’s population reside in primary medical care health professional shortage areas (HPSA) and nearly 2.8 million Nevadans reside in mental HPSAs. Efforts to address the nursing shortage have added urgency given enduring unmet population health needs in Nevada that have arguably worsened over the course of the COVID-19 pandemic (e.g., the opioid and methamphetamine epidemics, mental health care crisis, rising obesity rates), not to mention a growing backlog of delayed and postponed surgery and procedures across the state over the past three years. Indeed, addressing the current nursing shortage is critical to improving population health and reducing health disparities in Nevada.

Nursing workforce shortages will require state leaders in Nevada to pursue policy measures and strategies to increase the supply of registered nurses, improve the diversity of the nursing workforce, and address the geographic maldistribution of the state’s nursing and health workforce. Increasing the supply of nurses will require expanded and targeted investments in public nursing degree programs to increase the number of graduates at all degree levels across all regions of Nevada.

Policy Options and Recommendations

The Nevada State Legislature plays a critical role in ensuring that Nevada’s health, education, and workforce policies address access barriers, control health care costs, and meet the health care needs of its residents. The twelve overlapping policy measures outlined in this brief highlight key strategies that nursing stakeholders in Nevada and other states are already employing to educate, train, recruit, and retain more registered nurses.

In the broadest terms, state policy measures and actions to address nursing and other health workforce shortages fall into three general categories or “buckets”:

- “Grow your own” strategies and policy measures that expand existing Nevada System of Higher Education (NSHE) nursing and health care education programs and capacity in Nevada.
- Strategies and policy measures that “stretch” the existing nursing and health workforce in Nevada, including the utilization and reimbursement of telehealth technologies and efforts to maximize the use of nurses and other health professionals practicing at the top of their scope of practice and licensure.
- “Beg, steal, borrow, or barter” strategies and policy measures that tap the available nursing workforce in other states and countries, such as the participation in inter-state licensure compacts and reciprocity agreements.

Addressing current and projected nursing workforce shortages will require state policymakers to prioritize and implement proven policy measures and strategies from all three buckets. Some measures will require new or expanded general fund support from the state legislature for NSHE nursing programs, while other measures will require policy changes to existing state law, or administrative and licensing regulations for nursing education and health facilities. All successful strategies and policy measures will require greater collaboration and

coordination among state policymakers and an increasingly diverse set of nursing workforce stakeholders in Nevada during the 2023 legislative session and beyond.

Twelve overlapping policy options and strategies that will “move the needle” on nursing shortages in Nevada include:

1. Expand public funding to increase the capacity of NSHE nursing programs and higher education institutions to enroll and graduate more registered nurses over the next decade. Additional funding and policy change is needed to address the:
 - shortage of faculty, clinical instructors, and preceptors in NSHE nursing programs;
 - low salaries of nursing faculty and clinical instructors in NSHE nursing programs as compared to nurses employed in hospitals and other patient care settings;
 - shortage of clinical placements for nursing students;
 - inadequate training for precepting, heavy workloads, and noncompetitive pay for preceptors;
 - inadequate facilities, equipment and resources in NSHE nursing programs needed to increase program capacity;
 - need for long-term, sustainable funding outside of the current funding formula for NSHE nursing education programs, faculty salaries, and facilities; and
 - post-secondary education pathways from associate degree in nursing programs (ADN) to bachelor-of-science in nursing (BSN) programs in Nevada, as well as pathways for BSN-credentialed nurses to masters and doctoral degrees in nursing.

2. Support and incentivize innovative higher education-industry programs and partnerships in Nevada, including:
- paid apprenticeships for nursing students in hospitals and health systems;
 - clinical ladders and new paths to licensure in nursing within hospitals and health systems;
 - joint appointments and salary support between hospital-based educators and NSHE nursing programs;
 - clinical placement opportunities in non-hospital settings, such as community and behavioral health centers, health departments, nursing homes, schools, and other community-based sites;
 - graduate and post-graduate training to practicing nurses through state funded fellowship and residency programs to increase health care services provided by nurse practitioners and registered nurses in high-need specialty areas and to vulnerable populations in Nevada;
 - industry support for new graduate hiring and continuing education costs; and
 - professional and career opportunities for nursing applicants, nursing students, and new nursing graduates in Nevada to reduce attrition and to address the expectations-reality mismatch of new entrants to nursing practice.
3. Support opportunities for developing and expanding career ladders to nursing within and beyond the health professions in Nevada, including bridge programs that facilitate and support:
- licensed practical nurses to transition to registered nurses;
 - paramedics to transition to registered nursing; and
 - Veterans, retired military corpsmen and medics, and others interested in nursing as a second career.

4. Expand funding and policy change for State of Nevada nursing and health workforce development programs, including:

- certification and training for certified nursing assistants and other entry-level health professionals in Nevada who are not currently eligible for financial aid or support from state workforce development agencies;
- grants, scholarships, stipends, and other financial incentives for nursing students to train, begin practice, and remain in Nevada;
- paid apprenticeships for high school students to become certified nursing assistants before they graduate and NSHE nursing students working toward their associate and bachelor's degrees in nursing; and
- measures permitting emergency medical technicians, certified nursing assistants, nurse apprentices, and armed forces corpsmen or medics to apply clinical work hours toward nursing degrees and eligibility for nursing scholarship programs.

5. Support Nevada's participation in federal Title VII Health Professions and Title VIII Nursing Workforce Development Programs, including:

- Advanced Nursing Education (ANE) Program;
- Advanced Nursing Education – Nurse Practitioner Residency (ANE-NPR) Program;
- Advanced Nursing Education – Nurse Practitioner Residency Integration Program (ANE-NPRIP) Program;
- Advanced Nursing Education – Sexual Assault Nurse Examiners (ANE-SANE) Program;
- National Health Service Corps (NHSC);
- Nevada Health Service Corps / Student Loan Repayment Program (SLRP);
- Nurse Anesthetist Traineeship (NAT);
- Nurse Education, Practice, Quality and Retention (NEPQR) program;

- Nurse Corps Loan Repayment Program;
- Nurse Faculty Loan Program (NFLP); and
- Nursing Workforce Diversity (NWD) Program.

Nevada policymakers and nursing stakeholders must also pursue collaborative efforts with the Nevada Congressional delegation to expand federal support for nursing workforce development programs, including Title VIII nursing programs in the Public Health Services Act and U.S. Department of Labor.

6. Support strategies and policy measures to increase the diversity of the nursing workforce and participation from traditionally underrepresented groups in nursing education programs in Nevada, including targeted assistance and support to:
 - students with low incomes;
 - racial and ethnic minority students;
 - military veterans;
 - learners with disabilities; and
 - students likely to work in rural and medically underserved areas of Nevada.

7. Assess and support strategies and policy change to improve working conditions and work-life balance for nurses and health care teams to mitigate exhaustion and burnout, increase career satisfaction, and decrease turnover in health care, including measures that address:
 - adequate lifelong salary and benefits;
 - career development and advancement opportunities and barriers;
 - on-site childcare;
 - hybrid work options;
 - physically safe and mentally healthy work environments;

- minimum patient-to-nurse staffing ratios and other patient safety measures;
 - limits on overtime and mandatory overtime;
 - positioning nurses in leadership roles in hospitals and health systems;
 - expanded access to collective bargaining; and
 - continuing education needs of nurses.
8. Expand funding for strategies and measures to promote nursing as a career choice to high school students in Nevada, including support for:
- K-12 health care career pipeline programs in nursing and health care;
 - measures to increase health-related and STEM pre-requisite course completion for high school students;
 - summer nursing and other health professions camps and shadowing opportunities for high school students in Nevada, e.g., UNLV nursing summer camp;
 - early nursing education pathways and tracks from high school to community college to university-based RN programs; and
 - Nevada Area Health Education Center (AHEC) program and partners.
9. Assess and address policy change that supports team-based models of care across a range of inpatient and outpatient health care settings to stretch the existing registered nurse workforce in Nevada, including measures that:
- expand the scope of practice and utilization of non-physician clinicians and team members practicing at the top of their scope of practice, and
 - address the associated need for inter-professional education and training of health professions students, such as the Nevada AHEC Scholars Program.

10. Assess and implement policy measures to expedite the licensure of registered nurses and nurse practitioners from other U.S. states, including legislation:

- permanently extending temporary expedited licensure and reciprocity measures for registered nurses enacted during the COVID-19 public health emergency;
- enacting Nevada’s participation in the Nurse Licensure Compact; and
- enacting Nevada’s participation in the Advanced Practice Nurse (APRN) Compact.

11. Assess and implement policy changes to address clinical faculty-to-student ratios in nursing education regulation and other potential changes to the Nevada Nurse Practice Act to improve the quality, quantity, and geographic distribution of the nursing workforce in Nevada.

12. Fund and support a statewide Nevada Nurse Workforce Center. The Center will serve as a hub to advance nursing education, practice, leadership, workforce development, and policy in Nevada. The Center will address the nursing shortage by:

- studying the unique characteristics of the nursing workforce in Nevada;
- developing strategies to increase the number of new nurses in the state;
- recruiting nurses to the profession;
- implementing strategies to retain nurses in the workforce; and
- advocating for changes in policy to improve the stability of the nursing workforce in Nevada.

In conclusion, the twelve overlapping policy measures outlined in this Call to Action provide a blueprint for state policymakers to consider as we tackle current and projected nursing workforce shortages in the 2023 session of the Nevada State Legislature and beyond. Eliminating the current nursing shortage is an essential component of our state’s strategy to improve access to care, contain health care costs and spending, and improve population health in the coming decade.

Acknowledgements

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For additional information on this policy brief or its contents, please contact Dr. John Packham at jpackham@med.unr.edu. For additional information on research and policy analysis undertaken by the Nevada Health Workforce Research Center at the University of Nevada, Reno School of Medicine, please visit <https://med.unr.edu/statewide/nhwrc>.

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