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Executive Summary

Illinois Nursing Workforce Center Advanced Practice Registered Nurse 2016 Survey

The results from the 2016 Advanced Practice Registered Nursing workforce survey are reported in this document. The survey captured data on the demographics, education, state distribution, job activities and practice foci of Advanced Practice Registered Nurses (APRNs) in Illinois. The survey was conducted during licensure renewal, with two additional email requests for participation post license renewal. Participation was voluntary, 26.47% or 3,113 of the 11,671 Illinois APRNs completed the survey

General overview: Data on the characteristics, supply, and distribution of APRNs in the State of Illinois is essential to expanding access to care and planning for provision of essential primary and other health care services. This report contains data on the demographics of Illinois' current APRN workforce, including type of APRN, the relative numbers of APRNs in each age group, their cultural diversity, and educational preparation. The data quantifies the services APRNs provide, the process that is used to bill for these services, and how the required collaborative agreement with the Illinois physician(s) is maintained. Finally, the survey captures APRN distribution and type of APRN density throughout the state as well as their work with a broad range of populations.

Aging workforce: The report presents important information about the aging of the Illinois APRN workforce, overall 42.5% respondents are over the age of 55 years. However, the average age varies based on type of APRN. There are four types of APRNs: Certified Registered Nurse Anesthetist (CRNA), Certified Clinical Nurse Specialist (CNS), Certified Nurse Midwife (CNM) and Certified Nurse Practitioner (NP). For example, 42% of Certified Nurse Practitioners (NPs) are less than 45 years of age; 49.3% of CNMs and 52% CRNAs are less than 55 years of age. Interestingly, years of experience as an APRN does not closely correlate with the age of the APRN -- suggesting the diverse career trajectories of APRNs.

Geographic distribution: The report maps out the type of APRN and where they are living in the state, documenting that APRNs generally practice in areas of high population density. This population map was created from the IDFPR licensure database and includes all 11,671 APRNs. While of great interest it is difficult to map APRN practice sites in terms of Medically Underserved Areas (MUAs). The broad county-wide designation of an MUA masks the diversity of underserved areas within the region -- best indicated by a zip code or census tract within a county. The current data are an excellent start toward efforts to map the practice of APRNs, and their provision of care to underserved areas of the State.

Increasing diversity: In contrast to the increase in cultural and racial diversity in the state of Illinois, data indicate a less culturally diverse Advanced Practice Registered Nursing workforce. Though the majority, 86.81% of APRNs are Caucasian/White, a higher per cent of APRNs under the age of 55 years are from cultural and racially diverse backgrounds compared to APRNs in the older age range. For example, 44% Hispanic/Latino APRNs are under the age of 45 years, 52.1% of the Asian APRNs are 45

years or younger, while 39% of Black or African American APRNs are younger than 45 years of age. This differs from the 2015 Illinois APRN survey which did not report this amount of diversity among younger APRNs.

Specialty/Work Place Characteristics/Billing: The survey respondents reported on their nursing specialty, billing arrangements, and workplace setting. The respondents were provided a choice amongst job settings as well as the option to write in settings that were not listed. Approximately 50% of respondents practice in ambulatory settings; at least 30% practice in a hospital/inpatient setting. Some APRNs indicated time was split between hospital and outpatient settings. In line with Illinois regulation, APRNs maintain collaborative agreements but with a range of physician-collaborator relationships. Forty-three percent of respondents bill exclusively under their National Provider Identifier (NPI) number; this was followed by 24% billing under the clinic/facility number.

Summary: The 2016 Illinois APRN survey data will be extremely valuable as health care planners project the human health care capital that will be needed in Illinois. These data will be of great use in estimating the current APRN supply, their demographics, and practice specialties. The anticipated shortage of primary care providers is particularly acute in Illinois. Focused workforce planning is urgently needed to assure access to healthcare for Illinois residents. The full report is available on the Illinois Nursing Workforce Center website <http://nursing.illinois.gov/ResearchData.asp>