

# ***Strengthening Georgia's Nursing Workforce Pipeline***

*A Data-Driven Approach to Workforce Planning and Public Health Preparedness*

## **I. Background and Problem Statement**

Georgia continues to face persistent nursing workforce shortages that threaten the state's population to healthcare services, public health preparedness, and health equity. These shortages are exacerbated by limitations in nursing education capacity, including faculty shortages, constrained clinical placement opportunities, and regulatory requirements that limit enrollment growth. As healthcare demands increase due to population growth, aging demographics, and rising chronic disease burden, the state's ability to prepare and sustain an adequate nursing workforce is increasingly challenged.

A strong nursing workforce is foundational to emergency response, chronic disease management, rural and underserved community care, and overall healthcare system resilience. Nurses are responsible for providing patient-centered care, enhancing rural health outcomes to close gaps in access, and aid in assessing and triaging victims in care of emergency response. Addressing bottlenecks within the nursing education and workforce pipeline is therefore a critical public health priority.

## **II. Purpose and Objectives**

The purpose of this plan is to use workforce data and stakeholder input to identify barriers within Georgia's nursing education and employment pipeline and to support evidence-based policy and programmatic decisions related to training capacity, recruitment, and retention.

Specific objectives include:

- Examine faculty vacancy rates and regulatory requirements such as mandated faculty to staff ratios that affect student enrollment.
- Analyze NCLEX-RN first-time pass rates in Georgia and comparison states.
- Identify opportunities to strengthen transitions from nursing education to practice.
- Support targeted policy investments aimed at strengthening and sustaining a nursing workforce

## **III. Approach and Methods**

This plan utilizes a mixed-methods approach that integrates quantitative workforce data with qualitative stakeholder input. Quantitative data (NCLEX Pass Rates, Faculty to Student Ratios, and Survey Results) are used to assess the scale and distribution of nursing workforce challenges, while qualitative data (identifying patterns, Fact Sheets) provide insight into underlying causes and potential solutions.

Data Sources

- Georgia Board of Nursing

- University System of Georgia (USG)
- National Council of State Boards of Nursing (NCSBN)
- Georgia Board of Health Care Workforce
- Nursing program surveys and state workforce reports
- American Association of Colleges of Nursing (AACN)

## **IV. Key Workforce Measures**

### **A. Nursing Education Capacity**

Key indicators include enrollment and graduation trends by degree level. Current capacity constraints limit the number of qualified applicants who can be admitted to nursing programs despite high demand.

The Georgia Board of Health Care Workforce Nursing Schools Grant Program offers up to \$500,000 in grants to nursing schools to expand enrollment capacity and increase the number of graduates. These investments represent an important mechanism for addressing capacity limitations (Georgia Board of Health Care Workforce).

### **B. Faculty Vacancy Rates and Regulatory Requirements**

Faculty shortages are a major constraint on nursing education capacity. National survey data indicate approximately 1,977 vacant faculty positions across 922 nursing schools (AACN Nursing Faculty Shortage Fact Sheet).

In Georgia, post-COVID regulations require a minimum student-to-faculty ratio of 25:1 for full-time faculty in nursing programs (GA R&R - GAC - Rule 410-8-.03. Organization and Administration. 2026). While intended to maintain educational quality, this requirement may limit enrollment expansion when faculty positions remain unfilled.

Comparative data from other states show wide variation in student-to-faculty ratio regulations. Some states specify ratios, while others do not regulate or specify minimums.

**C. NCLEX-RN Pass Rates**

NCLEX-RN first-time pass rates serve as an important indicator of educational outcomes.

- Georgia first-time pass rate (2023): 90.3%
- U.S.-educated candidates (2025): 86.7%
- Internationally educated candidates (2025): 47.3%

*Source NCLEX Pass Rates NCSBN*

Comparison across states suggests that states with defined student-to-faculty ratios often demonstrate higher first-time NCLEX-RN pass rates than states without regulated ratios.

State	Ratio (Student: Faculty)	NCLEX RN PASS RATE- First Time Test Taker (2023)
Georgia	25:1	90.3%
Alaska	No specified Ratio	82.9%

Missouri	Do not regulate ratio	89.9%
Minnesota	Do not regulate ratio	85.7%
Delaware	13:1	93.0%
Louisiana	10:1	92.9%

Source 2023 NCLEX® Examination Statistics.

NCLEX outcomes indicate strong overall performance in Georgia, though targeted support for internationally educated nurses may improve workforce integration and exam success.

## V. Stakeholder Engagement

Stakeholder input will be collected through analysis of existing data regarding:

- Nursing faculty and student ratios
- Nursing schools and State Board of Nursing data

Key focus areas include:

- Faculty recruitment and retention strategies
- Clinical training and school admission capacity
- Transition from education to practice

Recent initiatives, such as articulation agreements within the University System of Georgia to support seamless ASN-to-BSN transitions, demonstrate promising strategies to strengthen workforce pipelines to encourage further education. Additionally, nurse residency programs are

increasingly recognized as essential for supporting new graduate nurses during the transition into practice and support a healthy environment to encourage retention (Mohamed & Al-Hmairat, 2024).

**Source:** *Gov. Kemp Announces TCSG, USG Sign First Articulation Agreement Since Passage of Top State for Talent Act. (2025).* & *The effectiveness of nurse residency programs on new graduate nurses' retention: Systematic review (2024)*

## **VI. Public Health Significance**

A well-prepared and adequately staffed nursing workforce is essential to Georgia's public health infrastructure. Strengthening the nursing pipeline supports:

- Emergency response and disaster preparedness with proper and timely triaging and assessment
- Chronic disease prevention and management through education and care coordination
- Access to care in rural and underserved communities by encouraging telehealth utilization, timely screenings, and monitoring.
- Long-term healthcare system sustainability by optimizing care, resources, education to prevent emergency room visits and increased hospitalizations.

## **VII. Policy and Practice Implications**

Findings from this plan support the following policy and programmatic actions:

- Targeted investments in nursing education capacity and faculty development
- Incentives to recruit and retain nursing faculty, including pathways for experienced nurses to transition into educator roles
- Expansion of education-to-employment pipelines, including articulation agreements and nurse residency programs
- Sustainable workforce planning aligned with Georgia's public health and healthcare needs

## **VIII. Conclusion**

Addressing nursing workforce shortages in Georgia requires a coordinated, data-driven approach that aligns education capacity, workforce regulation, and public health priorities. By strengthening faculty capacity, supporting educational transitions, and leveraging workforce data for policy decision-making, Georgia can build a resilient nursing workforce equipped to meet current and future population health needs.

## References

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