Survey of Alaska Nurses' Views on the Nurse Licensure Compact



Alaska State Board of Nursing



December 12, 2019

ABSTRACT

With the implementation of enhanced nurse licensure compact (eNLC) which includes mandatory criminal background checks among other uniform licensure requirements in 2018, 34 states enacted the eNLC. To gather Alaska nurses' opinion on the eNLC, the Alaska board of nursing (BON) collaborated with the National Council of State Boards of Nursing (NCSBN) to conduct an online survey of all nurses licensed in Alaska. The current survey shows that 92% of respondents licensed in Alaska support Alaska joining the compact. This is an increase over already high levels of support reported in 2014, when 87% of Alaska nurses declared themselves in favor of joining the NLC in the NCSBN National NLC Survey.

BACKGROUND

The National Council of State Boards of Nursing (NCSBN) developed the Nurse Licensure Compact (NLC) to allow for mutual recognition of state licenses between the participating states (Hellquist & Spector, 2004). The NLC streamlines nurse mobility and promotes the standardization of nursing practice regulations (Evans, 2015; Litchfield, 2010; Poe, 2008; Thomas & Thomas, 2018). To further increase access to care and enhance public protection, NCSBN promoted the enhanced NLC (eNLC) in 2015 (Alexander, 2016; Fotsch, 2018). The eNLC requires mandatory criminal background checks as well as 10 additional uniform licensure requirements (Halpern, 2016; NCSBN, 2018). The eNLC was implemented in January 2018. Currently, 34 states enacted the eNLC.

As one of the most desirable states for traveler nurses, mobile nursing practice is a public interest in Alaska. To gather opinions from Alaska nurses on the eNLC, the Alaska Board of Nursing (AK BON), in collaboration with NCSBN, conducted the current survey of all nurses licensed in Alaska in November 2019.

METHODOLOGY

This was a descriptive online survey of all nurses who hold an active registered nurse (RN) or licensed practical nurse (LPN) license in Alaska. Findings from the 462 Alaska nurses who participated in the 2014 NCSBN National NLC survey were used for control. The survey instrument was developed by the AK BON, in collaboration with NCSBN. It comprised nine questions regarding nurses' opinions about Alaska joining the compact, as well as basic details regarding their license and practice (Appendix A). It was estimated to take less than five minutes to complete the survey. NCSBN designed and maintained the online survey via the Qualtrics platform.

Study Population

The study subjects are all nurses who hold an active RN or LPN license in Alaska and who have access to Internet. Based on the national nurse database, over 16,000 active RN or LPN licenses registered Alaska (https://www.ncsbn.org/national-nursing-database.htm).

Procedures

On November 12, 2019, the AK BON distributed the study announcement with an anonymous survey link via the AK BON mailer to all study subjects. On November 21, the AK BON sent out 10,000 follow-up emails and 5,000 fliers (Appendix B). The survey was also posted on the AK BON website to attract participation (Appendix C). The online survey was closed on December 7, 2019.

Data Analysis

Data were exported from Qualtrics via an Excel file. Standard descriptive analysis of data was performed using SAS Enterprise Guide 7.1. Findings from the 462 nurses licensed in Alaska who participated in the 2014 NCSBN National NLC Survey were used as baseline data for comparison.

Confidentiality

The current survey did not collect identifiable personal information such as name or social security number of the participants. Only aggregate data were analyzed and reported.

RESULTS

As of December 7, 3,573 completed surveys were returned. On an assumption that non-response is random, at the 95% confidence level, the maximum margin of error for the findings from the current survey is less than $\pm 2\%^{1}$.

I. Characteristics of Study Subjects

Over half of the respondents (56% n=2,018) considered Alaska their primary residence (Table 1). The proportion of non-Alaska respondents reported in the current survey increased from 21% in 2014 to 44% in 2019 (Table 1).

Table 1. Primary Residency in Alaska

		mpact Survey 5,573)	2014 NL((n=4	•
Yes	56%	2,018	78%	361
No	44%	1,555	21%	100

The majority (87%) of the responding nurses hold an RN license, while 8% hold an LPN license, well reflecting the RN and LPN license composition reported in the 2014 survey. Two hundred and ninety-five respondents (8%) also hold an advanced practice nurse (APRN) license (Table 2).

¹ The margin of error (MOE) can be calculated with the formula: MOE = $Z^* \sqrt{p^* (1-p)}/\sqrt{n}$

Table2. Type of License Held

	2019 AK Compact Survey (n=3,762)*			NLC Survey n=499)*
RN	87%	3,268	85%	424
LPN	5%	199	6%	28
APRN	8%	295	9%	47

^{*}Note. Respondents could select more than one response option

Over fifty percent of the respondents (58%) were direct care nurses (Table 3). Eighteen percent of the respondents specified some other roles, which include certified registered nurse anesthetist; nurse practitioner; certified nurse midwife, and travel nurse, etc. Most of the respondents (97%) practiced nursing in the past 24 months (Table 4).

Table3. Primary Role in Nursing

	2019 AK Compact Survey (n=3,504)	
Telephone triage nurse	4%	153
Transport nurse	1%	33
Case manager nurse	7%	249
Nurse administration/manager	8%	263
Dire care nurse	58%	2,029
Nurse educator	4%	149
Other	18%	628

Table 4. Practice in the Past 24 Months with a Nurse License

	2019 AK Compact Survey (n=3,573)		2014 NLC Survey (n=461)	
Yes	97%	3,466	94%	435
No	3%	107	6%	26

More than sixty percent of the respondents (61%) also hold an active nursing license in another state, a slight increase from 53% from the 2014 survey (Table 5).

Table 5. Hold a License Outside of Alaska

	2019 AK Compact Survey (n=3,527)		2014 NLC Survey (n=371)		
Yes	<mark>61%</mark>	<mark>2,148</mark>	53%	195	
No	39%	1,379	47%	176	

The current survey further indicates 64% of the respondents had provided nursing services and/or communicated with a patient or client who was located in a state other than Alaska (Table 6). This proportion increased substantially compared to that reported in the 2014 survey (22%).

Table 6. Practice in the Past 24 Months with Patients/Clients Outside of Alaska

	2019 AK Com (n=3,5			LC Survey =433)
Yes	64%	2,240	22%	97
No	36%	1,264	78%	336

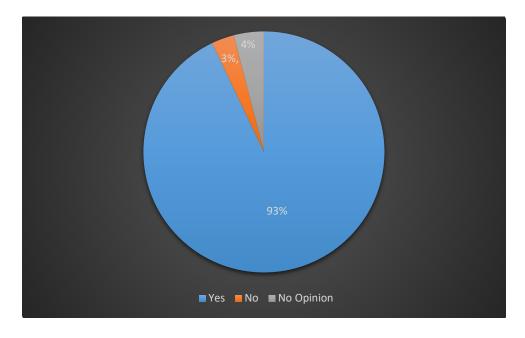
Additionally, we found that among those who practice nursing in the past 24 months, 22% of the respondents were members of a union (Table 7).

Table 7. Union Membership during Employment

Union Membership	2019 AK Compact Survey (n=3,466)		2014 NLC Survey (n=417)	
Yes	<mark>22%</mark>	749	<mark>29%</mark>	121
No	78%	2,717	71%	296

The majority of the respondents (92%, n=3,259) support Alaska joining the compact (Figure 1).

Figure 1. Nurses' Opinions about Alaska Joining the eNLC (n=3,527)



Compared to the 2014 survey report, the proportion of nurses who are in favor of Alaska joining the compact increased from 87% in 2014 to 92% in 2019. Meanwhile, the proportion of nurses who had no opinion about Alaska joining the compact decreased from 10% in 2014 to 4% in 2019 (Table 8). Three percent of respondents opposed Alaska joining the Compact, a portion essentially unchanged from 2014.

Table 8. In Favor of Alaska Joining the Compact

2019 AK Compact Survey (n=3,527)			LC Survey 199)*	
Yes (in favor)	92%	3,259	87%	173
No (opposed)	3%	119	3%	6
No Opinion	4%	149	10%	20

^{*}The 2014 survey included six different answers. Only comparable answers in both surveys were used.

In addition, the current survey shows that 87% of the respondents (3,058 out of 3,519) would be interested in applying for a compact license if Alaska were to join the compact. Several respondents indicated that they would consider moving to Alaska if Alaska became a compact state.

Further analysis of support for the compact among sub-groups of respondents indicated a high level of support among all categories (Table 9). The highest level of support (90% and above) was indicated in nurses with primary residency outside of Alaska (97%), those who provided nursing services outside of Alaska (96%), those holding a license outside of Alaska (96%), nurses who are not members of a union (94%), and those who practiced nursing in the past two years (93%).

Table 9. Opinions about Alaska Joining the Compact

Cub guann		In Favor of Joining the Compact			
Sub-group		Yes	No	No Opinion	
D: '1 ' A1 1		89% (1,773)	5% (105)	6% (121)	
Primary residency in Alaska	No	97% (1,486)	1% (14)	2% (28)	
Practiced nursing within the past 24 months		93% (3,169)	3% (118)	4% (139)	
		89% (90)	1% (1)	10% (10)	
Provided services/communicated with patients	Yes	96% (2,148)	2% (41)	2% (51)	
out of AK within the past 24 months		86% (1,092)	6% (76)	8% (96)	
M 1 C 1 1 1		87% (643)	8% (57)	6% (43)	
Member of a union during employment	No	94% (2,526)	2% (61)	4% (96)	
Hold a license outside of Alaska		96% (2,058)	2% (44)	2% (46)	
		87% (1,201)	5% (75)	7% (103)	

The current survey also asked respondents to specify why they are for or against Alaska joining the compact. Two text boxes were provided for these respondents' comments. Several respondents also sent their comments to NCSBN via emails. A brief summary is provided below. Additional comments from the respondents are listed in Appendix D.

Benefits of Alaska Joining the Compact

- Increases access to standardized patient care and safety.
- Serves the best interests of nurses.
- Facilitates the care of patients who seek treatment across states.
- Eliminates cost and difficulty of applying for and maintaining multiple state licenses.
- Allows flexibility for travel nurses.
- Allows nurses incentive to work in Alaska, and freedom to work across state borders, particularly given the population of military spouses needing to move states.
- Eases hospital and clinic employment delays.
- Makes it easier to meet staffing needs and fill nursing shortage; efficient and cost-effective placement.
- Encourages nursing students who attend nursing schools outside Alaska, to work in Alaska
- Broadens collective nurse practice experience and knowledge base.
- Patient safety (unsafe nurse may practice in Alaska; potential deficiencies in quality control)
- Difference in nursing scope of practice in Alaska compared to other states, especially in rural areas
- Loss of Alaska state and BON revenue from licensing fees
- Potential increase in licensing and renewal cost
- Loss of union protection. Preservation of nursing union bargaining power, particularly in event of potential strike
- Geographic and cultural differences in Alaska compared to contiguous United States
- Facilitation of orientation to unique nursing practice environment
- Lack of interest by Alaska nurses (no intention to practice outside of Alaska, retired or retiring, or not a resident of a compact state, etc.)
- Increase in population, pollution, and disrespect
- Lack of knowledge on the NLC

LIMITATIONS

This study relied upon voluntary self-reported data. It is possible that our respondents are a self-selected group with strong opinions about the compact, such that we may overestimate both support and opposition and underestimate the size of the "no opinion" group among the Alaska nursing workforce. The current survey was distributed to all Alaska licensed nurses via an anonymous web link. We were unable to track the exact response rate. It was reported that some nurses were unable to access the survey due to security by their network administrator. Some nurses who could not participate in the survey contacted NCSBN, indicating that they are in favor of Alaska joining the compact.

CONCLUSION

We surveyed all nurses with an active Alaska license who have access to Internet, and over three thousand nurses responded. The vast majority (92%) of the respondents are in favor of Alaska joining the compact, and 3% of the respondents oppose Alaska joining the compact due to the concerns that unsafe nurses might come to practice in Alaska, lowering the quality of care. The enhanced compact that has included criminal background checks and additional standardized licensure requirements should have adequately addressed these concerns. The current study shows that some nurses are not fully aware of the licensure requirements in the enhanced compact. Additional outreach education could help the remaining non-supportive nurses to make an educated decision and feel more positive about joining the compact.

An important point to note is that 64% of our respondents reported having provided nursing services to and/or communicated with patients or clients located in a state other than Alaska. This is a substantial increase over the 22% of Alaska nurses who reported similar cross-border activities in the 2014 survey. The proportion of the responding nurses who held a license outside of Alaska also increased, from 53% in 2014 to 61% in the current survey. These data suggest an increasing demand on Alaska nurses to practice beyond state borders.

In sum, 3,573 Alaska nurses completed the current compact survey. The vast majority (92%) were in favor of Alaska joining the Compact, and 64% of the respondents already practice across state borders. The respondents (87%) also showed interest in applying for a compact license if Alaska joins the compact.

REFERENCES

- Alexander, M. (2016). Public trust in nusing goes beyond state lines. *Journal of Nursing Regulation*, 7(2), 3.
- Evans, S. (2015). The Nurse Licensure Compact: A historical perspective. *Journal of Nursing Regulation*, 6(3), 11-16.
- Fotsch, R. (2018). The enhanced Nurse Licensure Compact goes live. *Journal of Nursing Regulation*, 8(4), 61-62.
- Halpern, L. W. (2016). New Patient Safety Requirements Toughen Nurse Licensure Compact. *Am J Nurs*, *116*(12), 15. doi:10.1097/01.NAJ.0000508648.55941.5a
- Hellquist, K., & Spector, N. (2004). A primer: the National Council of State Boards of Nursing Nurse Licensure Compact. JONAS Healthc Law Ethics Regul, 6(4), 86-89; quiz 90-81.
- Litchfield, S. M. (2010). Update on the nurse licensure compact. *AAOHN J*, 58(7), 277-279. doi:10.3928/08910162-20100625-03
- NCSBN. (2018). Licensure requirements for a multistate License. Retrieved from https://www.ncsbn.org/ULR Updated Jan 2018.pdf
- Poe, L. (2008). Nursing regulation, the nurse licensure compact, and nurse administrators: working together for patient safety. *Nurs Adm Q, 32*(4), 267-272. doi:10.1097/01.NAQ.0000336722.10689.d3
- Thomas, K. A., & Thomas, M. B. (2018). The Texas Board of Nursing responds to disaster. *Journal of Nursing Regulation*, 9(2), 41-46.

Appendix A: 2019 Alaska Compact Survey Instrument

Introduction: The Alaska Board of Nursing (AK BON) is seeking your input on the Nurse Licensure Compact (NLC).

The NLC allows a nurse who holds one multi-state license issued by a Compact state to practice in any other Compact state without obtaining additional licenses. Currently 34 states have enacted the NLC legislation in the United States. The NLC facilitates cross-border practice and allows a nurse to move freely among Compact states without obtaining a license from each.

To better understand your opinions of joining the NLC, please answer the following questions.

_	1. In the past 24 months, have you been employed in a position that required a arsing license?
	Yes
	No
	2. During that employment, were you a member of a nursing union?
	Yes
	No
Q3	3. Is Alaska your state of primary residence?
	Yes
	No
4.	Other than Alaska, do you hold an active nursing license in any other state?
	Yes
	No
Q5	5. Would you be in favor of Alaska joining the Nurse Licensure Compact?
	Yes (please provide reason)
	No (please provide reason)
	No opinion
	6. If Alaska were to join the Nurse Licensure Compact, would you be interested in plying for a Compact license?
	Yes
	No

Q7	. What type of license do you currently hold? (Select all that apply)
	LPN/VN RN APRN
cor	s. In the past 24 months, have you provided nursing services and/or mmunicated with a patient, client or a student who was in a state other than aska?
	Yes No
Q9	. What is your primary role in nursing? (Select one only)
	Telephone Triage Nurse
	Transport Nurse
	Case manager nurse
	Nurse Administrator/Manager
	Direct Care Nurse
	Nurse Educator
	Other (please specify)

Thank you very much for your time and participation!

Appendix B. Study Announcement and Follow up Reminder from the Alaska Board of Nursing



Survey Information

The National Council of State Boards of Nursing (NCSBN) is conducting this Nurse Licensure compact (NLC) survey on behalf of the AK Board of Nursing. Your responses will assist the AK BON in making decisions regarding adoption of the NLC in Alaska. Participation in the survey is voluntary. Your responses will be completely confidential and only aggregated data will be reported. The survey should take less than 5 minutes.

To Access the Survey Visit:

https://ncsbn.az1/thisisanexample/

Questions or Comments

If you have any questions or comments about the 2019 Alaska Nurse Licensure Compact Survey, contact:

Dr. Elizabeth Zhong, PhD ezhong@ncsbn.org



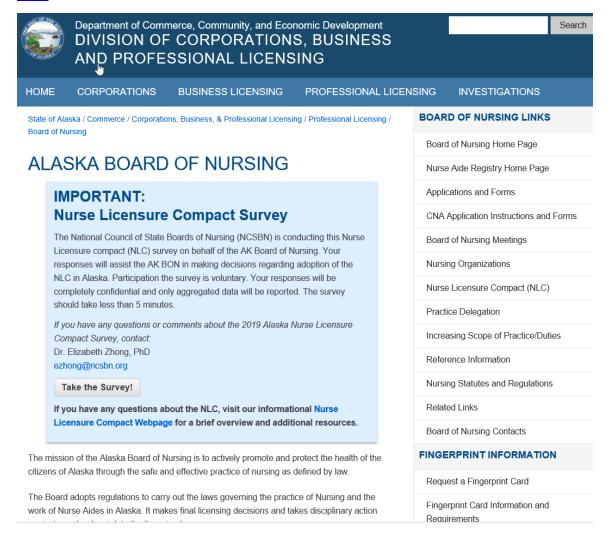
THE STATE OF ALASKA BOARD OF NURSING

PLEASE COMPLETE THE Nurse Licensure Compact Survey

https://ncsbn.az1/thisisanexample/

ALASKA BOARD OF NURSING

Robert B. Atwood Building 550 W. 7th Avenue, Suite 1500 Anchorage, AK 99501-3567 Appendix C. AK BON Web Post of the Nursing Nurse Licensure Compact Survey https://www.commerce.alaska.gov/web/cbpl/ProfessionalLicensing/BoardofNursing.aspx



Appendix D: Selected Comments from the Respondents

The following is a summary of some de-identified quotes from respondents.

- I currently hold a compact license. Please become part of the eNLC. With the shortage of nurses nationwide, I am surprised that most state BON's haven't adopted this legislation.
- Alaska will continue to lose many outstanding nurses and be subjected to continual nursing shortages without it. It is paramount to join the Compact.
- We all take a national exam in order to become licensed, getting state specific licenses delays/prevents getting nurses where they are needed in an efficient amount of time.
- I am currently a part of an organization that provides relief across many states to sister facilities in order to provide more seamless patient care. Supporting our hospital in Alaska is not possible without compact licensing.
- Our facility frequently must use travelers (nurses) and hires military spouses from out of state. It would be beneficial to not have to wait for their licensing to come through.
- I have an Alaska license but now live in Colorado, where I would have to obtain a CO license to be considered for a nursing position.
- I have been licensed in all 50 states and many more states have accepted compact. It goes with the future of healthcare moving to the virtual arena.
- Becoming a compact state would speed up the process of obtaining travel nurses in low staffed and difficult to staff areas of the state since there would be no wait for licensure of individuals holding compact state licenses.
- We would very much have benefited from a compact in which many states are included. It has been expensive to carry three licenses all these years, not to mention doing CEU's for all states involved. Now, the volunteer hours being increased from 30 to 60 hours, has placed an additional burden on those of us who are "retired".
- The compact licensure would open more doors of opportunity to remain in the state while practicing nurse coaching in particular. I want to be a part of transforming healthcare in our state, and the nation, through Nurse Coaching and evidence based holistic approaches to wellness. Being a part of a compact licensure would support this vision. Thank you for your time in considering my voice as you move forward with your decision.