

South Dakota Nursing Workforce

2019 Supply and Employment Characteristics



SOUTH DAKOTA

Center *for* Nursing Workforce

Suggested Citation:

South Dakota Center for Nursing Workforce (April 10, 2019). South Dakota Nursing Workforce: 2019 Supply and Employment Characteristics.

South Dakota Board of Nursing, Center for Nursing Workforce Staff Contributor: Linda J. Young, MS, RN, FRE, BC

Acknowledgements:

- Thank you to South Dakota licensed nurses who completed questions on their renewal applications.
- Thank you to the South Dakota Board of Nursing staff for assistance in collecting, compiling data, and reviewing the report: Gloria Damgaard, MS, RN, EO; Glenna Burg, MS, RN, CNE, Nursing Education Specialist; and Erin Matthies, BA, Operations Manager.



South Dakota Board of Nursing
4305 S. Louise Avenue, Suite 201
Sioux Falls, SD 57106-3115
<http://www.doh.sd.gov/boards/nursing>
<http://www.doh.sd.gov/boards/nursing/sdcenter.htm>

©2019 South Dakota Board of Nursing. All materials related to this copyright may be photocopied for non-commercial scientific or education advancement.

Table of Contents

Executive Summary	4
Key Findings.....	4
Overview and Methods	5
Trends in Supply of South Dakota Nurses	5
Licensed Practical Nurses	6
South Dakota Supply Trends	6
Demographics of LPN Supply.....	6
Employment Characteristics.....	8
Practice Characteristics	9
LPN Distribution in South Dakota	11
Registered Nurses.....	13
South Dakota Supply Trends	13
Demographics of RN Supply	13
Employment Characteristics.....	15
Practice Characteristics	16
RN Distribution in South Dakota	19
Advanced Practice Registered Nurses	21
Certified Nurse Midwives	21
South Dakota Supply Trends	21
Demographics of CNM Supply.....	21
Employment and Practice Characteristics.....	22
Certified Nurse Practitioners	23
South Dakota Supply Trends	23
Demographics of CNP Supply	24
Employment and Practice Characteristics.....	25
Certified Registered Nurse Anesthetists.....	27
South Dakota Supply Trends	27
Demographics of CRNA Supply.....	27
Employment and Practice Characteristics.....	28
Clinical Nurse Specialists	30
South Dakota Supply Trends	30
Demographics of CNS Supply	30
Employment and Practice Characteristics.....	31
APRN Distribution in South Dakota	34
Employment Data Collection Form.....	35
References	37

Executive Summary

The purpose of this report is to provide stakeholders the most accurate information on South Dakota's nursing workforce supply and employment characteristics. The South Dakota Center for Nursing Workforce (SDCNW) and South Dakota Board of Nursing (SDBON) prepared the report.

The SDCNW, initially funded by the Robert Wood Johnson Foundation, was established in 1996 as the SD Colleagues in Caring Project. At the completion of the grant in 2002, state legislation was enacted in the Nurse Practice Act. This legislation, SDCL 36-9-95 and 36-9-96, created the Nursing Workforce Center and a source for funding. The SDBON is the lead agency for the SDCNW.

The report includes findings from data gathered from each nurse license renewal application submitted to the SDBON. Similar supply reports were published biennially from 1996 to 2017. Information in this report compares current data with historical data from previous reports or with national findings on supply and demand for nurses.

The mission of the SDCNW is to *design a nursing workforce prepared to partner with South Dakota citizens to meet their changing health needs.*

Key Findings

Supply As of December 28, 2018, South Dakota's total nursing workforce increased by 5.4% from 2016. The licensed practical nurse (LPN) population increased by 3.4%, registered nurse (RN) population by 4.4%, certified nurse practitioners (CNP) by 31%, and certified registered nurse anesthetists (CRNA) by 8.6%. Only certified nurse midwife (CNM) and clinical nurse specialist (CNS) supply decreased, 15.8% for CNMs and 5.9% for CNSs. Most CNPs, 77.6%, were licensed and certified in the population foci of family across the lifespan.

Age The average age of LPNs was 44.1 years old, slightly younger than the average of 44.8 in 2017. LPNs 51 years or older comprised 38.0% of supply a decrease of 4% from 2015. The average age of RNs was 44.8 years old, slightly older than 44.6 in 2017. The percentage of RNs 51 years or older however decreased to 36.6% in 2019 from 37.9% in 2017. CNMs average age was 50.1 and CNSs was 58.0. A large percentage of CNMs, 37.5%, were 56 years or older and a very large percentage of CNSs, 76.6%, were 56 years or older. CNPs and CRNAs were younger, CNPs average age was 44.4 and CRNAs was 48.1.

Gender and Ethnicity Consistent with previous reports most nurses were female and white/Caucasian. Male RNs comprised 9.0% up from 8.6% in 2014. Also consistent with previous reports the majority of CRNAs, 57.9%, were male.

Highest Level of Education Overall, 64.4% of RN respondents held a baccalaureate or higher degree. The majority of LPNs were prepared with a diploma or certificate and 13.1% reported they were enrolled in a program leading to an advanced nursing degree.

Employment The majority of LPNs and RNs reported their primary place of employment and practice in the state of South Dakota for one employer. Consistent with previous reports a significant percentage, 89.8% of LPNs and 93.3% of RNs, reported employment in the nursing profession as full-time, part-time, or on a per diem basis. Most LPNs were employed in nursing home/extended care facilities, 28.1%, ambulatory care settings, 22.5%, and hospitals, 8.7%. The majority of RNs were employed in hospitals, 39.6%, ambulatory care settings, 11.4%, and nursing home/extended care facilities, 7.7%.

Distribution Appropriate distribution of the nursing workforce is a key component to ensuring employers and consumers have access to nursing services within a community. South Dakota has uneven distribution of nurses between counties. The state's most populated counties of Minnehaha, Lincoln, and Pennington have the highest percentages of nurses. More nurses per population may be needed as individuals from other counties or neighboring states access health care services within these three counties. Smaller populated counties however, with far fewer nurses than their overall population, may be experiencing nursing shortages.

Overview and Methods

This report focuses on supply and characteristics of nursing workforce for: *Licensed Practical Nurses (LPN)*, *Registered Nurses (RN)*, *Certified Nurse Midwives (CNM)*, *Certified Nurse Practitioners (CNP)*, *Certified Registered Nurse Anesthetists (CRNA)*, *Clinical Nurse Specialists (CNS)*, and *Nursing Education Faculty*. Nursing supply is measured by the number of actively licensed nurses. Because supply can be overstated by assessing only the total number of actively licensed nurses, this report also measures the number of hours worked or volunteered in the profession, which demonstrates their level of participation in the nursing workforce and other employment characteristics of nurses. The SDCNW analyzed aggregate licensure data retrieved from the SDBON licensure system for all actively licensed nurses on December 28, 2018.

All nurses that renewed their South Dakota nursing license on a biennial basis, reactivated an inactive license, or reinstated a lapsed license were required to complete the employment data questions on a required online licensure application. The employment data analyzed in this report was collected from January 1, 2017 to December 28, 2018. The number of nurses that completed renewal, reactivation, or reinstatement applications during this data collection period is shown in the Table 1. Nurses that applied for an initial license by examination or a license by endorsement into South Dakota from another state did not complete the employment data questions and were not included in the response rate.

Table 1: Employment Data Collected January 1, 2017 to December 28, 2018

Licensed Nurses	Number that Renewed, Reactivated, or Reinstated	Completed Data Received	Response Rate:
LPNs	2,227	2,227	100%
RNs	16,383	16,383	100%
CNMs	29	29	100%
CNPs	868	868	100%
CRNAs	437	437	100%
CNSs	61	61	100%
TOTAL	20,005	20,005	100%

Trends in Supply of South Dakota Nurses

Active Supply As of December 28, 2018 the SDBON reported 2,635 actively licensed practical nurses (LPN), 18,479 actively licensed registered nurses (RN), 32 actively licensed certified nurse midwives (CNM), 1,111 actively licensed certified nurse practitioners (CNP), 493 actively licensed certified registered nurse anesthetists (CRNA), and 64 actively licensed clinical nurse specialists (CNS). Data presented in the table demonstrates a positive growth in supply of the total number of actively licensed nurses in every category with the exception of CNMs and CNSs.

Table 2: Actively Licensed Nurses and Percent Change

Actively Licensed Nurses	2018	% Change	2016	% Change	2014
LPNs	2,635	+3.4%	2,549	+2.7%	2,483
RNs	18,479	+4.4%	17,693	+10.0%	16,084
CNMs	32	-15.8%	38	+18.8%	32
CNPs	1,111	+31.0%	848	+30.3%	651
CRNAs	493	+8.6%	454	+3.2%	440
CNSs	64	-5.9%	68	-4.2%	71
TOTAL	22,814	+5.4%	21,650	+9.6%	19,761

The percent change reflects a comparison from the indicated year to the previous year.

Licensed Practical Nurses

South Dakota Supply Trends

Licensure Status As of December 28, 2018 the SDBON reported 2,635 actively licensed LPNs in South Dakota’s supply, see Figure 1. Data revealed a gain of 86 nurses from 2016 to 2018, a 3.4% increase since 2016.

As shown in Figure 2, during the data collection time period from January 1, 2017 to December 28, 2018 a total of 569 LPNs were added to South Dakota’s active supply, 406 LPNs were added as new graduates and 163 by endorsement from another state. Overall, South Dakota had an increase in supply during this time period of 86 LPNs with a net loss of 483 LPNs. The loss of LPNs is consistent with findings from previous workforce reports. A net loss of 466 LPNs was documented from 2015 to 2016; 409 from 2013 to 2014, and 379 from 2011-2012. Reasons for the loss were due to retirement, LPNs leaving the profession, moving out of South Dakota, or inactivation of the license. Many choose to inactivate their practical nurse license after completing RN education and licensing as an RN.

Figure 1: Actively Licensed LPNs

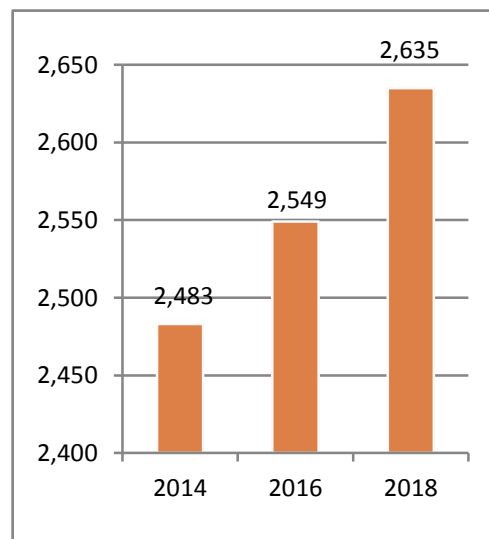
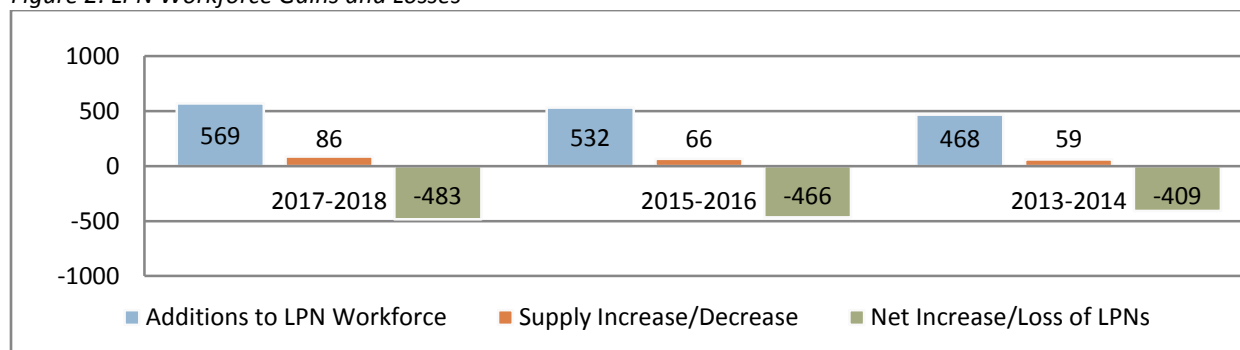


Figure 2: LPN Workforce Gains and Losses



Demographics of LPN Supply

Gender Consistent with previous reports the majority, 95.3%, of actively licensed LPNs in South Dakota were female. Nationally female LPNs comprised 92.3% of the population¹.

Table 3: LPN Gender Distribution

	2018		2016		2014	
Male LPNs	125	4.7%	120	4.7%	109	4.4%
Female LPNs	2,510	95.3%	2,429	95.3%	2,374	95.6%
TOTAL	2,635	100.0%	2,549	100.0%	2,483	100.0%

Race/Ethnicity The majority of LPNs were white/Caucasian. Minority nurse populations continue to be under-represented. Table 4 presents comparisons of ethnic distribution of the United States, South Dakota, and actively licensed LPNs in the United States and South Dakota.

Table 4: LPN Ethnic Distribution

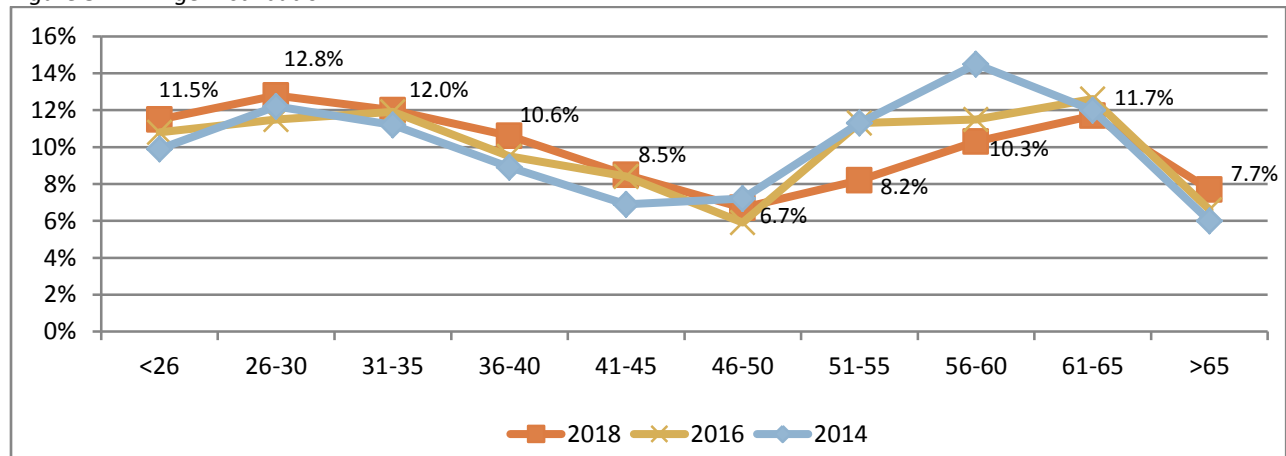
	American Indian/Alaska Native	Asian/Pacific Islander	Black/African American	Hispanic/Latino	Two or More Races / Other	White/Caucasian
U.S. Population²	1.3%	6.0%	13.4%	18.1%	2.7%	60.7%
U.S. LPNs¹	0.6%	2.8%	18.5%	7.4%	6.8%	71.4%
SD Population³	9.0%	1.6%	2.1%	3.8%	2.4%	82.2%
SD LPNs	119 (4.5%)	25 (1.0%)	53 (2.0%)	39 (1.5%)	27(1.0%)	2,372 (90.0%)

Age Age distribution of actively licensed LPNs is shown in Table 5 and Figure 3. The percentage of LPNs who were 51 years or older comprised 38.0% of supply and the average age of an LPN was 44.1 years old. Data revealed 24.3% were 30 years or younger, a 2 percentage point increase from 2016. Nationally¹ over 50% of LPNs were 50 years or older and the median age was 54. South Dakota LPN employment data revealed 12.4%, about 326 LPNs, intend “to leave or retire from nursing within the next five years”; in 2017 14.3% (308) respondents intended to retire or leave.

Table 5: LPN Age

Age Range	2018		2016		2014	
<26	304	11.5%	275	10.8%	246	9.9%
26-30	336	12.8%	293	11.5%	303	12.2%
31-35	315	12.0%	303	11.9%	278	11.2%
36-40	280	10.6%	242	9.5%	221	8.9%
41-45	223	8.5%	213	8.4%	172	6.9%
46-50	176	6.7%	151	5.9%	178	7.2%
51-55	217	8.2%	289	11.3%	281	11.3%
56-60	271	10.3%	294	11.5%	359	14.5%
61-65	309	11.7%	322	12.6%	297	12.0%
>65	204	7.7%	167	6.6%	148	6.0%
Total	2,635	100%	2,549	100%	2,483	100%

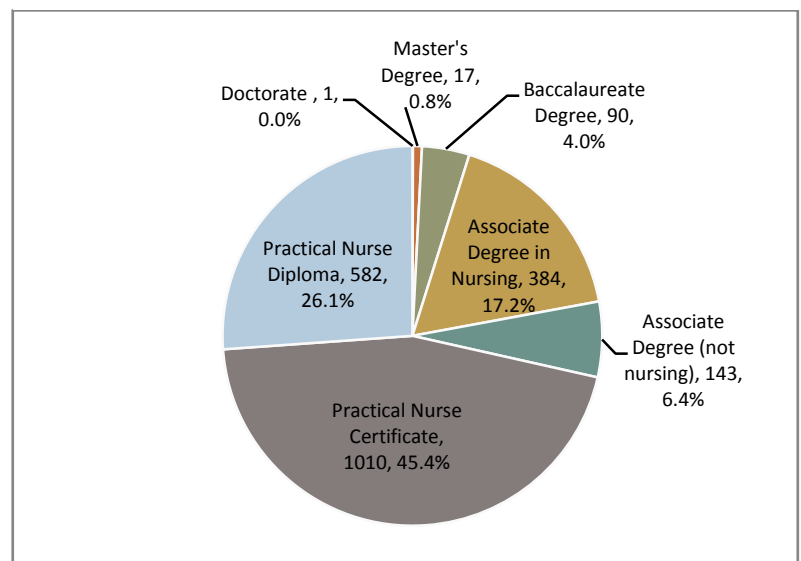
Figure 3: LPN Age Distribution



Highest Academic Achievement Consistent with previous reports the majority of LPN respondents, 95.1%, indicated their highest educational preparation at the PN diploma, certificate, or associate degree levels as shown in Figure 4. National¹ data reflected similar findings with 98.6% holding a diploma, certificate or associate degree. Only 4.0% of LPNs were prepared with a baccalaureate degree, nationally¹ 1.2% held a baccalaureate degree.

Respondents who indicated they were enrolled in a program leading to an advanced nursing degree comprised 13.1% (292), an increase of 1.3% from 2017. Of these LPNs, 165 were enrolled in associate degree programs, 117 in baccalaureate degree programs, one in a master’s degree program, and 10 were unknown/missing data.

Figure 4: Highest Academic Achievement of LPNs



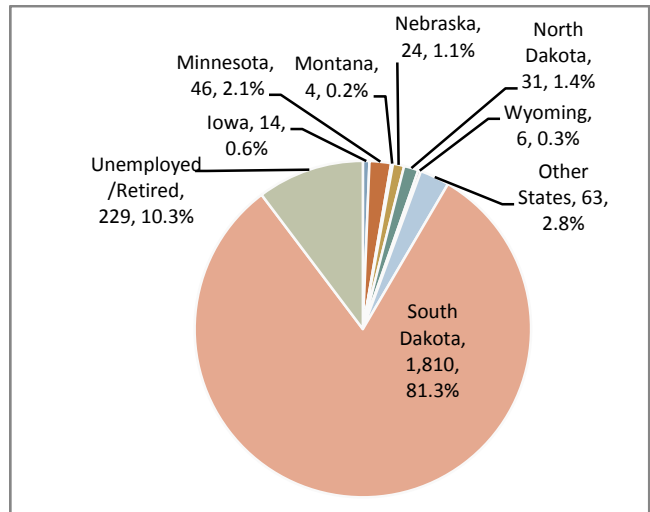
Employment Characteristics

Primary State of Practice

Consistent with previous reports, the majority of LPNs, 81.3%, reported their primary place of employment and practice was in the state of South Dakota, Figure 5. LPNs that reported employment in a neighboring state of Iowa, Minnesota, Montana, Nebraska, North Dakota, or Wyoming comprised 5.7%; 2.8% were employed in other states.

Most LPNs, 81.1% (1,806), reported they held employment and practiced as a nurse for one employer, 7.9% (176) reported they had two employers, and 0.7% (16) reported three or more. LPNs who were not employed in a nursing position comprised 10.3% (229) of respondents, a similar finding in previous reports. Nationally¹ 84.5% of LPNs held one position, 13.4% had two employers, and 2.1% had three or more.

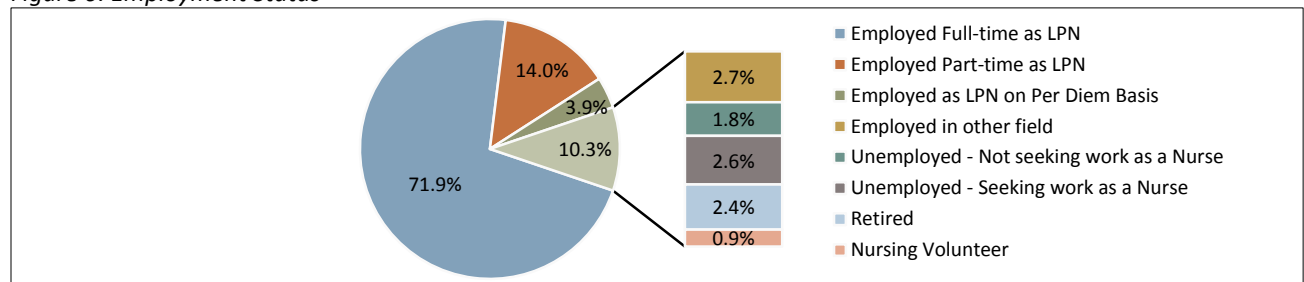
Figure 5: Primary State of Practice



Employment Status Employment data reflected a high percentage of LPNs, 89.8%, reported they were employed in the nursing profession either full-time, part-time, or on a per diem basis. This finding is consistent with previous South Dakota Nursing Workforce Supply reports published from 1999 to 2017 which revealed 82% – 91% of LPNs actively employed in nursing.

As shown in Figure 6, most LPN respondents, 1,601 (71.9%), reported being employed full-time in the nursing profession, the average number of hours worked was 39.6 hours per week. LPNs who worked 31 hours or less per week comprised 14.0% (311) and those working on a per diem basis, an arrangement wherein a nurse is employed on an as needed basis, comprised 3.9% (86). The average number of hours worked by part-time and per diem LPNs was 17.5 hours per week. Nationally¹ 61.2% of LPN respondents were employed full-time, 12.1% part-time, and 7.1% per diem.

Figure 6: Employment Status



LPN Availability to the Workforce An important aspect of measuring nursing supply is assessing how many LPNs were available to the nursing workforce. As shown in Table 6, most LPNs, 72.4%, reported working in a nursing position 32 or more hours per week, compared to 83.8% nationally¹. LPNs that worked 31 hours or less comprised 16.8% of respondents; national¹ data reflected 16.2%.

Table 6: Reported Hours Worked in a Week

Number of Hours Worked in a Week	Number	Percent	National Data ¹
0 or Reported as Unemployed or Retired	240	10.8%	--
1 – 15	146	6.6%	4.1%
16 – 23	78	3.5%	4.7%
24 – 31	151	6.8%	7.4%
32 - 40	1,413	63.4%	59.4%
41 – 50	149	6.7%	16.0%
51 – 60	27	1.2%	5.1%
61 or more	23	1.0%	3.3%
Total	1,987	100.0%	100.0%

The active licensed supply of 2,635 LPNs can overstate the number of nurses engaged in nursing practice and available to the workforce, therefore data on the number of hours worked in nursing were used to estimate the number of LPN FTEs available to employers. Table 7 displays the formula used to identify the estimated 2,129.2 LPN FTEs available to the workforce, an increase of the 157.6 FTEs from 2017.

Table 7: Estimated FTEs Available

Percentage that worked 32 or more hours per week (Full-time)	Percentage that worked 31 or less hours per week (Part-time)	Estimated Actively Licensed LPN FTEs Available
2,635 LPNs x 72.4% FT = 1,907.3 FTEs	2,635 LPNs x 16.8% PT / 0.5 = 221.9 FTEs	1,907.3 + 221.9 = 2,129.2 Total FTEs

Reasons for Unemployment LPNs who were not employed in a nursing position accounted for 10.3% (229) of respondents; of them 53 were retired, 19 volunteered as a nurse, 60 were employed in non-nursing positions, 39 were unemployed and not seeking work as a nurse, and 58 were unemployed and seeking work as a nurse. The most common reason selected for being unemployed was taking care of home and family; see Table 8.

Table 8: Reasons for Unemployment

Reasons for Unemployment	Number	Percent	National Data ¹
Taking Care of Home and Family	38	39.2%	39.1%
Disabled	4	4.1%	17.5%
Inadequate Salary	2	2.1%	3.0%
School	13	13.4%	14.9%
Difficulty in Finding a Nursing Position	11	11.3%	23.1%
Other	29	29.9%	22.7%
Total	97	100.0%	--

Practice Characteristics

Primary Employment The majority of LPN respondents held primary employment in nursing home/extended care, 28.1%, ambulatory care, 22.5%, or a hospital, 8.7%. Most, 25.7%, practiced in the specialty area of geriatric/gerontology or adult/family health, 17.9% as a staff nurse, 77.5%. See Figure 7 and Tables 9 and 10 for comparison to national data findings.

Secondary Employment A total of 192 LPNs indicated they worked for two or more employers. The majority, 44.8%, were employed in nursing homes/extended care and reported geriatric/gerontology as their specialty area of practice; see Figure 7 and Tables 9 and 10.

Figure 7: LPN Employment Settings

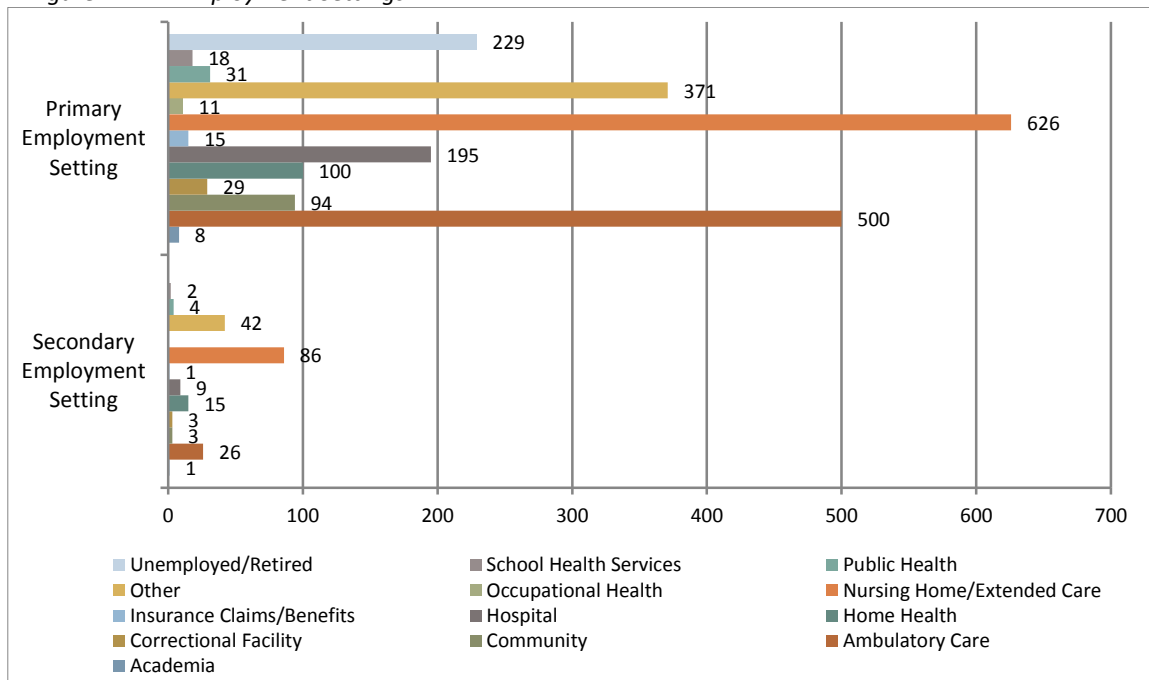


Table 9: LPN Employment Settings

Employment Settings	Primary Settings		National Data ¹	Secondary Settings	
			Primary Settings		
Academia	8	0.3%	0.3%	1	0.5%
Ambulatory Care	500	22.5%	6.8%	26	13.5%
Community	94	4.2%	3.4%	3	1.6%
Correctional Facility	29	1.3%	2.8%	3	1.6%
Home Health	100	4.5%	14.0%	15	7.8%
Hospital	195	8.7%	9.6%	9	4.7%
Insurance Claims/Benefits	15	0.7%	0.9%	1	0.5%
Nursing Home/Extended Care	626	28.1%	37.3%	86	44.8%
Occupational Health	11	0.5%	0.6%	0	0.0%
Other	371	16.7%	19.7%	42	21.9%
Public Health	31	1.4%	1.9%	4	2.1%
School Health Services	18	0.8%	2.6%	2	1.0%
Unemployed/Retired	229	10.3%	*	--	--
Total	2,227	100.0%	100.0%	192	100.0%

*Not included.

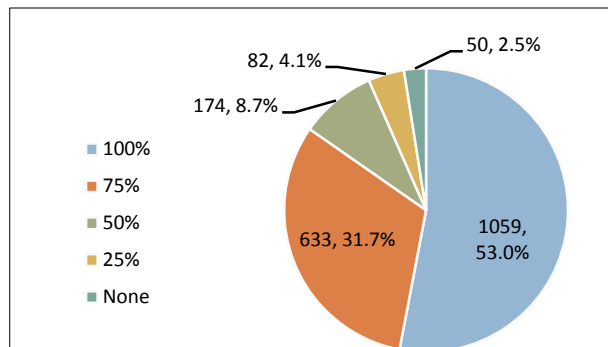
Table 10: LPN Practice Specialties

Practice Specialty	Primary Practice Specialty		National Data ¹	Secondary Practice Specialty	
			Primary Specialty		
Acute Care / Critical Care	87	3.9%	2.7%	21	10.9%
Adult Health / Family Health	399	17.9%	14.6%	11	5.7%
Community	50	2.2%	0.9%	4	2.1%
Geriatric / Gerontology	572	25.7%	30.5	74	38.5%
Home Health	80	3.6%	8.8%	9	4.7%
Medical-Surgical	120	5.4%	2.9%	6	3.1%
Occupational Health	12	0.5%	0.6%	0	0.0%
Oncology	16	0.7%	0.6%	0	0.0%
Palliative Care / Hospice	6	0.3%	1.4%	1	0.5%
Pediatrics / Neonatal	87	3.9%	7.6%	5	2.6%
Psychiatric / Mental Health / Substance Abuse	46	2.1%	4.8%	4	2.1%
Public Health	20	0.9%	1.0%	3	1.6%
Rehabilitation	48	2.2%	4.3%	3	1.6%
School Health	18	0.8%	2.6%	2	1.0%
Trauma / Emergency	5	0.2%	0.5%	0	0.0%
Women's Health / Maternal-Child Health / Obstetrics	64	2.9%	2.1%	1	0.5%
Other – Clinical Specialties	285	12.8%	13.0%	48	25.0%
Other – Non-clinical Specialties	83	3.7%	1.3%	--	--
Unemployed / Retired	229	10.3%	*	--	--
TOTAL	2,227	100.0%	100.0%	192	100.0%

*Not included.

Time Involved in Direct Patient Care Similar to previous workforce reports, a large number of LPNs working in a nursing position reported spending a significant percentage of their time in direct patient care; Figure 8.

Figure 8: Percentage of Time Spent in Direct Patient Care



LPN Distribution in South Dakota

South Dakota’s seven regions are shown on the map in Figure 9. The number of LPNs who resided in the regions as of December 28, 2018 is provided in Table 11. The 2017 U.S. Census Bureau’s³ annual estimates of South Dakota’s population was used to compare the state’s county population to the number of LPNs residing in a county or region. The ratio of LPNs to population was estimated to provide a basis to compare the number of LPNs available to the workforce in an area. The ratio of LPNs to population of 100,000 was 226.0, an increase of 16.2 from 2016. The limitations of comparing ratios are the assumptions that citizens will receive nursing services in the region they reside and that the same types of health care services are available in each region. The number and distribution of nurses in a region may need to be higher based on the needs of that region.

Figure 9: Regional State Map

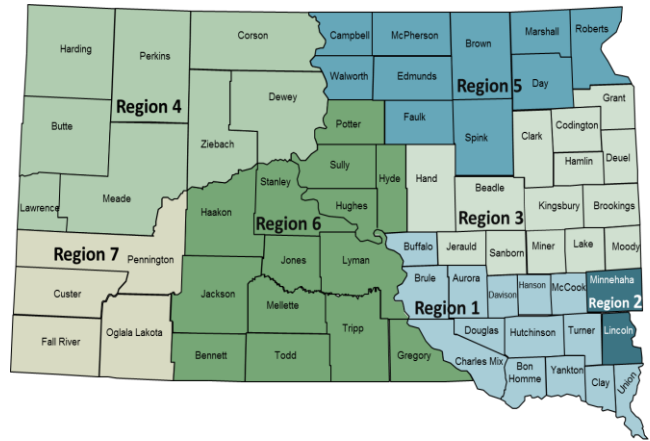


Table 12 displays the number of LPNs in each of the state’s 66 counties and provides the number of LPNs 61 years or older that may exit the workforce in the next 5 years.

Table 11: LPN Regional Distribution

Region	Counties / State	Region Population ²	Region’s % of State Population	Number Residing in Region	Region’s % of LPN Population	LPN to Population Ratio	Population Ratio % Change
Region 1	14 Counties: Aurora, Bon Homme, Brule, Buffalo, Charles Mix, Clay, Davison, Douglas, Hanson, Hutchinson, McCook, Turner, Union, and Yankton	125,372	14.4%	298	12.3%	2017: 179.5 2019: 192.1	+7.0%
Region 2	2 Counties: Lincoln and Minnehaha	245,280	28.2%	805	33.1%	2017: 243.1 2019: 265.2	+9.1%
Region 3	14 Counties: Beadle, Brookings, Clark, Codington, Deuel, Grant, Hamlin, Hand, Jerauld, Kingsbury, Lake, Miner, Moody, and Sanborn	135,792	15.6%	407	16.7%	2017: 222.3 2019: 242.2	+9.0
Region 4	8 Counties: Butte, Corson, Dewey, Harding, Lawrence, Meade, Perkins, and Ziebach	80,564	9.3%	184	7.6%	2017: 176.1 2019: 184.5	+4.8%
Region 5	10 Counties: Brown, Campbell, Day, Edmunds, Faulk, Marshall, McPherson, Roberts, Spink, and Walworth	81,787	9.4%	248	10.2%	2017: 228.7 2019: 245.0	+7.1%
Region 6	14 Counties: Bennett, Gregory, Haakon, Hughes, Hyde, Jackson, Jones, Lyman, Mellette, Potter, Stanley, Sully, Todd, and Tripp	60,998	7.0%	127	5.2%	2017: 147.8 2019: 168.2	+13.8%
Region 7	4 Counties: Custer, Fall River, Oglala Lakota, and Pennington	139,873	16.1%	363	14.9%	2017: 203.5 2019: 209.7	+3.0%
South Dakota Total	66 counties	869,666	100%	2,432 (92.3%)	100%	2017: 209.8 2019: 226.0	+7.7%
Out-of-State	Minnesota	--	--	108 (4.1%)	--	--	--
	Other States/Jurisdictions	--	--	95 (3.6%)	--	--	--
Total		--	--	2,635 (100.0%)	--	--	--

Table 12: LPN County Distribution

County	County Population ³	Number of LPNs	Number of LPNs 61 Years or Older	County	County Population ³	Number of LPNs	Number of LPNs 61 Years or Older
Aurora	2,738	8	2 (25.0%)	Jackson	3,289	5	1 (20.0%)
Beadle	18,157	33	8 (24.2%)	Jerault	2,028	4	1 (25.0%)
Bennett	3,454	5	2 (40.0%)	Jones	936	1	0 (0.0%)
Bon Homme	6,984	19	10 (52%)	Kingsbury	4,952	22	3 (13.6%)
Brookings	34,255	50	5 (10.0%)	Lake	12,809	26	8 (30.8%)
Brown	39,178	100	22 (22.0%)	Lawrence	25,429	48	11 (22.9%)
Brule	5,312	12	2 (16.7%)	Lincoln	56,664	187	30 (16.0%)
Buffalo	1,999	2	0 (0.0%)	Lyman	3,904	6	2 (33.3%)
Butte	10,107	22	9 (40.9%)	Marshall	5,499	15	1 (6.7%)
Campbell	1,379	8	2 (25.0%)	McCook	2,426	18	5 (27.8%)
Charles Mix	9,428	16	4 (25.0%)	McPherson	4,804	7	1 (14.3%)
Clark	3,668	17	5 (29.4%)	Meade	28,018	88	10 (11.4%)
Clay	13,990	22	0 (0.0%)	Mellette	2,088	8	2 (25.0%)
Codington	28,099	134	20 (14.9%)	Miner	2,228	8	2 (25.0%)
Corson	4,203	1	0 (0.0%)	Minnehaha	188,616	618	105 (17.0%)
Custer	8,691	16	4 (25.0%)	Moody	6,579	15	3 (20.0%)
Davison	19,704	37	13 (35.1%)	Oglala Lakota	14,354	5	1 (20.0%)
Day	5,521	15	6 (40.0%)	Pennington	110,141	314	68 (21.7%)
Deuel	4,281	15	0 (0.0%)	Perkins	2,974	9	2 (22.2%)
Dewey	5,835	10	4 (40.0%)	Potter	2,231	7	0 (0.0%)
Douglas	2,931	11	2 (18.2%)	Roberts	10,278	43	10 (23.3%)
Edmunds	3,919	12	1 (8.3%)	Sanborn	2,450	4	1 (25.0%)
Fall River	6,687	28	10 (35.7%)	Spink	6,410	20	2 (10.0%)
Faulk	2,329	6	2 (33.3%)	Stanley	3,011	8	2 (25.0%)
Grant	7,061	34	6 (17.6%)	Sully	1,407	0	0 (0.0%)
Gregory	4,226	8	1 (12.5%)	Todd	10,065	18	5 (27.8%)
Haakon	1,943	12	8 (66.7%)	Tripp	5,460	15	3 (20.0%)
Hamlin	5,948	33	4 (12.1%)	Turner	8,315	27	8 (29.6%)
Hand	3,277	12	3 (25.0%)	Union	15,029	41	5 (12.2%)
Hanson	3,423	7	2 (28.6%)	Walworth	5,543	22	7 (31.8%)
Harding	1,242	3	0 (0.0%)	Yankton	22,662	58	10 (17.2%)
Hughes	17,666	28	7 (25.0%)	Ziebach	2,756	3	1 (33.3%)
Hutchinson	7,358	20	12 (60.0%)	State Total	869,666	2,432	489 (20.1%)
Hyde	1,318	6	3 (50.0%)	Out of State	--	203	--
				Total	--	2,635	--

Registered Nurses

South Dakota Supply Trends

Licensure Status As of December 28, 2018 the SDBON reported 18,479 actively licensed RNs in South Dakota’s supply, see Figure 10. Data revealed a gain of 786 nurses from 2016 to 2018, a 4.4% increase since 2016.

As shown in Figure 11, during the data collection time period from January 1, 2017 to December 28, 2018 a total of 2,947 RNs were added to South Dakota’s active supply, 1,133 RNs were added as new graduates and 1,814 by endorsement from another state. Overall, South Dakota had an increase in supply during this time period of 786 RNs with a net loss of 2,161 RNs. The net loss of RNs is consistent with findings from previous workforce reports from 2011 - 2017. Reasons for the loss were due to retirement, leaving the profession, moving out of South Dakota, or inactivation of the license.

Figure 10: Actively Licensed RNs

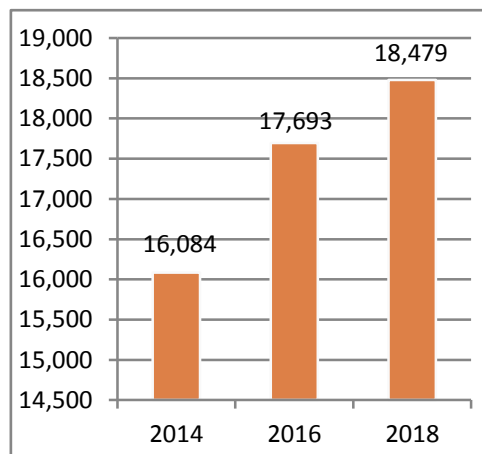
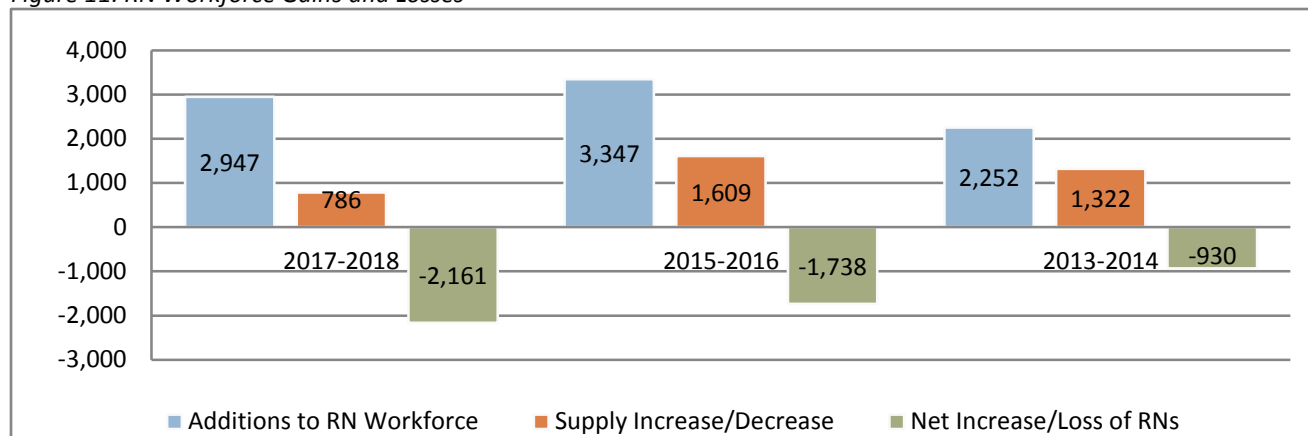


Figure 11: RN Workforce Gains and Losses



Demographics of RN Supply

Gender Consistent with previous reports the majority, 91.0%, of actively licensed RNs in South Dakota were female. Nationally female RNs comprised 90.9% of the population¹.

Table 13: RN Gender Distribution

	2018		2016		2014	
Male RNs	1,658	9.0%	1,535	8.7%	1,385	8.6%
Female RNs	16,821	91.0%	16,158	91.3%	14,699	91.4%
TOTAL	18, 479	100.0%	17,693	100%	16,084	100%

Race/Ethnicity The majority of RNs were white/Caucasian. Minority nurse populations continue to be under-represented. Table 14 presents comparisons of ethnic distribution of the United States, South Dakota, and actively licensed RNs in the United States and South Dakota.

Table 14: RN Ethnic Distribution

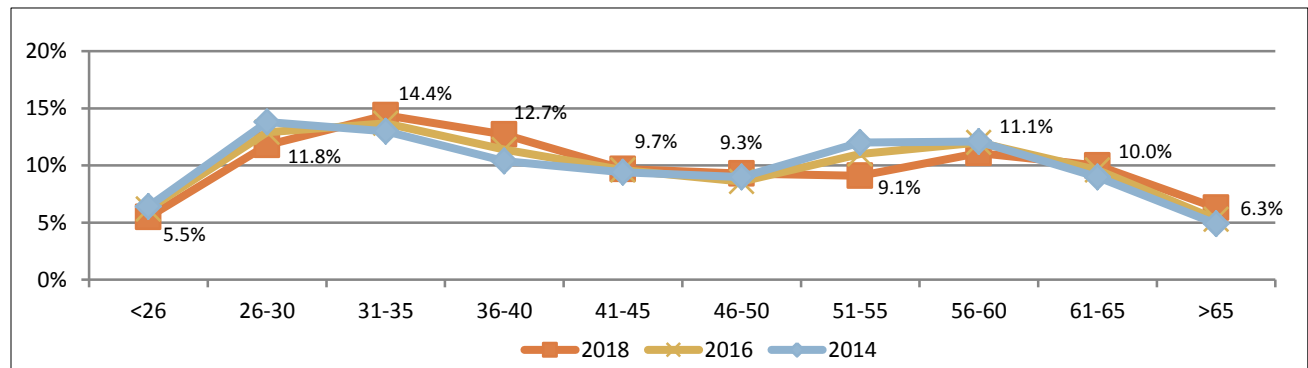
	American Indian/Alaska Native	Asian/Pacific Islander	Black/African American	Hispanic/Latino	Two or More Races / Other	White/Caucasian
U.S. Population²	1.3%	6.0%	13.4%	18.1%	2.7%	60.7%
U.S. RNs¹	0.4%	8.0%	6.2%	5.3%	1.7%	80.8%
SD Population³	9.0%	1.6%	2.1%	3.8%	2.4%	82.2%
SD RNs	2.0% (363)	1.8% (316)	2.5% (468)	0.8% (143)	1.0% (192)	92.0% (16,997)

Age Age distribution of actively licensed RNs is shown in Table 15 and Figure 12. The percentage of RNs who were 51 years or older comprised 36.6% of active supply; RNs who were 35 years or younger comprised 31.7%. The average age of an RN was 44.8; in 2017 the average age was 44.6. Nationally, the median age¹ was 53 years. South Dakota RN employment data revealed 13.9% (2,274) of RNs intend “to leave or retire from nursing within the next five years”; a slight increase from 2017’s data of 13.0%.

Table 15: RN Age

Age Range	2018		2016		2014	
<26	1,023	5.5%	1,098	6.2%	1,029	6.4%
26-30	2,178	11.8%	2,277	12.9%	2,220	13.8%
31-35	2,664	14.4%	2,422	13.7%	2,091	13.0%
36-40	2,345	12.7%	2,010	11.4%	1,673	10.4%
41-45	1,799	9.7%	1,692	9.6%	1,517	9.4%
46-50	1,714	9.3%	1,519	8.6%	1,447	9.0%
51-55	1,678	9.1%	1,938	11.0%	1,927	12.0%
56-60	2,057	11.1%	2,115	12.0%	1,950	12.1%
61-65	1,852	10.0%	1,693	9.6%	1,448	9.0%
>65	1,169	6.3%	929	5.3%	782	4.9%
Total	18,479	100.0%	17,693	100%	16,084	100%

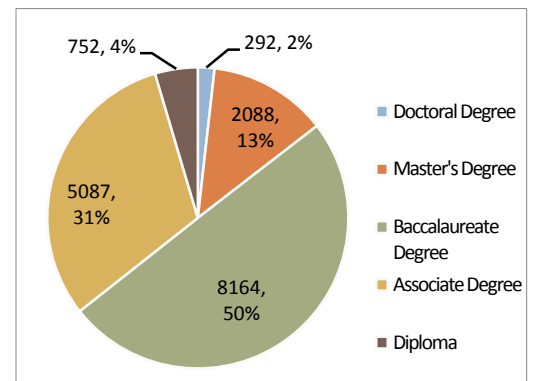
Figure 12: RN Age Distribution



Highest Academic Achievement

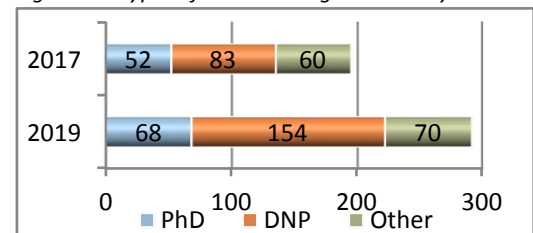
As shown in Figure 13, the majority of RNs, 49.8%, held a baccalaureate degree, a 3.1% increase from 2017. Of them, 45.2% (7,413) held a baccalaureate in nursing degree. RNs that held an associate degrees and diplomas decreased, RNs holding associate degrees comprised 31.1%, a decrease of 3.5% and those holding a diploma comprised 4.6%, a decreased of 1.0%. Graduate prepared RNs increased; those holding a master’s degree comprised 12.7%, an increase of 0.9% from 2017 and those holding a doctorate degree comprised 1.8%, an increase of 0.5%. Figure 14 displays the types of doctorate degrees held.

Figure 13: Highest Academic Achievement of RNs



The Institute of Medicine’s (IOM) report, The Future of Nursing Leading Change, Advancing Health⁴, recommended increasing the number of nurses prepared with a baccalaureate degree to 80% by 2020. Baseline data in 2009 revealed South Dakota had 39% of RNs prepared with a baccalaureate or higher degree. Data collected during this time period revealed 64.4% held a baccalaureate or higher degree, a 4.6% increase from 2017; 15.6% short of the goal. Nationally, 64.1% of RNs held a baccalaureate or higher degree¹. The IOM report also recommended doubling the number of RNs prepared with a doctorate degree by 2020. South Dakota met this recommendation; 65 RNs were prepared with a doctorate in 2009, during this reporting period 292 RNs held a doctorate degree.

Figure 14: Types of Doctoral Degrees Held by RNs



Enrolled in Advanced Nursing Degree

Consistent with previous reports, a large number of RNs, 7.7% (1,267), reported they were “currently enrolled in education classes leading to an advanced nursing degree”. Table 16 displays the degrees sought.

Table 16: RNs Enrolled in Nursing Education Programs

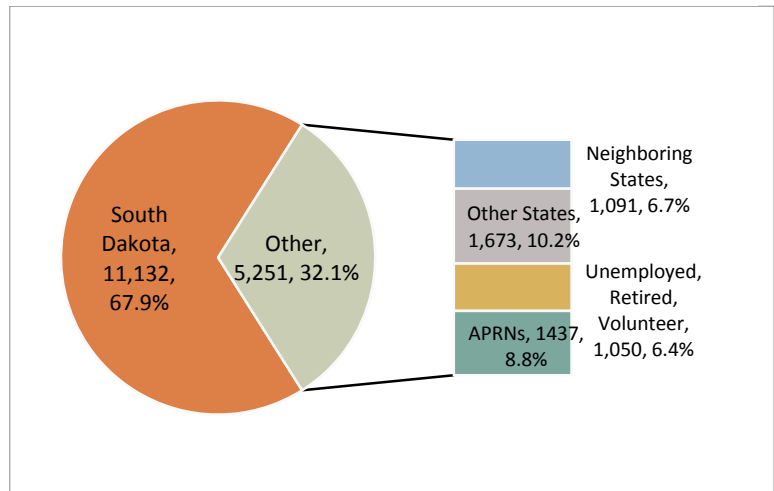
Nursing Degree Sought	Number of RNs	Percent
Baccalaureate in Nursing	366	28.9%
Master’s in Nursing	661	52.2%
Doctorate of Nursing Practice (DNP)	181	14.3%
PhD	33	2.6%
Other	26	2.1%
Total	1,267	100.0%

Employment Characteristics

Primary State of Practice

The majority of RN respondents, 67.9%, reported their primary place of practice within the state of South Dakota, Figure 15. RNs practicing in neighboring states of Iowa, Minnesota, Montana, Nebraska, North Dakota, or Wyoming comprised 6.7%, and RNs practicing in other states comprised 10.2%. RNs that practiced in the role of an advanced practice registered nurse (APRN) comprised 8.8%, nationally¹ 12.6% of RNs were APRNs. Respondents who reported as unemployed, retired, or volunteering comprised 6.4%.

Figure 15: Primary State of Practice

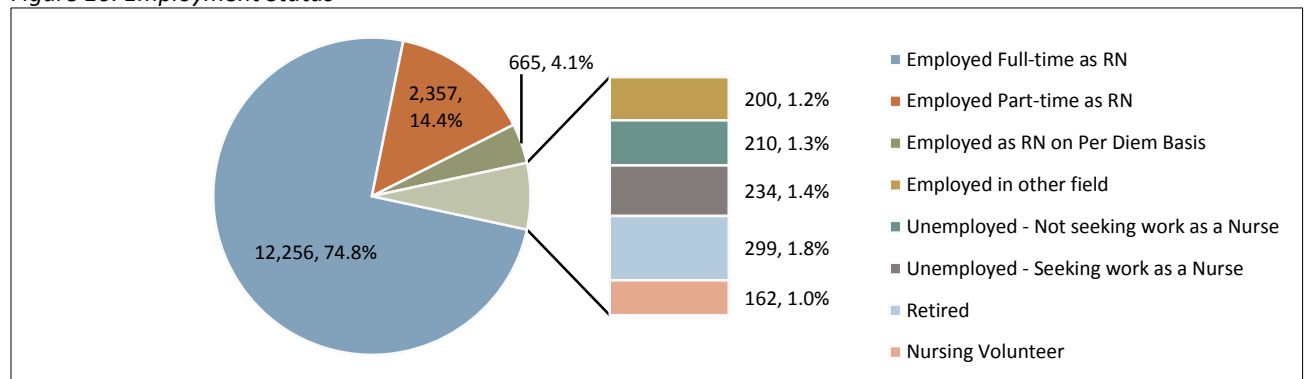


Most RNs, 74.6% (12,219), reported employment and practicing as a nurse for only one employer; 8.9% (1,462) reported having two employers, and 1.2% (203) reported three or more. RNs who were unemployed, retired, volunteers, or practicing as APRNs comprised 15.2% (2,487) of respondents. Nationally¹ 83.3% held one position, 13.9% had two, and 2.8% had three or more.

Employment Status

Consistent with previous reports, employment data reflected a high percentage of RN respondents, 93.3%, employed in the nursing profession either full-time, part-time, or on a per diem basis. As shown in Figure 16, most RNs, 12,256 (74.8%), reported being employed full-time in the nursing profession. RNs who worked part-time comprised 14.4% (2,357) and those working on a per diem basis, an arrangement wherein a nurse is employed on an as needed basis, comprised 4.1% (665). Nationally¹ 65.4% of RN respondents were employed full-time, 12.1% part-time, and 7.1% per diem.

Figure 16: Employment Status



RN Availability to the Workforce An important aspect of measuring nursing supply is assessing how many RNs were available to the nursing workforce. As shown in Table 17, most RN respondents, 68.9%, reported working in a nursing position 32 or more hours per week; they worked an average of 39.6 hours per week. Respondents who worked 31 hours or less per week accounted for 15.6% of RNs; they worked an average of 19.1 hours per week. See the APRN section of this report for CNM, CNP, CRNA, and CNS employment characteristics and workforce availability.

Table 17: Reported Hours Worked in a Week

Number of Hours Worked in a Week	Number	Percent	National Data ¹
0	48	0.3%	--
1 – 15	776	4.7%	4.1%
16 – 23	506	3.1%	4.7%
24 – 31	1,276	7.8%	7.4%
32 - 40	9,648	58.9%	59.4%
41 – 50	1,316	8.0%	16.0%
51 – 60	182	1.1%	5.1%
61 or more	144	0.9%	3.3%
Subtotal	13,896	--	--
APRN Respondents	1,438	8.8%	--
Unemployed/Volunteer Respondents	1,049	6.4%	--
Total Respondents	16,383	100.00%	100.0%

The active licensed supply of 18,479 RNs can overstate the number of nurses engaged in nursing practice and available to the workforce, therefore data on the number of hours worked in nursing were used to estimate the number of RN FTEs available to employers. Table 18 displays the formula used to identify an estimated 14,177.0 RN FTEs available to the workforce, a decrease of 782.4 FTEs from 2017.

Table 18: Estimated FTEs Available

Percentage that worked 32 or more hours per week (Full-time)	Percentage that worked 31 or less hours per week (Part-time)	Estimated Actively Licensed RN FTEs Available
18,479 RNs x 68.9% FT = 12,734.4 FTEs	18,479 RNs x 15.6% PT / 0.5 = 1,442.6 FTEs	12,734.4 + 1,442.6 = 14,177.0 Total FTEs

Reasons for Unemployment

RNs who reported they were unemployed accounted for 2.7% (444) of respondents. Of them, 210 reported they were unemployed and not seeking work as a nurse and 234 responded they were unemployed and seeking work as a nurse. The most common reason selected for being unemployed was taking care of home and family; see Table 19.

Table 19: Reasons for Unemployment

Reasons for Unemployment	Number	Percent	National Data ¹
Taking Care of Home and Family	175	39.4%	39.1%
Disabled	25	5.6%	17.5%
Inadequate Salary	1	0.2%	3.0%
School	58	13.1%	14.9%
Difficulty in Finding a Nursing Position	24	5.4%	23.1%
Other/Missing	161	36.3%	--
Total	444	100.0%	--

Practice Characteristics

Primary Employment As shown in Figure 17 and Table 20, the majority of RN respondents held primary employment in a hospital, 39.6% (6,493), ambulatory care setting, 11.4% (1,865), or nursing home/extended care setting, 7.7% (1,267).

As shown in Figure 18 and Table 21, most RNs practiced in the medical-surgical area, 14.1%, and acute care/critical care area, 11.9%. The majority of RNs worked in the role of a staff nurse and spent a significant amount of time involved in direct patient care, see Figure 19.

Secondary Employment A total of 1,665 (10.6%) respondents worked for two or more employers. The majority were employed in hospitals, 36.6% (1,049), nursing homes/extended care, 14.6% (420), and ambulatory care settings, 10.8% (309). The most common secondary specialty area was Geriatric/gerontology, 13.3%, and acute care/critical care, 13.3% in the position of a staff nurse. See Figures 17, 18 and Tables 20, 21.

Figure 17: RN Employment Settings

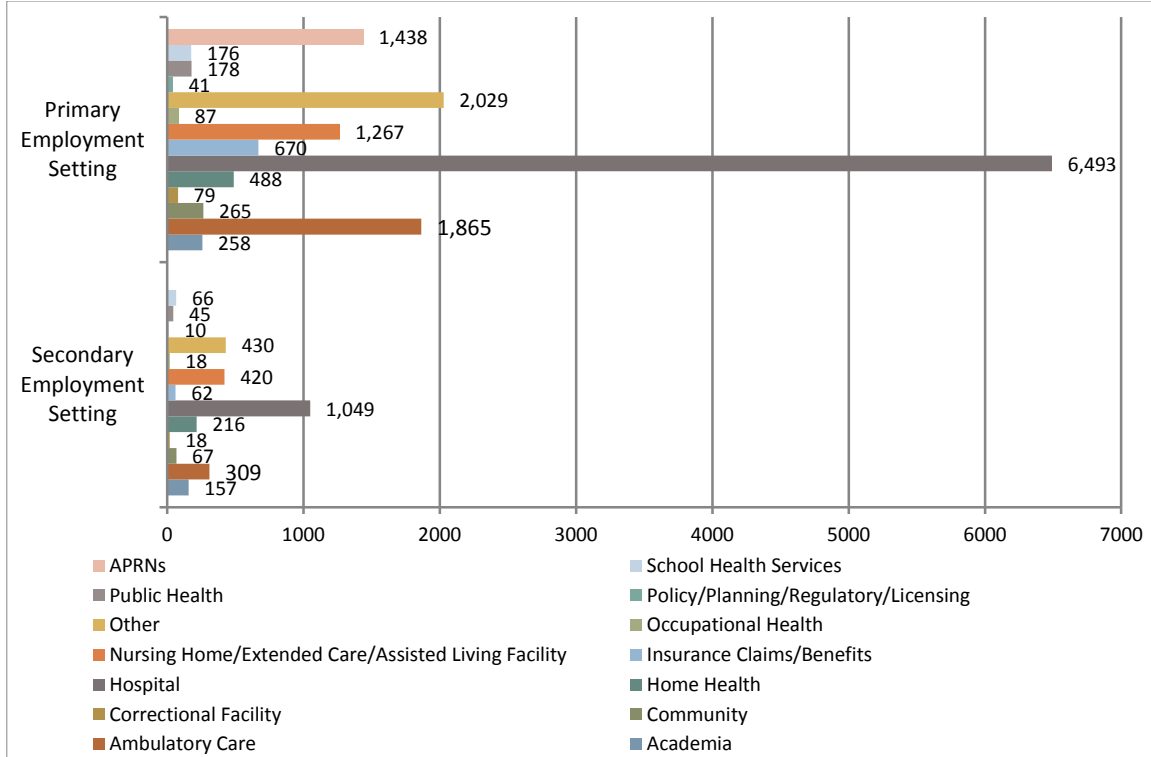


Table 20: RN Employment Settings

Employment Settings	Primary Settings		National Data ¹	Secondary Settings	
	Count	Percentage	Primary Settings	Count	Percentage
Academia	258	1.6%	2.6	157	5.5%
Ambulatory Care	1,865	11.4%	9.4	309	10.8%
Community	265	1.6%	2.0	67	2.3%
Correctional Facility	79	0.5%	0.8	18	0.6%
Home Health	488	3.0%	4.3	216	7.5%
Hospital	6,493	39.6%	55.7	1,049	36.6%
Insurance Claims/Benefits	670	4.1%	1.8	62	2.2%
Nursing Home/Extended Care	1,267	7.7%	5.3	420	14.6%
Occupational Health	87	0.5%	0.8	18	0.6%
Policy/Planning/Regulatory/Licensing	41	0.3%	0.2	10	0.3%
Public Health	178	1.1%	1.4	45	1.6%
School Health Services	176	1.1%	2.6	66	2.3%
APRNs	1,438	8.8%	*	--	--
Other	2,029	12.4%	13.0**	430	15.0%
Unemployed/Retired	1,049	6.4%	*	--	--
Total	16,383	100.0%	100.0%	2,867	100.0%

*Not included.

**National data: dialysis and hospice percentages were added to 'Other' category.

Figure 18: RN Employment Positions

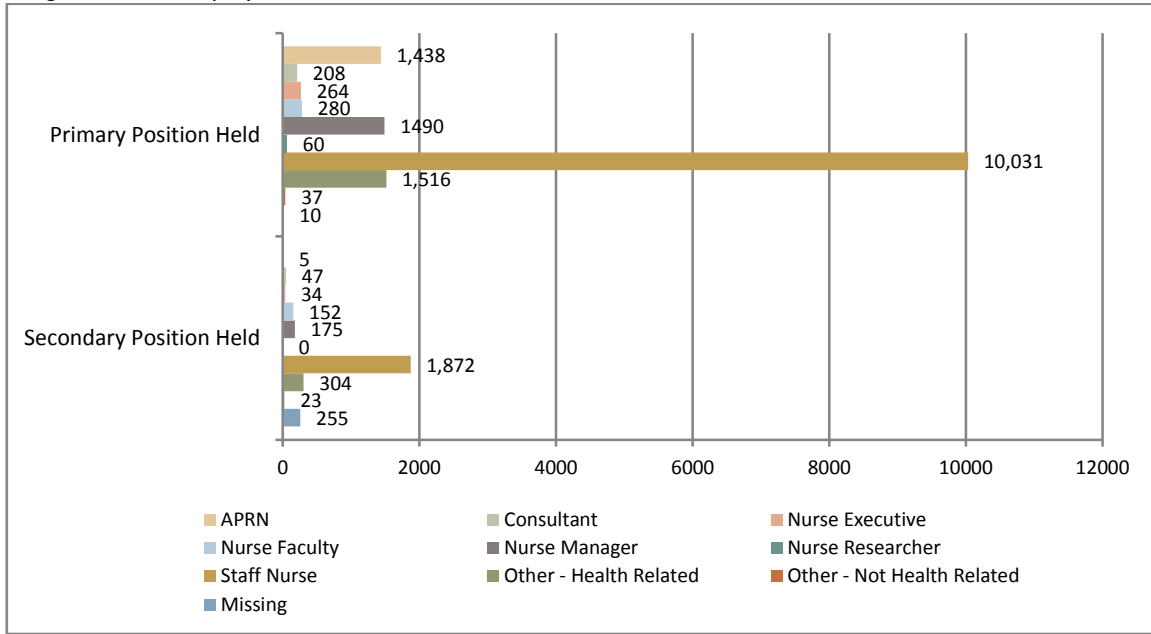


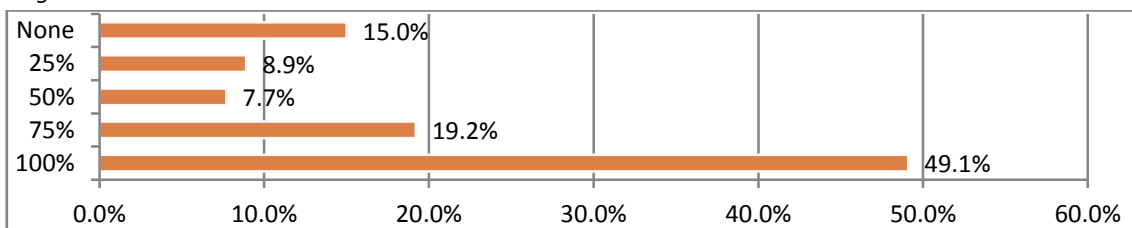
Table 21: RN Practice Specialties

Practice Specialty	Primary Practice Specialty		National Data ¹ Primary Specialty	Secondary Practice Specialty	
Acute Care / Critical Care	1,950	11.9%	14.0	381	13.3%
Adult Health / Family Health	1,013	6.2%	7.2	159	5.5%
Anesthesia	59	0.4%	1.9	9	0.3%
Community	220	1.3%	1.0	55	1.9%
Geriatric / Gerontology	1,248	7.6%	5.1	380	13.3%
Home Health	422	2.6%	3.6	122	4.3%
Maternal Child	526	3.2%	4.7	73	2.5%
Medical-Surgical	2,315	14.1%	8.5	330	11.5%
Occupational Health	116	0.7%	0.9	18	0.6%
Oncology	446	2.7%	2.8	48	1.7%
Palliative Care / Hospice	73	0.4%	1.7	28	1.0%
Pediatrics / Neonatal	621	3.8%	6.9	141	4.9%
Psychiatric / Mental Health / Substance Abuse	399	2.4%	4.1	36	1.3%
Public Health	207	1.3%	1.3	74	2.6%
Rehabilitation	179	1.1%	1.9	42	1.5%
School Health	172	1.0%	2.5	62	2.2%
Trauma / Emergency	206	1.3%	5.4	69	2.4%
Women's Health	347	2.1%	1.5	35	1.2%
Other	3,377	20.6%	24.8**	805	28.1%
APRNs	1,438	8.8%	*	*	*
Unemployed / Retired	1,049	6.4%	*	*	*
TOTAL	16,383	100.0%	100.0%	2,867	100.0%

*Not included.

**Cardiology, nephrology, and perioperative percentages were added to "Other" category.

Figure 19: Time Involved in Direct Patient Care



RN Distribution in South Dakota

South Dakota’s seven regions are shown on the map in Figure 20. The number of RNs who resided in these regions as of December 28, 2018 is provided in Table 22. The 2017 U.S. Census Bureau’s³ annual estimates of South Dakota’s population was used to compare the state’s county population to the number of RNs residing in a region. The ratio of RNs to population was estimated to provide a basis to compare the number of RNs available to the workforce in an area. The ratio of RNs to population of 100,000 was 1,338.3, a decrease of 6.8% from 2016. The limitations of comparing ratios are the assumptions that citizens will receive nursing services in the region they reside and that the same types of health care services are available in each region. The number and distribution of nurses in a region may need to be higher based on the needs of that region.

Figure 20: Regional State Map

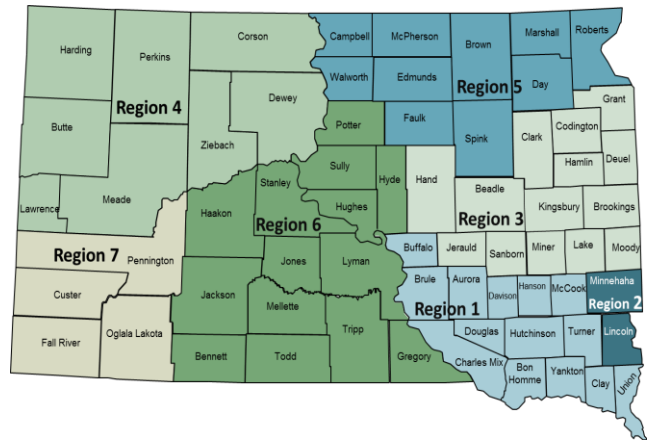


Table 23 displays the number of RNs in the state’s regions by ethnicity and by the number who were 61 years or older that may exit the workforce in the next 5 years. Data reflects the majority of RNs who reside in South Dakota are white; Regions 6 and 7 have the highest percentages of RNs who are American Indian, 6.0% and 6.7% respectively.

Table 24 displays the number of RNs in each of the state’s 66 counties and provides the percent of RNs in each county 61 years or older. The two counties with the highest percentage of RNs who were 61 years or older are Hyde county, 40%, and Fall River county, 35.3%.

Table 22: RN Regional Distribution

Region	Counties / State	Region Population ²	Region’s % of State Population	Number Residing in Region	Region’s % of RN Population	RN to Population Ratio	Population Ratio % Change
Region 1	14 Counties: Aurora, Bon Homme, Brule, Buffalo, Charles Mix, Clay, Davison, Douglas, Hanson, Hutchinson, McCook, Turner, Union, and Yankton	125,372	14.4%	2,291	15.1%	2017: 1,509.9 2019: 1,401.9	-7.2%
Region 2	2 Counties: Lincoln and Minnehaha	245,280	28.2%	6,043	39.8%	2017: 2,009.6 2019: 1,890.2	-5.9%
Region 3	14 Counties: Beadle, Brookings, Clark, Codington, Deuel, Grant, Hamlin, Hand, Jerauld, Kingsbury, Lake, Miner, Moody, and Sanborn	135,792	15.6%	1,648	10.9%	2017: 1,040.0 2019: 931.1	-10.5%
Region 4	8 Counties: Butte, Corson, Dewey, Harding, Lawrence, Meade, Perkins, and Ziebach	80,564	9.3%	1,012	6.7%	2017: 1,055.4 2019: 963.7	-8.7%
Region 5	10 Counties: Brown, Campbell, Day, Edmunds, Faulk, Marshall, McPherson, Roberts, Spink, and Walworth	81,787	9.4%	1,106	7.3%	2017: 1,148.2 2019: 1,037.5	-9.6%
Region 6	14 Counties: Bennett, Gregory, Haakon, Hughes, Hyde, Jackson, Jones, Lyman, Mellette, Potter, Stanley, Sully, Todd, and Tripp	60,998	7.0%	670	4.4%	2017: 904.0 2019: 842.7	-6.8%
Region 7	4 Counties: Custer, Fall River, Oglala Lakota, and Pennington	139,873	16.1%	2,400	15.8%	2017: 1,394.2 2019: 1,316.4	-5.6%
South Dakota Total	66 counties	869,666	100%	15,170 (82.1%)	100%	2017: 1,436.7 2019: 1,338.3	-6.8%
Out-of-State	Minnesota	--	--	957 (5.2%)	--	--	--
	Other States/Jurisdictions	--	--	2,352 (12.7%)	--	--	--
Total		--	--	18,479 (100.0%)	--	--	--

Table 23: RN Regional Distribution by Ethnicity, 61 Years or Older

Region	American Indian/Alaska Native	Asian/Pacific Islander	Black/African American	Hispanic/Latino	Two or More Races / Other	White/Caucasian	61 Years or Older
Region 1	1.1% (26)	0.6% (13)	1.0% (22)	0.5% (11)	1.0% (22)	95.9% (2,197)	18.4% (422)
Region 2	0.4% (22)	1.0% (63)	0.9% (54)	0.4% (27)	1.1% (64)	96.2% (5,813)	13.1% (792)
Region 3	0.8% (13)	0.7% (12)	0.7% (12)	0.2% (4)	0.7% (12)	96.8% (1,595)	18.1% (298)
Region 4	5.6% (57)	0.3% (3)	0.6% (6)	0.8% (8)	1.0% (10)	91.7% (928)	18.9% (191)
Region 5	1.4% (16)	0.8% (9)	1.0% (11)	0.3% (3)	0.6% (7)	95.8% (1,060)	19.1% (211)
Region 6	6.0% (40)	1.9% (13)	0.4% (3)	0.7% (5)	0.7% (5)	90.1% (604)	16.9% (113)
Region 7	6.7% (160)	2.5% (60)	1.7% (40)	1.1% (26)	1.4% (34)	86.7% (2,080)	19.4% (465)
Total SD Counties	2.2% (334)	1.1% (173)	1.0% (148)	0.6% (84)	1.0% (154)	94.1% (14,277)	--
Total In-state and Out-of-State SD RNs	2.0% (363)	1.8% (316)	2.5% (468)	0.8% (143)	1.0% (192)	92.0% (16,997)	16.4% (2,492)
SD Population³	9.0%	1.6%	2.1%	3.8%	2.4%	82.2%	--
U.S. RNs¹	0.4%	8.0%	6.2%	5.3%	1.7%	80.8%	--
U.S. Population²	1.3%	6.0%	13.4%	18.1%	2.7%	60.7%	--

Table 24: RN County Distribution

County	County Population ³	Number of RNs	Number of RNs 61 Years or Older	County	County Population ³	Number of RNs	Number of RNs 61 Years or Older
Aurora	2,738	47	10.6% (5)	Jackson	3,289	26	15.4% (4)
Beadle	18,157	208	23.1% (48)	Jerauld	2,028	24	33.3% (8)
Bennett	3,454	28	14.3% (4)	Jones	936	14	7.1% (1)
Bon Homme	6,984	116	29.3% (34)	Kingsbury	4,952	80	22.5% (18)
Brookings	34,255	308	16.6% (51)	Lake	12,809	160	17.5% (28)
Brown	39,178	585	17.8% (104)	Lawrence	25,429	339	22.1% (75)
Brule	5,312	71	14.1% (10)	Lincoln	56,664	1,803	11.6% (209)
Buffalo	1,999	5	0.0% (0)	Lyman	3,904	22	18.2% (4)
Butte	10,107	102	17.6% (18)	Marshall	5,499	52	13.5% (7)
Campbell	1,379	18	22.2% (4)	McCook	2,426	95	13.7% (13)
Charles Mix	9,428	130	19.2% (25)	McPherson	4,804	27	25.9% (7)
Clark	3,668	46	17.4% (8)	Meade	28,018	463	17.5% (81)
Clay	13,990	161	16.8% (27)	Mellette	2,088	12	33.3% (4)
Codington	28,099	364	16.2% (59)	Miner	2,228	41	12.2% (5)
Corson	4,203	12	25.0% (3)	Minnehaha	188,616	4,240	13.8% (583)
Custer	8,691	124	25.8% (32)	Moody	6,579	100	23.0% (23)
Davison	19,704	329	21.0% (69)	Oglala Lakota	14,354	74	16.2% (12)
Day	5,521	74	18.9% (14)	Pennington	110,141	2,100	18.3% (385)
Deuel	4,281	62	8.1% (5)	Perkins	2,974	21	9.5% (2)
Dewey	5,835	41	17.1% (7)	Potter	2,231	40	20.0% (8)
Douglas	2,931	64	7.8% (5)	Roberts	10,278	94	24.5% (23)
Edmunds	3,919	74	24.3% (18)	Sanborn	2,450	37	18.9% (7)
Fall River	6,687	102	35.3% (36)	Spink	6,410	87	19.5% (17)
Faulk	2,329	29	17.2% (5)	Stanley	3,011	52	21.2% (11)
Grant	7,061	85	15.3% (13)	Sully	1,407	6	16.7% (1)
Gregory	4,226	79	13.9% (11)	Todd	10,065	24	20.8% (5)
Haakon	1,943	31	16.1% (5)	Tripp	5,460	73	16.4% (12)
Hamlin	5,948	93	16.1% (15)	Turner	8,315	169	17.8% (30)
Hand	3,277	40	25.0% (10)	Union	15,029	394	17.0% (67)
Hanson	3,423	80	11.3% (9)	Walworth	5,543	66	18.2% (12)
Harding	1,242	6	33.3% (2)	Yankton	22,662	487	20.3% (99)
Hughes	17,666	248	14.9% (37)	Ziebach	2,756	28	10.7% (3)
Hutchinson	7,358	143	20.3% (29)	State Total	869,666	15,170	16.4% (2,492)
Hyde	1,318	15	40.0% (6)	Out of State	--	3,309	--
Total					--	18,479	--

Advanced Practice Registered Nurses Certified Nurse Midwives

South Dakota Supply Trends

Licensure Status As of December 28, 2018 the SDBON reported 32 actively licensed certified nurse midwives (CNM) in South Dakota’s supply, see Figure 21; a decrease of 6 nurse midwives from 2016 to 2018 and a 15.8% decrease in supply since 2016.

From January 1, 2017 to December 28, 2018 a total of 2 CNMs were added to South Dakota’s active supply of CNMs; 1 as a new graduate and 1 by endorsement from another state, see Figure 22. Overall, South Dakota had a decrease in supply during this time period of 6 CNMs with a net loss of 8 CNMs. Reasons for the loss of CNMs to the workforce were due to retirement, leaving the profession, moving out of South Dakota, or choosing to not renew their SD CNM license.

Figure 21: Actively Licensed CNMs

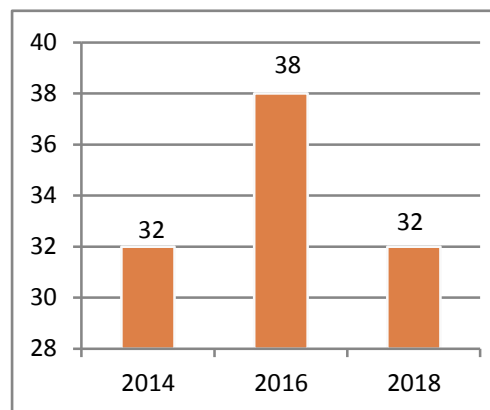
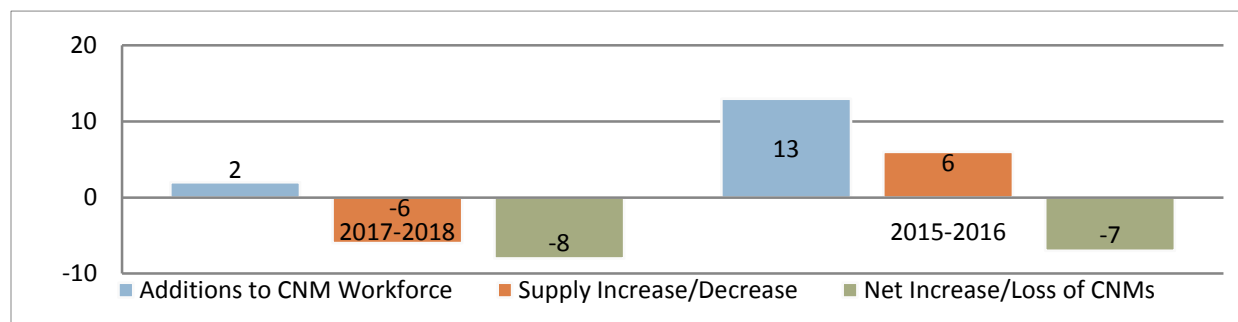


Figure 22: CNM Workforce Gains and Losses



Certification/Practice Foci All actively licensed CNMs held certification through the American Midwifery Certification Board (AMCB) as certified nurse midwives.

Demographics of CNM Supply

Gender/Race/Ethnicity Consistent with previous reports, licensure data revealed the majority of actively licensed CNMs, 31 (96.9%), were female and white/Caucasian. Table 25 presents comparisons of ethnic distribution in the United States and South Dakota.

Table 25: CNM Ethnic Distribution

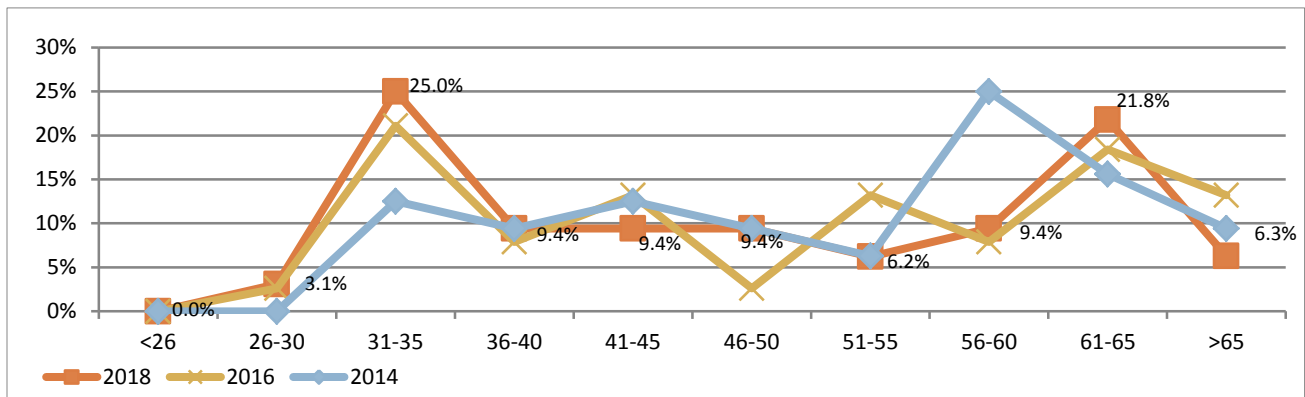
	American Indian/Alaska Native	Asian/Pacific Islander	Black/African American	Hispanic/Latino	Two or More Races / Other	White/Caucasian
U.S. Population ²	1.3%	6.0%	13.4%	18.1%	2.7%	60.7%
SD Population ³	9.0%	1.6%	2.1%	3.8%	2.4%	82.2%
SD CNMs	0.0%	0.0%	0.0%	0.0%	3.1%	96.9%

Age Age distribution of actively licensed CNMs is shown in Table 26 and Figure 23. The average age of a CNM was 48.3 years; the average age in 2016 was 50.1. Data revealed 13.8% (4) CNMs intend “to leave or retire from nursing within the next five years”.

Table 26: CNM Age Distribution

Age Range	2018		2016		2014	
<26	0	0.0%	0	0.0%	0	0.0%
26-30	1	3.1%	1	2.6%	0	0.0%
31-35	8	25.0%	8	21.1%	4	12.5%
36-40	3	9.4%	3	7.9%	3	9.4%
41-45	3	9.4%	5	13.2%	4	12.5%
46-50	3	9.4%	1	2.6%	3	9.4%
51-55	2	6.2%	5	13.2%	2	6.3%
56-60	3	9.4%	3	7.9%	8	25.0%
61-65	7	21.8%	7	18.4%	5	15.6%
>65	2	6.3%	5	13.2%	3	9.4%
Total	32	100%	38	100%	32	100%

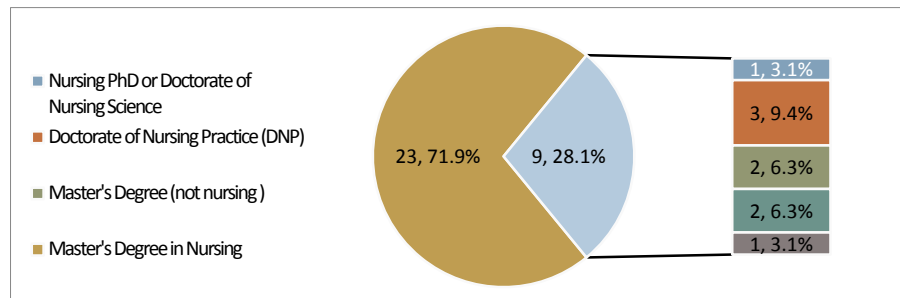
Figure 23: CNM Age Distribution



Highest Academic Achievement

Consistent with previous SD nursing workforce reports most CNMs, 29 (90.6%), held a graduate degree, see Figure 24. Only one CNM was “currently enrolled in education classes leading to an advanced nursing degree”.

Figure 24: Highest Academic Achievement of CNMs

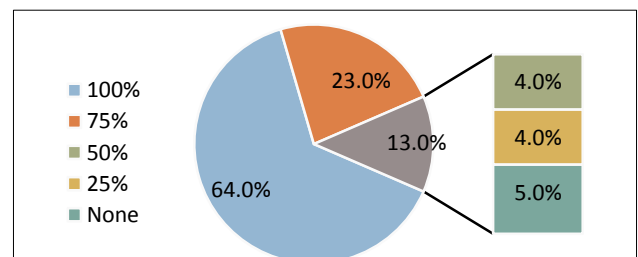


Employment and Practice Characteristics

The primary location of practice for most CNMs, 75.9%, was in the state of South Dakota; 13.8% reported employment in neighboring states of Iowa and Minnesota; and 10.3% in other states. The majority, 86.2%, was employed by only one employer and 13.8% by two or more employers. Consistent with previous reports, data reflected a high number were employed full time, 23 (79.3%), working 32 or more hours per week, or part time, 6 (20.7%), working 31 hours or less in the nursing profession.

Work settings with the highest percent of CNMs employed were hospitals, 48.3%, ambulatory care, 31.0%, and community/home settings, 17.2%. The majority, 93.1%, indicated their primary area of practice was in the specialty area of maternal-child and women’s health; 6.9% reported adult and family practice. The average number of hours worked by CNMs in a week was 39.5. Figure 25 provides the percentage of time involved in direct patient care.

Figure 25: Percentage of Time Spent in Direct Patient Care



Certified Nurse Practitioners

South Dakota Supply Trends

Licensure Status As of December 28, 2018 the SDBON reported 1,111 actively licensed CNPs in South Dakota’s supply, see Figure 26; a gain of 263 nurses from 2016 to 2018 and a 31.0% increase since 2016.

From January 1, 2017 to December 28, 2018 a total of 336 CNPs were added to South Dakota’s active supply; 182 were added as new graduates and 154 were added by endorsement from another state. Overall, South Dakota had an increase in supply during this time period of 263 nurses with a net loss of 73 CNPs, see Figure 27. Possible reasons for the loss of these nurses may be due to retiring from the profession, moving out of South Dakota, or leaving the profession. According to the 2016 Workforce Report, 60 CNPs indicated during that time period that they planned to retire in the next five years, which may account for a large number, about 82%, of the 73 CNPs lost.

Figure 26: Actively Licensed CNPs

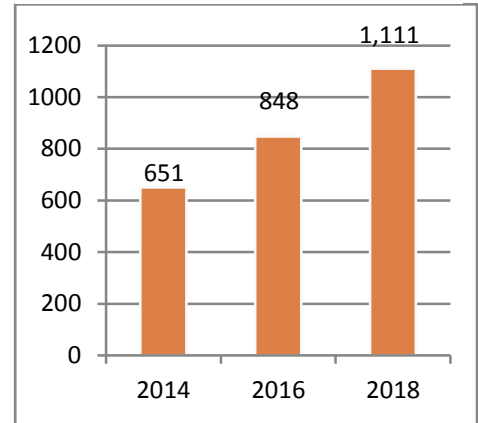
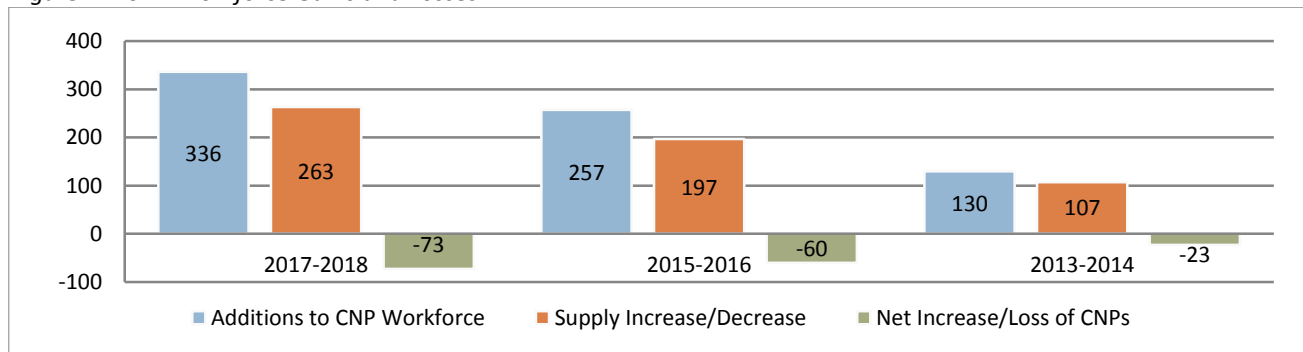


Figure 27: CNP Workforce Gains and Losses

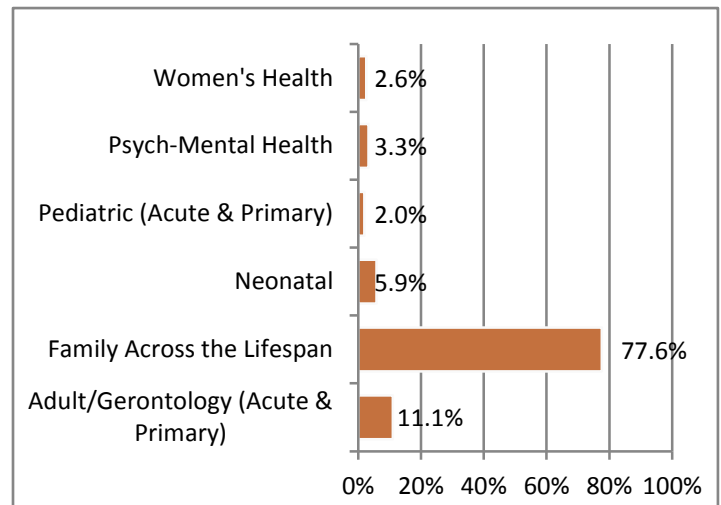


Certification/Practice Foci CNPs were required to hold national certification in at least one focus/specialty area of practice, consistent with their NP education preparation, to meet licensure requirements. Recognized certification included: acute care, adult, adult/gerontology, gerontology, acute adult/gerontology, primary care adult/gerontology, family across the lifespan, neonatal, acute pediatric, primary care pediatric, psych-mental health, and women’s health. CNPs may complete additional graduate nursing education to qualify to hold more than one type of certification; 27 nurse practitioners held two or more types of certification.

CNPs were certified by the following organizations: American Academy of Nurse Practitioners Certification Program (AANP-CP), American Association of Critical-Care Nurses (AACN), American Nurses Credentialing Center (ANCC), National Certification Corporation (NCC), and Pediatric Nursing Certification Board (PNCB).

Figure 28 displays the percentage of CNPs licensed within six nationally recognized focus areas. The majority of CNPs were educated, certified, and licensed as family NPs (862, 77.6%) and adult/gerontology acute or primary care NPs (123, 11.1%). The remaining NPs held neonatal (65, 5.9%), psych-mental health (37, 3.3%), women’s health (29, 2.6%), or pediatric (22, 2.0%) certification.

Figure 28: CNP Certification Focus Areas



Demographics of CNP Supply

Gender/Race/Ethnicity Consistent with previous reports the majority of actively licensed CNPs were female (1,019, 91.7%) and white/Caucasian (1,052, 94.7%). Only 92 CNPs were male (8.3%). Table 27 displays comparisons of ethnic distribution in the United States, South Dakota, and of actively licensed CNPs.

Table 27: CNP Ethnic Distribution

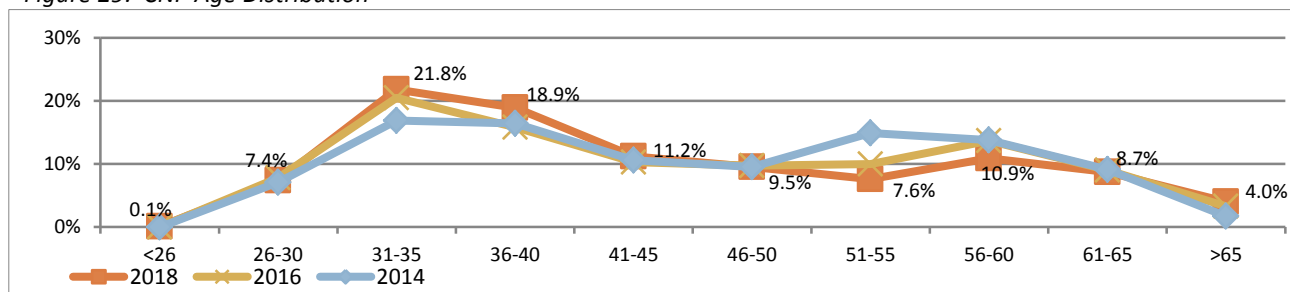
	American Indian/Alaska Native	Asian/Pacific Islander	Black/African American	Hispanic/Latino	Two or More Races / Other	White/Caucasian
U.S. Population ²	1.3%	6.0%	13.4%	18.1%	2.7%	60.7%
SD Population ³	9.0%	1.6%	2.1%	3.8%	2.4%	82.2%
SD CNPs	1.2% (13)	1.0% (11)	1.4% (16)	0.3% (3)	1.4% (16)	94.7% (1,052)

Age Age distribution of actively licensed CNPs is shown in Table 28 and Figure 29. A large percentage of CNPs, 48.2%, was 40 years or younger and 23.6% was 56 or older. The average age of a CNP was 44.4. Employment data also revealed 9.1% of respondents, about 101 CNPs, intend “to leave or retire from nursing within the next five years”.

Table 28: CNP Age Distribution

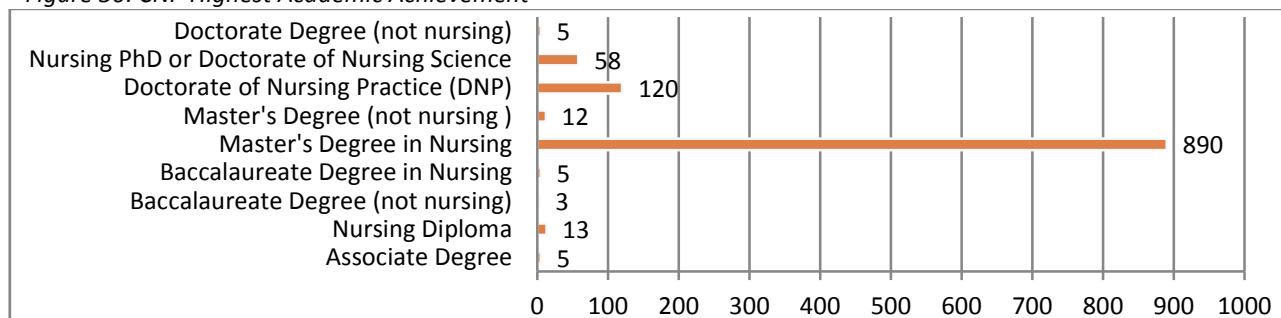
Age Range	2018		2016		2014	
<26	1	0.1%	0	0.0%	0	0.0%
26-30	82	7.4%	66	7.8%	46	7.1%
31-35	242	21.8%	174	20.5%	110	16.9%
36-40	210	18.9%	134	15.8%	107	16.4%
41-45	124	11.2%	87	10.3%	69	10.6%
46-50	106	9.5%	82	9.7%	62	9.5%
51-55	84	7.6%	85	10.0%	97	14.9%
56-60	121	10.9%	116	13.7%	90	13.8%
61-65	97	8.7%	76	9.0%	59	9.1%
>65	44	4.0%	28	3.3%	11	1.7%
Total	1,111	100.0%	848	100.0%	651	100.0%

Figure 29: CNP Age Distribution



Highest Academic Achievement As shown in Figure 30, 97.7% of CNPs reported they held a graduate degree as their highest level of education; 80% (890) held a master’s degree in nursing. Only 2.3% (26) did not hold a graduate degree; they were licensed prior to the nursing graduate degree requirement. CNPs enrolled in a program leading to an advanced nursing degree comprised 2.4% of respondents; 18 were enrolled in a doctorate of nursing practice (DNP) program, 3 in a PhD program, and one in a master’s program.

Figure 30: CNP Highest Academic Achievement



Employment and Practice Characteristics

Most CNPs, 80.0%, reported their primary place of employment in South Dakota; 8.5% reported employment in neighboring states of Iowa, Minnesota, Montana, Nebraska, North Dakota, and Wyoming, and 11.5% reported other states. The majority of respondents, 72.7%, were employed by one employer; 19.9% by two, and 3.9% by 3 or more. The remaining 2.5% was not employed in a nursing position.

Consistent with previous reports, most CNPs, 738 (85.0%) reported being employed full-time, working 32 or more hours per week. The average number of hours worked by full-time CNPs was 42 hours per week. Only 79 (9.1%) respondents worked part-time, 31 hours or less per week; they worked an average of 27.1 hours per week. The 21 (2.4%) CNPs who reported working on a per diem basis, an arrangement wherein a nurse is employed on an as needed basis, worked an average of 20.8 hours per week. Only 30 (3.5%) were retired (5), unemployed (11) and not seeking work as a nurse, unemployed (6) and seeking work as a nurse, employed in non-nursing positions (7), or volunteering (1). Reasons given for unemployment were “caring for home and family”, “difficulty finding a nursing position”, and “other”. Table 29 displays demographic and employment characteristic comparisons of CNPs.

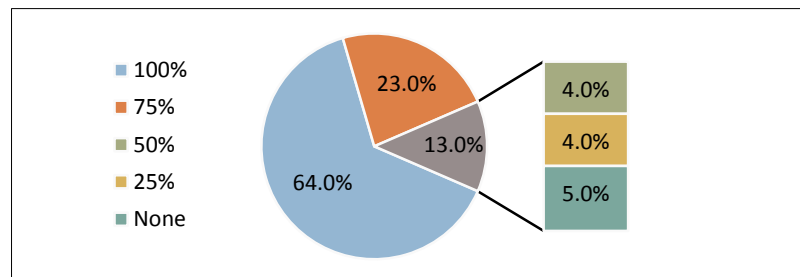
Table 29: CNP Demographic and Employment Characteristics

Age Category	Age Number / %	Male Number / %	Non-White Number / %	Full-time Number / %	Primary Employment in South Dakota Number / %	Intend to Retire or Leave in 5 Years Number / %
<31	2.9% (25)	0.5% (5)	0.1% (1)	2.5% (22)	2.1% (18)	0.2% (2)
31-35	19.4% (168)	1.4% (12)	0.8% (7)	16.2 (141)	15.0% (130)	0.5% (5)
36-40	19.5% (169)	1.6% (14)	0.8% (7)	17.9 (155)	15.1% (131)	0.5% (4)
41-45	11.8% (102)	0.5% (5)	0.1% (1)	10.1 (88)	9.4% (82)	0.8% (7)
46-50	9.9% (86)	0.5% (4)	0.4% (3)	8.7 (75)	8.8% (76)	0.5% (4)
51-55	8.7% (76)	0.3% (3)	0.4% (3)	7.0 (61)	6.7% (58)	1.5% (13)
56-60	12.8% (111)	0.5% (4)	0.5% (5)	10.7 (93)	10.8% (94)	1.9% (17)
61-65	10.2% (89)	1.3% (11)	0.4% (3)	8.5 (74)	8.5% (74)	2.2% (19)
>65	4.8% (42)	0.5% (4)	0.1% (1)	3.3 (29)	3.6% (31)	1.2% (10)
Total	100% (868)	7.1% (62)	3.6% (31)	85.0% (738)	80.0% (694)	9.3% (81)

Time Involved in Direct Patient Care

As shown in Figure 31, most CNPs reported a significant percentage of time involved in direct patient care. Respondents who indicated they spent no time in direct patient care were retired or unemployed.

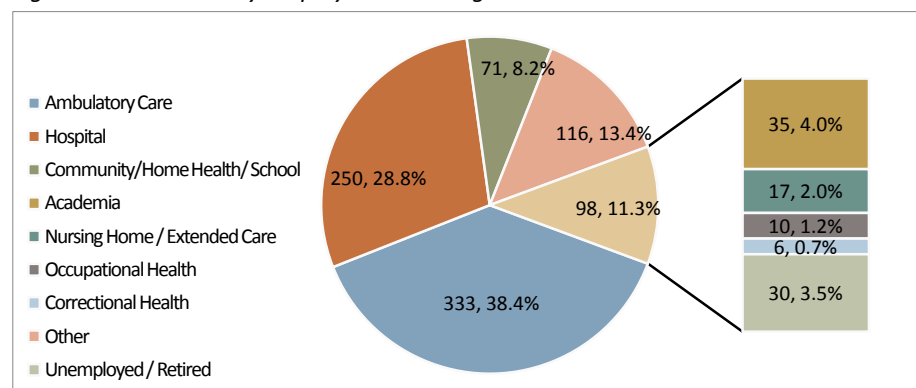
Figure 31: Percentage of Time Spent in Direct Patient Care



Primary Practice Setting

As shown in Figure 32, settings with the highest percentage of CNPs employed were ambulatory care, 333 (38.4%), hospitals, 250 (28.8%), and community settings, 71 (8.2%); CNPs who responded they were employed in ‘other’ settings comprised 13.4%.

Figure 32: CNP Primary Employment Setting



As displayed in Figure 33 the majority of CNPs indicated their primary area of practice was in the specialty area of adult/family health, 287 (33.1%), acute/critical care/trauma, 130 (15.0%), pediatric/neonatal, 74 (8.5%), and other areas, 116 (13.4%).

Figure 33: CNP Primary Clinical Practice Area

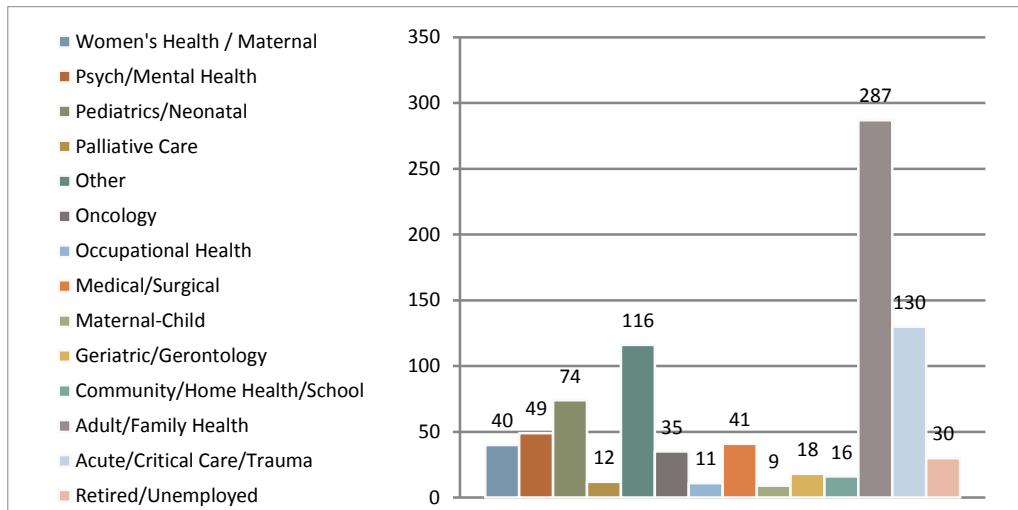


Figure 34: CNP Secondary Employment Setting

Secondary Practice Setting CNPs who indicated they worked for two or more employers comprised 23.8% (207) of respondents. As shown in Figure 34, secondary practice settings with the highest percentage of CNPs employed were ambulatory care, hospitals, and academic settings. The most common secondary clinical practice areas for CNPs were adult/family health (57, 27.0%) and acute/critical care/trauma (57, 27.0%), as shown in Figure 35.

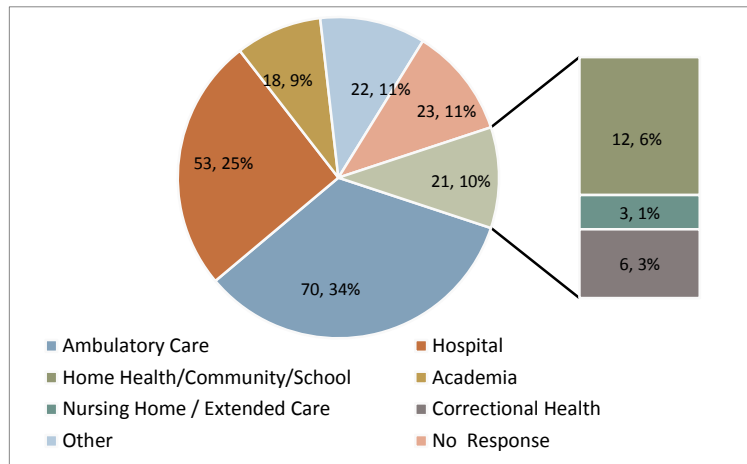
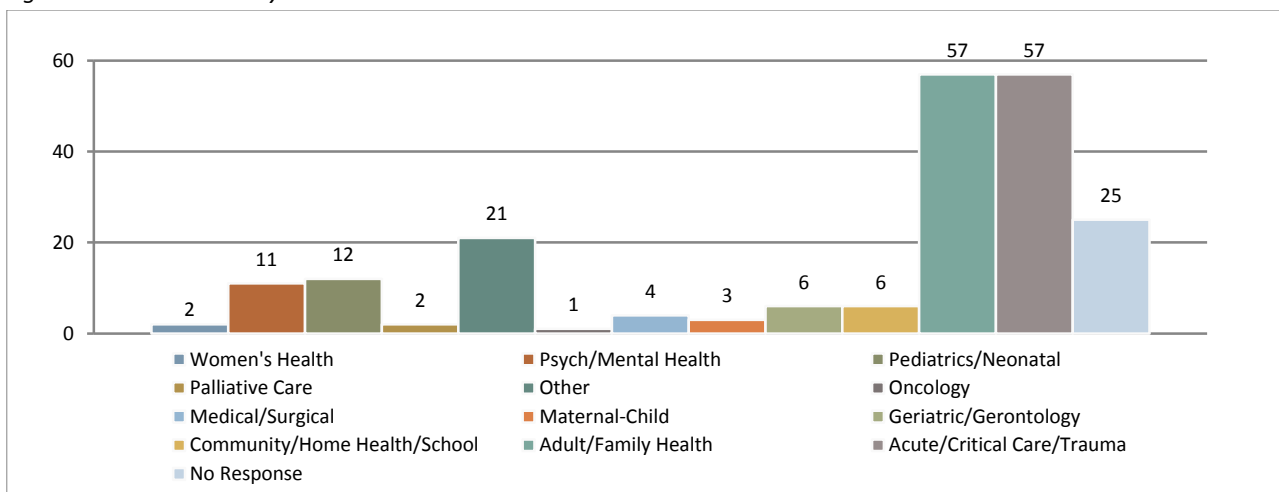


Figure 35: CNP Secondary Clinical Practice Area



Certified Registered Nurse Anesthetists

South Dakota Supply Trends

Licensure Status As of December 28, 2018 the SDBON reported 493 actively licensed CRNAs in South Dakota’s supply, see Figure 36; a gain of 39 nurses from 2016 to 2018, an 8.5% increase since 2016.

From January 1, 2017 to December 31, 2018 a total of 73 CRNAs were added to South Dakota’s active supply; 32 were added as new graduates and 41 were added by endorsement from another state. Overall, South Dakota had an increase in supply during this time period of 39 nurses with a net loss of 34 CRNAs, see Figure 37. Possible reasons for the loss of these nurses may be due to retiring from the profession, moving out of South Dakota, or leaving the profession. According to the 2016 Workforce Report, 64 CRNAs indicated during that time period that they planned to retire or leave in the next five years. This may account for the majority of the 34 CRNAs lost from South Dakota’s workforce.

Figure 36: Actively Licensed CRNAs

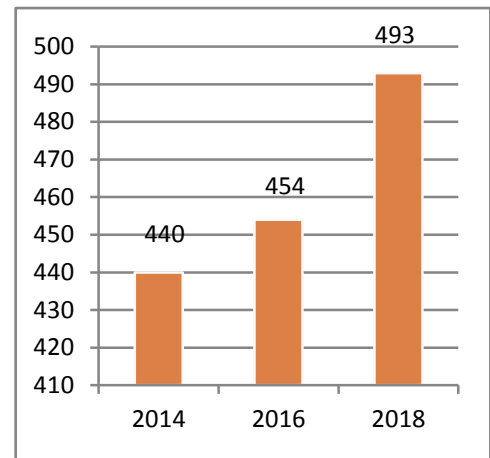
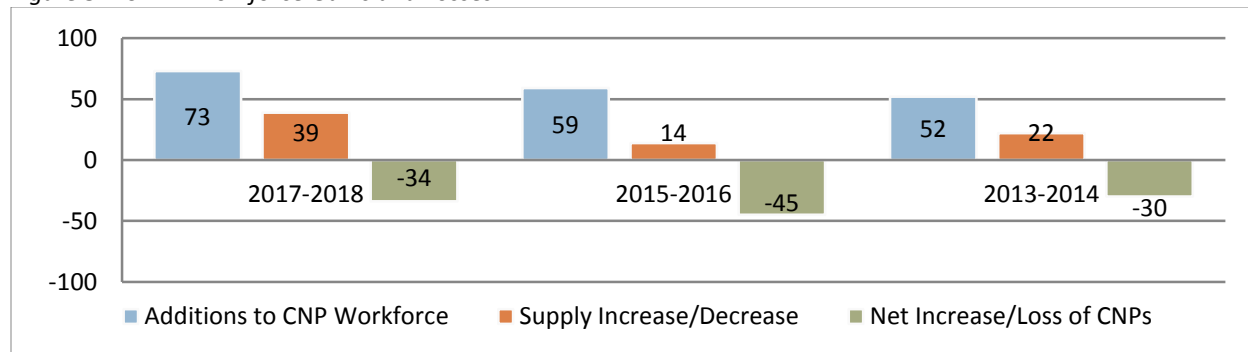


Figure 37: CRNA Workforce Gains and Losses



Certification/Practice Foci All actively licensed CRNAs held certification through the National Board of Certification and Recertification for Nurse Anesthetists (NBCRNA).

Demographics of CRNA Supply

Gender/Race/Ethnicity Consistent with previous reports, the majority of actively licensed CRNAs were male (272, 57.9%) and white/Caucasian (483, 98%). Females comprised 44.8% (221). Table 30 displays comparisons of ethnic distribution in the United States, South Dakota, and of actively licensed CRNAs.

Table 30: CRNA Ethnicity

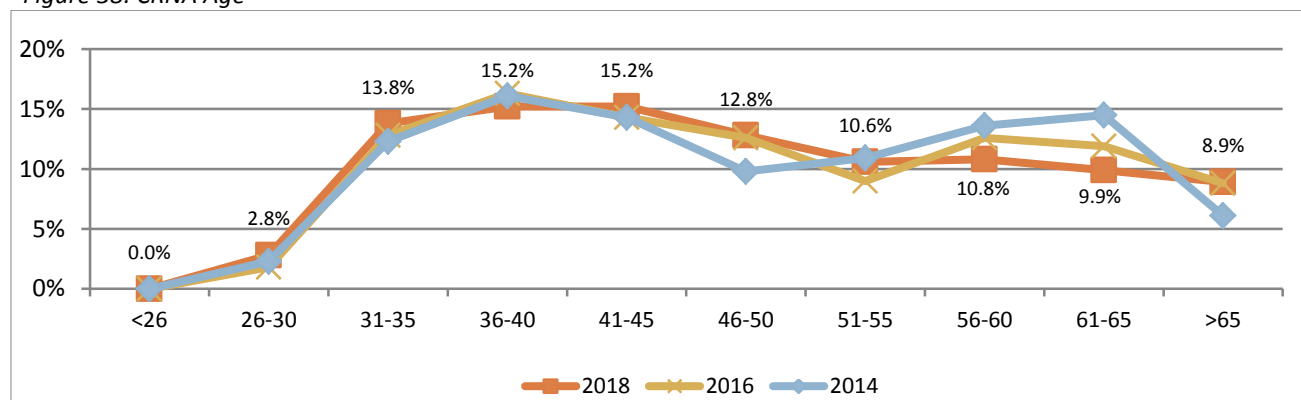
	American Indian/Alaska Native	Asian/Pacific Islander	Black/African American	Hispanic/Latino	Two or More Races / Other	White/Caucasian
U.S. Population ²	1.3%	6.0%	13.4%	18.1%	2.7%	60.7%
SD Population ³	9.0%	1.6%	2.1%	3.8%	2.4%	82.2%
SD CRNAs	0.4% (2)	0.2% (1)	0.6% (3)	0.4% (2)	0.4% (2)	98% (483)

Age Age distribution of actively licensed CRNAs is shown in Table 31 and Figure 38. A large percentage of CRNAs, 31.8% (157), was 40 years or younger; 29.6% (146) was 56 or older. The average age of a CRNA in South Dakota was 48.1 years. Employment data revealed 17.2% of respondents, about 85 CRNAs, intend “to leave or retire from nursing within the next five years”.

Table 31: CRNA Age

Age Range	2018		2016		2014	
<26	0	0.0%	0	0.0%	0	0.0%
26-30	14	2.8%	8	1.8%	10	2.3%
31-35	68	13.8%	58	12.8%	54	12.3%
36-40	75	15.2%	74	16.3%	71	16.1%
41-45	75	15.2%	65	14.3%	63	14.3%
46-50	63	12.8%	57	12.6%	43	9.8%
51-55	52	10.6%	41	9.0%	48	10.9%
56-60	53	10.8%	57	12.6%	60	13.6%
61-65	49	9.9%	54	11.9%	64	14.5%
>65	44	8.9%	40	8.8%	27	6.1%
Total	493	100.0%	454	100.0%	440	100.0%

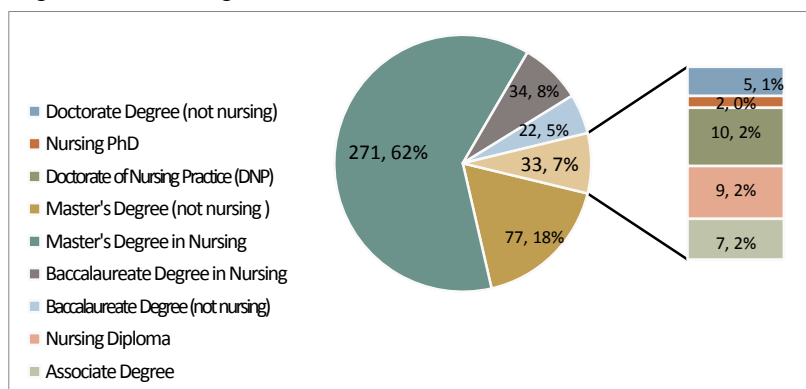
Figure 38: CRNA Age



Highest Academic Achievement

As shown in Figure 39, 83.5% of CRNAs reported they held a graduate degree as their highest educational degree; 62.0% held a nursing master’s degree. CRNAs enrolled in a program leading to an advanced nursing degree comprised 2.1% of respondents; 7 were enrolled in a doctorate of nursing practice (DNP) program, one in a PhD program, and one in a master’s program.

Figure 39: CRNA Highest Academic Achievement



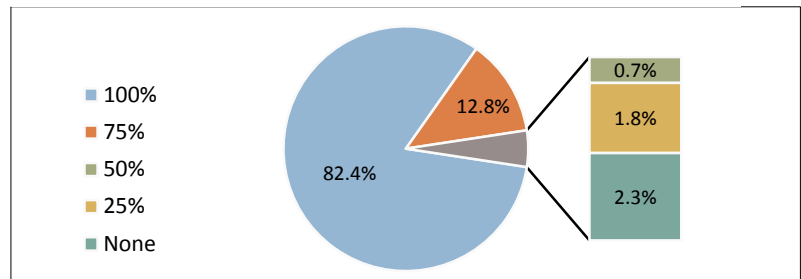
Employment and Practice Characteristics

Most CRNAs, 75.5%, reported their primary place of employment within the state of South Dakota; 16.3% reported neighboring states of Iowa, Minnesota, Montana, Nebraska, North Dakota, and Wyoming, and 8.2% in other states. The majority, 82.4%, was employed by one employer, 8.7% by two, and 7.1% by 3 or more employers. The remaining 1.8% was not employed in a nursing position.

Consistent with previous reports, most CRNAs, 374 (85.6%) reported being employed full-time, working 32 or more hours per week. The average number of hours worked by full-time CRNAs was 41.3 hours per week. CRNAs who worked part-time, 31 hours or less per week, comprised 10.3% (45) of respondents; they worked an average of 25.2 hours per week. The 10 (2.3%) CRNAs who reported working on a per diem basis, an arrangement wherein a nurse is employed on an as needed basis, worked an average of 13.0 hours per week. The remaining 8 (1.8%) CRNAs were retired (2), unemployed (1) and not seeking work as a nurse, unemployed (2) and seeking work as a nurse, or employed in non-nursing positions (3). Reasons given for unemployment were “caring for home and family” and “disabled”.

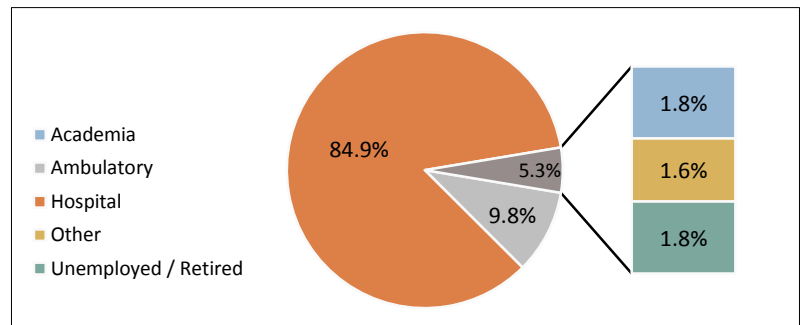
Time Involved in Direct Patient Care As shown in Figure 40, most CRNAs reported a significant percentage of time involved in direct patient care. Respondents who indicated they spent no time in direct patient care were academic faculty, retired, or unemployed.

Figure 40: Percentage of Time Spent in Direct Patient Care



Primary Practice Setting As shown in Figure 41, the majority of CRNAs were employed in hospitals, 84.9% (371), and ambulatory care settings, 9.8% (43). CRNA respondents employed in academia comprised 1.8% (8), those employed in 'other' settings comprised 1.4% (6), and the remaining 1.8% was unemployed or retired.

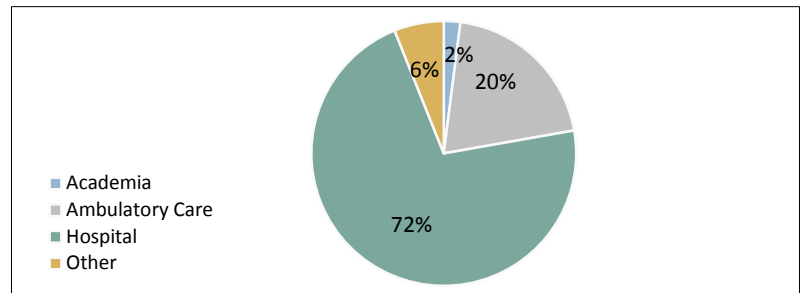
Figure 41: CRNA Primary Employment Setting



The majority of CRNAs indicated their primary area of practice was in the specialty area of anesthesia, 96.8% (423); 1.4% (6) reported other areas, and 1.8% (8) were unemployed or retired.

Secondary Practice Setting CRNAs who worked for two or more employers comprised 22.7% (99) of respondents. Similar to primary employment setting, most CRNAs secondary positions were in hospitals and ambulatory care settings in the specialty area of anesthesia; see Figure 42.

Figure 42: CRNA Secondary Employment Setting



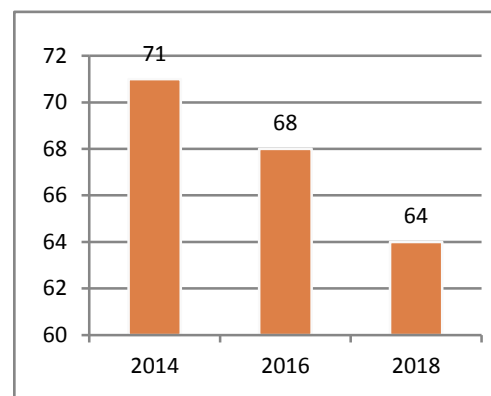
Clinical Nurse Specialists

South Dakota Supply Trends

Licensure Status As of December 28, 2018 the SDBON reported 64 actively licensed CNSs in South Dakota’s supply, see Figure 43; a loss of 4 nurses from 2016 to 2018, a 5.9% decrease since 2016.

From January 1, 2017 to December 31, 2018 only one CNS was added to South Dakota’s active supply by endorsement from another state. Overall, South Dakota had a decrease in supply during this time period of 4 nurses with a net loss of 5 CNSs. Possible reasons for the loss of these nurses may be due to retirement, moving out of South Dakota, or leaving the profession. According to the 2016 Workforce Report, 17 CNSs indicated they planned to retire or leave in the next five years, accounting for the loss in workforce.

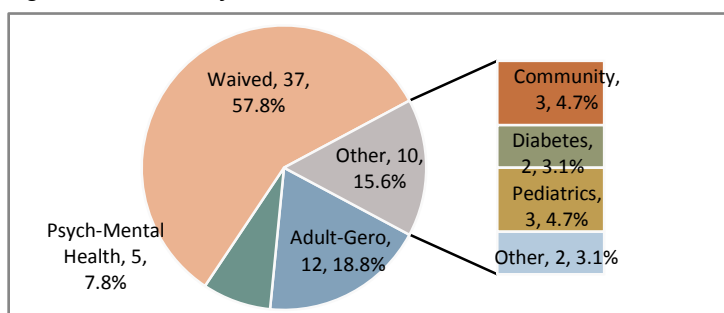
Figure 43: Actively Licensed CNSs



Certification/Practice Foci

CNSs were required to hold national certification in at least one focus/specialty area of practice to meet licensure requirements. The majority of CNSs however, 57.8% (37), were waived from this requirement because they were licensed prior July 1, 1996. Figure 44 shows the most common areas of certification for the remaining 27 CNSs, the majority were certified in adult/gerontology and psych-mental health.

Figure 44: CNS Certification Focus Areas



Demographics of CNS Supply

Gender/Race/Ethnicity Consistent with previous reports, the majority of actively licensed CNSs were female (63, 98.4%) and white/Caucasian. Table 32 displays comparisons of ethnic distribution in the United States, South Dakota, and of actively licensed CNSs.

Table 32: CNS Ethnicity

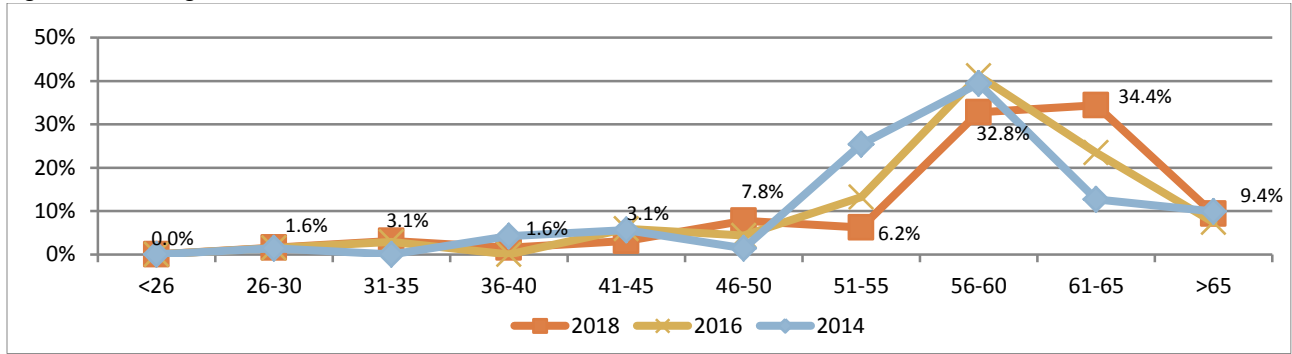
	American Indian/Alaska Native	Asian/Pacific Islander	Black/African American	Hispanic/Latino	Two or More Races / Other	White/Caucasian
U.S. Population ²	1.3%	6.0%	13.4%	18.1%	2.7%	60.7%
SD Population ³	9.0%	1.6%	2.1%	3.8%	2.4%	82.2%
SD CNSs	1 / 1.6%	0 / 0.0%	0 / 0.0%	0 / 0.0%	1 / 1.6%	62 / 96.9%

Age Distribution of actively licensed CNSs by age is shown in Table 33 and Figure 45. A large percentage, 76.6%, was 56 or older; the average age was 58.0. Renewal data revealed 37.7% of respondents, about 23 CNSs, intend “to leave or retire from nursing within the next five years”.

Table 33: CNS Age

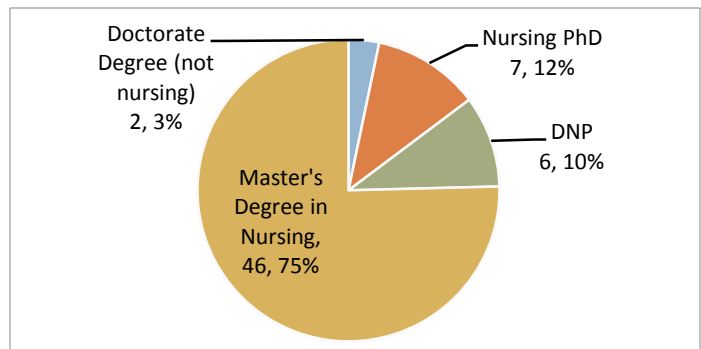
Age Range	2018		2016		2014	
<26	0	0.0%	0	0.0%	0	0.0%
26-30	1	1.6%	1	1.5%	1	1.4%
31-35	2	3.1%	2	2.9%	0	0.0%
36-40	1	1.6%	0	0.0%	3	4.2%
41-45	2	3.1%	4	5.9%	4	5.6%
46-50	5	7.8%	3	4.4%	1	1.4%
51-55	4	6.2%	9	13.2%	18	25.4%
56-60	21	32.8%	28	41.2%	28	39.4%
61-65	22	34.4%	16	23.5%	9	12.7%
>65	6	9.4%	5	7.4%	7	9.9%
Total	64	100%	68	100%	71	100%

Figure 45: CNS Age



Highest Academic Achievement All CNSs in South Dakota reported their highest educational preparation as a graduate degree; those prepared with a doctoral degree comprised 25.0%; see Figure 46. No CNSs reported enrollment in a program leading to an advanced nursing degree.

Figure 46: CNS Highest Academic Achievement



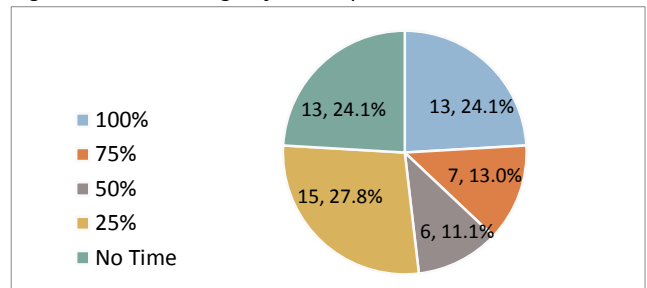
Employment and Practice Characteristics

Most CNSs, 77.0%, reported their primary place of employment within the state of South Dakota; 4.9% reported employment in neighboring states of Iowa, North Dakota, and Wyoming, and 6.6% in other states. The majority, 65.6%, was employed by one employer, 18.0% by two, 4.9% by 3 or more employers; and the remaining 11.5% were retired or not employed in a nursing position.

Consistent with previous reports, most CNSs, 46 (75.4%) reported being employed full-time, working 32 or more hours per week. The average number of hours worked by full-time CNS was 44.5 hours per week. CNSs who worked part-time, 31 hours or less per week, comprised 9.8% (6) of respondents; they worked an average of 19.3 hours per week. Only 2 (3.3%) CNSs reported working on a per diem basis, an arrangement wherein a nurse is employed on an as needed basis. The remaining 7 (11.5%) CNSs were retired (3), unemployed (1) and not seeking work as a nurse or employed in non-nursing positions (3).

Time Involved in Direct Patient Care Over half of the 54 CNSs who held employment in a nursing position reported spending 25% or less of their time in direct patient care, Figure 47. CNSs that spent 75% to 100% of their time in direct patient care comprised 37.1% of CNS respondents.

Figure 47: Percentage of Time Spent in Direct Patient Care



Primary Practice Setting Practice settings with the highest percentage of CNSs employed were hospitals, academia, and ambulatory care, Figure 48. CNSs employed in 'other' settings comprised 6.6% of respondents; those who were unemployed and not seeking work as a nurse or retired accounted for 11.5%.

Many CNSs reported their primary area of practice in the specialty areas of psych-mental health (10, 16.4%), acute/critical care/trauma (10, 16.4%), and adult health (6, 9.8%); Figure 49.

Figure 48: CNS Primary Employment Setting

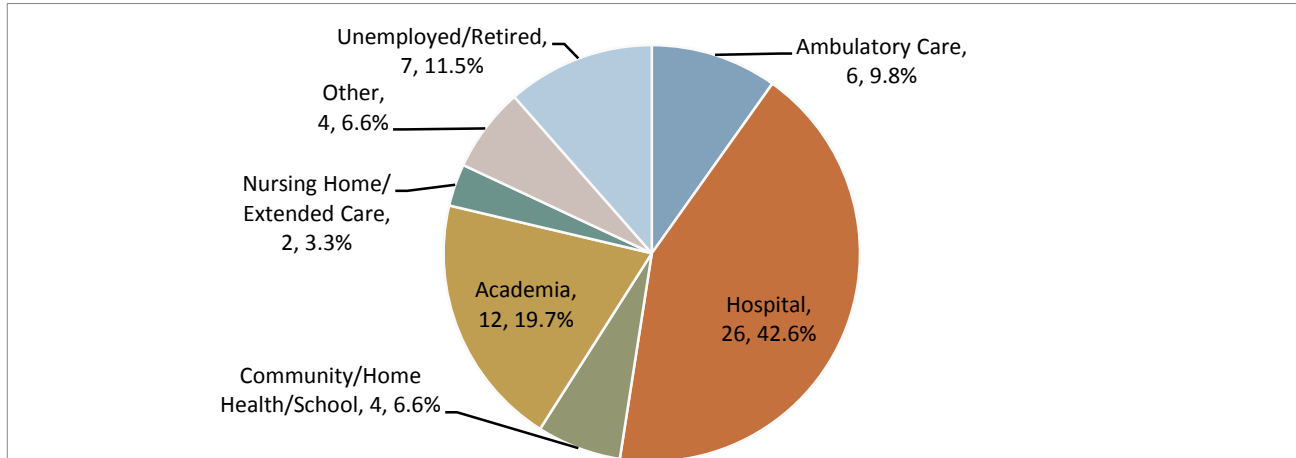
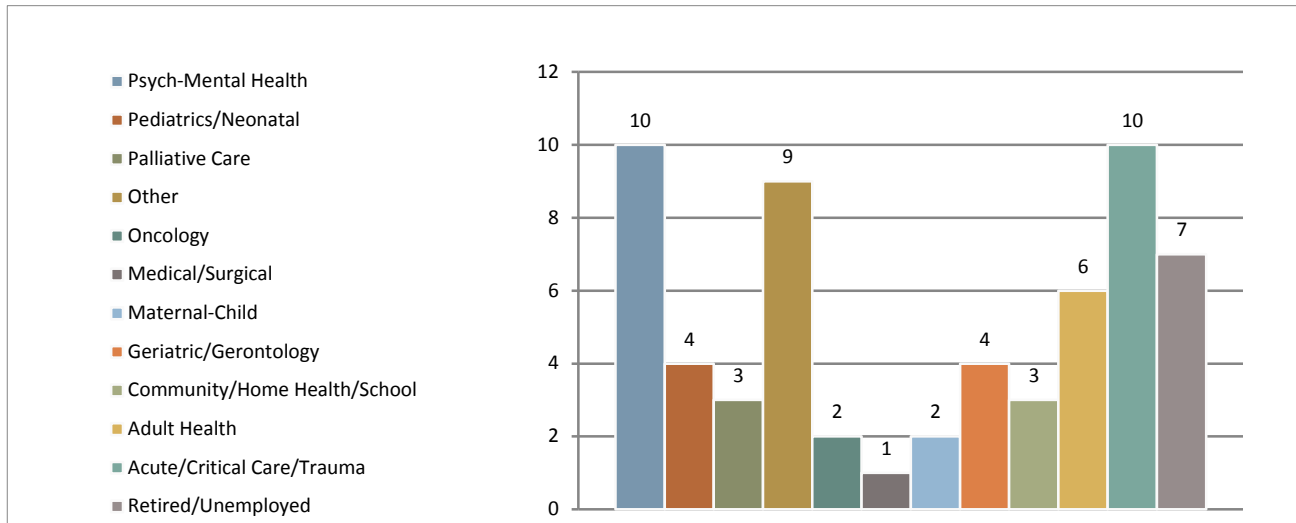


Figure 49: CNS Primary Clinical Practice Area



Secondary Practice Setting CNSs who indicated they worked for two or more employers comprised 23.0% (14) of respondents; secondary employment locations included ambulatory care, hospitals, academic, and occupational settings. The most common secondary clinical practice areas were psychiatric/mental health/substance use, acute care/critical care, and adult health.

APRN Distribution

Distribution South Dakota’s seven regions are shown on the map in Figure 50. The number of APRNs as of December 28, 2018 who resided in these regions is provided in Table 34 and the number in each of South Dakota’s 66 counties is provided in Table 35. Consistent with previous reports, the majority of nurses resided in Minnehaha and Pennington counties (Regions 2 and 7).

Figure 50. Regional State Map

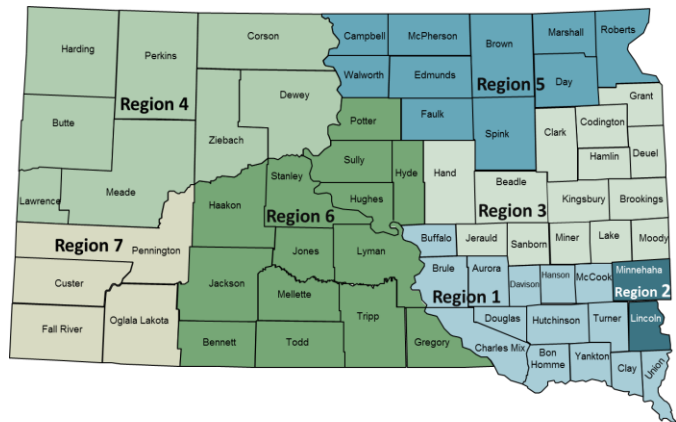


Table 34: Regional Distribution

Region	Counties / State	Region Population ²	Region's % of State Population	Number Residing in Region (Percent of Total APRN Population)			
				CNMs	CNPs	CRNAs	CNSs
Region 1	14 Counties: Aurora, Bon Homme, Brule, Buffalo, Charles Mix, Clay, Davison, Douglas, Hanson, Hutchinson, McCook, Turner, Union, and Yankton	125,372	14.4%	1 (3.1%)	108 (9.7%)	48 (9.7%)	5 (7.8%)
Region 2	2 Counties: Lincoln and Minnehaha	245,280	28.2%	14 (43.8%)	366 (32.9%)	180 (36.5%)	36 (56.3%)
Region 3	14 Counties: Beadle, Brookings, Clark, Codington, Deuel, Grant, Hamlin, Hand, Jerauld, Kingsbury, Lake, Miner, Moody, and Sanborn	135,792	15.6%	0 (0.0%)	86 (7.7%)	21 (4.3%)	3 (4.7%)
Region 4	8 Counties: Butte, Corson, Dewey, Harding, Lawrence, Meade, Perkins, and Ziebach	80,564	9.3%	0 (0.0%)	65 (5.9%)	24 (4.9%)	2 (3.1%)
Region 5	10 Counties: Brown, Campbell, Day, Edmunds, Faulk, Marshall, McPherson, Roberts, Spink, and Walworth	81,787	9.4%	1 (3.1%)	50 (4.5%)	25 (5.1%)	1 (1.6%)
Region 6	14 Counties: Bennett, Gregory, Haakon, Hughes, Hyde, Jackson, Jones, Lyman, Mellette, Potter, Stanley, Sully, Todd, and Tripp	60,998	7.0%	0 (0.0%)	46 (4.1%)	10 (2.0%)	2 (3.1%)
Region 7	4 Counties: Custer, Fall River, Oglala Lakota, and Pennington	139,873	16.1%	8 (25.0%)	157 (14.1)	76 (15.4%)	8 (12.5%)
In-State Total	66 counties	869,666	100%	24 (75%)	878 (79.0%)	384 (77.9%)	57 (89.1%)
Out-of-State	Iowa, Minnesota, Montana, Nebraska, North Dakota, Wyoming	--	--	5 (15.6%)	130 (11.7%)	78 (15.8%)	3 (4.7%)
	Other States/Jurisdictions	--	--	3 (9.4%)	103 (9.3%)	31 (6.3%)	4 (6.2)
Total		--	--	32 (100%)	1,111 (100%)	493 (100%)	64 (100%)

Table 35. Number of APRNs by County

County	County Population ³	CNMs	CNPs	CRNAs	CNSs	County	County Population ³	CNMs	CNPs	CRNAs	CNSs
Aurora	2,738	0	3	1	0	Jackson	3,289	0	3	0	1
Beadle	18,157	0	12	3	0	Jerauld	2,028	0	2	0	0
Bennett	3,454	0	4	0	0	Jones	936	0	1	0	0
Bon Homme	6,984	0	5	1	0	Kingsbury	4,952	0	5	0	0
Brookings	34,255	0	23	5	1	Lake	12,809	0	9	4	0
Brown	39,178	0	28	16	1	Lawrence	25,429	0	22	15	0
Brule	5,312	0	7	1	1	Lincoln	56,664	3	118	79	7
Buffalo	1,999	0	0	0	0	Lyman	3,904	0	0	1	0
Butte	10,107	0	6	0	0	Marshall	5,499	0	4	0	0
Campbell	1,379	0	1	0	0	McCook	2,426	1	5	0	0
Charles Mix	9,428	0	6	1	0	McPherson	4,804	0	0	0	0
Clark	3,668	0	4	0	0	Meade	28,018	0	30	9	2
Clay	13,990	0	4	4	0	Mellette	2,088	0	1	0	0
Codington	28,099	0	8	8	0	Miner	2,228	0	3	0	0
Corson	4,203	0	2	0	0	Minnehaha	188,616	11	248	101	29
Custer	8,691	0	15	1	2	Moody	6,579	0	4	1	1
Davison	19,704	0	11	8	0	Oglala Lakota	14,354		2	0	0
Day	5,521	0	1	1	0	Pennington	110,141	6	131	75	6
Deuel	4,281	0	1	0	0	Perkins	2,974	0	0	0	0
Dewey	5,835	0	2	0	0	Potter	2,231	0	3	0	0
Douglas	2,931	0	6	0	0	Roberts	10,278	0	3	3	0
Edmunds	3,919	0	3	2	0	Sanborn	2,450	0	3	0	0
Fall River	6,687	1	9	0	0	Spink	6,410	0	4	0	0
Faulk	2,329	0	1	0	0	Stanley	3,011	0	0	1	0
Grant	7,061	0	6	0	1	Sully	1,407	0	0	0	0
Gregory	4,226	0	5	1	0	Todd	10,065	0	2	1	0
Haakon	1,943	0	0	0	0	Tripp	5,460	0	9	1	0
Hamlin	5,948	0	4	0	0	Turner	8,315	0	8	1	1
Hand	3,277	0	2	0	0	Union	15,029	0	17	17	2
Hanson	3,423	0	3	3	0	Walworth	5,543	1	5	3	0
Harding	1,242	0	0	0	0	Yankton	22,662	0	24	9	0
Hughes	17,666	0	17	5	1	Ziebach	2,756	0	3	0	0
Hutchinson	7,358	0	9	2	1	State Total	869,666	24	878	384	57
Hyde	1,318	0	1	0	0	Out of State		8	233	109	7
						Total		32	1,111	493	64

Employment Data Collection Form

1. **What type of nursing degree / credential qualified you for your first U.S. nursing license?**
 - Vocational / Practical Certificate Nursing
 - Diploma – Nursing
 - Associate Degree – Nursing
 - Baccalaureate Degree – Nursing
 - Master’s Degree – Nursing
 - Doctoral Degree – Nursing (PhD)
 - Doctoral Degree – Nursing (DNP)
2. **What is your highest level of education?**
 - Vocational / Practical Certificate Nursing
 - Diploma – Nursing
 - Associate Degree – Nursing
 - Associate Degree – Non-Nursing
 - Baccalaureate Degree – Nursing
 - Baccalaureate Degree – Non-Nursing
 - Master’s Degree – Nursing
 - Master’s Degree – Non-Nursing
 - Doctoral Degree – Nursing (PhD)
 - Doctoral Degree – Nursing Practice (DNP)
 - Doctoral Degree – Nursing Other
 - Doctoral Degree – Non-Nursing
3. **Year of initial U.S. Licensure:** _____
4. **Country of entry-level education:** _____
5. **What is your employment status?**
 - Actively employed in nursing or in a position that requires a nurse license (select one)
 - Full-time
 - Part-time
 - Per diem
 - Actively employed in a field other than nursing (select one)
 - Full-time
 - Part-time
 - Per diem
 - Working in nursing only as a volunteer
 - Unemployed (select one)
 - Seeking work as a nurse
 - Not seeking work as a nurse
 - Retired
6. **In how many positions are you currently employed as a nurse?**
 - 1
 - 2
 - 3 or more
7. **How many hours do you work during a typical week in all your nursing positions?**
 - <10 hours
 - 11-20 hours
 - 21-30 hours
 - 31-40 hours
 - 41-50 hours
 - 51-60 hours
 - >60 hours
8. **Indicate the zip code, city, state and county of your primary employer.**
 - Zip Code: _____
 - City: _____
 - State: _____
 - County: _____
9. **Identify the type of setting that most closely corresponds to your nursing practice position.**
 - Ambulatory Care Setting
 - Assisted Living Facility
 - Community Health
 - Correctional Facility
 - Insurance Claims / Benefits
 - Nursing Home / Extended Care
 - Occupational Health
 - Policy / Planning Regulatory / Licensing Agency

- Dialysis Center
- Home Health
- Hospice
- Hospital
- Public Health
- School Health Services
- School of Nursing
- Other

10. Identify the position title that most closely corresponds to your nursing practice position.

- Advanced Practice Registered Nurse
- Case Manager
- Consultant
- Nurse Executive
- Nurse Faculty / Educator
- Nurse Manager
- Nurse Researcher
- Staff Nurse
- Other – Health Related
- Other – Non Health Related

11. Identify the employment specialty that most closely corresponds to your nursing practice position.

- Acute Care/ Critical Care
- Adult Health
- Anesthesia
- Cardiology
- Community
- Emergency / Trauma
- Family Health
- Genetics
- Geriatric / Gerontology
- Home Health
- Informatics
- Information Technology
- Maternal-Child Health / Obstetrics
- Medical / Surgical
- Neonatal
- Nephrology
- Neurology / Neurosurgical
- Occupational Health
- Oncology
- Orthopedic
- Palliative Care / Hospice
- Pediatrics
- Perioperative
- Primary Care
- Psychiatric / Mental Health / Substance Abuse
- Public Health
- Radiology
- Rehabilitation
- School Health
- Urologic
- Women’s Health
- Other – Clinical Specialties
- Other – Non Clinical Specialties

12. What percent of your current position involves direct patient care?

- 0%
- 25%
- 50%
- 75%
- 100%

13. If unemployed, please indicate the reasons.

- Difficulty in finding a nursing position
- Disabled
- Inadequate Salary
- School
- Taking care of home and family
- Other

14. Formal Education

- I am not taking courses toward an advanced degree in nursing
- I am currently taking courses toward an advanced degree in nursing

15. Do you intend to leave / retire from nursing practice in the next 5 years?

- Yes
- No

16. Other states in which you have ever held a license:

Active License: _____

Inactive License: _____

List all states where currently practicing nursing, whether physically or electronically: _____

References

1. Smiley, R. A., Lauer, P., Bienemy, C., Berg, J. G., Shireman, E., Reneau, K.A., Alexander, M. (October 2018, updated January 2019). The 2017 National Nursing Workforce Survey. *Journal of Nursing Regulation*, 9 (3), Supplement.
2. U.S. Census Bureau: QuickFacts, United States. Data derived from Population Estimates, American Community Survey. Retrieved on December 3, 2018 from <https://www.census.gov/quickfacts/fact/table/US/PST045217>.
3. U.S. Census Bureau: QuickFacts, United States. Data derived from Population Estimates, American Community Survey. Retrieved on December 3, 2018 from <https://www.census.gov/quickfacts/fact/table/sd,US/PST045217>.
4. Institute of Medicine of the National Academies (2010). *The Future of Nursing Leading Change Advancing Health*. www.iom.edu/nursing.