California Board of Registered Nursing

2020-2021 Annual School Report

Data Summary and Historical Trend Analysis

A Presentation of Post-Licensure Nursing Education Programs in California

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PREFACE AND SURVEY METHODS

Nursing Education Survey Design

The 2020-2021 Board of Registered Nursing (BRN) School Survey was designed to provide comparable data to prior surveys and was updated based on recommendations from the Board's Nursing Education and Workforce Advisory Committee. The School Survey is primarily intended to collect data on pre-licensure registered nursing (RN) education programs in California. Since 2004-2005, pre-licensure nursing education programs that also offer post-licensure programs have been asked to provide data on their post-licensure programs. Note that the data presented in this report are only for post-licensure programs that also have an approved pre-licensure program in California. Programs that are located outside California and offer post-licensure education online are not included.

The California Board of Registered Nursing commissioned the University of California, San Francisco to develop the online survey instrument, administer the survey, and report data collected from the survey. Revisions to the post-licensure sections of the survey may prevent comparability of some data.

The survey collected data about nursing programs, their students, and their faculty from August 1, 2020, through July 31, 2021. Demographic information and census data were requested for October 15, 2021.

Survey Participation

In 2020-2021, 43 RN-to-BSN programs, 41 Master's degree programs, and 18 Doctoral programs responded to the survey. There was a total of 52 schools, including Phoenix University—whose campuses across California are counted as two schools—Southern California and Northern California.

Since 2011-2012, there has been an increase of 30.3% (n=10) in the number of RN-to-BSN programs, 13.9% (n=5) in the number of Master's degree programs, and 80.0% (n=8) in the number of Doctoral programs (DNP and/or PhD). Overall, the number of programs increased by 29.1% (n=23) over this period. For the seven schools that offer both a DNP and PhD, these two programs are counted as one Doctoral program for this calculation to maintain consistency with prior years. There were 17 DNP programs and seven research-based Doctoral programs (PhD) in 2020-2021.

There was one new RN-to-BSN program, three new MSN programs, and two new DNP programs reported in 2020-2021. One RN-to-BSN program that were reported in 2019-2020 was not reported in 2020-2021, and one DNP program that was reported in 2019-2020 was not reported in 2020-2021. These changes may be due to a number of reasons. For instance, the program may have closed, the school may have been exempted from answering the post-licensure survey because it ceased to offer a BRN-approved pre-licensure program, or the school did not report the program for other reasons such as lack of enrollment. A list of schools that responded to the survey is provided in Appendix A.

Changes to the Survey

There were some notable changes to this year's survey.

- Questions about student census were eliminated, leaving sections on new enrollments and completions.
- The section on MSN programs has been updated to request demographic information for new enrollments and completions by major program tracks.
- The section on DNP programs has been updated to request basic information by major program track for entry-level and post-master's level enrollments and completions, and by demographic categories for entry-level enrollments and completions.

Analysis of these new questions and impacts of the changes are discussed in the summary subsection of each program section in the report.

Only twelve schools reported single post-licensure programs. Most had a combination of programs, the most common being an RN-to-BSN program with an MSN program.

Of the 18 schools with Doctoral programs, eleven schools had a DNP program with no PhD program, one had just a PhD program with no DNP program, and six had both.

Table 1. Post-licensure program combinations, 2020-2021

Programs	#
RN-to-BSN only	9
MSN only	2
Doctoral only	1
RN-to-BSN & MSN	23
RN-to-BSN & Doctoral	1
MSN & Doctoral	6
RN-to-BSN, MSN & Doctoral	10
Number of schools	**52**

Table 2. Number of post-licensure programs by program type by academic year

	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
RN-to-BSN	33	32	35	34	34	38	38	37	43	43
Master's Degree	36	36	36	35	35	38	38	35	37	41
Doctoral	10	12	13	13	13	16	14	13	17	18
Number of programs	**79**	**80**	**84**	**82**	**82**	**92**	**90**	**85**	**97**	**102**
Number of schools[T]	**45**	**44**	**45**	**44**	**42**	**46**	**46**	**44**	**51**	**52**

[T]Since most nursing schools admit students in more than one program, the number of nursing programs is greater than the number of nursing schools.
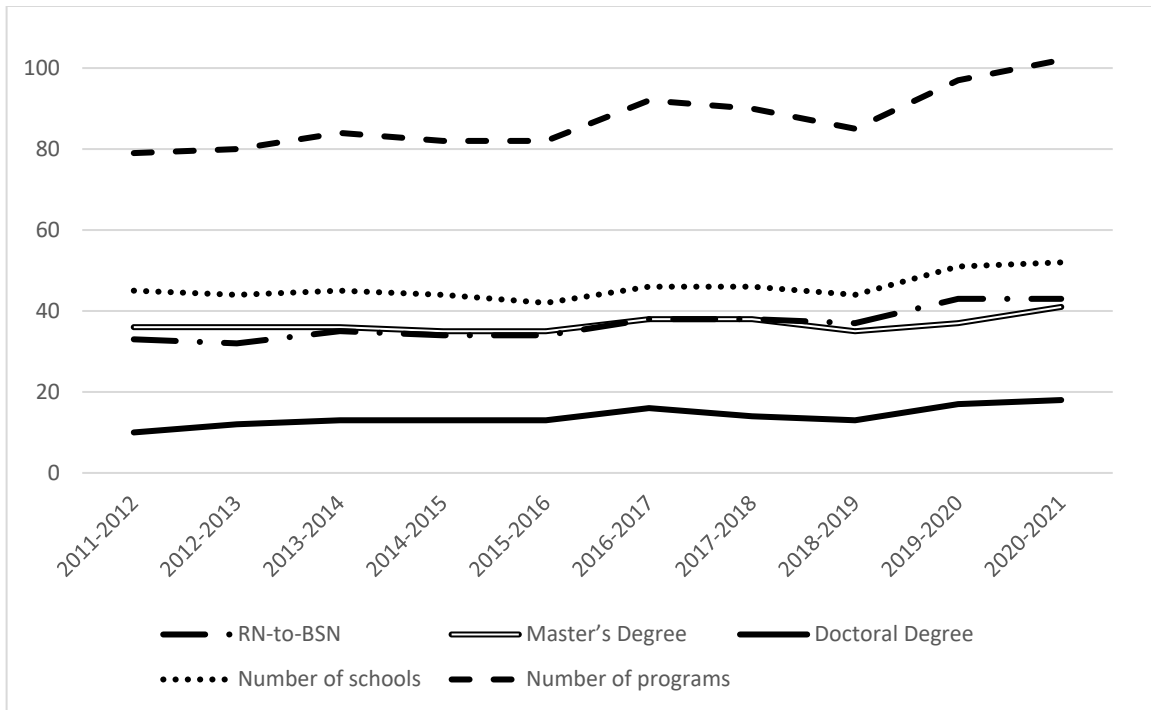
Figure 1. Number of post-licensure programs by program type by academic year

Analysis

This report focuses on the post-licensure data; previously published reports present the results of the pre-licensure sections of the survey. Data are presented in aggregate form to describe overall trends in RN education in California statewide and within regions of the state. Note that statistics for enrollments and completions represent two separate student populations. Therefore, it is not possible to compare enrollment and completion data.

POST-LICENSURE RN EDUCATION PROGRAM SUMMARY AND TRENDS

Since post-licensure programs offer a range of degrees, this report is presented in three sections: RN-to-BSN programs, Master's degree programs, and Doctoral programs. Doctoral programs are broken out into doctorate of nursing practice (DNP) and research-based Doctoral programs (PhD). Faculty census data and staffing data are presented separately since they are collected by school, not by program type. Note that the data *do not* include post-licensure education programs offered by schools that do not have an approved California pre-licensure RN education program.

RN-to-BSN Programs

Number of RN-to-BSN Programs

The number of RN-to-BSN programs increased by 30.3% (n=10) over the last ten years, from 33 programs in 2011-2012 to 43 programs in 2020-2021.

In 2020-2021, more than half of RN-to-BSN programs were offered at private schools (58.1%, n=25), while 41.9% (n=18) of RN-to-BSN programs were offered at public schools. The number of RN-to-BSN programs offered at private schools increased by 78.6% (n=11) over the last ten years, while the number of RN-to-BSN programs offered at public schools decreased by 5.3% (n=1).

The proportion of private RN-to-BSN programs has risen over the decade, exceeding half of all RN-to-BSN programs in 2016-2017. The number of private and public RN-to-BSN programs has remained steady over the last two years.

Table 3. Number of RN-to-BSN degree programs by academic year

	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Public	57.6%	53.1%	54.3%	52.9%	50.0%	47.4%	44.7%	43.2%	41.9%	41.9%
count	19	17	19	18	17	18	17	16	18	18
Private	42.4%	46.9%	45.7%	47.1%	50.0%	52.6%	55.3%	56.8%	58.1%	58.1%
count	14	15	16	16	17	20	21	21	25	25
Number of programs reporting	**33**	**32**	**35**	**34**	**34**	**38**	**38**	**37**	**43**	**43**
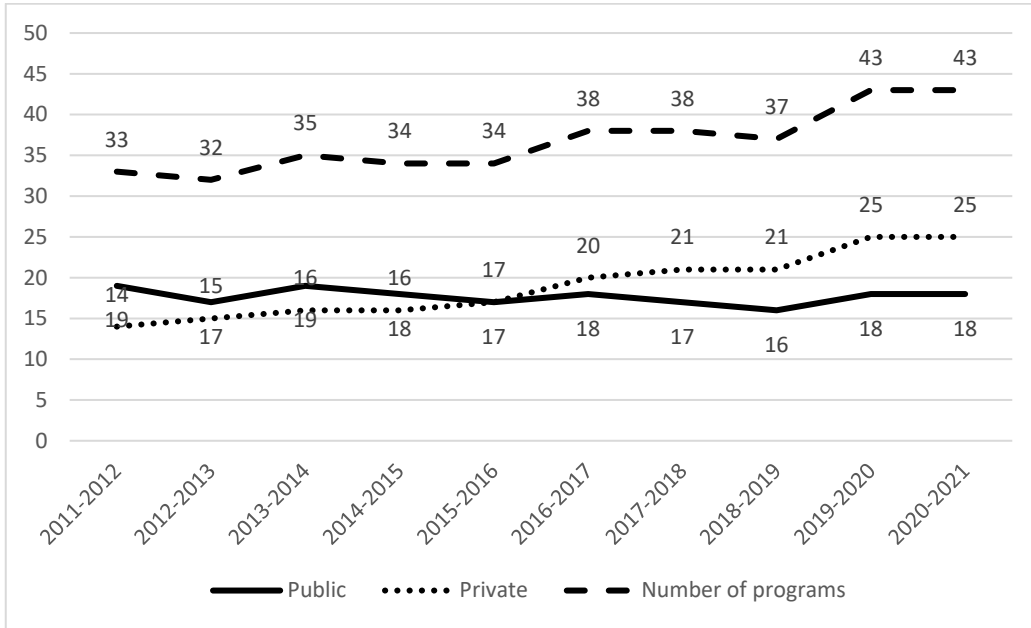
Figure 2. Number of public and private RN-to-BSN programs by academic year
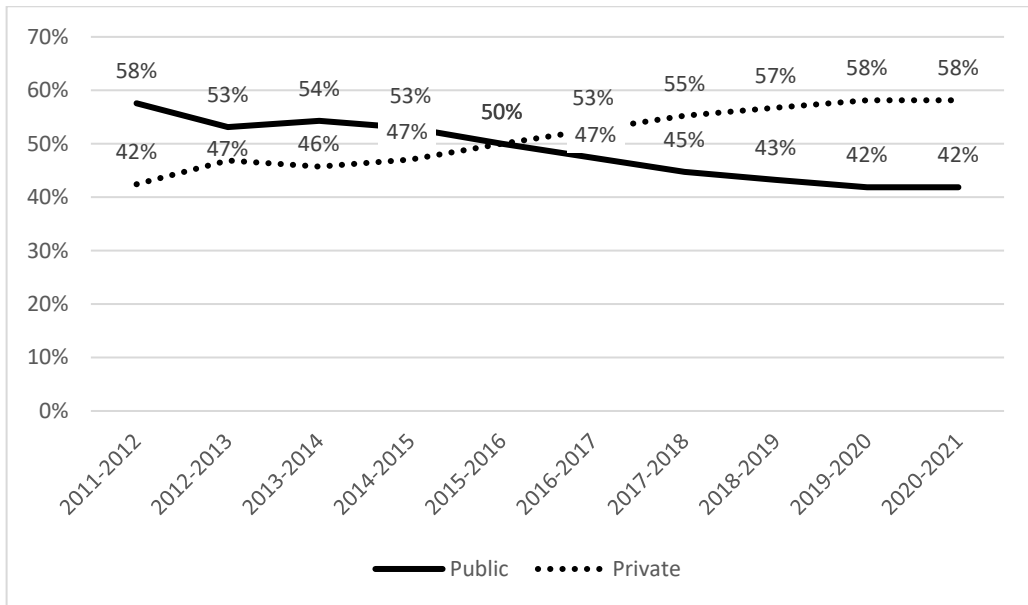
Figure 3. Percent of public and private RN-to-BSN programs by academic year

RN-to-BSN Program Characteristics

In 2020-21, as in all prior years, the regular RN-to-BSN program type with no prelicensure students was the most commonly offered master's degree program. There has been a decrease over the last seven years in the share of programs where RNs are admitted to a specific RN-to-BSN track in the generic BSN program.

Table 4. RN-to-BSN program types by academic year

	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
RN to BSN program only (no prelicensure students)	77.4%	84.8%	94.3%	91.4%	87.9%	87.5%	92.9%
RNs are admitted into spaces with prelicensure students	12.9%	6.1%	2.9%	5.7%	9.1%	10.0%	9.5%
RNs are admitted to a specific RN-to-BSN track in the Generic BSN program	16.1%	12.1%	8.6%	0.0%	9.1%	7.5%	2.4%
Other	6.5%	9.1%	11.4%	11.4%	12.1%	7.5%	7.1%
Programs Responding	**31**	**33**	**35**	**35**	**33**	**40**	**42**

In 2020-21, the hybrid (online and in-person) format was the most commonly selected mode of delivery, reaching a ten-year high in 2020-21, possibly due to the pandemic, which required more remote learning to keep students and faculty safe. While full-time programming was the most commonly selected format in 2020-21, it experienced a decline after 2019-20. The use of distance/online education was also popular and reported by 18 programs (41.9%). The use of traditional and evening formats has decreased over time. Earlier modes such as contract education and extended campus are not reflected in this table since these categories were not included after 2013-14.

Table 5. Delivery formats, RN-to-BSN degree programs, by academic year

	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Hybrid Online/In-Person	-	-	0.0%	41.2%	47.1%	39.5%	39.5%	29.7%	37.2%	51.2%
Full-time Program	0.0%	-	0.0%	50.0%	61.8%	52.6%	50.0%	59.5%	55.8%	48.8%
Distance Education/ Online	27.3%	-	37.1%	26.5%	35.3%	47.4%	42.1%	43.2%	53.5%	41.9%
Part-time Program	39.4%	-	22.9%	44.1%	44.1%	39.5%	39.5%	48.6%	55.8%	39.5%
100% In-Person Program	-	-	-	-	-	-	-	-	-	16.3%
Traditional Program*	54.5%	-	48.6%	29.4%	17.6%	23.7%	21.1%	16.2%	18.6%	-
Other	6.1%	-	5.7%	5.9%	2.9%	7.9%	5.3%	5.4%	14.0%	11.6%
Weekend Program	0.0%	-	5.7%	2.9%	2.9%	5.3%	2.6%	2.7%	2.3%	7.0%
Evening Program	24.2%	-	17.1%	20.6%	26.5%	15.8%	15.8%	13.5%	11.6%	4.7%
Number of programs	**33**	**-**	**35**	**34**	**34**	**38**	**38**	**37**	**43**	**43**

*The wording for this answer choice was changed to "100% on-line" in 2020-21, so categories may not be directly comparable.

Note: data for 2012-2013 are not available for this table.

Over the last ten years, the majority of RN-to-BSN programs were accredited by the Commission on Collegiate Nursing Education (CCNE). RN-to-BSN Accreditation from the Accreditation Commission for Education in Nursing (ACEN) has been on the decline since 2014-15.

The CCNE approves accreditation for bachelor's and master's nursing programs while the ACEN approves accreditation for all types of nursing programs, including associate, baccalaureate, master/s, and doctoral.

Table 6. RN-to-BSN program accreditation

	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-21
ACEN (Accreditation Commission for Education in Nursing)	6.3%	-	10.0%	10.0%	6.1%	5.6%	5.7%	5.7%	4.9%	2.5%
CCNE (Commission on Collegiate Nursing Education)	84.4%	-	90.0%	90.0%	93.9%	86.1%	88.6%	85.7%	90.2%	90.0%
CNEA (Commission for Nursing Education Accreditation)	-	-	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Council on Accreditation of Nurse Anesthesia Educational Programs (COA)	-	-	-	-	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Accreditation Commission for Midwifery Education (ACME)	-	-	-	-	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Other		-	13.3%	13.3%	6.1%	8.3%	5.7%	5.7%	9.8%	5.0%
None	9.4%	-	3.3%	3.3%	0.0%	2.8%	5.7%	8.6%	2.4%	2.5%
Number of programs reporting	**32**	**-**	**30**	**30**	**33**	**36**	**35**	**35**	**41**	**40**

Note: data for 2012-2013 are not available for this table.

Most RN-to-BSN programs use distance education modes (whether 100% online or hybrid) and flexible course scheduling as methods of increasing access to the program. Offering courses via distance education modes has risen to 85.0% (n=34) in 2019-2020 and 2020-2021. Flexible course scheduling remains a common method that RN-to-BSN programs use to increase access (60.0%, n=24), although its use has decreased somewhat since 2010-2011.

Some programs offer courses in work settings and use partial funding of classes by work settings to increase access, although use of both has declined over the last decade, especially providing courses in work settings.

Table 7. Approaches to increase RN access to the program by academic year

	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Distance education modes	71.0%	83.3%	71.4%	83.3%	68.8%	70.3%	69.4%	78.4%	85.0%	85.0%
Flexibility in course scheduling	67.7%	63.3%	68.6%	73.3%	62.5%	62.2%	52.8%	62.2%	57.5%	60.0%
Partial funding of classes by work setting	35.5%	30.0%	22.9%	46.7%	40.6%	32.4%	30.6%	24.3%	30.0%	15.0%
Courses provided in work settings	41.9%	30.0%	17.1%	23.3%	25.0%	16.2%	11.1%	13.5%	5.0%	10.0%
Number of programs reporting	**31**	**30**	**35**	**30**	**32**	**37**	**36**	**37**	**40**	**40**
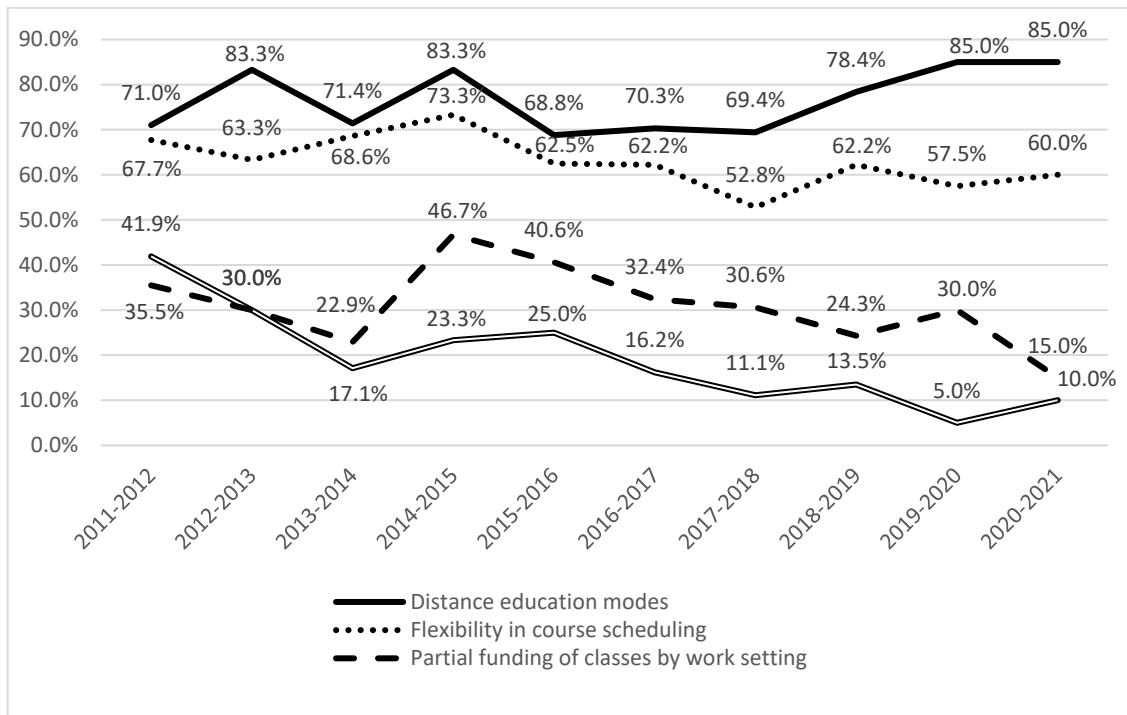
Figure 4. Approaches to increase RN access to the program by academic year

In 2020-2021, the most commonly cited methods to award credit for prior education and experience were direct articulation of ADN coursework (63.9%, n=23), followed by partnerships with ADN programs or similar collaborations (61.1%, n=22). The use of partnerships with ADN programs or similar collaborations has increased overall over the decade, peaking in 2015-2016 at 63.3% (n=19) of programs and then declining somewhat. The direct articulation of ADN coursework remains the most common method of awarding credit for prior education although its use has decreased since peaking at 90.0% (n=27) in 2014-2015.

The use of portfolios to document competencies as a mechanism to award credit has overall declined since 2011-2012, when 16.1% of programs used this mechanism. By 2020-2021, only one program (2.8%) reported using portfolios to document competencies to award credit.

Table 8. Mechanisms to award credit for prior education and experience by academic year

	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Direct articulation of ADN coursework	71.0%	73.3%	67.7%	90.0%	50.0%	61.8%	51.4%	65.6%	56.4%	63.9%
Partnerships with ADN programs or similar collaborations	45.2%	53.3%	54.8%	60.0%	63.3%	52.9%	51.4%	53.1%	59.0%	61.1%
Specific program advisor	45.2%	43.3%	38.7%	70.0%	30.0%	35.3%	37.1%	31.3%	33.3%	50.0%
Tests to award credit*	22.6%	20.0%	22.6%	30.0%	13.3%	20.6%	17.1%	21.9%	20.5%	19.4%
Specific upper division courses	12.9%	13.3%	9.7%	20.0%	10.0%	17.6%	20.0%	15.6%	5.1%	11.1%
Portfolios to document competencies	16.1%	6.7%	12.9%	20.0%	13.3%	0.0%	2.9%	6.3%	2.6%	2.8%
Number of programs reporting	**31**	**30**	**31**	**30**	**30**	**34**	**35**	**32**	**39**	**36**

*NLN achievement tests or challenge exams
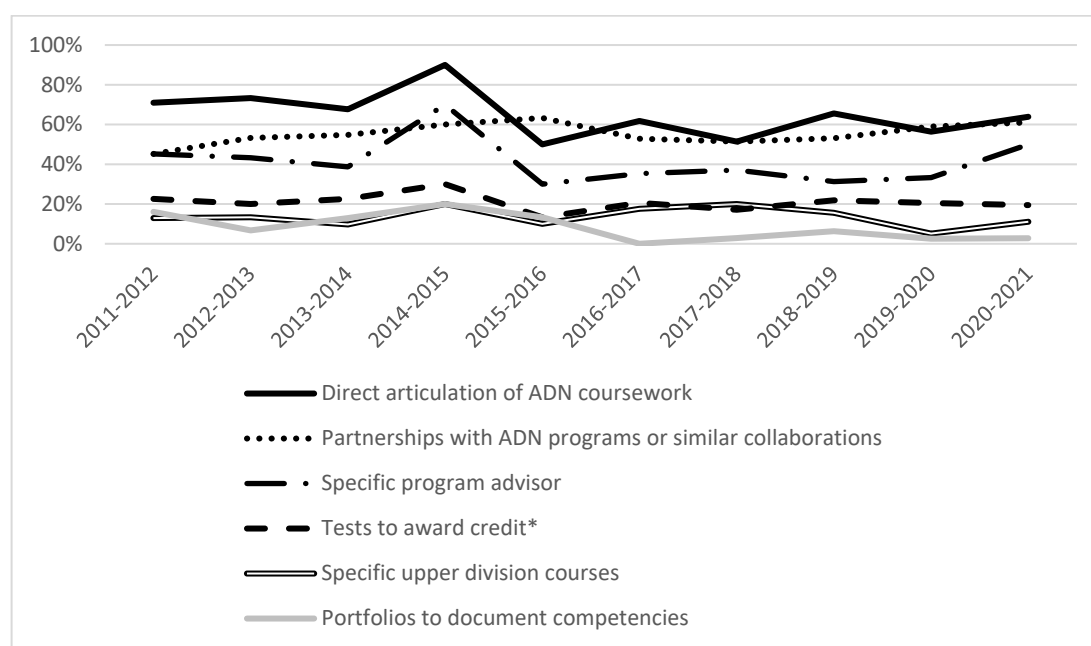
Figure 5. Mechanisms to award credit for prior education and experience by academic year

RN-to-BSN Applications, Admissions, and Enrollments

In 2020-2021, RN-to-BSN programs received 4,299 applications for admission, representing a decline from the ten-year high of 7,035 in 2015-2016. Of the 4,299 applications received in 2020-2021, 34.4% (n=1,478) were not accepted for admission, and 16.4% (n=463) of those admitted did not enroll.

In 2014-15, admitted students were recorded as enrolled students. From 2014-2015 onward, enrolled students were differentiated from admitted students because many who are admitted did not enroll. In 2019-2020, this table was revised to reflect the number admitted, not enrolled, from 2012-2013 onward. In 2020-21, the number of qualified applicants was not requested, so this table has been revised to reflect the total number of applicants rather than the number of qualified applicants.

Table 9. Applications for admission to RN-to-BSN programs by academic year

	2011-2012	2012-2013⁂	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Applications*	**3,882**	**4,271**	**3,927**	**4,989**	**7,035**	**9,321**	**6,783**	**5,588**	**6,660**	**4,299**
Admitted	2,581	2,362	2,522	3,468	5,783	5,198	4,989	3,945	4,401	2,821
New student enrollments	1,998	2,315	2,252	2,355	4,317	3,698	4,238	3,507	3,993	2,358
# Not admitted	1,301	1,682	1,405	1,521	1,252	4,123	1,794	1,643	2,259	1,478
# Not enrolled	1,884	1,750	1,675	2,634	2,718	5,623	2,545	2,081	2,667	1,920
% Applications *admitted*	**66.5%**	**55.3%**	**64.2%**	**69.5%**	**82.2%**	**55.8%**	**73.6%**	**70.6%**	**66.1%**	**65.6%**
% Applications *enrolled*	**51.5%**	**54.2%**	**57.3%**	**47.2%**	**61.4%**	**39.7%**	**62.5%**	**62.8%**	**60.0%**	**54.8%**

*These data represent applications, not individuals. A change in the number of applications may not represent an equivalent change in the number of individuals applying to nursing school.
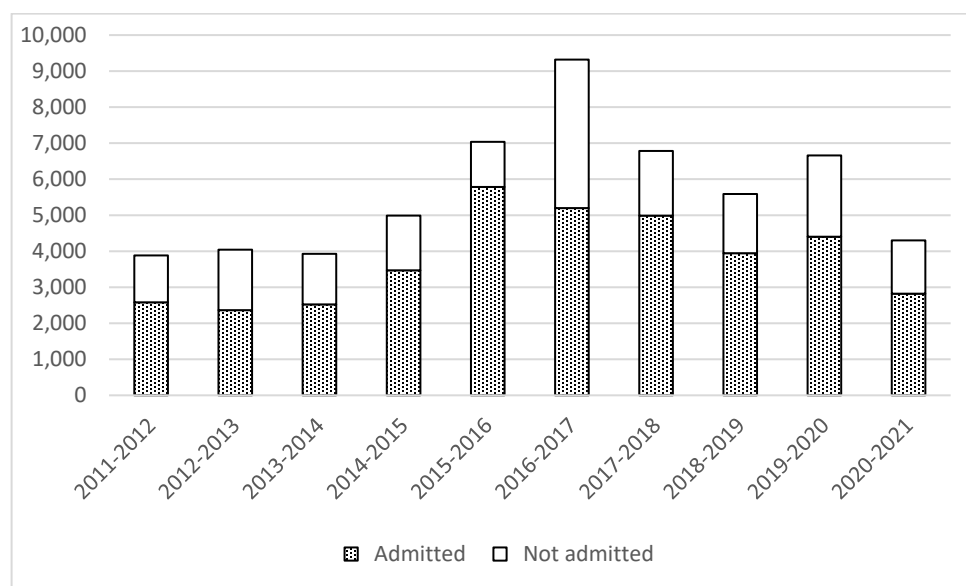
Figure 6. Admitted and not admitted applicants by academic year, RN-to-BSN programs

In 2020-2021, 4,443 admission spaces were filled with 2,358 students. Some online RN-to-BSN programs accept all qualified applicants and there is no cap on enrollment; for programs where there was no number of admission spaces given (n=5), or the number of admission spaces was extremely high, indicating "no cap" (ex: 999, n=3), the number of new enrollments was used as the number of spaces available. Four programs listed more than 200 admission spaces, not including those that listed "999".

Thirty-two of the forty-three RN-to-BSN programs listed fewer new enrollments than admissions spaces available in 2020-2021, not including the online programs with no cap. For some schools, the number of admission spaces exceeded the number of new enrollments by hundreds of spaces.

In 2020-2021, only 53.2% of admission spaces were filled with new enrollments—the lowest level in the last ten years.

Table 10. Availability and utilization of RN-to-BSN admission spaces by academic year

	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Spaces available	2,978	3,224	3,368	3,180	4,941	5,119	6,658	6,487	5,096	4,433
New student enrollments	1,998	2,488	2,252	2,351	4,317	3,698	4,238	3,507	3,993	2,358
% Spaces filled with new student enrollments	**67.1%**	**77.2%**	**66.9%**	**73.9%**	**87.4%**	**72.2%**	**63.7%**	**54.1%**	**78.4%**	**53.2%**
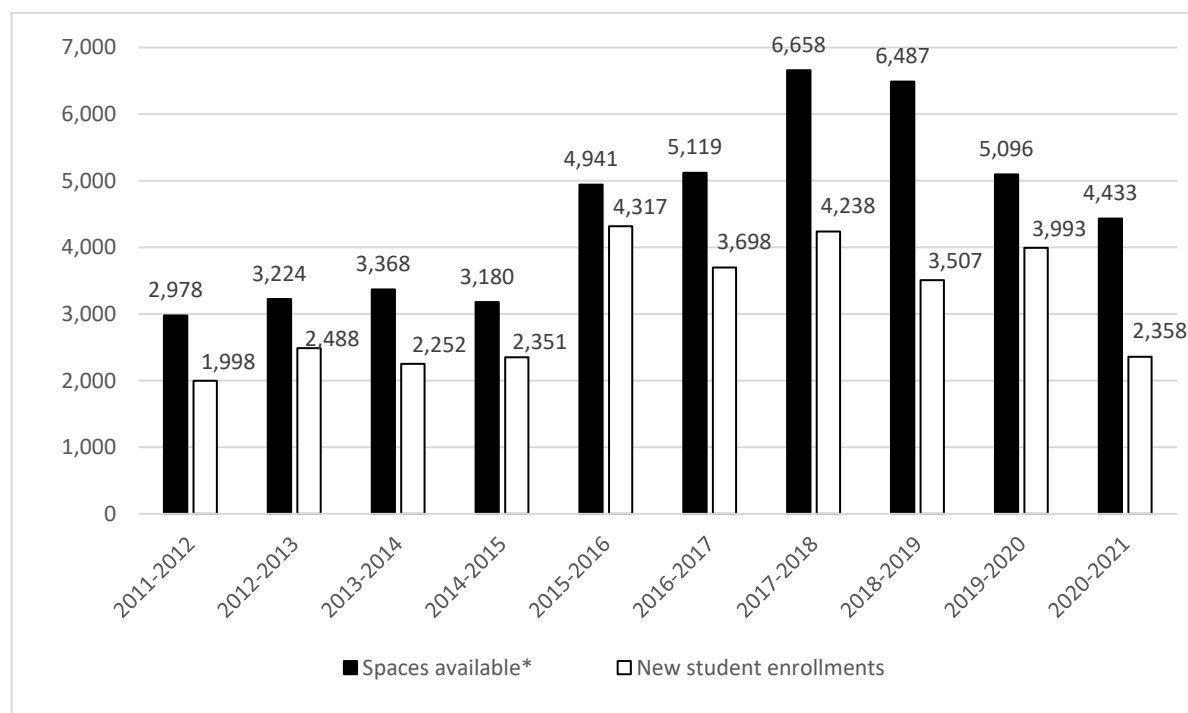
Figure 7. Availability and utilization of RN-to-BSN admission spaces by academic year

New student enrollment reached a ten-year high of 4,317 in 2015-2016. Since that time, enrollment has fluctuated, declining to 2,358 in 2020-2021. This is a drop off of about 1,614 new enrollments since last year (2019-2020).

Private program enrollments surpassed public school enrollments in 2015-2016 and have remained more than half of all new student enrollments since that time. However, in 2020-21, both public and private programs saw a drop in enrollments

Of the 3,358 new enrollments in 2020-2021, 1,732 were enrolled in a general post-licensure BSN (RN-to-BSN) while 851 were enrolled in a specific post-licensure program in which students begin taking BSN courses while still enrolled in an ADN program (e.g., California Collaborative Model for Nursing Education). One program did not specify which of these categories its 77 students fell into.

Table 11. RN-to-BSN new student enrollment by program type by academic year

	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
New student enrollment	**1,998**	**2,488**	**2,252**	**2,351**	**4,317**	**3,698**	**4,238**	**3,507**	**3,993**	**2,358**
Public	1,083	1,578	1,247	1,772	2,010	1,557	1,446	1,225	1,734	684
Private	915	910	1,005	579	2,307	2,141	2,792	2,282	2,259	1,674

Note: Much of the increase between 2014-15 and 2015-16 is the result of the inclusion of a new private RN-to-BSN program.
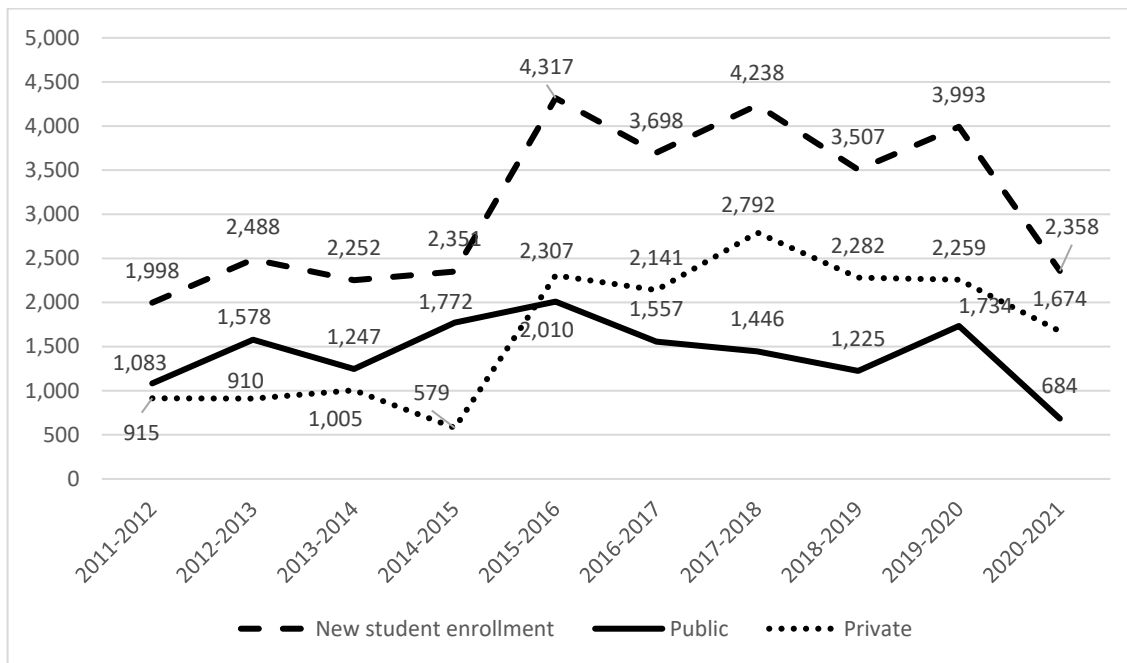
Figure 8. RN-to-BSN new student enrollment by program type by academic year

The majority of newly enrolled RN-to-BSN students over the last decade have been people of color, primarily Hispanic and Asian. While the proportion of Hispanic enrollees has increased over time, the proportion of enrollees from other groups has varied without a clear trajectory.

Table 12. Ethnic distribution of RN-to-BSN new enrollments by academic year

	2011-2012	2012-2013*	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Native American	0.3%	-	0.7%	0.5%	0.4%	1.0%	0.3%	0.4%	0.6%	0.6%
Asian/Pacific Islander subtotal	29.5%	-	31.0%	33.5%	26.7%	25.1%	23.9%	19.4%	27.7%	27.7%
South Asian	0.5%	-	1.4%	0.8%	1.2%	0.7%	1.7%	0.4%	1.7%	2.5%
Filipino	4.7%	-	4.7%	6.2%	2.4%	2.7%	1.1%	3.1%	3.1%	3.9%
Hawaii	1.1%	-	0.6%	1.8%	1.6%	2.1%	3.1%	1.1%	1.4%	1.0%
Other Asian	23.2%	-	24.3%	24.6%	21.6%	19.7%	18.0%	14.8%	21.6%	20.3%
Other Pacific Islander	-	-	-	-	-	-	-	-	-	1.1%
African American	10.7%	-	7.1%	5.4%	5.8%	6.5%	7.2%	11.0%	6.2%	6.4%
Hispanic	24.5%	-	24.2%	27.6%	27.0%	25.7%	28.7%	26.1%	29.4%	35.4%
Multi-race	3.5%	-	5.8%	4.6%	1.5%	4.3%	3.8%	4.8%	4.8%	4.9%
Other	1.8%	-	1.2%	0.8%	3.1%	0.4%	1.2%	1.0%	0.3%	0.4%
White	29.7%	-	29.9%	27.6%	35.5%	37.0%	34.8%	37.4%	30.9%	23.5%
Total	**1,591**	**-**	**1,903**	**1,494**	**3,843**	**3,026**	**3,935**	**3,196**	**3,339**	**2,142**
Ethnic Minorities**	70.3%	-	70.00%	72.30%	64.60%	63.10%	65.10%	62.70%	69.10%	76.50%
# Unknown/ unreported	407	-	349	857	474	672	303	311	654	216

Note: data for 2012-2013 are not available for this table.
**Ethnic minorities include all reported non-White racial and ethnic groups, including "Other" and "Multi-race".

Over the last ten years, most RN-to-BSN new enrollments have been female. However, the proportion of male new enrollments hit a ten-year high in 2020-21.

Table 13. Gender distribution of RN-to-BSN new enrollments by academic year

	2011-2012	2012-2013*	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Male	14.1%	-	15.7%	17.3%	16.1%	15.6%	17.6%	15.6%	18.1%	21.0%
Female	85.9%	-	84.3%	82.7%	83.9%	84.4%	82.4%	84.3%	81.8%	79.0%
Other	0.0%	-	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%	0.0%
Total	**1,965**	**-**	**2,099**	**1,589**	**4,083**	**3,189**	**4,221**	**3,452**	**3,827**	**2,352**
# Unknown/ unreported	33	-	153	762	234	509	17	55	166	6

Note: data for 2012-2013 are not available for this table.

In 2020-21, the proportion of students 30 years of age and younger has risen to 50.5% after several years of hovering in the 35-43% range. This is much higher than it has been since 2014-15 when it was 53.2%.

Table 14. Age distribution of RN-to-BSN new enrollments by academic year

	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
17 – 20 years	0.1%	-	4.8%	0.1%	0.1%	0.1%	1.0%	0.6%	0.2%	1.3%
21 – 25 years	14.7%	-	15.2%	21.7%	10.8%	13.3%	13.3%	16.6%	14.2%	21.2%
26 – 30 years	28.3%	-	26.9%	31.3%	24.4%	22.6%	22.0%	26.2%	24.7%	28.0%
31 – 40 years	30.7%	-	31.1%	32.0%	35.8%	35.9%	36.1%	32.4%	33.9%	30.7%
41 – 50 years	19.5%	-	16.2%	10.6%	20.6%	19.6%	20.0%	16.8%	19.5%	13.8%
51 – 60 years	5.9%	-	5.4%	2.9%	7.5%	8.0%	7.0%	6.7%	7.1%	4.7%
61 years and older	0.8%	-	0.4%	1.2%	0.8%	0.5%	0.6%	0.6%	0.5%	0.3%
Total	**1,760**	**-**	**1,854**	**1,458**	**3,989**	**3,126**	**4,074**	**3,244**	**3,497**	**1,782**
# Unknown/ unreported	238	-	398	893	328	572	164	263	11	576

Note: data for 2012-2013 are not available for this table.

Twenty-three programs (53.5%) reported that they enrolled fewer students in 2020-2021 than in the prior year. A program-by-program comparison of 2020-21 RN-to-BSN enrollments with 2019-20 enrollments reveals that 60.5% of programs (n=26) enrolled fewer students this year than last.

The majority reported that this resulted from accepted students not enrolling (56.5% n=13), followed by lack of qualified applicants (30.4%, n=7) and program revisions (17.4%, n=4). The latter two categories were derived from text comments.

In 2020-2021, some examples of comments indicating lack of qualified applicants include "Students are working RNs and chose not to return to the program during the height of the COVID-19 pandemic," and "Our community college ADRN transfer partner graduated fewer students". Some examples of comments indicating program revisions include "teaching out the program," and "we only offered a part-time schedule because many ADN students were delayed in their coursework/completing their programs."

A series of questions about the impact of the COVID-19 pandemic were added in 2019-20. In 2020-21, 17.4% of RN-to-BSN programs (n=4) either decreased or skipped a cohort. One program reported decreasing enrollments by 60%.

Table 15. Reasons for enrolling fewer RN-to-BSN students by academic year

	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Accepted students did not enroll	61.5%	60.0%	60.0%	47.1%	63.6%	63.2%	56.5%
Lack of qualified applicants*	8.3%	40.0%	33.3%	23.5%	27.3%	21.1%	30.4%
Program revisions*	-	-	6.7%	11.8%	9.1%	5.3%	17.4%
Competition/mode*	7.7%	0.0%	26.7%	23.5%	18.2%	21.1%	8.7%
Decreased an admission cohort	-	-	-	-	-	5.3%	8.7%
Other	7.7%	10.0%	13.3%	5.9%	18.2%	21.1%	8.7%
Skipped a cohort	-	-	-	-	-	0.0%	8.7%
Lost funding	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	4.3%
Challenges converting clinicals to virtual simulation	-	-	-	-	-	0.0%	0.0%
Challenges converting courses from in-person to online modalities	-	-	-	-	-	0.0%	0.0%
College/university / BRN requirement to reduce enrollment	15.4%	10.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Concerns about safety of faculty in clinical rotations	-	-	-	-	-	0.0%	0.0%
Concerns about safety of students in clinical rotations	-	-	-	-	-	0.0%	0.0%
Insufficient faculty	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
To reduce costs	7.7%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Unable to secure clinical placements for all students	7.7%	0.0%	6.7%	0.0%	0.0%	0.0%	0.0%
Challenges converting clinicals to in-person simulation	-	-	-	-	-	0.0%	0.0%
Number of programs reporting	**13**	**10**	**15**	**17**	**11**	**19**	**23**

*Categories derived from text comments.

RN-to-BSN Student Completions

The number of students that completed an RN-to-BSN program in California increased over the last ten years, from 1,600 in 2011-2012 to 3,595 in 2019-2020, but then dropped to 2,267 in 2020-21.

Private programs have had a greater share of RN-to-BSN completions than public programs for the past five years—peaking at 72.2% of all completions in 2019-2020. Some of this increase is due to the inclusion of a very large program that had not reported data prior to 2015-2016. By 2020-21, the proportion of private school completions had dropped to 63.5% of all completions (n=1,439).

Of these 2,2677 completions, 1,669 were enrolled in a standard post-licensure BSN (RN-to-BSN) program, and 828 were enrolled in a specific post-licensure program in which students begin taking BSN courses while enrolled in an ADN program (e.g., California Collaborative Model for Nursing Education).

Table 16. RN-to-BSN student completions by academic year

	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Public programs	850	1,030	1,097	1,174	1,076	1,386	1,549	874	998	828
Private programs	750	796	675	671	1,357	1,748	2,126	2,236	2,597	1,439
Total student completions	**1,600**	**1,826**	**1,772**	**1,845**	**2,433**	**3,134**	**3,675**	**3,110**	**3,595**	**2,267**
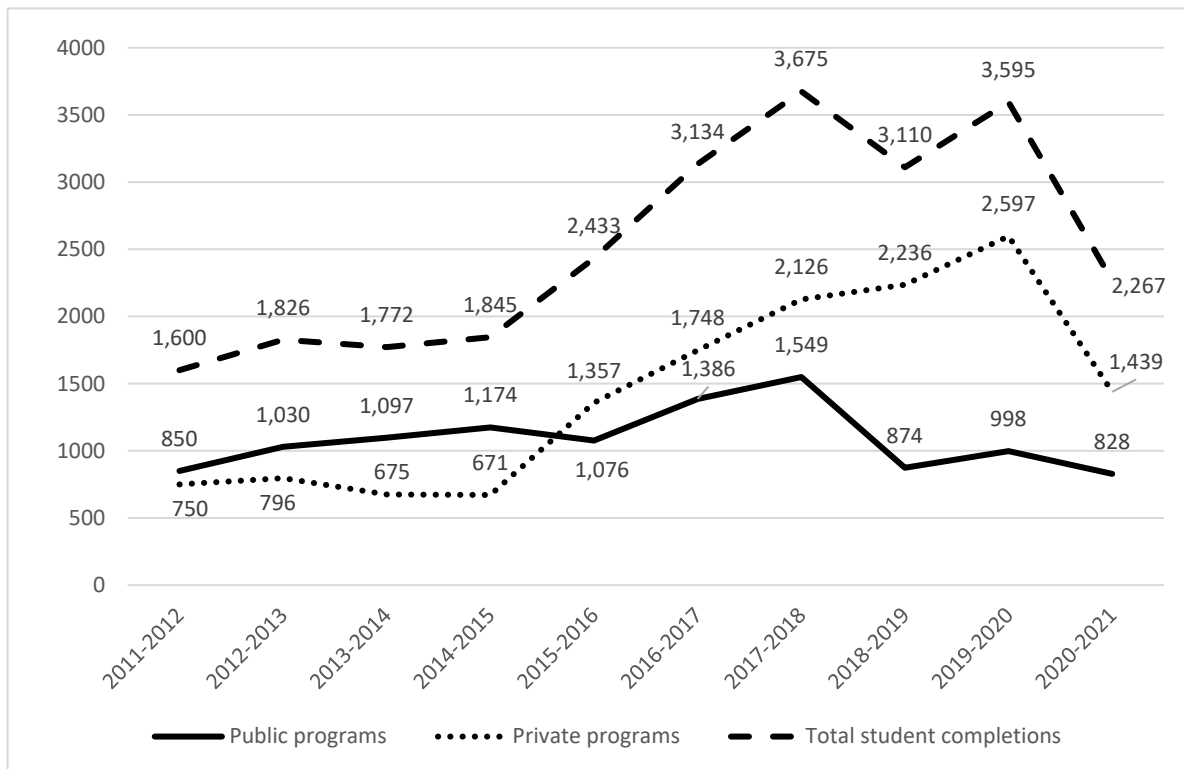
Figure 9. RN-to-BSN program completions by academic year

The majority of RN-to-BSN completions over the last decade have been people of color, primarily Hispanic and Asian. While the proportion of Hispanic enrollees has increased over time, the overall proportion of ethnic minority completions has varied.

Table 17. Ethnic distribution of RN-to-BSN completions by academic year

	2011-2012	2012-2013*	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Native American	1.0%	-	0.6%	0.5%	0.5%	0.6%	0.8%	0.5%	0.6%	0.5%
Asian/Pacific Islander subtotal	29.0%	-	32.3%	34.8%	27.4%	26.4%	24.5%	24.8%	25.6%	28.3%
South Asian	1.2%	-	0.9%	2.8%	0.4%	0.5%	0.5%	0.3%	1.0%	3.3%
Filipino	3.7%	-	4.5%	6.3%	3.2%	1.9%	1.9%	3.0%	2.0%	3.8%
Hawaii	1.8%	-	0.7%	1.6%	2.1%	1.9%	2.2%	2.8%	1.8%	1.1%
Other Asian	22.3%	-	26.2%	24.1%	21.7%	22.1%	19.9%	18.8%	20.9%	19.5%
Other Pacific Islander	0.0%	-	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.8%
African American	9.9%	-	9.6%	5.8%	5.3%	6.1%	5.4%	6.0%	6.3%	6.0%
Hispanic	19.1%	-	23.7%	26.5%	24.6%	23.5%	27.4%	26.9%	26.9%	35.2%
Multi-race	1.8%	-	3.5%	2.6%	5.4%	4.9%	4.7%	4.6%	4.7%	4.3%
Other	2.0%	-	1.3%	1.7%	0.4%	0.3%	0.6%	0.8%	0.3%	0.6%
White	37.2%	-	28.9%	28.1%	36.3%	38.2%	36.6%	36.4%	35.6%	25.2%
Total	**1,183**	**-**	**1,445**	**1,284**	**2,236**	**2,970**	**3,478**	**2,894**	**3,240**	**1,999**
Ethnic Minorities**	62.8%	-	71.0%	71.9%	63.6%	61.8%	63.4%	63.7%	64.5%	75.1%
# Unknown/ unreported	417	-	327	561	197	164	197	216	355	268

Note: data for 2012-2013 are not available for this table.

While most RN-to-BSN completions are female, the proportion of male completions has increased over the last ten years.

Table 18. Gender distribution of RN-to-BSN completions by academic year

	2011-2012	2012-2013*	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Male	13.4%	-	12.7%	15.2%	13.8%	15.2%	14.3%	16.3%	16.5%	15.9%
Female	86.6%	-	87.3%	84.8%	86.2%	84.8%	85.7%	83.7%	83.5%	83.2%
Other	0.0%	-	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.9%
Total	**1,570**	**-**	**1,638**	**1,358**	**2,429**	**3,125**	**3,682**	**3,093**	**3,563**	**2,188**
# Unknown/ unreported	30	-	134	121	4	9	6	17	32	79

Note: data for 2012-2013 are not available for this table.

In 2020-21, the proportion of completions 30 years of age and younger has risen to 44.9% after several years of hovering in the 18-30% range. This is much higher than it has been since 2014-15 when it 44.8% of those completing were 30 years of age and younger.

Table 19. Age distribution of RN-to-BSN completions by academic year

	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
17 – 20 years	0.1%	-	0.0%	0.0%	0.0%	0.0%	0.7%	0.0%	2.8%	0.7%
21 – 25 years	5.5%	-	9.4%	13.0%	4.4%	8.3%	8.0%	7.8%	6.6%	13.6%
26 – 30 years	15.1%	-	22.0%	31.8%	14.3%	21.2%	18.8%	18.7%	21.5%	30.5%
31 – 40 years	21.4%	-	25.2%	30.9%	22.0%	37.1%	31.3%	34.2%	33.1%	30.9%
41 – 50 years	15.6%	-	15.2%	10.5%	12.0%	21.0%	20.2%	20.9%	20.8%	14.9%
51 – 60 years	7.0%	-	6.1%	3.8%	4.9%	8.8%	10.0%	8.9%	8.4%	5.2%
61 years and older	0.6%	-	0.7%	0.1%	0.4%	0.7%	0.8%	1.0%	1.1%	0.6%
Total	**1,148**	**-**	**1,458**	**1,312**	**2,316**	**3,041**	**3,659**	**2,970**	**3,302**	**1,721**
# Unknown/ unreported	452	-	314	167	117	93	29	140	293	546

Note: data for 2012-2013 are not available for this table.

Summary of RN-to-BSN program data

The number of RN-to-BSN programs has remained the same since last year and, for the fifth year in a row, there were more private than public programs. While the number of admission spaces decreased over the last year, the number of spaces available is more than a third higher than what it was in 2011-2012. RN-to-BSN programs also enrolled and graduated many more students in 2020-21 than in 2011-12, although the number of new students enrolling, the number of applicants, and the number of applicants admitted dropped since last year.

This year, like last year, the number of admission spaces far exceeds the number of new student enrollments, with 46.8% of spaces unfilled, even discounting several online programs with no enrollment cap.

Twenty-three programs (53.5%) reported that they enrolled fewer students in 2020-2021 than in the prior year.

More than half (53.5%, n=23) of programs reported that they had enrolled *fewer* students this year compared to last year. The most common reasons given were that accepted students did not enroll and that there was a lack of qualified applicants. Several respondents (17.4%, n=4) reported that they either decreased or skipped a cohort as a result of the pandemic.

Master's Degree Programs

Master's degree programs offer post-licensure nursing education in functional areas such as nursing education and administration, as well as advanced practice nursing fields (i.e., nurse practitioner, clinical nurse specialist, nurse midwife, and nurse anesthetist).

Number of MSN Programs

In 2020-2021, 41 schools that offered a Master's degree program responded to this survey. The number of Master's degree programs has increased by five since 2011-12. Overall, the number of MSN programs has grown by approximately fourteen percent over the last decade.

More than half (51.2%) of reported programs in 2020-21 are private. Prior to 2016-17, most master's degree programs reported were in public colleges and universities.

Table 20. Number of Master's degree programs by academic year

	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Public	52.8%	52.8%	52.8%	54.3%	54.3%	50.0%	50.0%	48.6%	48.6%	48.8%
count	19	19	19	19	19	19	19	17	18	20
Private	47.2%	47.2%	47.2%	45.7%	45.7%	50.0%	50.0%	51.4%	51.4%	51.2%
count	17	17	17	16	16	19	19	18	19	21
Number of programs reporting	**36**	**36**	**36**	**35**	**35**	**38**	**38**	**35**	**37**	**41**

*One private school was inadvertently coded as public in the 2016-17 report; that designation has been corrected for this report.
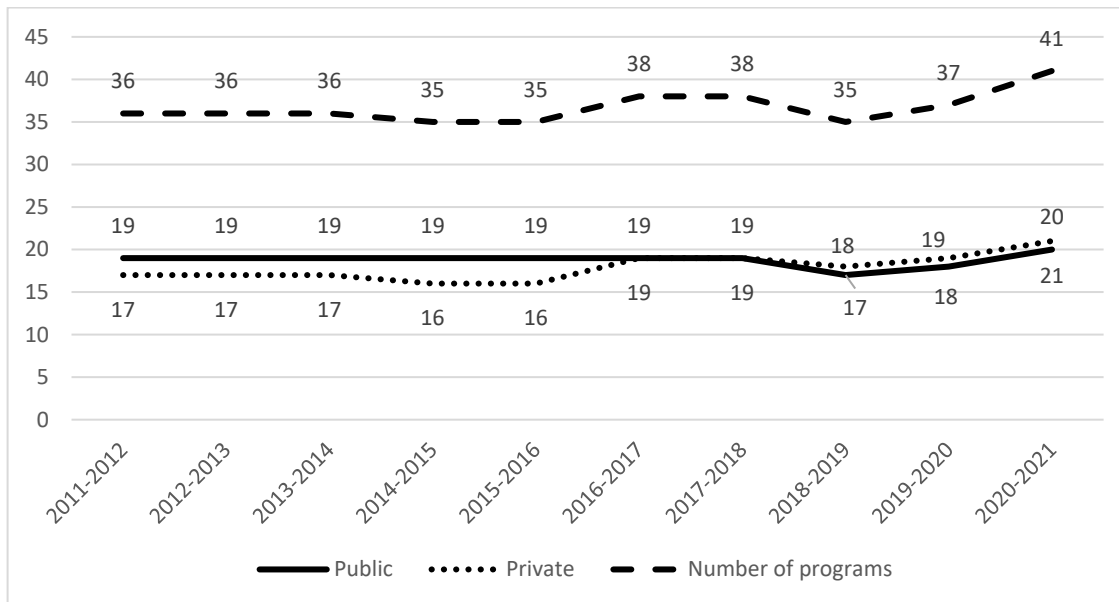
Figure 10. Number of MSN programs by academic year
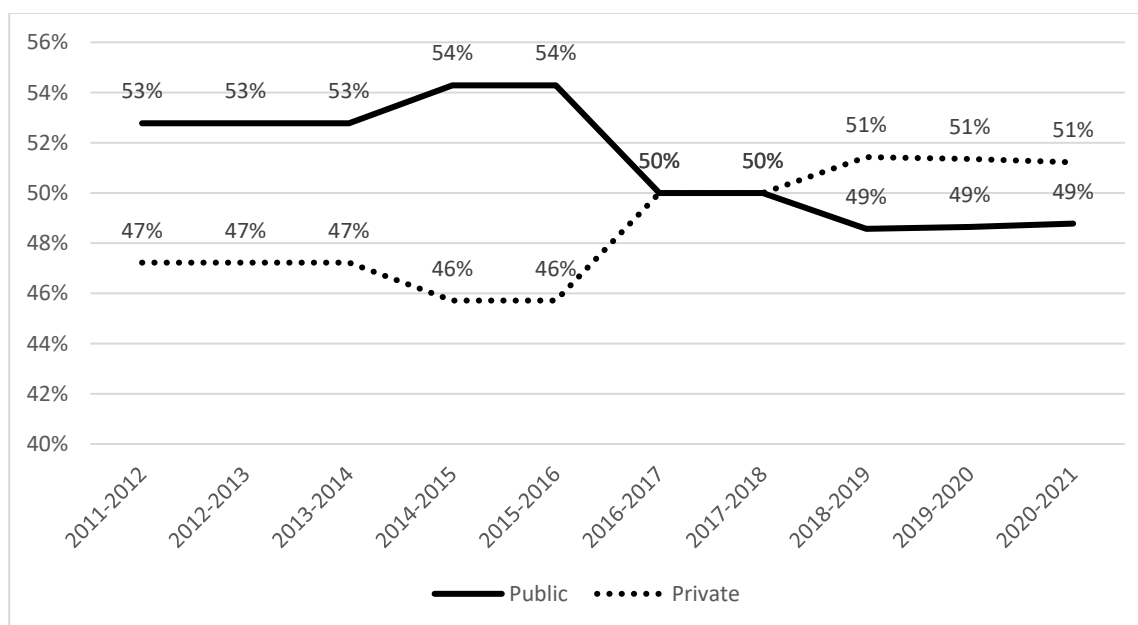
Figure 11. Percent of public and private MSN programs

MSN Program Characteristics

In 2020-21, as in all prior years, the BSN to MSN was the most commonly offered type of master's degree program. There has been an increase in the share of master's degree programs offering the BSN to MSN and a slight increase in the share offering the Diploma-RN to MSN, but a decrease in the other two categories.

Table 21. MSN program type by academic year

	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Diploma-RN to MSN	2.9%	2.9%	5.3%	10.5%	5.9%	10.5%	12.2%
ADN to MSN	20.6%	17.6%	15.8%	18.4%	20.6%	18.4%	17.1%
BSN to MSN	82.4%	79.4%	81.6%	84.2%	82.4%	86.8%	87.8%
Other	26.5%	32.4%	26.3%	18.4%	23.5%	21.1%	17.1%
Programs Responding	**34**	**34**	**38**	**38**	**34**	**38**	**41**

In 2020-21, the hybrid (online and in-person) format was the most commonly selected mode of delivery. While of full-time programming was the most commonly selected format in 2020-21, it experienced a steep decline after 2019-20. The use of distance/online education peaked in 2014-15, but has since declined. This may be due to the addition of the answer choice "hybrid on-line/in-person" in 2013-14, which may better capture the type of learning most programs were implementing, which includes online education. The use of the hybrid/in-person mode peaked in 2020-21, possibly due to health and safety concerns during the pandemic. The use of traditional and evening formats has decreased over time. Earlier modes such as contract education and extended campus are not reflected in this table since these categories were not included after 2013-14.

Table 22. Delivery formats, MSN programs, by academic year

	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Hybrid online/in-person	-	-	0.0%	40.6%	45.5%	50.0%	44.4%	59.4%	42.9%	64.9%
Full-time program	64.7%	-	57.1%	68.8%	81.8%	70.6%	72.2%	87.5%	80.0%	59.5%
Traditional program*	61.8%	-	57.1%	53.1%	39.4%	35.3%	44.4%	31.3%	25.7%	-
100% in-person program	-	-	-	-	-	-	-	-	-	40.5%
Part-time program	55.9%	-	40.0%	31.3%	27.3%	41.2%	38.9%	59.4%	57.1%	37.8%
Distance education/ online	23.5%	-	28.6%	46.9%	45.5%	32.4%	30.6%	28.1%	28.6%	29.7%
Other	2.9%	-	0.0%	0.0%	6.1%	2.9%	8.3%	3.1%	8.6%	13.5%
Weekend program	5.9%	-	20.0%	18.8%	9.1%	11.8%	16.7%	15.6%	14.3%	8.1%
Evening program	17.6%	-	28.6%	31.3%	15.2%	17.6%	11.1%	6.3%	5.7%	2.7%
Programs responding	**35**	**-**	**35**	**32**	**33**	**34**	**36**	**32**	**35**	**37**

*The wording for this answer choice was changed to "100% on-line" in 2020-21, so categories may not be directly comparable.
Note: data for 2012-2013 are not available for this table.

In 2020-2021, the majority of MSN programs (73.2%, n=30) offered a nurse practitioner track and/or some other track (65.9%, n=27). Only one MSN program offered a CRNA program.

In addition, 39.0% (n=16) of 41 MSN programs offered a post-graduate NP certificate between August 1, 2020 and July 31, 2021.

Table 23. MSN program tracks offered

	Percent	Number
Clinical Nurse Specialist (CNS)	24.4%	10
Nurse Practitioner (NP)	73.2%	30
Certified Nurse Midwife (CNM)	9.8%	4
Clinical Registered Nurse Anesthetist (CRNA)	2.4%	1
Other track	65.9%	27
Total	**100.0%**	**41**

In 2020-2021, 80.0% (n=24) of the 30 MSN programs that reported offering an NP track offered didactic courses online. In addition, 70.0% (n=21) of the 30 MSN programs that reported offering an NP track enrolled out-of-state online students between August 1, 2020 and July 31, 2021.

Over the last ten years, the majority of MSN programs were accredited by the Commission on Collegiate Nursing Education (CCNE). Accreditation from the Accreditation Commission for Education in Nursing (ACEN) has declined to zero since 2011-12. Accreditation from the Council of Nurse Anesthesia Educational Programs (COA) has also declined to zero since 2015-16, while accreditation from the Accreditation Commission for Midwifery Education (ACME) had declined to one program reporting.

In 2020-21, other certification listed in text comments included: National Certification Corporation (NCC), California Commission on Teacher Credentialing, and American Association of Critical Care Nurses (AACN).

Table 24. MSN Program accreditation

	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
ACEN (Accreditation Commission for Education in Nursing)	5.7%	-	5.7%	3.0%	2.9%	2.9%	3.0%	3.1%	0.0%	0.0%
CCNE (Commission on Collegiate Nursing Education)	88.6%	-	94.3%	93.9%	91.2%	88.6%	97.0%	90.6%	94.3%	92.1%
CNEA (Commission for Nursing Education Accreditation)	-	-	-	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Council on Accreditation of Nurse Anesthesia Educational Programs (COA)	-	-	-	-	8.8%	8.6%	6.1%	3.1%	2.9%	0.0%
Accreditation Commission for Midwifery Education (ACME)	-	-	-	-	5.9%	5.7%	3.0%	3.1%	2.9%	2.6%
Other	0.0%	-	0.0%	9.1%	8.8%	8.6%	3.0%	12.5%	2.9%	7.9%
None	8.6%	-	0.0%	0.0%	2.9%	2.9%	0.0%	0.0%	2.9%	5.3%
Programs responding	**35**	**-**	**35**	**33**	**34**	**35**	**33**	**32**	**35**	**38**

Note: data for 2012-2013 are not available for this table.

MSN Applications, Admissions, and Enrollments

In 2020-21, the number of qualified applicants was not requested, so this table has been revised to reflect the total number of applicants rather than the number of qualified applicants. The number of applicants admitted, and the number of applicants enrolled, has increased over the last decade.

The number applications received by Master's degree programs, both public and private, increased to a ten-year high of 7,367 applications in 2020-21. This is 65.8% higher than the number of applications a decade ago. Over this period, the share of applications admitted, and the share of applications enrolled, have increased.

Table 25. Applications for admission to MSN degree programs by academic year

	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Applications*	**4,443**	**-**	**4,686**	**3,938**	**4,400**	**5,972**	**5,517**	**4,244**	**6,278**	**7,367**
Admitted	2,388	-	2,427	2,273	2,979	3,223	3,827	3,217	4,597	5,295
Enrolled	2,200	2,274	2,211	2,133	2,307	2,769	3,544	3,007	3,981	5,410
# Not admitted	2,055	-	2,259	1,665	1,421	2,749	1,690	1,027	1,681	2,072
# Not enrolled	2,243	-	2,475	1,805	2,093	3,203	1,973	1,237	2,297	1,957
% Applications admitted	**53.7%**	**-**	**51.8%**	**57.7%**	**67.7%**	**54.0%**	**69.4%**	**75.8%**	**73.2%**	**71.9%**
% Applications enrolled	**49.5%**	**-**	**47.2%**	**54.2%**	**52.4%**	**46.4%**	**64.2%**	**70.9%**	**63.4%**	**73.4%**

*These data represent applications, not individuals. A change in the number of applications may not represent an equivalent change in the number of individuals applying to nursing school.

¥No postlicensure data were available for 2012-2013.
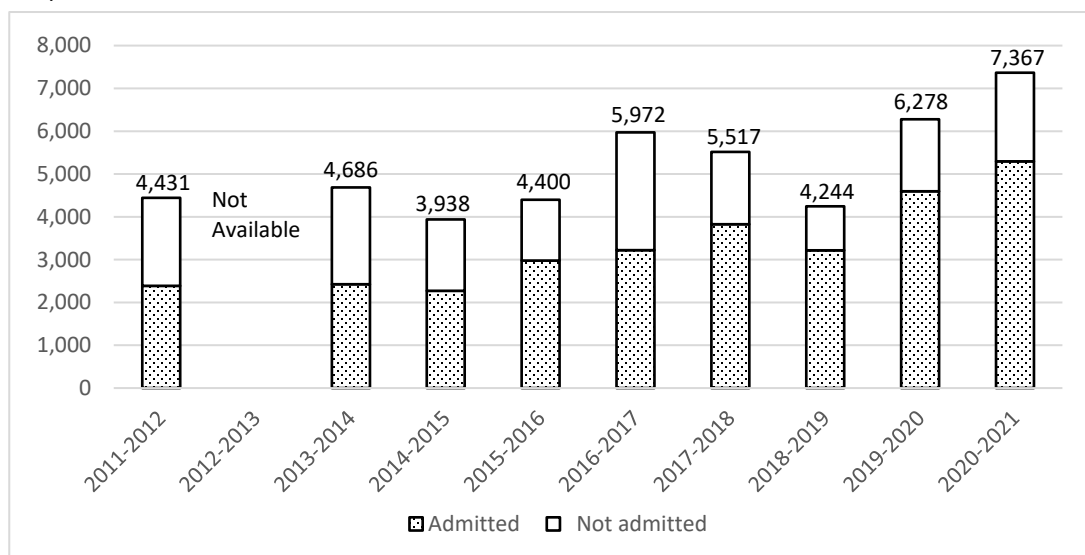
Figure 12. Applicants by academic year, MSN programs

New student enrollment has grown considerably over the past decade, reaching a 10-year high of 5,410 in 2020-21.

Admission spaces available for new student enrollments in Master's degree programs have grown by 138% (n=4,042) over the last ten years to a total of 6,980 admission spaces in 2020-21. Thirty-three of forty-one programs (80.5%) reported more admission spaces than new enrollments this year.

Table 26. Availability and utilization of MSN admission spaces by academic year

	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Spaces available*	2,938	2,472	2,856	2,440	3,969	3,464	4,434	4,029	4,740	6,980
New student enrollments	2,200	2,274	2,211	2,133	2,307	2,769	3,544	3,007	3,981	5,410
% Spaces filled with new student enrollments	**74.9%**	**92.0%**	**77.4%**	**87.4%**	**58.1%**	**79.9%**	**79.9%**	**74.6%**	**84.0%**	**77.5%**

*Two programs did not report admission spaces, and one reported a very large number intended to indicate "no cap" due to the online format of the program (999). If number of admission spaces were not provided in the data, or there was "no cap", the number of new enrollments was used as the number of available admission spaces.
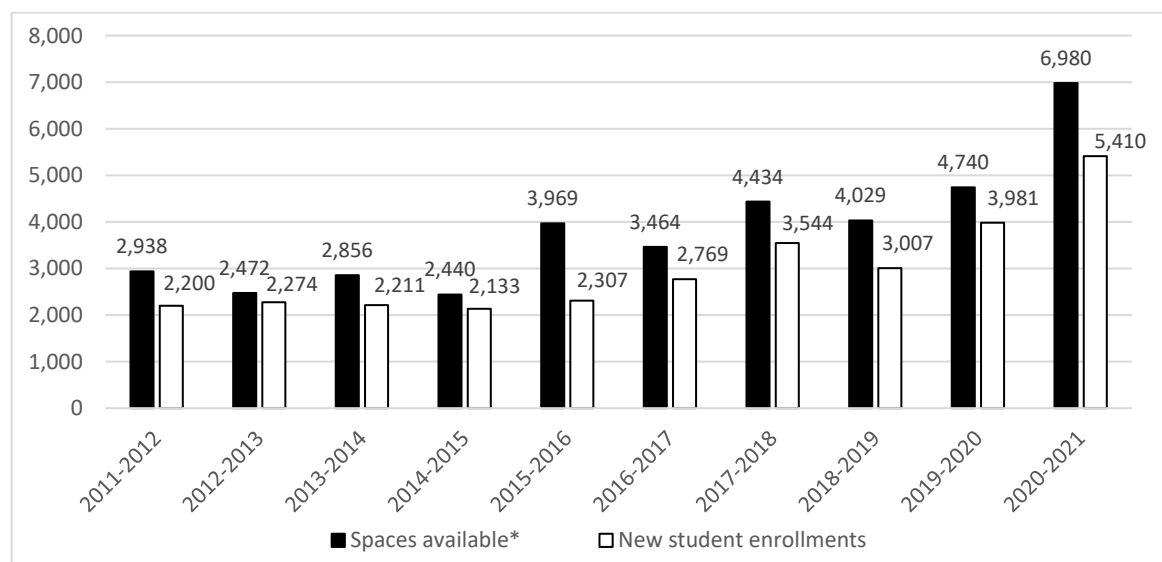
Figure 13. Availability and utilization of admission spaces, Master's degree programs, by academic year

In the past ten years, Master's degree programs have seen enrollment grow by 145.9% (n=3,210) reaching a ten-year high of 5,410 in 2020-2021. This growth is attributable to private programs, which have seen 300.1% growth (n=3,352) in new student enrollments since 2011-2012. In contrast, public schools saw a 13.1% decrease in new enrollments (n=142). In 2020-2021, 82.6% of new Master's degree students (n=4,469) enrolled in private programs.

Table 27. MSN new student enrollments by academic year

	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
New student enrollment	**2,200**	**2,274**	**2,211**	**2,133**	**2,307**	**2,769**	**3,544**	**3,007**	**3,981**	**5,410**
Public	1,083	1,077	1,071	909	1,001	990	924	733	801	941
Private	1,117	1,197	1,140	1,224	1,306	1,779	2,620	2,274	3,180	4,469

*One private school was inadvertently coded as public in the 2016-17 report; that designation has been corrected for this report.
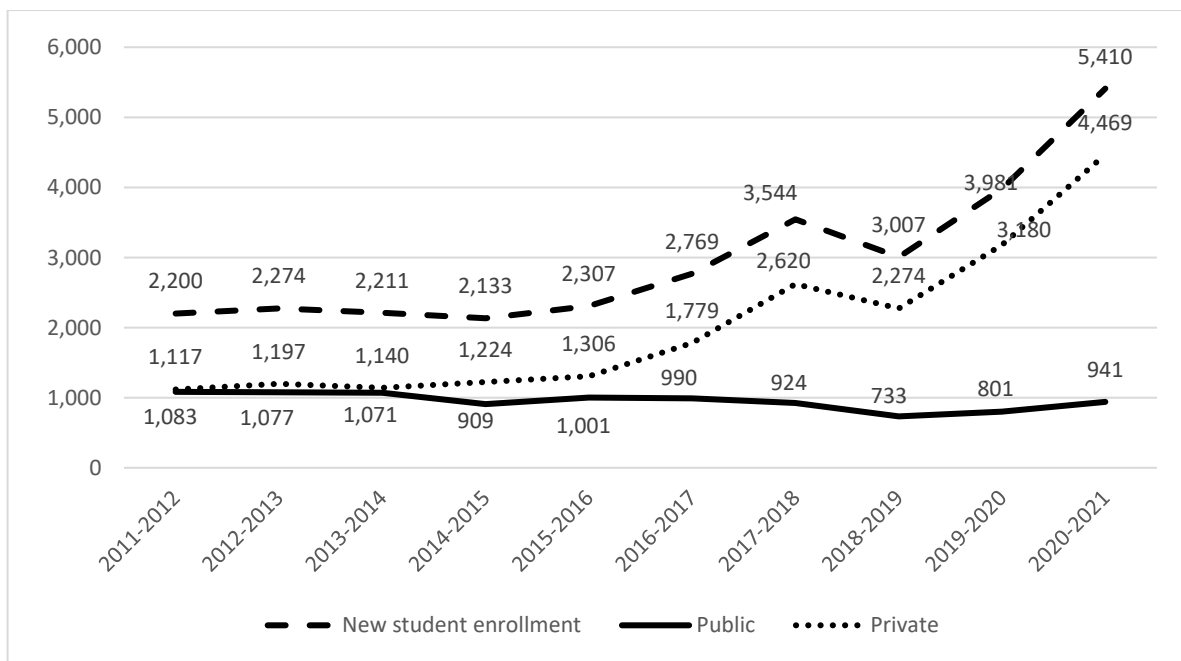
Figure 14. New student enrollment, MSN programs, by academic year

Nurse practitioners were the largest share of enrollments from Master's degree programs in 2020-2021, accounting for over a half of all enrollments except in 2018-19, when they accounted for only 35.6% of enrollments (n=1,061).

In 2020-21, this question was simplified to reflect only major APRN categories and "other". Therefore, it is not possible to trend other popular program tracks or specialty areas like nursing education or nursing administration. Amongst APRN categories, the proportion of clinical nurse specialists and certified registered nurse anesthetists have declined, while the proportion of nurse practitioners and certified nurse midwives have fluctuated.

"Other" fields made up 29.8% of completions (n=1,315), and included nursing education, nursing administration, school nurse, nurse generalist, nursing informatics, various leadership categories, and miscellaneous other categories.

Table 28. MSN new student enrollments by program track or specialty area, by academic year

	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Nurse Practitioner	50.5%	-	56.3%	61.7%	47.8%	44.0%	52.7%	35.6%	60.1%	66.9%
Nurse Generalist	3.4%	-	3.0%	4.3%	8.7%	8.3%	3.8%	12.3%	5.0%	-
Nursing Science and Healthcare Leadership	1.4%	-	0.0%	1.2%	1.3%	1.1%	0.8%	2.7%	1.2%	-
Other / unknown	8.2%	-	5.1%	1.7%	9.8%	12.4%	4.1%	3.3%	3.5%	29.8%
Nursing Education	7.7%	-	4.9%	3.7%	14.6%	16.4%	13.0%	15.3%	12.1%	-
Clinical Nurse Specialist	7.1%	-	5.2%	5.5%	4.2%	3.2%	1.1%	1.5%	2.2%	2.0%
Nursing Administration	5.1%	-	4.0%	2.3%	5.9%	3.3%	15.9%	16.2%	9.7%	-
Certified Nurse Midwife	1.2%	-	0.8%	1.0%	0.7%	0.7%	0.7%	0.5%	0.5%	0.7%
Certified Registered Nurse Anesthetist	3.9%	-	4.1%	3.8%	3.9%	2.1%	2.6%	0.9%	0.7%	0.6%
School Nursing	2.1%	-	2.2%	2.7%	1.5%	1.8%	1.8%	8.6%	2.8%	-
Clinical Nurse Leader	8.5%	-	12.7%	10.9%	0.0%	3.1%	0.0%	0.0%	0.0%	-
Case Management	0.1%	-	0.1%	0.0%	0.3%	0.0%	0.0%	0.0%	0.1%	-
Community Health/ Public Health	0.6%	-	1.0%	0.3%	0.4%	0.4%	0.6%	0.1%	0.1%	-
Informatics/ Nursing Informatics	-	-	0.7%	0.6%	0.0%	2.7%	2.5%	2.9%	2.0%	-
Ambulatory care	-	-	-	0.0%	0.6%	0.1%	0.3%	0.0%	0.0%	-
Health Policy	0.2%	-	0.0%	0.3%	0.4%	0.2%	0.1%	0.1%	0.1%	-
Total Student Completions	**2,195**	**-**	**2,149**	**2,053**	**2,253**	**2,812**	**3,084**	**2,978**	**3,987**	**4,408**
Unknown Track	5	-	62	80	54	(43)	460	29	(6)	1,002
Students enrolled in a double major	74	-	45	24	51	70	95	38	50	42

In 2020-21, respondents were asked to break out their MSN new student enrollments by demographic categories and track. Certified nurse midwife (CNM) was the track with the most ethnic minorities with half of all enrollments in the "Other Asian" category. However, nurse practitioners (NP) and "other track" enrollees were more diverse in terms of having a range of students from all listed racial and ethnic categories. Certified registered nurse anesthetist (CRNA) was the only track that was majority white (75%, n=12).

Totals for the demographic categories do not sum to the total number of new enrollments reported. Several schools neglected to provide breakdowns by track or demographic categories.

Table 29. Ethnic distribution of MSN new enrollments by track, 2020-2021

	Nurse Practitioner (NP)	Certified Nurse Midwife (CNM)	Certified Registered Nurse Anesthetist (CRNA)	Other Track
Native American	0.7%	0.0%	0.0%	0.5%
Asian/Pacific Islander subtotal	34.0%	50.0%	0.0%	29.7%
South Asian	*7.4%*	*0.0%*	*0.0%*	*0.4%*
Filipino	*9.0%*	*0.0%*	*0.0%*	*3.4%*
Hawaiian	*0.7%*	*0.0%*	*0.0%*	*2.3%*
Other Asian	*16.2%*	*50.0%*	*0.0%*	*23.2%*
Other Pacific Islander	*0.7%*	*0.0%*	*0.0%*	*0.4%*
African American	13.4%	4.2%	0.0%	8.1%
Hispanic	14.8%	12.5%	12.5%	20.4%
Multi-race	4.1%	12.5%	12.5%	5.3%
Other	0.3%	0.0%	0.0%	0.2%
White	32.7%	20.8%	75.0%	35.8%
Total	**2,702**	**24**	**16**	**1,112**
Percent ethnic minorities	67.3%	79.2%	25.0%	64.2%
Unknown/Unreported	143	1	12	127
Number of programs reporting	28	3	1	26
Programs offering this track	30	4	1	30

*Some enrollments may be double-counted because forty-two students were enrolled in more than one track.

The majority of all MSN enrollments in all tracks were female, except for CRNA enrollments. More than half of CRNA enrollees were male (53.6%, n=15).

Table 30. Gender distribution of MSN new enrollments by track, 2020-2021

	Nurse Practitioner (NP)	Certified Nurse Midwife (CNM)	Certified Registered Nurse Anesthetist (CRNA)	Other Track
Male	23.6%	0.0%	53.6%	27.4%
Female	76.4%	100.0%	46.4%	72.6%
Other	0.0%	0.0%	0.0%	0.0%
Total	**2,888**	**20**	**28**	**1,221**
Unknown/Unreported	60	11	0	408
Number of programs reporting	26	3	1	25
Programs offering this track	30	4	1	30

*Some enrollments may be double-counted because forty-two students were enrolled in more than one track.

The majority of all MSN new enrollments were over 30 years of age, and largest proportion of each group was between the ages of 31 and 40 years of age. CRNAs were the youngest group, with 46.4% (n=13) of new enrollments under the age of 31. More than a third of NP track and other track enrollments were over 40 years of age.

Table 31. Age distribution of MSN new enrollments by track, 2020-2021

	Nurse Practitioner (NP)	Certified Nurse Midwife (CNM)	Certified Registered Nurse Anesthetist (CRNA)	Other Track
17–20 years	0.0%	0.0%	0.0%	0.0%
21–25 years	3.9%	0.0%	3.6%	4.9%
26–30 years	21.3%	33.3%	42.9%	20.5%
31–40 years	39.9%	53.3%	53.6%	35.2%
41–50 years	23.7%	13.3%	0.0%	27.3%
51–60 years	10.4%	0.0%	0.0%	11.1%
61 years and older	0.8%	0.0%	0.0%	1.0%
Total	**2,599**	**15**	**28**	**981**
#Unknown/unreported	349	16	-	648
Number of programs reporting	26	3	1	25
Programs offering this track	30	4	1	30

*Some enrollments may be double-counted because forty-two students were enrolled in more than one track.

Despite the increase in enrollment numbers, twenty programs (48.8%) reported that they had enrolled fewer students in 2020-21 than in the prior year. Public programs were much more likely than private programs to report enrolling fewer students (60.0%, n=12 vs. 38.1%, n=8).

The majority reported that this resulted from accepted students not enrolling (70.0%, n=14). Fifty-percent of the programs enrolling fewer students reported "other" reasons. Respondents provided write-in descriptions of some of these reasons. The more common write-in answers over the years have been recoded and are reflected as percentages in Table 17 below and indicated with an asterisk. Examples of these write-in answers in 2020-21 include "Pandemic is a difficult time for working nurses to be in school while also taking care of family (local public-school districts with K-12 were closed nearly all academic (year)," "Competition with DNP programs," and "COVID issues."

Only one program reported skipping a cohort due to the pandemic. No other programs reported skipping or decreasing a cohort, or safety concerns related to the pandemic, as reasons for fewer students enrolling.

Table 32. Reasons for enrolling fewer MSN students by academic year

	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Accepted students did not enroll	64.7%	78.6%	75.0%	52.9%	58.3%	62.5%	70.0%
Lack of qualified applicants*	29.4%	28.6%	12.5%	47.1%	8.3%	25.0%	5.0%
Other	11.8%	28.6%	12.5%	11.8%	25.0%	18.8%	25.0%
Competition/mode*	-	-	-	-	-	6.3%	5.0%
Program revisions*	0.0%	-	6.3%	5.9%	8.3%	18.8%	15.0%
College/university /requirement to reduce enrollment	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
To reduce costs	0.0%	7.1%	0.0%	0.0%	0.0%	0.0%	0.0%
Unable to secure clinical placements for all students	5.9%	7.1%	6.3%	5.9%	8.3%	6.3%	5.0%
Lost funding	5.9%	7.1%	0.0%	0.0%	0.0%	0.0%	0.0%
Insufficient faculty	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Skipped a cohort	-	-	-	-	-	0.0%	5.0%
Decreased an admission cohort	-	-	-	-	-	6.3%	0.0%
Concerns about safety of students in clinical rotations	-	-	-	-	-	0.0%	0.0%
Concerns about safety of faculty in clinical rotations	-	-	-	-	-	0.0%	0.0%
Challenges converting courses from in-person to online modalities	-	-	-	-	-	0.0%	0.0%
Challenges converting clinicals to virtual simulation	-	-	-	-	-	0.0%	0.0%
Challenges converting clinicals to in-person simulation	-	-	-	-	-	0.0%	0.0%
Number of programs reporting	**17**	**14**	**16**	**17**	**12**	**16**	**20**

*Categories derived from text comments.

MSN Student Completions

The number of students that completed a Master's degree program in California has increased by 59.1% (n=1,117) in the last decade, reaching a ten-year high of 3,008 students in 2020-2021. Growth over this period is due to the large number of completions from private programs (164.4% growth, n=1,409). Public programs have experienced a decline of 28.2% since 2011-2012 (n= -292).

Table 33. MSN student completions by academic year

	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Public programs	1,034	933	933	911	852	870	921	630	871	742
Private programs	857	829	1,006	1,072	789	1,216	1,385	1,440	1,528	2,266
Total student completions	**1,891**	**1,762**	**1,939**	**1,983**	**1,641**	**2,086**	**2,306**	**2,070**	**2,399**	**3,008**
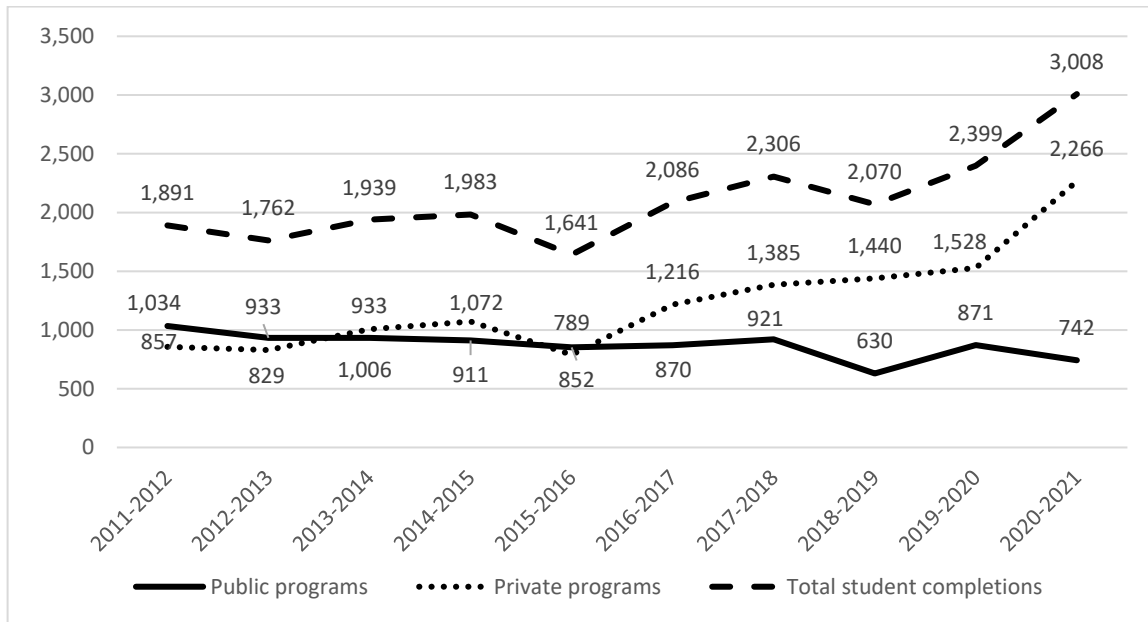
Figure 15. MSN program completions by academic year

Nurse practitioners were the largest share of graduates from Master's degree programs in 2020-2021, accounting for over a half of all graduates. The share of nurse practitioners has grown from 44.7% in 2010-2011 to 51.8% in 2020-2021. However, due to fluctuation, the overall growth over this period is slight.

This year, this question was simplified to reflect only major APRN categories and "other". Therefore, it is not possible to trend other popular program tracks or specialty areas like nursing education or nursing administration. Amongst APRN categories, the proportion of clinical nurse specialists and certified registered nurse anesthetists have declined, while the proportion of nurse practitioners and certified nurse midwives have fluctuated.

"Other" fields made up 45.6% of completions (n=1,372), and included nursing education, nursing administration, school nurse, nurse generalist, nursing informatics, various leadership categories, and miscellaneous other categories.

Table 34. MSN student completions by program track or specialty area by academic year

	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Nurse Practitioner	44.7%	56.4%	53.4%	57.8%	52.8%	51.3%	54.3%	47.2%	50.5%	51.8%
Nursing Education	8.6%	9.6%	7.8%	3.7%	13.9%	11.2%	11.0%	14.2%	12.3%	-
Nursing Administration	11.6%	7.3%	4.5%	4.2%	5.4%	5.3%	13.2%	10.0%	16.0%	-
Other specialty	0.8%	1.0%	0.1%	3.1%	9.0%	9.4%	5.9%	6.3%	4.9%	45.6%
Nurse Generalist	1.2%	0.2%	1.8%	2.8%	3.7%	1.7%	4.3%	5.8%	4.2%	-
Certified Registered Nurse Anesthetist	3.8%	3.6%	3.9%	4.6%	5.3%	4.1%	3.0%	3.0%	3.0%	0.9%
Clinical Nurse Specialist	8.8%	8.9%	6.4%	6.7%	4.9%	3.4%	3.2%	2.0%	3.2%	2.0%
School Nurse	1.4%	1.1%	1.9%	1.9%	2.0%	1.8%	1.9%	2.0%	4.2%	-
Nursing Informatics	-	-	0.3%	0.3%	0.9%	0.9%	0.8%	1.6%	1.7%	-
Nursing Science and Leadership	2.5%	2.4%	1.2%	1.4%	1.5%	1.2%	1.0%	1.5%	1.3%	-
Certified Nurse Midwife	1.2%	0.9%	0.9%	1.1%	1.1%	0.5%	0.6%	0.9%	0.5%	1.1%
Community Health/ public Health	0.5%	0.7%	1.0%	0.7%	1.0%	0.8%	0.2%	0.5%	0.2%	-
Case Management	2.2%	2.3%	2.2%	2.5%	0.1%	0.0%	0.1%	0.3%	0.0%	-
Ambulatory Care	2.2%	0.0%	1.9%	0.0%	0.6%	0.4%	0.3%	0.3%	0.1%	-
Clinical Nurse Leader	10.4%	7.9%	9.4%	9.0%	0.1%	6.0%	0.1%	0.1%	0.0%	-
Health Policy	2.6%	0.2%	0.0%	0.2%	0.3%	0.3%	0.3%	0.1%	0.3%	-
Total Student Completions	**1,891**	**1,762**	**1,939**	**1,796**	**2,232**	**2,907**	**3,336**	**2,070**	**2,399**	**3,008**

Blank cells indicate that the information was not requested in the given year.

[1] Students who double-majored were counted in each specialty area for the first time in 2008-09. Therefore, each student who completed a Master's degree program may be represented in multiple categories.

¥ This answer option was inadvertently dropped from the 2014-2015 survey.

In 2020-21, respondents were asked to break out their MSN student completions by demographic categories and track. Totals for the demographic categories do not sum to the total number of completions reported. Several schools neglected to provide breakdowns by track or demographic categories.

Nurse practitioner (NP) was the track with the largest share of ethnic minorities at 69.8% (n=1,014). Certified registered nurse anesthetist (CRNA) was the track with the smallest percentage of ethnic minorities (57.7%).

Table 35. Ethnic distribution of MSN completions by track, 2020-2021

	Nurse Practitioner (NP)	Certified Nurse Midwife (CNM)	Certified Registered Nurse Anesthetist (CRNA)	Other Track
Native American	0.6%	0.0%	0.0%	1.1%
Asian/Pacific Islander subtotal	37.3%	40.0%	34.6%	27.2%
South Asian	*5.0%*	*13.3%*	*34.6%*	*0.1%*
Filipino	*4.8%*	*0.0%*	*0.0%*	*1.4%*
Hawaiian	*1.5%*	*0.0%*	*0.0%*	*2.3%*
Other Asian	*25.0%*	*26.7%*	*0.0%*	*23.0%*
Other Pacific Islander	*1.1%*	*0.0%*	*0.0%*	*0.4%*
African American	13.1%	13.3%	7.7%	8.0%
Hispanic	16.1%	6.7%	15.4%	18.8%
Multi-race	1.8%	3.3%	0.0%	2.0%
Other	1.0%	0.0%	0.0%	0.8%
White	30.2%	36.7%	42.3%	42.1%
Total	**1,452**	**30**	**26**	**1,139**
Percent ethnic minorities	69.8%	63.3%	57.7%	57.9%
Unknown/Unreported	108	4	1	227
Number of programs reporting	27	4	1	30
Programs offering this track	30	3	1	30

*Some completions may be double-counted because sixty-one students completed more than one track.

The majority of completions in each track was female. However, the CRNA track had the greatest share of male completions at 34.6% (n=9) while the CNM track had the fewest (3.0%, n=1).

Table 36. Gender distribution of MSN completions by track, 2020-2021

	Nurse Practitioner (NP)	Certified Nurse Midwife (CNM)	Certified Registered Nurse Anesthetist (CRNA)	Other Track
Male	18.4%	3.0%	34.6%	15.1%
Female	81.6%	97.0%	65.4%	84.9%
Other	0.0%	0.0%	0.0%	0.0%
Total	**1,518**	**33**	**26**	**1,241**
Unknown/Unreported	42	1	1	125
Number of programs reporting	27	3	1	30
Programs offering this track	30	4	1	30

*Some completions may be double-counted because sixty-one students completed more than one track.

The largest share of NP (68.1%, n=895), CRNA (81.5%, n=22), and "Other Track" (81.5%, n=862) completions were between 31 and 50 years of age. The largest share of CNM completions (70.0%, n=21) were between 26 and 40 years of age.

Table 37. Age distribution of MSN completions by track, 2020-2021

	Nurse Practitioner (NP)	Certified Nurse Midwife (CNM)	Certified Registered Nurse Anesthetist (CRNA)	Other Track
17–20 years	0.0%	0.0%	0.0%	0.0%
21–25 years	0.8%	0.0%	0.0%	0.7%
26–30 years	20.2%	36.7%	18.5%	14.3%
31–40 years	43.3%	33.3%	74.1%	41.0%
41–50 years	24.7%	23.3%	7.4%	29.7%
51–60 years	10.2%	6.7%	0.0%	12.7%
61 years and older	0.7%	0.0%	0.0%	1.6%
Total	**1,315**	**30**	**27**	**1,220**
#Unknown/unreported	245	4	-	147
Number of programs reporting	26	3	1	25
Programs offering this track	30	4	1	30

*Some completions may be double-counted because sixty-one students completed more than one track.

Individual/family nursing is the most common specialty area for nurse practitioners (NPs), with 68.9% (n=1,074) of NPs graduating in this specialty area in 2020-2021. Other common specialty areas in 2020-2021 included psychiatry/mental health (8.7%, n=135), and adult/gerontology acute care (5.8%, n=90).

In 2020-21, "other" specialties described by respondents included "Peds Acute Care and Primary Care NP "(n=16), "Oncology NP Post-Master's Certificate" (n=1), "Adult-Gero Primary Care Occupational/Environmental Health NP" (n=4), and "FNP + School Nurse" (n=1).

Table 38. MSN student completions by nurse practitioner specialty, by academic year

	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Acute care	6.2%	7.1%	-	-	-	-	-	-	-	-
Adult	7.1%	6.0%	-	-	-	-	-	-	-	-
Family	67.2%	70.9%	-	-	-	-	-	-	-	-
Individual/Family	-	-	66.9%	75.0%	64.5%	64.0%	68.2%	71.9%	68.5%	68.9%
Gerontology	1.7%	1.5%	-	-	-	-	-	-	-	-
Adult/ Gerontology primary	-	-	10.8%	10.3%	12.0%	8.8%	7.6%	8.1%	5.9%	4.5%
Adult/ Gerontology acute	-	-	6.2%	5.3%	6.7%	9.3%	8.6%	6.5%	7.8%	5.8%
Neonatal	1.2%	0.0%	0.2%	0.0%	0.0%	0.1%	0.1%	0.2%	0.5%	0.1%
Occupational health*	0.6%	0.2%	-	-	-	0.2%	0.5%	0.0%	0.1%	-
Pediatric	6.2%	4.2%	-	-	-	-	-	-	-	-
Pediatric primary	-	-	5.3%	5.3%	3.6%	3.0%	3.1%	2.4%	4.5%	1.1%
Pediatric acute	-	-	1.5%	1.8%	1.7%	1.8%	1.0%	1.3%	1.7%	0.7%
Psychiatric/mental health	4.6%	3.4%	4.6%	3.4%	6.5%	6.8%	6.2%	7.3%	7.7%	8.7%
Women's health	3.0%	3.6%	3.3%	2.8%	3.2%	2.1%	2.4%	2.0%	2.7%	1.1%
Other	2.4%	2.9%	1.2%	1.1%	1.7%	0.0%	0.7%	0.3%	0.6%	9.2%
Total Number of Nurse Practitioners¥	**845**	**994**	**1,035**	**1,015**	**866**	**1,070**	**1,252**	**978**	**1,211**	**1,558**

Note: Response categories were modified in 2013-2014.

*This category was on the survey up until 2011-2012. After that time, percentages were from text comments as necessary.

In 2020-2021, most (90.0%, n=27) of the 30 MSN programs with NP tracks prepared NP graduates to take a national certification exam, and most (86.7%, n=26) officially tracked the success rate of graduates on the certification exam(s) for NPs. 16 of the 30

Summary of MSN program data

There was an increase in the number of master's programs over the last year, from 37 programs in 2019-20 to 41 programs in 2020-21. One public MSN programs reported data *this year* that did not report last year, as did three private MSN programs. Growth in the number admission spaces (138%), and new student enrollments (146%) over the last ten years has been driven by the inclusion of large private programs, some of them online programs. Enrollments in public programs have declined 13% over the last decade while enrollments in private programs have increased by 300%.

In 2020-21, master's programs received 7,367 applications for 6,980 admission spaces, although it is not known if students whose applications were rejected by one school were admitted to a different school. This year, like last year, the number of admission spaces exceeded the number of new student enrollments, with 22.5% of spaces left unfilled.

Despite the number of applications, 49% of programs noted that they had enrolled *fewer* students than they had the prior year, with the most common reason being that accepted students did not enroll. While the pandemic was mentioned a few times in text comments describing "other" reasons for decreased enrollment in 2020-21, few respondents selected any of the series of pandemic-related response categories added this year, although one program noted skipping a cohort due to the pandemic.

The number of students that completed MSN programs has grown by 59%. The number of completions (3,008) reached a ten-year high.

Nurse Practitioner (NP) continues to be the most common specialty for students completing a Master's degree, making over half of all completions. In 2020-21, more than two-thirds (68.9%) of graduating NPs specialized in individual/family nursing.

Doctoral Programs

Number of Doctoral Programs

The number of schools offering Doctoral nursing programs in California (affiliated with BRN-approved pre-licensure programs) increased by 80.0% (n=8) over the last decade. In 2020-21, there were 18 schools with nursing Doctoral programs in California. Two schools reported new DNP programs in 2020-21, one public and one private, and one public school that reported a DNP program last year did not report a program this year.

In 2019-20, and 2020-21, schools were asked to break their Doctoral programs out by Doctorate of Nursing Practice (DNP) and research-based Doctoral programs (PhD). If a school had both a DNP and a PhD, they are counted as having just one Doctoral program for the purpose of continuity for this table. Schools reported 17 DNP and seven PhD Doctoral tracks in 2020-21. Six schools had both a DNP and a nursing PhD, eleven schools had just a DNP, and one school had just a PhD program.

More than half of the Doctoral programs reported (61.1%, n=11) were in private schools. More than half of DNP programs were in private schools (64.7%, n=11), but more than half of research-based Doctoral programs (PhD) were in public schools (57.1%, n=4).

Table 39. Number schools with Doctoral degree programs by academic year

All Schools with Doctoral Programs	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Public	40.0%	50.0%	53.8%	53.9%	46.2%	43.8%	42.9%	30.8%	41.2%	38.9%
count	4	6	7	7	6	7	6	4	7	7
Private	60.0%	50.0%	46.2%	46.2%	53.8%	56.3%	57.1%	69.2%	58.8%	61.1%
count	6	6	6	6	7	9	8	9	10	11
Number of programs reporting	**10**	**12**	**13**	**13**	**13**	**16**	**14**	**13**	**17**	**18**
DNP Programs	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Public	-	-	-	-	-	-	-	-	37.5%	35.3%
count	-	-	-	-	-	-	-	-	6	6
Private	-	-	-	-	-	-	-	-	62.5%	64.7%
count	-	-	-	-	-	-	-	-	10	11
Number of programs reporting	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**16**	**17**
PhD Programs	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Public	-	-	-	-	-	-	-	-	57.1%	57.1%
count	-	-	-	-	-	-	-	-	4	4
Private	-	-	-	-	-	-	-	-	42.9%	42.9%
count	-	-	-	-	-	-	-	-	3	3
Number of programs reporting	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	**7**	**7**
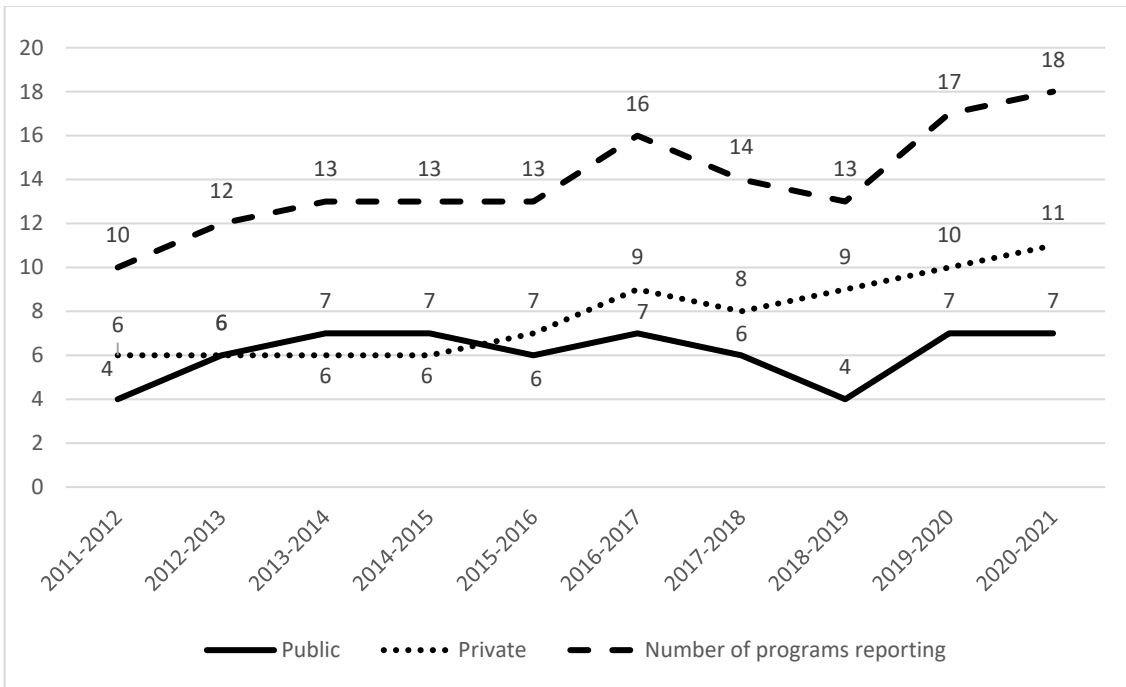
Figure 16. Number of schools with Doctoral programs by academic year
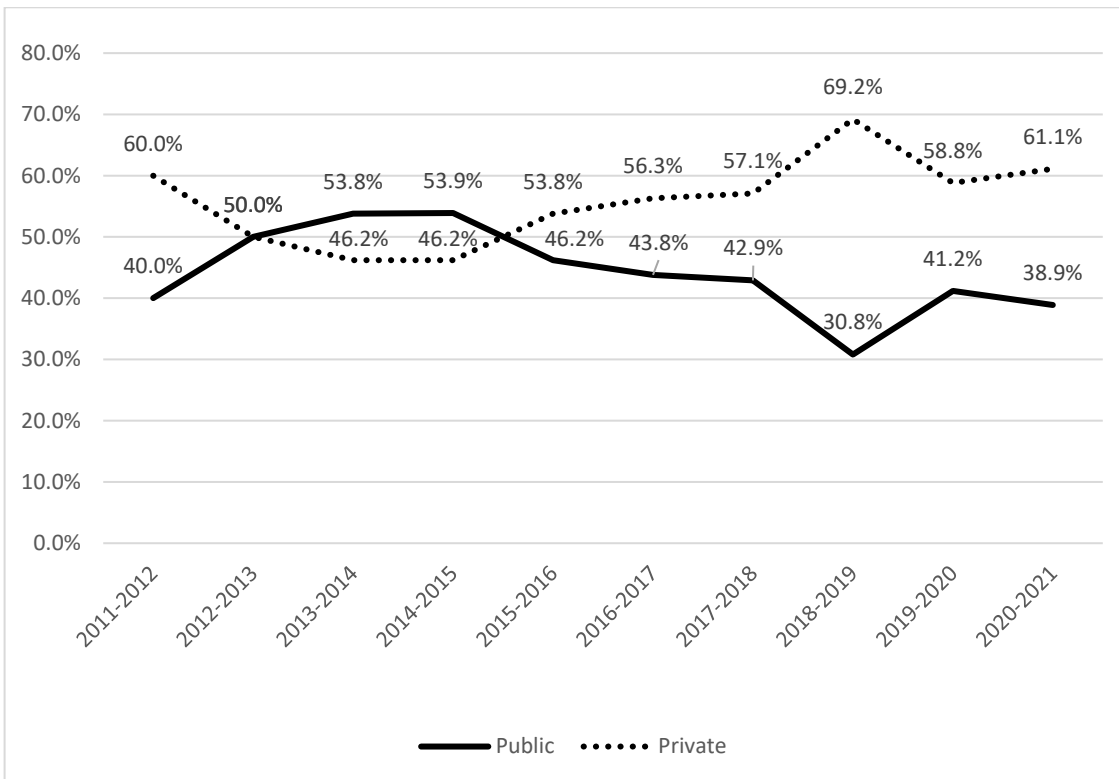
Figure 17. Schools with Doctoral programs, public and private programs by academic year

Doctoral Program Characteristics

In 2020-21, the hybrid online/in-person format was the most commonly selected mode of delivery and full-time was the most commonly selected format. The use of hybrid education peaked in 2020-21, possibly due to health and safety concerns during the pandemic, although the use of 100% online or distance education has decreased. The use of the traditional format has decreased over time. However, the wording for this answer category was changed in 2020-2021 to "100% in-person", which is not directly comparable. Earlier modes such as contract education and extended campus are not reflected in this table since these categories were not included after 2013-14.

Table 40. Delivery formats, Doctoral degree programs, by academic year

	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Full-time Program	0.0%	-	0.0%	69.2%	63.6%	71.4%	85.7%	100.0%	100.0%	76.5%
Hybrid Online/In-Person	-	-	16.7%	30.8%	27.3%	35.7%	50.0%	53.8%	52.9%	64.7%
Distance Education/ Online (100%)	20.0%	-	25.0%	30.8%	27.3%	28.6%	21.4%	46.2%	47.1%	29.4%
Part-time Program	0.0%	-	0.0%	23.1%	27.3%	42.9%	57.1%	53.8%	47.1%	29.4%
Other	0.0%	-	8.3%	7.7%	9.1%	21.4%	21.4%	15.4%	5.9%	17.6%
100% in-person	-	-	-	-	-	-	-	-	-	5.9%
Traditional Program	70.0%	-	75.0%	61.5%	36.4%	28.6%	35.7%	23.1%	29.4%	5.9%
Weekend Program	10.0%	-	0.0%	7.7%	0.0%	7.1%	7.1%	7.7%	5.9%	0.0%
Evening Program	20.0%	-	8.3%	0.0%	9.1%	0.0%	0.0%	0.0%	5.9%	-
Number of programs reporting	**10**	**-**	**12**	**13**	**11**	**14**	**14**	**13**	**17**	**17**

*The wording for this answer choice was changed to "100% in-person" in 2020-21, so categories may not be directly comparable.
The "-" indicates that this answer category was not provided in the referenced year.

In 2020-2021, the majority (54.5%, n=6) of entry-level DNP programs had nurse practitioner programs, while the majority (82.4%, n=14) of post-master's-level programs were "other" tracks.

In addition, 11.8% (n=2) of 17 DNP programs offered a post-graduate NP certificate between August 1, 2020 and July 31, 2021.

Table 41. DNP program tracks offered

	Entry-Level	Post-Master's-Level	Total
Clinical Nurse Specialist (CNS)	9.1%	0.0%	5.9%
Nurse Practitioner (NP)	54.5%	17.6%	41.2%
Certified Nurse Midwife (CNM)	0.0%	0.0%	0.0%
Clinical Registered Nurse Anesthetist (CRNA)	18.2%	0.0%	11.8%
Other track	18.2%	82.4%	82.4%
Total programs	**11**	**17**	**17**

In 2020-2021, 42.9% (n=3) of the seven DNP programs offering an *NP track* reported offering didactic courses online. In addition, 42.9% (n=3) of the seven doctoral programs that reported offering an NP track enrolled out-of-state online students between August 1, 2020 and July 31, 2021.

In 2019-20, and 2020-21, this question was further broken down by DNP and PhD categories within the broader umbrella of Doctoral programs.

The majority of both DNP and PhD programs indicated a full-time format in both years, although that share decreased for both in 2020-21, probably due to the COVID-19 pandemic.

Most PhD programs reported a traditional format in 2019-20, although few DNP programs did so. It is difficult to compare this category across years as the wording was changed in 2020-2021 to "100% in-person", which is not directly comparable.

The majority of DNP program types reported using a hybrid online/in-person format in both years while few PhD programs did so. The share of DNP programs using a hybrid online/in-person format increased in 2020-21.

Table 42. Delivery formats by type of Doctoral program, 2020-2021

	DNP		PhD	
	2019-2020	2020-2021	2019-2020	2020-2021
100% In-person	-	6.3%	-	0.0%
Traditional Program	12.5%	-	71.4%	-
Distance Education/ Online (100%)	50.0%	31.3%	0.0%	14.3%
Evening Program	0.0%	-	14.3%	-
Part-time Program	43.8%	31.3%	28.6%	14.3%
Weekend Program	6.3%	0.0%	0.0%	0.0%
Other	6.3%	12.5%	0.0%	14.3%
Hybrid Online/In-Person	56.3%	68.8%	14.3%	14.3%
Full-time Program	93.8%	75.0%	100.0%	71.4%
Number of programs	**16**	**16**	**7**	**7**

*The wording for this answer choice was changed to "100% in-person" in 2020-21, so categories may not be directly comparable.
The "-" indicates that this answer category was not provided in the referenced year.
Answer categories do not sum to 100% because programs can select more than one delivery format or mode. Fourteen programs listed both full-time and part-time as delivery formats.

Doctoral Applications, Admissions, and Enrollments

In 2020-21 Doctoral programs received 1,429 applications to their programs—a slight decline from last year's ten-year high of 1,538, but more than three times the number of applications in 2011-12. Of these 1,429 applications, 44.6% were accepted for admission, hence 32.1% of all applications were enrolled. This is the lowest proportion of applicants admitted or enrolled in the last ten years. PhD applicants were more likely to be admitted and enrolled than DNP applicants.

In 2020-21, the number of qualified applicants was not requested, so this table has been revised to reflect the total number of applicants rather than the number of qualified applicants.

The number of applicants to Doctoral programs has grown by 226% (n=991) since 2011-12, much higher than the growth in the number of admitted applications (125%, n=638), and enrollments (126%, n=458).

Table 43. Applications for admission to Doctoral programs by academic year

All Doctoral Programs	2011-2012	2012-2013¥	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Applications*	**438**	**NA**	**449**	**441**	**550**	**602**	**803**	**960**	**1,538**	**1,429**
Admitted	284	NA	244	299	321	372	469	656	773	638
New enrollments	203	NA	230	218	236	290	358	413	614	458
# Not admitted	154	NA	205	142	229	230	334	304	765	791
# Not enrolled	235	NA	219	223	314	312	445	547	924	971
% Applications *admitted*	**64.8%**	**NA**	**54.3%**	**67.8%**	**58.4%**	**61.8%**	**58.4%**	**68.3%**	**50.3%**	**44.6%**
% Applications *enrolled*	**46.3%**	**NA**	**51.2%**	**49.4%**	**42.9%**	**48.2%**	**44.6%**	**43.0%**	**39.9%**	**32.1%**
DNP Programs	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Applications*	-	-	-	-	-	-	-	-	**1,411**	**1,297**
Admitted	-	-	-	-	-	-	-	-	706	576
New enrollments	-	-	-	-	-	-	-	-	556	413
# Not admitted	-	-	-	-	-	-	-	-	705	721
# Not enrolled	-	-	-	-	-	-	-	-	855	721
% Applications *admitted*	-	-	-	-	-	-	-	-	**50.0%**	**44.4%**
% Applications *enrolled*	-	-	-	-	-	-	-	-	**39.4%**	**31.8%**
PhD Programs	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Applications*	-	-	-	-	-	-	-	-	**127**	**132**
Admitted	-	-	-	-	-	-	-	-	67	62
New enrollments	-	-	-	-	-	-	-	-	58	51
# Not admitted	-	-	-	-	-	-	-	-	60	70
# Not enrolled	-	-	-	-	-	-	-	-	69	81
% Applications *admitted*	-	-	-	-	-	-	-	-	**52.8%**	**47.0%**
% Applications *enrolled*	-	-	-	-	-	-	-	-	**45.7%**	**38.6%**

*These data represent applications, not individuals. A change in the number of applications may not represent an equivalent change in the number of individuals applying to nursing school.

¥No postlicensure data were available for 2012-2013.
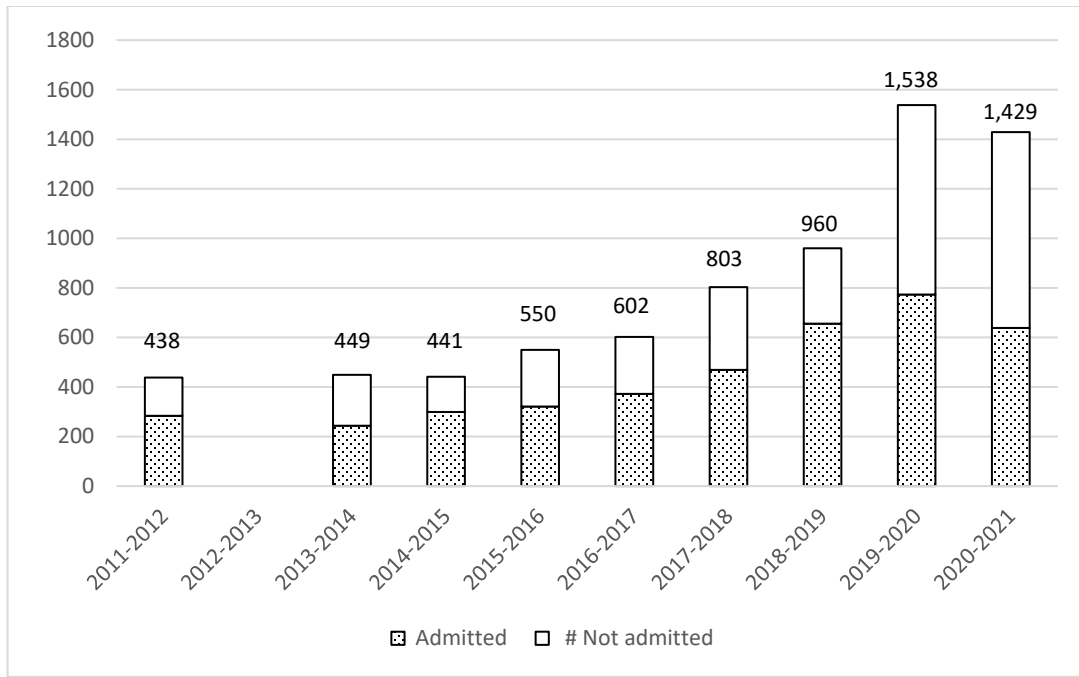
Figure 18. Applicants by academic year, Doctoral programs

Admission spaces available for new student enrollments in Doctoral programs have tripled in the last decade, from 203 in 2011-2012 to 639 in 2020-21.

Starting in 2012-2013, there have been more admission spaces available than students enrolled in Doctoral programs. In 2020-21, there were 175 unfilled spaces reported. While 74.1% (n=413) of the DNP spaces were filled, only 62.2% (n=51) of PhD spaces were filled.

Table 44. Availability and utilization of Doctoral admission spaces by academic year

	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Spaces available*	203	362	372	320	368	394	487	645	836	639
DNP spaces	-	-	-	-	-	-	-	-	738	557
PhD spaces	-	-	-	-	-	-	-	-	98	82
New student enrollments	227	314	230	198	236	290	358	413	614	464
DNP enrollments	-	-	-	-	-	-	-	-	556	413
PhD enrollments	-	-	-	-	-	-	-	-	58	51
% Doctoral spaces filled with new student enrollments	111.8%	86.7%	61.8%	61.9%	64.1%	73.6%	73.5%	64.0%	73.4%	72.6%
% DNP spaces filled with new students	-	-	-	-	-	-	-	-	75.3%	74.1%
% PhD spaces filled with new students	-	-	-	-	-	-	-	-	59.2%	62.2%

*If admission spaces were not provided in the data, the number of new enrollments was used as the number of available admission spaces.
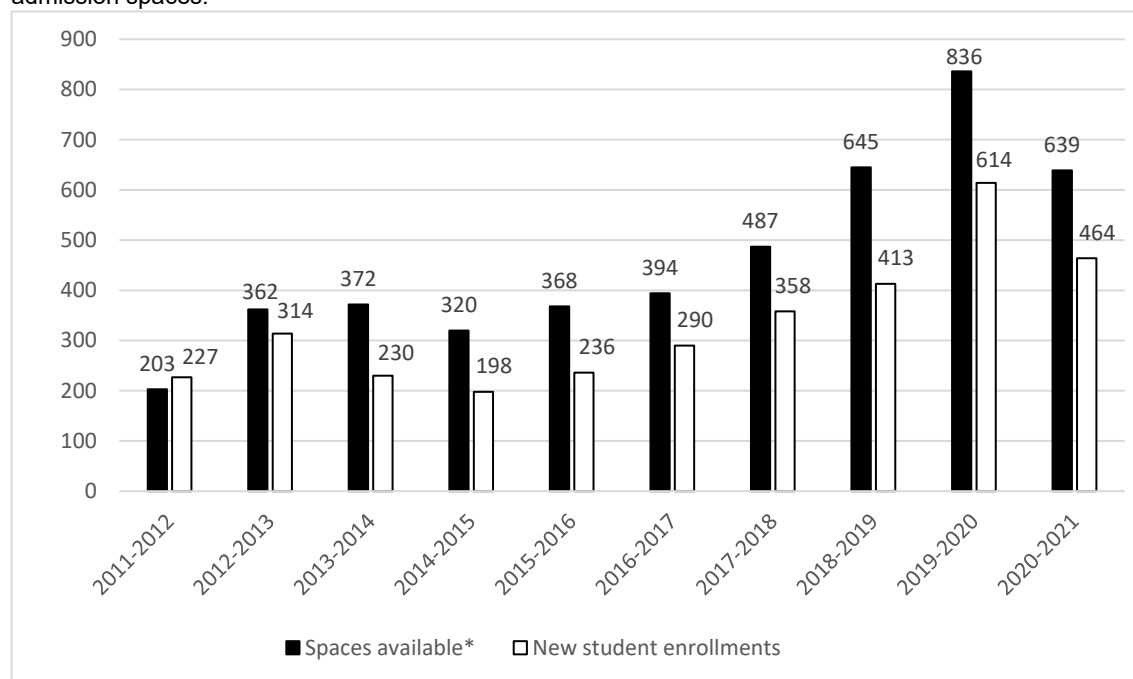
Figure 19. Availability and utilization of admission spaces, Doctoral programs, by academic year

In 2020-21, new student enrollments declined from the ten-year high of 614 in 2019-20. Private program enrollments far exceeded public program enrollments, constituting 73.1% of all new enrollments. Private school Doctoral program enrollments have grown by 109.3% (n=177) since 2011-12, while public program enrollments have grown by 204.9% (n=84) in the same period.

Table 45. Doctoral new student enrollment by academic year

All Programs	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
New student enrollment	203	314	230	198	236	290	358	413	614	464
Public	41	142	93	94	99	140	136	99	182	125
Private	162	172	137	104	137	150	222	314	432	339
DNP Programs	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
New student enrollment	-	-	-	-	-	-	-	-	556	413
Public	-	-	-	-	-	-	-	-	155	97
Private	-	-	-	-	-	-	-	-	401	316
PhD Programs	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
New student enrollment	-	-	-	-	-	-	-	-	58	51
Public	-	-	-	-	-	-	-	-	27	28
Private	-	-	-	-	-	-	-	-	31	23
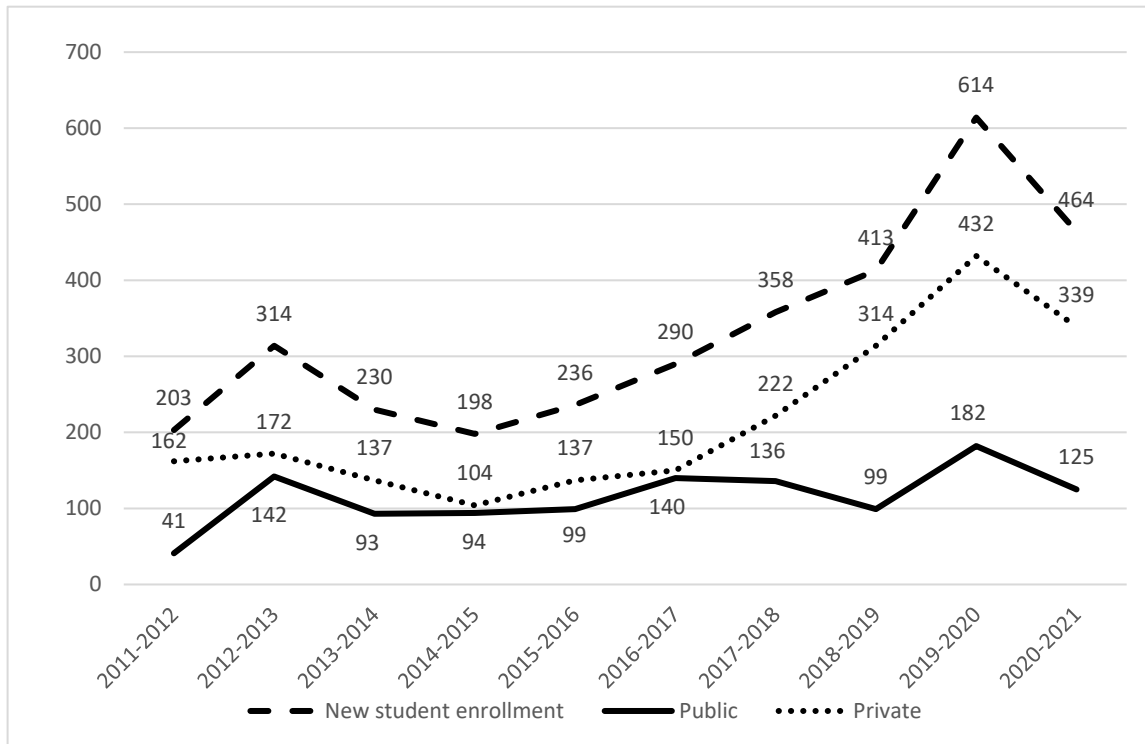
Figure 20. New student enrollment, Doctoral programs, by academic year

Six of 11 DNP programs (35.3%) and two of seven PhD programs (28.6%) reported that they had enrolled fewer students in 2020-21 than in the prior year. Five DNP programs (62.5%) reported that the main reason they enrolled fewer students was that accepted students did not enroll. One, a PhD program, reported insufficient faculty as a reason for enrolling fewer students. One DNP program skipped a cohort due to the COVID-19 pandemic. Finally, one DNP program and one PhD program reported a lack of qualified applicants as a reason for enrolling fewer students. This category was derived from text answers: "Fewer qualified applicants and fewer applications received overall", and "Shortage of applicants that were a good fit for the program."

Table 46. Reasons for enrolling fewer Doctoral students by academic year

	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Accepted students did not enroll	80.0%	75.0%	100.0%	100.0%	100.0%	85.7%	62.5%
Lack of qualified applicants*	20.0%	0.0%	33.3%	50.0%	0.0%	0.0%	25.0%
Skipped a cohort (due to COVID)	-	-	-	-	-	0.0%	12.5%
Insufficient faculty	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	12.5%
Other	20.0%	50.0%	0.0%	25.0%	33.3%	14.3%	0.0%
Number of programs reporting	**5**	**4**	**3**	**4**	**3**	**7**	**8**

*Answer category derived from text comments.

DNP Student Enrollments

In 2020-21, respondents were asked to break down their DNP enrollments by track and by whether those enrollees were entry-level or post-master's level. Total enrollment numbers broken down by track and level differed somewhat from the overall enrollment numbers reported above.

The majority of entry-level DNP enrollees were entering the NP track (77.2%, n=149), followed by "other track" (35.2%, n=49). No enrollees were listed in the CNM track, and only a few were reported in the CNS and CRNA tracks.

The majority of post-master's level DNP enrollees (60.6%, n=259) were entering some track other than CNS, NP, CNM, or CNRA. Forty-four percent of post-master's level enrollees (n=114) were entering the NP track, while no enrollees were reported in the CNS, CNM, or CRNA tracks.

Table 47. DNP new enrollments by level and track, 2020-2021

	Entry-Level DNP	Post-Master's DNP	Total	Programs offering this track
Clinical Nurse Specialist (CNS)	1.6%	0.0%	0.7%	**1**
Nurse Practitioner (NP)	77.2%	44.0%	58.2%	**5**
Certified Nurse Midwife (CNM)	0.0%	0.0%	0.0%	**0**
Certified Registered Nurse Anesthetist (CRNA)	25.4%	0.0%	10.8%	**2**
Other Track	1.0%	60.6%	35.2%	**1**
Total new enrollments	**193**	**259**	**452**	
Enrolled in a double major	10	12	22	

In 2020-21, respondents were asked to break out their DNP *entry-level* new student enrollments by demographic categories and track. Nurse practitioner was the most diverse track with 68.1% (n=98). "Other track" was the least diverse at 50% ethnic minorities (n=2).

Totals for the demographic categories do not sum to the total number of new enrollments reported. Several respondents neglected to provide breakdowns by track or demographic categories. In addition, ten students were enrolled in more than one track. The demographics of post-master's level students were not collected, hence, comparisons to prior years are not possible.

Table 48. Ethnic distribution of entry-level DNP new enrollments by track, 2020-2021

	Nurse Practitioner (NP)	Certified Nurse Midwife (CNM)	Certified Registered Nurse Anesthetist (CRNA)	Other Track
Native American	0.0%	-	0.0%	0.0%
Asian/Pacific Islander subtotal	33.3%	-	35.4%	0.0%
South Asian	*13.2%*	*-*	*2.1%*	*0.0%*
Filipino	*5.6%*	*-*	*0.0%*	*0.0%*
Hawaiian	*0.7%*	*-*	*0.0%*	*0.0%*
Other Asian	*13.9%*	*-*	*31.3%*	*0.0%*
Other Pacific Islander	*0.0%*	*-*	*2.1%*	*0.0%*
African American	12.5%	-	6.3%	50.0%
Hispanic	16.7%	-	10.4%	0.0%
Multi-race	5.6%	-	10.4%	0.0%
Other	0.0%	-	0.0%	0.0%
White	31.9%	-	37.5%	50.0%
Total	**144**	**-**	**48**	**2**
Percent ethnic minorities	68.1%	-	62.5%	50.0%
Unknown/Unreported	143		12	127
Number of programs reporting	5	-	2	1
Programs offering this track	5	-	2	1

88.6% (n=32) of NPs and 100.0% (n=2) of "Other Track" entry-level DNP enrollees were female. Over half of CRNAs enrollees were female (57.1%, n=28). The CRNA track had the largest proportion of male students (42.9%, n=21).

Table 49. Gender distribution of entry-level DNP new enrollments by track, 2020-2021

	Nurse Practitioner (NP)	Certified Nurse Midwife (CNM)	Certified Registered Nurse Anesthetist (CRNA)	Other Track
Male	10.1%	-	42.9%	0.0%
Female	88.6%	-	57.1%	100.0%
Other	1.3%	-	0.0%	0.0%
Total	**149**	**0**	**49**	**2**
Unknown/Unreported	0	-	0	0
Number of programs reporting	5	-	2	1
Programs offering this track	5	-	2	1

*Some enrollments may be double-counted because ten students were enrolled in more than one track.

About 62.3% (n=91) of NP and 100% (n=2) of "Other Track" new enrollees were older than 30 years of age. CRNAs were likely to be somewhat younger, with 53.9% age 30 or under.

Table 50. Age distribution of entry-level DNP enrollments by track, 2020-2021

	Nurse Practitioner (NP)	Certified Nurse Midwife (CNM)	Certified Registered Nurse Anesthetist (CRNA)	Other Track
17–20 years	0.0%	-	0.0%	0.0%
21–25 years	7.5%	-	4.1%	0.0%
26–30 years	30.1%	-	49.0%	0.0%
31–40 years	37.0%	-	44.9%	100.0%
41–50 years	21.2%	-	2.0%	0.0%
51–60 years	2.7%	-	0.0%	0.0%
61 years and older	1.4%	-	0.0%	0.0%
Total	**146**	**-**	**49**	**2**
#Unknown/unreported	3	-	-	-
Number of programs reporting	5	-	2	1
Programs offering this track	5	-	2	1

*Some enrollments may be double-counted because ten students were enrolled in more than one track.

PhD Student Enrollments

For the last two years, the demographics of research-based Doctoral program enrollments (PhD) have been broken out separate from DNP demographics. Over the last two years, ethnic minority students have made up at least 50% of research-based Doctoral program enrollments.

Table 51. Ethnic distribution of PhD new enrollments by academic year

	2019-2020		2020-2021	
	%	#	%	#
Native American	0.0%	0	0.0%	0
Asian/Pacific Islander subtotal	17.3%	9	18.0%	9
South Asian	*5.8%*	*3*	*2.0%*	*1*
Filipino	*11.5%*	*6*	*10.0%*	*5*
Hawaiian	*0.0%*	*0*	*0.0%*	*0*
Other Asian	*0.0%*	*0*	*6.0%*	*3*
Other Pacific Islander	*-*	*-*	*0.0%*	*0*
African American	19.2%	10	12.0%	6
Hispanic	13.5%	7	12.0%	6
Multi-race	1.9%	1	2.0%	1
Other	0.0%	0	6.0%	3
White	48.1%	25	50.0%	25
Total	**100.0%**	**52**	**100.0%**	**50**
Percent ethnic minorities	51.9%	27	50.0%	25
Unknown/Unreported		6		1

Female students have made up the majority of new PhD enrollments in both of the last two years, although male students make up sizable minorities.

Table 52. Gender distribution of PhD new enrollments by academic year

	2019-2020		2020-2021	
	%	#	%	#
Male	25.9%	15	15.7%	8
Female	74.1%	43	84.3%	43
Other	0.0%	0	0.0%	0
Total	**100.0%**	**58**	**100.0%**	**51**
# Unknown/ unreported		0		0

The majority of PhD new enrollments has been under 31 years of age in both of the last two years.

Table 53. Age distribution of PhD new enrollments by academic year

	2019-2020		2020-2021	
	%	#	%	#
17 – 20 years	0.0%	0	0.0%	0
21 – 25 years	0.0%	0	3.9%	2
26 – 30 years	15.5%	9	3.9%	2
31 – 40 years	32.8%	19	25.5%	13
41 – 50 years	25.9%	15	33.3%	17
51 – 60 years	10.3%	6	9.8%	5
61 years and older	0.0%	0	2.0%	1
Total	**15.5%**	**49**	**7.8%**	**40**
# Unknown/ unreported		9		11

Doctoral Student Completions

The number of students that completed a nursing Doctoral program in California increased almost five-fold in the past ten years, from 84 in 2011-12 to 415 in 2020-21, which was a ten-year high.

Private program graduates made up 76.6% of all graduates in 2020-21. While private program graduates made up 80.7% of DNP program graduates, they were only 44.7% of PhD program graduates.

Graduates of DNP programs made up 88.7% (n=368) of all graduates in 2020-21, and graduates of PhD programs made up 11.3% (n=47).

Table 54. Student completions, Doctoral programs, by academic year

All Programs	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Public programs	23	21	90	141	97	58	75	83	69	97
Private programs	61	105	96	101	79	113	110	196	246	318
Total student completions	**84**	**126**	**186**	**242**	**176**	**171**	**185**	**279**	**315**	**415**
DNP Programs	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Public programs	-	-	-	-	-	-	-	-	49	71
Private programs	-	-	-	-	-	-	-	-	227	297
Total student completions	-	-	-	-	-	-	-	-	**276**	**368**
PhD Programs	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Public programs	-	-	-	-	-	-	-	-	20	26
Private programs	-	-	-	-	-	-	-	-	19	21
Total student completions	-	-	-	-	-	-	-	-	**39**	**47**
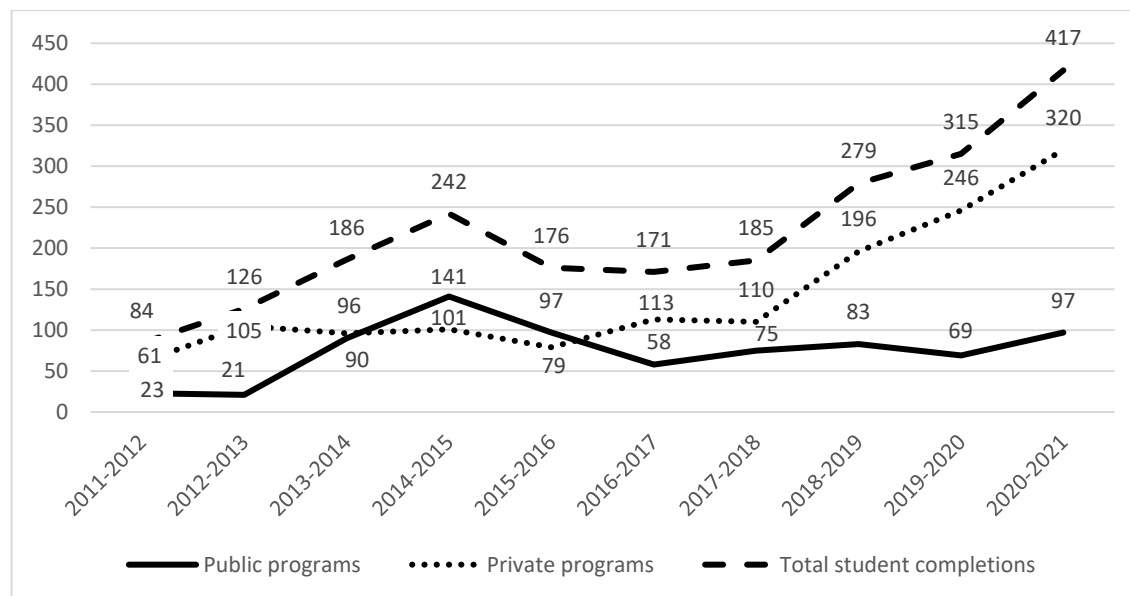
Figure 21. Doctoral program completions by academic year

DNP Student Completions

In 2020-21, respondents were asked to break down their DNP completions by track and by whether those completions were entry-level or post-master's level. Total completion numbers broken down by track and level differed somewhat from the overall completion numbers reported above because some four programs gave different numbers these questions.

The majority of entry-level DNP completions were in the NP track (98.1%, n=101), followed by "other track" (1.9%, n=49). No completions were listed in the CNS, CNM, or CRNA tracks.

The majority (54.8%, n=138) of post-master's level enrollees (n=138) were entering the NP track, while no enrollees were reported in the CNS, CNM, or CRNA tracks. 45.2% (n=114) of post-master's DNP completions were in some track other than CNS, NP, CNM, or CNRA.

Table 55. DNP completions by level and track, 2020-2021

	Entry-Level DNP	Post-Master's DNP	Total	Programs offering this track
Clinical Nurse Specialist (CNS)	0.0%	0.0%	0.0%	1
Nurse Practitioner (NP)	98.1%	45.2%	60.6%	5
Certified Nurse Midwife (CNM)	0.0%	0.0%	0.0%	0
Certified Registered Nurse Anesthetist (CRNA)	0.0%	0.0%	0.0%	2
Other Track	1.9%	54.8%	39.4%	1
Total new enrollments	**103**	**252**	**355**	
Completing a double major	15	2	17	

Three of the 17 DNP programs provided a breakout of their DNP tracks that did not correspond with the total number of completes they provided, which left 13 students for whom the track was not known. This year, the questionnaire was simplified to ask about APRN track (nurse practitioner, nurse midwife, certified registered nurse anesthetist, and clinical nurse specialist). Of the remaining 355 graduates, 60.6% completed a nurse practitioner track and 39.4% completed an "other" track.

The proportion of students completing a nurse practitioner track has stayed the same over the last two years after three years of increase.

Other tracks provided in text comments included: Generalist (n=34), General Doctoral studies program (n=15), various leadership tracks (n=52) (Healthcare Leadership, Leadership, Nurse Leader, Population Health Leadership, Systems Leadership), Post-Master's DNP (n=12), no specialty track (n=15).

Table 56. DNP student completions by program track or specialty area by academic year

Track	2017-2018		2018-2019		2019-2020		2020-2021	
	Percent	Number	Percent	Number	Percent	Number	Percent	Number
Nurse Practitioner	20.1%	28	53.8%	128	61.4%	159	60.6%	215
Nurse Generalist	34.5%	48	28.6%	68	8.5%	22	-	-
Nursing Science and Healthcare Leadership	36.0%	50	10.9%	26	8.5%	22	-	-
Other / unknown	1.4%	2	4.2%	10	18.9%	49	39.4%	140
Nursing Education	0.0%	0	1.7%	4	0.0%	0	-	-
Clinical Nurse Specialist	0.7%	1	0.8%	2	0.4%	1	0.0%	0
Nursing Administration	0.0%	0	0.0%	0	0.0%	0	-	-
Certified Nurse Midwife	0.0%	0	0.0%	0	0.0%	0	0.0%	0
Certified Registered Nurse Anesthetist	0.0%	0	0.0%	0	0.0%	0	0.0%	0
School Nursing	0.0%	0	0.0%	0	0.0%	0	-	-
Clinical Nurse Leader	0.0%	0	0.0%	0	0.0%	0	-	-
Case Management	0.0%	0	0.0%	0	0.0%	0	-	-
Community Health/Public Health	0.0%	0	0.0%	0	0.0%	0	-	-
Informatics/Nursing Informatics	0.0%	0	0.0%	0	0.0%	0	-	-
Ambulatory care	0.0%	0	0.0%	0	0.0%	0	-	-
Health Policy	0.0%	0	0.0%	0	0.0%	0	-	-
Total number of completions	**100.0%**	**139**	**100.0%**	**238**	**100.0%**	**259**	**100.0%**	**355**

In 2020-2021, most (80.0%, n=4) of the 5 DNP programs with NP tracks prepared NP graduates to take a national certification exam, and most (80.0%, n=4) officially tracked the success rate of graduates on the certification exam(s) for NPs.

In 2020-21, respondents were asked to break out their DNP student completions by demographic categories and track. Totals for the demographic categories do not sum to the total number of completions reported.

67.0%% (n=65) of nurse practitioner completions were ethnic minorities as were 50.0% of "Other Track" completions (n=1).

Table 57. Ethnic distribution of entry-level DNP completions by track, 2020-2021

	Nurse Practitioner (NP)	Certified Nurse Midwife (CNM)	Certified Registered Nurse Anesthetist (CRNA)	Other Track
Native American	0.7%	-	0.0%	0.0%
Asian/Pacific Islander subtotal	34.0%	-	0.0%	50.0%
South Asian	*1.4%*	*-*	*0.0%*	*0.0%*
Filipino	*5.6%*	*-*	*0.0%*	*0.0%*
Hawaii	*0.0%*	*-*	*0.0%*	*0.0%*
Other Asian	*15.3%*	*-*	*0.0%*	*50.0%*
Other Pacific Islander	*0.7%*	*-*	*0.0%*	*0.0%*
African American	11.1%	-	0.0%	0.0%
Hispanic	9.0%	-	0.0%	0.0%
Multi-race	0.7%	-	0.0%	0.0%
Other	0.7%	-	0.0%	0.0%
White	22.2%	-	0.0%	50.0%
Total	**97**	**-**	**-**	**2**
Percent ethnic minorities	**67.0%**	**-**	**-**	**50.0%**
Unknown/ unreported	4	-	-	-
Number of programs reporting	5	-	2	1
Programs offering this track	5	-	2	1

*Some completions may be double-counted because fifteen students completed more than one track.

88.0% (n=88) of NPs and 50.0% (n=1) of "Other Track" entry-level DNP enrollees were reported to be female.

Table 58. Gender distribution of entry-level DNP completions

	Nurse Practitioner (NP)	Certified Nurse Midwife (CNM)	Certified Registered Nurse Anesthetist (CRNA)	Other Track
Male	12.0%	-	0.0%	50.0%
Female	88.0%	-	0.0%	50.0%
Other	0.0%	-	0.0%	0.0%
Total	**100**	**0**	**0**	**2**
Unknown/Unreported	1	-	-	-
Number of programs reporting	5	-	2	1
Programs offering this track	5	-	2	1

*Some completions may be double-counted because fifteen students completed more than one track.

The majority of those completing an entry-level DNP program were over thirty years of age.

Table 59. Age distribution of entry-level DNP completions by track, 2020-2021

	Nurse Practitioner (NP)	Certified Nurse Midwife (CNM)	Certified Registered Nurse Anesthetist (CRNA)	Other Track
17–20 years	0.0%	-	0.0%	0.0%
21–25 years	0.0%	-	0.0%	0.0%
26–30 years	34.1%	-	0.0%	0.0%
31–40 years	53.7%	-	0.0%	50.0%
41–50 years	9.8%	-	0.0%	0.0%
51–60 years	2.4%	-	0.0%	50.0%
61 years and older	0.0%	-	0.0%	0.0%
Total	**41**	**-**	**-**	**2**
#Unknown/unreported	60	-	-	-
Number of programs reporting	**5**	**-**	**2**	**1**
Programs offering this track	5	-	2	1

*Some completions may be double-counted because fifteen students completed more than one track.

Five programs reported 215 students who completed a Nurse Practitioner program. Of those 215 students, 51.2% (n=110) completed a psychiatry/mental health track, and 38.6% (n=83) completed an individual/family specialty track. This is the second year in a row that psychiatry/mental health completions have exceeded individual/family completions. Nearly all of the psychiatry/mental health track students were from one new program that started in 2019-2020.

In 2020-2021, the majority of *entry-level* completions were in the individual/family track (63.4%, n=64), with psychiatry/mental health a distant second at 26.7% (n=27).

Table 60. Student completions, Nurse Practitioner specialties

NP Specialty	2017-2018	2018-2019	2019-2020	2020-2021	2020-2021 Entry-Level Only
Individual/Family	53.6%	46.1%	31.4%	38.6%	63.4%
Psychiatry/Mental Health	28.6%	28.9%	47.2%	51.2%	26.7%
Pediatrics (primary)	0.0%	7.8%	5.7%	1.9%	4.0%
Adult/Gerontology (acute)	0.0%	7.0%	3.1%	2.3%	5.0%
Other	0.0%	7.0%	5.0%	5.6%	0.0%
Adult/Gerontology (primary)	17.9%	2.3%	6.9%	0.5%	1.0%
Pediatrics (acute)	0.0%	0.8%	0.6%	0.0%	0.0%
Neonatal	0.0%	0.0%	0.0%	0.0%	0.0%
Women's Health/Gender	0.0%	0.0%	0.0%	0.0%	0.0%
Total	**28**	**128**	**159**	**215**	**101**

PhD Student Completions

For the last two years, the demographics of research-based Doctoral program completions (PhD) have been broken out separate from those of DNP completions. In 2020-21, ethnic minority students made up 56.5% of research-based Doctoral program completions, whereas in 2019-20, they made up only 35.9% of those completions.

Table 61. Ethnic distribution of PhD completions by academic year

	2019-2020		2020-2021	
	%	#	%	#
Native American	5.1%	2	2.2%	1
Asian/ Pacific Islander subtotal	11.4%	5	17.9%	10
South Asian	*0.0%*	*0*	*2.2%*	*1*
Filipino	*2.6%*	*1*	*8.7%*	*4*
Hawaii	*0.0%*	*0*	*0.0%*	*0*
Other Asian	*10.3%*	*4*	*10.9%*	*5*
Other Pacific Islander	*0.0%*	*-*	*0.0%*	*0*
African American	10.3%	4	8.7%	4
Hispanic	7.7%	3	15.2%	7
Multi-race	0.0%	0	4.3%	2
Other	0.0%	0	4.3%	2
White	64.1%	25	43.5%	20
Total	**100.0%**	**39**	**100.0%**	**46**
Ethnic Minorities**	35.9%	14	56.5%	26
# Unknown/ unreported		0		1

*Postlicensure data for 2012-2013 are not currently available.

Female students have made up the majority of PhD completions in both of the last two years. However, the proportion of male completions has doubled since last year.

Table 62. Gender distribution of PhD completions by academic year

	2019-2020		2020-2021	
	%	#	%	#
Male	7.7%	3	14.9%	7
Female	92.3%	36	85.1%	40
Other	0.0%	0	0.0%	0
Total	**100.0%**	**39**	**100.0%**	**47**
# Unknown/ unreported		0		0

The majority of PhD new enrollments has been over 31 years of age in both of the last two years. In 2020-21, a third of all PhD completions were over 50 years of age.

Table 63. Age distribution of PhD completions by academic year

	2019-2020		2020-2021	
	%	#	%	#
17 – 20 years	0.0%	0	0.0%	0
21 – 25 years	0.0%	0	0.0%	0
26 – 30 years	18.4%	9	2.6%	1
31 – 40 years	38.8%	19	41.0%	16
41 – 50 years	30.6%	15	23.1%	9
51 – 60 years	12.2%	6	20.5%	8
61 years and older	0.0%	0	12.8%	5
Total	**100.0%**	**49**	**100.0%**	**39**
# Unknown/ unreported		9		8

Summary of Doctoral Program Data

This year, like last year, the survey questions on Doctoral programs were split into two separate sections to account for differences in doctorate of nursing practice (DNP) and research-based Doctoral programs (PhD).

The number of schools offering Doctoral degrees, both public and private has increased over the last ten years. Two schools reported new DNP programs in 2020-21, one public and one private, and one public school that reported a DNP program last year did not report a program this year. However, the number of students pursuing those degrees has dropped off by 29.4% over the last year after hitting a ten year high in 2019-20, likely due to the impacts of the COVID-19 pandemic. The number of available spaces reported dropped off by nearly the same amount. While the number of applications remained fairly high, a smaller proportion of those applications resulted in admission or enrollment than in prior years. Completions reached a ten-year high in both public and private programs.

Dividing the Doctoral program questions into DNP and PhD sections revealed some important differences between programs. First, there are many more DNP programs (17), enrollees (413), and graduates (368) than there are PhD programs (7), enrollees (51), and graduates (47).

This is not unique to California: nationally, there were many more DNP enrollees (39,530) than nursing PhD enrollees (4,626) in 2020, and many more DNP graduates (9,158) than nursing PhD graduates (759) in 2020. [1]

Private schools account for 61.1% of all Doctoral programs surveyed—64.7% of the DNP programs and 42.9% of the PhD programs are in private schools. Historically, private Doctoral programs have been responsible for most of the increases in new student enrollments and student completions. In 2020-2021 private programs were responsible for 73.1% of new enrollments and 76.7% of completions in Doctoral programs. It is likely that this growth is also largely driven by

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[1] Source: American Association of Colleges of Nursing, Enrollment & Graduations in Baccalaureate and Graduate Programs in Nursing (series)

increases in DNP enrollments: nationally, PhD enrollments have declined slightly while nursing PhD completions have been relatively flat for the last six years; DNP enrollments have more than doubled and DNP completions have nearly tripled.[2]

Among the PhD programs, public programs had slightly more applicants and more completions than private PhD programs. Among DNP programs, private programs clearly had the edge in all categories.

DNP programs were able to fill more available admission spaces with new enrollments (74.1%) than were PhD programs (62.2%). However, PhD programs accepted a greater share of applicants (47.0%) than did DNP programs (47.0% vs. 44.4%).

More than a third of both DNP programs (35.3%) and 28.6% PhD programs reported that they had enrolled fewer students in 2020-21 than in the prior year. The main reason they enrolled fewer students was that accepted students did not enroll, followed by lack of qualified applicants. One program reported skipping a cohort due to COVID-19.

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[2] Source: American Association of Colleges of Nursing, Enrollment & Graduations in Baccalaureate and Graduate Programs in Nursing (series)

Faculty Census Data

Faculty data were collected by school, not by degree program. Therefore, faculty data represent post-licensure programs as a whole, not a specific degree program.

On October 15, 2021, post-licensure programs reported 1,561 faculty that taught post-licensure courses; some of these faculty (360) also had a teaching role in the pre-licensure programs offered at the school. Over the last ten years, there have been fluctuations in the number of faculty teaching post-licensure students. This may be due to online programs that have large fluctuations in enrollment and hence, fluctuations in faculty numbers, from year to year. Overall, the total number of post-licensure faculty, and the number of full-time and part-time post-licensure faculty, has grown overall since 2013, largely due to the growth in the number of part-time faculty.

Many schools that offer post-licensure programs (80.0%, n=40) reported sharing some faculty with pre-licensure programs. Hence, 23.1% (n=360) of the 1,561 total post-licensure faculty reported in 2021 were also reported as pre-licensure faculty. Post-licensure nursing programs reported 35 vacant faculty positions in 2021. These vacancies represent a 2.2% faculty vacancy rate—the lowest in the last ten years.

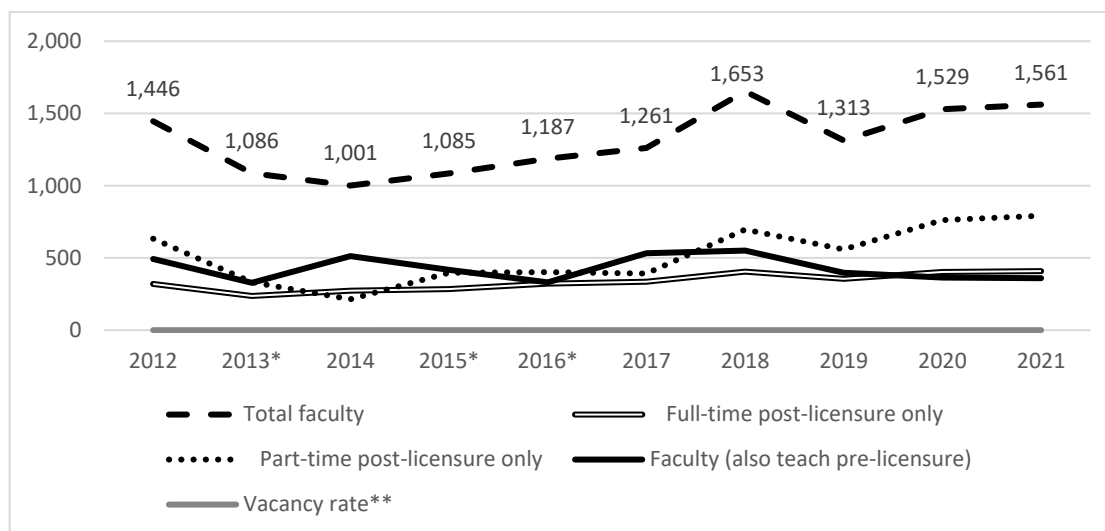### Table 64. Faculty census data by year

	2012	2013*	2014	2015*	2016*	2017	2018	2019	2020	2021
Total faculty	**1,446**	**1,086**	**1,001**	**1,085**	**1,187**	**1,261**	**1,653**	**1,313**	**1,529**	**1,561**
Faculty (post-licensure only)[1]	953	758	488	668	660	728	1,102	915	1165	1201
Full-time	320	237	274	285	322	336	405	356	403	409
Part-time	633	332	214	397	402	392	697	559	762	792
Faculty (also teach pre-licensure)	493	328	513	417	331	533	551	398	364	360
Vacancy rate**	**4.9%**	**5.0%**	**3.9%**	**13.8%**	**4.9%**	**4.4%**	**3.7%**	**5.0%**	**3.4%**	**2.2%**
Vacancies	75	57	41	173	61	58	63	69	53	35

Note: Census data represent the number of faculty on October 15th of the given year.
Vacancy rate = number of vacancies/ (total faculty + number of vacancies)
*The sum of full- and part-time faculty did not equal the total faculty reported in these years.
**One school reported 119 vacancies in 2015.

Figure 22. Faculty census data by year

Schools were asked if the school/program began hiring significantly more part-time than full-time active faculty over the past five years than previously. Twenty-five percent (25.0%, n=13) of 52 schools agreed.[3] These thirteen schools were asked to rank the reason for this shift. The top ranked reasons in 2020-21 were non-competitive salaries for full-time faculty, shortage of RNs applying for full-time faculty positions, and insufficient number of full-time faculty applicants with required credential.

Non-competitive salaries for full-time faculty has been the first or second ranked item for the six years this question has been asked. Shortage of RNs applying for full time faculty positions has been the second or third ranked reason in all six years. The only "other" reasons described for hiring more part-time faculty in 2020-21 were "smaller clinical groups require more clinical faculty," and "new program."

Table 65. Reasons for hiring more part-time faculty

	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Non-competitive salaries for full time faculty	2.3	3	2.4	1	2.5	3.4
Shortage of RNs applying for full time faculty positions	2.7	4.8	3.4	2.3	3.2	3.5
Insufficient number of full-time faculty applicants with required credential	4.3	5.8	3.9	4.5	3.6	3.6
Need for part-time faculty to teach specialty content	7.3	5	4.4	3.7	4.9	5.1
Private, state university or community college laws, rules or policies	5.7	5.4	4.4	5.3	5.5	5.7
To allow for flexibility with respect to enrollment changes	7.7	6.3	6.6	6.2	6.0	6.4
Insufficient budget to afford benefits and other costs of FT faculty	4.7	2	4.9	5.6	6.2	6.3
Need for full-time faculty to have teaching release time for scholarship, clinical practice, sabbaticals, etc.	5.7	6	6.7	5.8	6.2	6.3
Need for faculty to have time for clinical practice	4.7	5.6	6.8	7	8.1	6.7
Other	-	10	5	7	8.7	8.0
Number of schools reporting hiring more part-time faculty	**3**	**4**	**15**	**8**	**11**	**13**

*The lower the ranking, the greater the importance of the reason. (1 has the highest importance and 10 has the lowest importance.)

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[3] Twelve schools did not answer this question.

In 2020-21, schools were asked how many of their full-time post-licensure-only faculty shifted from full-time to part-time schedules during this program year. Four schools identified four faculty who had transitioned from full-time to part-time. The reasons given for this transition were returning to clinical practice (50.0%, n=2) and preparing for retirement (50.0%, n=2).

Preparing for retirement was the top reason, or tied for the top reason, for shifting to part-time four out of the past five years. Returning to clinical practice has also ranked high for each of the last three years.

Table 66. Reasons for faculty shifting from full to part-time

	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Return to clinical practice	0.0%	0.0%	60.0%	57.1%	50.0%
Preparing for retirement	50.0%	75.0%	60.0%	28.6%	50.0%
Other	0.0%	25.0%	60.0%	28.6%	0.0%
Family obligations	50.0%	0.0%	20.0%	14.3%	0.0%
Personal health issues	0.0%	0.0%	20.0%	0.0%	0.0%
Workplace climate	0.0%	0.0%	20.0%	0.0%	0.0%
Requested by program due to budgetary reason	50.0%	0.0%	0.0%	0.0%	0.0%
Workload	0.0%	25.0%	20.0%	0.0%	0.0%
Child care challenges due to childcare/ school closures	0.0%	0.0%	0.0%	0.0%	0.0%
Total number of schools reporting	**2**	**4**	**5**	**7**	**4**

Staffing and Administration

In 2020-2021, post-licensure programs were asked to report the number of clerical staff and clinical coordinators they employed, and whether these staff were adequate for program needs.

Because most schools also had approved pre-licensure programs, there is considerable overlap in staffing numbers between pre- and post-licensure programs in the following tables as many staff reported were supporting both types of programs. In addition, there is considerable overlap between post-licensure programs as most schools have more than one post-licensure program.

Clerical Staff

Three schools reported no clerical staff that supported their post-licensure programs. The remaining 49 schools reported 251 clerical staff in total: 111 supporting only post-licensure programs and 140 supporting both pre- and post-licensure programs.

Clerical staff provided a total of 6,781.5 hours of support weekly, 3,087.5 dedicated to post-licensure programs only, and an additional 3,694 split between pre- and post-licensure programs. The average number of staffing hours per staff per week was 27.0.

Table 67. Total number of clerical hours and clerical staff, 2020-2021

	Clerical Hours	Clerical Staff	Average per Staff Member
Supporting both programs	3,694.0	140	26.4
Supporting only postlicensure program	3,087.5	111	27.8
Total	**6,781.5**	**251**	**27.0**

Note: Averages in this table exclude schools with 0 clerical staff hours.
Schools with each program type generally had other postlicensure programs

The average number of clerical staff was greatest for schools with PhD and DNP programs (7.1 and 6.2 respectively) and least for schools with RN-to-BSN and MSN programs (5.2 and 5.6 staff, respectively).

Table 68. Average clerical staff for schools with each program type, 2020-2021

Program Type	Shared Clerical Staff	Postlicensure-Only Clerical Staff	All Clerical Staff
RN-to-BSN	3.6	2.1	5.2
MSN	3.5	2.5	5.6
DNP	3.4	2.8	6.2
PhD	2.9	4.3	7.1

Note: Averages in this table exclude schools with 0 clerical staff.
Schools with each program type generally had other postlicensure programs

The average number of overall clerical hours was greatest for schools with PhD and DNP programs (201.8 and 178.6 hours, respectively) and least for schools with RN-to-BSN and MSN programs (115.7 and 150.8 hours, respectively).

Table 69. Average clerical hours for schools with each program type, 2020-2021

Program Type	Shared Clerical Staff	Postlicensure-Only Clerical Staff	All Clerical Staff
RN-to-BSN	68.1	117.0	115.7
MSN	77.7	129.4	150.8
DNP	101.1	128.9	178.6
PhD	149.9	90.8	201.8

Note: Averages in this table exclude schools with 0 clerical support hours.
Schools with each program type generally had other postlicensure programs.

Schools with Doctoral programs (DNP, PhD) had more clerical hours per staff member on average than did schools with MSN and RN-to-BSN programs. Again, it is important to keep in mind that many schools have multiple program types.

The majority of clerical staffing hours in schools at Doctoral programs came from post-licensure-only clerical staff, while the majority of staffing hours at schools with RN-to-BSN and MSN programs came from staff shared between pre- and post-licensure programs. The majority of clerical *staff* in schools with PhD programs were dedicated postlicensure clerical staff, while the majority of clerical *staff* in schools with all other program types were staff shared between pre-and postlicensure programs.

Table 70. Postlicensure clerical support by programs, 2020-2021

	RN-to-BSN	MSN	DNP	PhD
Total clerical hours	5,893	6,032	3,036	1,413
Total clerical staff	219	224	105	50
Average hours per clerical staff member	**26.9**	**26.9**	**28.9**	**28.3**
Clerical Staff Shared between Pre & Postlicensure Programs				
Shared clerical hours	3,509	3,235	1,418	363
Shared clerical staff	132	126	58	20
Average hours per shared clerical staff	**26.6**	**25.7**	**24.4**	**18.2**
Percent of all clerical hours from shared clerical staff	59.5%	53.6%	46.7%	25.7%
Percent of all clerical staff that are shared staff	60.3%	56.3%	55.2%	40.0%
Postlicensure-Only Clerical Staff				
Postlicensure only clerical hours	2,384	2,797	1,618	1,050
Postlicensure only clerical staff	87	98	47	30
Average hours per postlicensure-only clerical staff	**27.4**	**28.5**	**34.4**	**35.0**
Percent of all clerical hours from postlicensure-only clerical staff	40.5%	46.4%	53.3%	74.3%
Percent of all clerical staff that are postlicensure-only clerical staff	39.7%	43.8%	44.8%	60.0%
Total number of schools with each program type	**43**	**41**	**17**	**7**

Respondents were asked to report on the adequacy of the amount of clerical support at their schools. Respondents at schools with PhD programs were more likely to report that the amount of clerical support was somewhat or very adequate (85.7%, n=6). This year, schools with DNP programs were the *least likely* to report that the amount of clerical support was somewhat or very adequate (81.3%, n=13). Overall, 83.3% (n=35) of the 42 schools that answered this question found their clinical coordination support to be "somewhat adequate" or "very adequate." No schools with postlicensure programs reported that the amount of clerical support was "very inadequate".

Table 71. Adequacy of amount of clerical support, 2020-2021

Adequacy	RN-to-BSN	MSN	DNP	PhD
Very adequate	11.8%	14.3%	18.8%	42.9%
Somewhat adequate	73.5%	68.6%	62.5%	42.9%
Somewhat inadequate	14.7%	17.1%	18.8%	14.3%
Very inadequate	0.0%	0.0%	0.0%	0.0%
Number of schools reporting	**34**	**35**	**16**	**7**

Clinical Coordinators

All but eleven schools reported clinical coordination staff. Schools reported 129 clinical coordination staff: 86 working with post-licensure students only, and 44 working with both pre-and post-licensure students. Together these 129 clinic coordination staff worked 3,384 aggregate hours per week, or an average of 26.2 hours each.

In the past, some respondents reported that some clinical coordinators were faculty who dedicated some of their time to clinical coordination, not a standalone position.

Table 72. Total number of clinical coordinator hours and staff, 2020-2021

	Coordinator Hours	Coordinator Staff	Average per Staff Member
Supporting both programs	1,143	44	26.3
Supporting only postlicensure program	2,241	86	26.2
Total	**3,384**	**129**	**26.2**

The average number of coordinator staff was greatest for schools with PhD and DNP programs (4.4 and 3.8 respectively) and least for schools with RN-to-BSN and MSN programs (3.4 and 3.2 staff, respectively).

Table 73. Average clinical coordination staff for schools with each program type, 2020-2021

Program Type	Shared Clerical Staff	Postlicensure-Only Clerical Staff	All Clerical Staff
RN-to-BSN	1.2	2.2	3.2
MSN	1.2	2.4	3.4
DNP	0.9	2.9	3.8
PhD	1.3	3.1	4.4

Note: Averages in this table exclude schools with 0 coordinator staff.
Schools with each program type generally had other postlicensure programs

The average number of overall clinical coordinator hours was greatest for schools with PhD and DNP programs (101.3 and 104.7 respectively) and least for schools with RN-to-BSN and MSN programs (89.5 and 84.0 hours, respectively).

Table 74. Average coordinator hours for schools with each program type, 2020-2021

Program Type	Shared Coordinator Staff	Postlicensure-Only Coordinator Staff	All Coordinator Staff
RN-to-BSN	43.8	70.1	84.0
MSN	45.7	73.3	89.5
DNP	52.0	77.3	101.3
PhD	73.3	73.3	104.7

Note: Averages in this table exclude schools with 0 clerical support hours.

Schools with Doctoral programs (DNP, PhD) had *fewer* clinical coordination hours *per staff member* on average than did schools with MSN and RN-to-BSN programs, keeping in mind that many schools have multiple program types.

The majority of clinical coordinator staffing hours in schools at with all program types came from postlicensure-only coordinator staff, and the majority of clinical coordination *staff* in schools with all program types were staff dedicated to postlicensure programs.

Table 75. Postlicensure clinical coordination support by programs, 2020-2021

	RN-to-BSN	MSN	DNP	PhD
Total coordinator hours	2,855	2,774	1,317	733
Total coordinator staff	109	110	53	31
Average hours per coordinator staff member	**26.2**	**25.2**	**24.8**	**23.6**
Coordinator Staff Shared between Pre & Postlicensure Programs				
Shared coordinator hours	963	869	312	220
Shared coordinator staff	37	35	12	9
Average hours per shared coordinator staff	**26.0**	**24.8**	**26.0**	**24.4**
Percent of all coordinator hours from shared coordinator staff	33.7%	31.3%	23.7%	30.0%
Percent of all coordinator staff that are shared staff	33.9%	31.8%	22.6%	29.0%
Postlicensure-Only Coordinator Staff				
Postlicensure only coordinator hours	1,892	1,905	1,005	513
Postlicensure only coordinator staff	72	75	41	22
Average hours per postlicensure-only coordinator staff	**26.3**	**25.4**	**24.5**	**23.3**
Percent of all coordinator hours from postlicensure-only coordinator staff	66.3%	68.7%	76.3%	70.0%
Percent of all coordinator staff that are postlicensure-only coordinator staff	66.1%	68.2%	77.4%	71.0%
Total number of schools with each program type	**43**	**41**	**17**	**7**

Respondents were asked to report the adequacy of the amount of clinical coordination support at their schools. Respondents at schools with PhD programs were more likely than other schools to report that the amount of clinical coordination support was adequate or very adequate (71.5%, n=5) compared to 62.1% (n=22) for schools with MSN programs. Overall, 81.8% (n=27) of the 33 schools that answered this question found their clinical coordination support to be "somewhat adequate" or "very adequate."

Table 76. Adequacy of amount of clinical coordination support, 2020-2021

Adequacy	RN-to-BSN	MSN	DNP	PhD
Very adequate	31.0%	27.6%	31.3%	28.6%
Somewhat adequate	37.9%	34.5%	37.5%	42.9%
Somewhat inadequate	13.8%	13.8%	12.5%	14.3%
Very inadequate	6.9%	3.4%	6.3%	0.0%
Number of programs reporting	**26**	**27**	**14**	**7**

APPENDICES

APPENDIX A – List of Post-Licensure Nursing Education Programs

RN-to-BSN Programs (43)

American University of Health Sciences*
Azusa Pacific University
California Baptist University
Charles R. Drew University of Medicine and
      Science
CNI College (Career Networks Institute)
Concordia University Irvine
CSU Bakersfield
CSU Channel Islands
CSU Chico
CSU Dominguez Hills
CSU East Bay
CSU Fresno
CSU Fullerton
CSU Long Beach
CSU Los Angeles
CSU Northridge
CSU Sacramento
CSU San Bernardino
CSU San Marcos
CSU Stanislaus
Glendale Career College
Gurnick Academy of Medical Arts - BSN
Holy Names University
Loma Linda University
Mount St. Mary's University AD
National University
Pacific College
Pacific Union College
Point Loma Nazarene University
Samuel Merritt University
San Diego State University
San Francisco State University
Simpson University
Sonoma State University
The Valley Foundation School of Nursing at
      San Jose State
UMass Global (Brandman)
United States University
Unitek College
University of Phoenix-SoCal
Vanguard University
Weimar University
West Coast University
Western Governors University

Master's Degree Programs (41)

American University of Health Sciences
Azusa Pacific University
California Baptist University
Charles R. Drew University of Medicine and
      Science*
Concordia University Irvine
CSU Bakersfield
CSU Channel Islands*
CSU Chico
CSU Dominguez Hills
CSU East Bay
CSU Fresno
CSU Fullerton
CSU Long Beach
CSU Los Angeles
CSU Sacramento
CSU San Bernardino
CSU San Marcos
CSU Stanislaus
Holy Names University
Loma Linda University
Mount St. Mary's University BSN
National University
Pacific College*
Point Loma Nazarene University
Samuel Merritt University
San Diego State University
San Francisco State University
Sonoma State University
The Valley Foundation School of Nursing at
      San Jose State
United States University
University of California Davis
University of California Los Angeles
University of California San Francisco
University of Phoenix-NorCal*
University of Phoenix-SoCal
University of San Diego, Hahn School of
      Nursing
University of San Francisco
Vanguard University
West Coast University
Western Governors University
Western University of Health Sciences

University of California, San Francisco

DNP Programs (17)

Azusa Pacific University
Brandman University Musco School of
     Nursing
California Baptist University
CSU Fresno
CSU Fullerton
Holy Names University*
Loma Linda University
Point Loma Nazarene University
Samuel Merritt University
The Valley Foundation School of Nursing at
     San Jose State
University of California Irvine*
University of California Los Angeles
University of California San Francisco
University of San Diego, Hahn School of
     Nursing
University of San Francisco
West Coast University
Western University of Health Sciences

PhD Programs (7)
Azusa Pacific University
Loma Linda University
University of California Davis
University of California Irvine
University of California Los Angeles
University of California San Francisco
University of San Diego, Hahn School of
     Nursing

*New program in 2020-2021

APPENDIX B – BRN Nursing Education and Workforce Advisory Committee

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