



Overview

Solving Texas' nurse workforce challenges requires innovative strategic investments in clinical training infrastructure and structural coordination between nursing school faculty and clinical care sites: hospitals, clinics, long-term care sites, and other clinical settings. It also requires investments in retaining trained nurses, steering the workforce through a generational post-pandemic shift and loss of "baby-boomer" expertise, and a reinvigorated commitment to reducing health care workplace violence.

Building on work conducted since 2021 on nursing workforce challenges, the Teaching Hospitals of Texas convened nurse executive leaders from member health systems in the summer of 2022 to review the data and research on the nurse workforce shortages and recommend strategies to increase the number of nurses, expedite timeframes for transition to independent practice, and support and retain existing nurses. Lack of clinical training capacity and clinical preceptors are identified by numerous sources as the primary obstacles to growing Texas' nurse workforce. Yet, few public investments have been made to support the critical clinical components of nurse education, retention, and workplace support.

While Senate Bill 25 (88th Legislature, regular session) included these targeted clinical grant programs to address these challenges, the programs need to be funded this legislative session.

THOT recommends the following:



1

Fund the Clinical Site Nurse Preceptor Grant Program

Why: Preceptors are hospital or other clinical site nurses who, in addition to their regular patient care responsibilities, also educate, train, demonstrate, and mentor nursing students at the bedside. The preceptor role is critical for nursing students to have full and holistic exposure to the complex clinical care environment before they become practicing nurses. With clinical training representing about one-third of nursing students' education, having an insufficient number of preceptors impedes growth of Texas' nurse pipeline.

What: Funding to support clinical site training through payment enhancements for clinical preceptors.



\$19.1 million will support a \$2 per hour preceptor differential to be implemented in fiscal year 2027 with similar annual costs thereafter.



2 Fund nursing innovation and coordination grants for clinical sites

Why: While innovation grants are currently available for nursing schools and educational programs, they are lacking for hospitals and other sites critical for clinical training, nursing practice innovation, and retention. The lack of funding hampers hospitals' and other care sites' ability to pilot and test technology, staffing and workflow innovations, and partnerships with schools of nursing, community colleges, high schools and others that could support, grow, and retain nurse workforce.

What: Two-year grants to 1) increase the nurse workforce or expedite the timeframe for nurses to enter the workforce with full, independent clinical capacity; 2) improve the nursing environment and retention; and 3) address workplace safety or other innovations to support nursing.



\$21.8 million in funding for two-year grants starting in the 2026-2027 biennium.



3 Fund clinical nurse faculty grant programs.

Why: Schools of nursing have insufficient numbers of faculty to teach all the students who are interested in nursing school. One factor is the salary gap between faculty and practicing nurses. Funding to support practicing nurses who want to teach part-time and faculty who want to work part-time in clinical settings would help address the faculty shortage and promote integration of the didactic and clinical training students need.

What: Two-year grants for clinical nurses to teach and nurse faculty to receive clinical training, if needed, as a prerequisite to working part-time in clinical settings.



\$1.55 million for part-time faculty and clinical support for faculty to staff programs.

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