South Dakota Nursing Workforce

2025 Supply and Employment Characteristics

SOUTH DAKOTA
Center *for* Nursing Workforce

Est. 1917
South Dakota
Board *of* Nursing
SDBON

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Executive Summary

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

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

The report includes findings from data gathered from each nurse license renewal application submitted to the SDBON. Similar supply reports were published biennially from 1996 to 2023. Information in this report compares current data with historical data from previous reports or with national findings on supply and demand for nurses.

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

Key Findings

Supply As of December 5, 2024, South Dakota's total nursing workforce increased by 4.1% from December 2022. The licensed practical nurse (LPN) population increased by 2.5%, registered nurse (RN) population increased by 1.3%, certified nurse midwife (CNM) by 11.5%, certified nurse practitioners (CNP) by 33.2%, and certified registered nurse anesthetists (CRNA) by 6.7%. Only clinical nurse specialist (CNS) supply decreased, 12.2%. Most CNPs, 80.3%, were licensed and certified in the population foci of family across the lifespan.

Age The average age of LPNs was 42 years old. LPNs 51 years or older comprised 29.7% of supply, a decrease of 2.3% from 2023. The average age of RNs was 44 years old, slightly younger than 44.2 in 2023. The percentage of RNs 51 years or older decreased to 31.9% from 33.3% in 2023. The average age of CNMs was 49 and the average age of CNSs was 62. A large percentage of CNMs, 25.9%, were 56 years or older and a very large percentage of CNSs, 76.7%, were 56 years or older. CNPs and CRNAs were younger, the average age of CNPs was 44 and the average age of CRNAs was 55.4.

Gender and Ethnicity Consistent with previous reports, most nurses were female and white/Caucasian. Male RNs comprised 10.5%, up from 9.9% in 2023.

Highest Level of Education Overall, 73.4% of RN respondents held a baccalaureate or higher degree. The majority of LPNs were prepared with a diploma, certificate, or associate degree and 16.2% reported they were enrolled in a program leading to an enhanced nursing degree.

Employment The majority of LPNs and RNs reported their primary place of employment and practice was in the state of South Dakota for one employer. Consistent with previous reports, a significant percentage, 90.2% of LPNs and 80.6% of RNs, reported employment in the nursing profession as full-time, part-time, or on a per diem basis. Most LPNs were employed in nursing home/extended care/assisted living facilities, 25.8%, ambulatory care settings, 25.5%, 'other' settings, 13.4%, and hospitals, 9.6%. The majority of RNs were employed in hospitals, 37.7% and ambulatory care settings, 12.8%.

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

Overview and Methods

This report focuses on supply and characteristics of nursing workforce for: *Licensed Practical Nurses (LPN), Registered Nurses (RN), Certified Nurse Midwives (CNM), Certified Nurse Practitioners (CNP), Certified Registered Nurse Anesthetists (CRNA), and Clinical Nurse Specialists (CNS).* Nursing supply is measured by the number of actively licensed nurses. Because supply can be overstated by assessing only the total number of actively licensed nurses, this report also measures the average number of hours worked in the profession, which demonstrates their level of participation in the nursing workforce and other employment characteristics of nurses. The SDCNW analyzed aggregate licensure data retrieved from the SDBON licensure system for all actively licensed nurses on December 5, 2024.

All nurses that renewed their South Dakota nursing license on a biennial basis, reactivated an inactive license, or reinstated a lapsed license were required to complete the employment data questions on a required licensure application. The employment data analyzed in this report was collected from January 1, 2023 to December 5, 2024. The number of nurses that completed renewal, reactivation, or reinstatement applications during this data collection period is shown in Table 1. Nurses that applied for an initial license by examination or a license by endorsement into South Dakota from another state did not complete the employment data questions and were not included in the response rate.

Table 1: Employment Data Collected January 1, 2023 to December 5, 2024

Licensed Nurses	Number Renewed, Reactivated, or Reinstated	Completed Data Received	Response Rate:
LPNs	2,236	2,236	100%
RNs	17,607	17,607	100%
CNMs	46	46	100%
CNPs	1,991	1,991	100%
CRNAs	491	491	100%
CNSs	40	40	100%
TOTAL	22,411	22,411	100%

Trends in Supply of South Dakota Nurses

Active Supply As of December 5, 2024 the SDBON reported 2,741 actively licensed practical nurses (LPN), 19,944 actively licensed registered nurses (RN), 58 actively licensed certified nurse midwives (CNM), 2,616 actively licensed certified nurse practitioners (CNP), 554 actively licensed certified registered nurse anesthetists (CRNA), and 43 actively licensed clinical nurse specialists (CNS). Data presented in Table 2 demonstrates a positive growth in supply of the total number of actively licensed nurses in every category with the exception of CNSs.

Table 2: Actively Licensed Nurses and Percent Change

Actively Licensed Nurses	2024	% Change*	2022	% Change*	2020
LPNs	2,741	+2.5%	2,674	+3.2%	2,591
RNs	19,944	+1.3%	19,680	+5.3%	18,693
CNMs	58	+11.5%	52	+18.2%	44
CNPs	2,616	+33.2%	1,964	+38.9%	1,414
CRNAs	554	+6.7%	519	+3.8%	500
CNSs	43	-12.2%	49	-12.5%	56
TOTAL	25,956	+4.1%	24,938	+7.0%	23,298

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

Licensed Practical Nurses

South Dakota Supply Trends

Licensure Status As of December 5, 2024, the SDBON reported 2,741 actively licensed LPNs in South Dakota's supply, Figure 1. Data revealed a gain of 67 nurses from 2022 to 2024.

As shown in Figure 2, during the data collection time period from January 1, 2023 to December 5, 2024, a total of 663 LPNs were added to South Dakota's active supply; 524 LPNs were added as new graduates and 139 by endorsement from another state. Overall, South Dakota increased supply during this time period by 67 LPNs and had a net loss of 596 LPNs.

The net loss of LPNs is consistent with findings from previous workforce reports. Reasons for the loss were due to retirement, leaving the profession, moving out of South Dakota, or inactivating the license. Many chose to inactivate their license after completing RN education and licensing as an RN or left the workforce due to the COVID-19 pandemic[2]. Additionally, South Dakota is a member of the Nurse Licensure Compact. As more states joined the compact, nurses residing in the new compact state inactivated their South Dakota license.

Figure 1: Actively Licensed LPNs
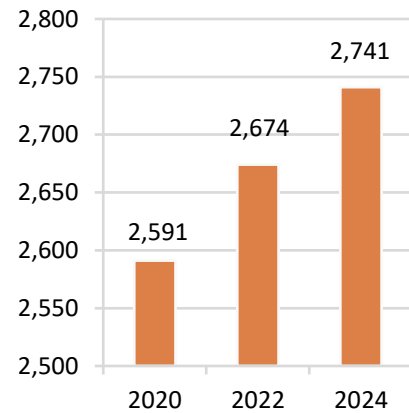
Figure 2: LPN Workforce Gains and Losses
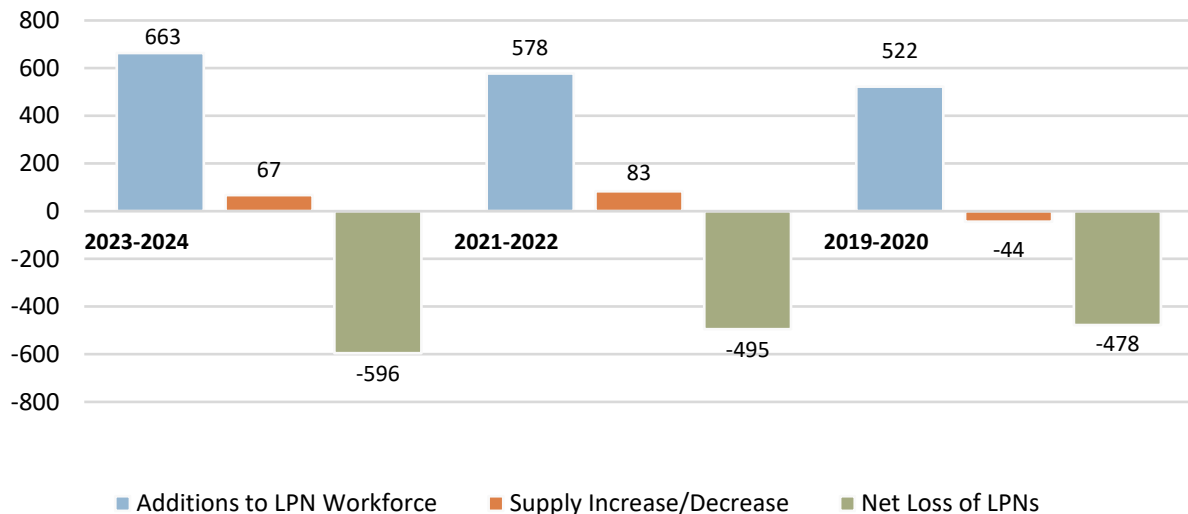
Demographics of LPN Supply

Gender Consistent with previous reports the majority, 94.7%, of actively licensed LPNs in South Dakota were female. Nationally female LPNs comprised 89.6% of the population[2].

Table 3: LPN Gender Distribution

	2024		2022		2020	
Male LPNs	145	5.3%	129	4.8%	114	4.4%
Female LPNs	2,596	94.7%	2,545	95.2%	2,477	95.6%
TOTAL	2,741	100.0%	2,674	100.0%	2,591	100.0%

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

Table 4: LPN Race/Ethnic Distribution

	American Indian/Alaska Native	Asian/Pacific Islander	Black/African American	Hispanic/ Latino	Two or More Races/Other	White/ Caucasian
U.S. Population[3]	1.3%	6.7%	13.7%	19.5%	3.1%	58.4%
U.S. LPNs[2]	1.3%	6.9%	17.6%	11.5%	8.4%	65.9%
SD Population[3]	8.5%	1.9%	2.6%	5.1%	2.8%	80.5%
SD LPNs	4.8% (131)	1.3% (36)	2.2% (60)	2.8% (76)	1.2% (34)	87.7% (2,404)

Age Age distribution of actively licensed LPNs is shown in Table 5 and Figure 3. The percentage of LPNs who were 51 years or older comprised 29.7% of supply and the average age of an LPN was 42 years old. Data revealed 28.4% were 30 years or younger, a 1.7% increase from 2022. Nationally[2] 44.7% of LPNs were 50 years or older and the median age was 47. South Dakota LPN employment data revealed 13.0% (289) of LPNs were retired or intend "to leave or retire from nursing within the next five years."

Table 5: LPN Age

Age Range	2024		2022		2020	
<26	416	15.2%	367	13.7%	322	12.4%
26-30	363	13.2%	346	13.0%	320	12.3%
31-35	324	11.8%	340	12.7%	302	11.7%
36-40	299	11.0%	274	10.2%	303	11.7%
41-45	293	10.7%	279	10.4%	243	9.4%
46-50	231	8.4%	212	8.0%	203	7.8%
51-55	180	6.6%	163	6.1%	153	5.9%
56-60	179	6.5%	242	9.0%	267	10.3%
61-65	226	8.2%	225	8.4%	246	9.5%
>65	230	8.4%	226	8.5%	232	9.0%
Total	2,741	100.0%	2,674	100.0%	2,591	100.0%

Figure 3: LPN Age Distribution
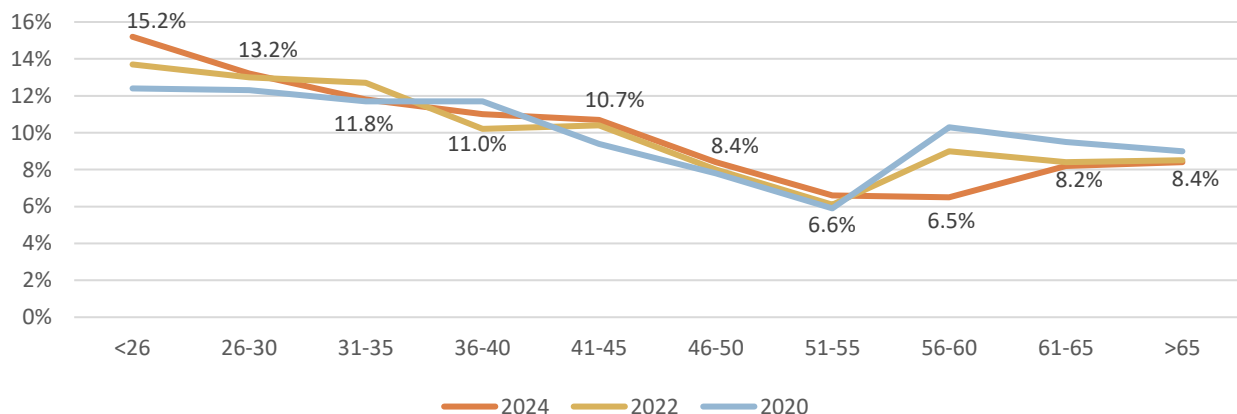
Highest Academic Achievement Consistent with previous reports the majority of LPN respondents, 93.7% (2,095), indicated their highest educational preparation at the LPN diploma, certificate, or associate degree levels as shown in Figure 4; only 6.3% (141) were prepared with a baccalaureate or higher degree. National[2] data reflected similar findings with 97.1% holding a diploma, certificate, or associate degree and 2.9% a baccalaureate degree.

Respondents who indicated they were enrolled in a program leading to an advanced nursing degree comprised 16.2% (362). Of these LPNs, 75.1% (272) were enrolled in associate degree programs, 23.5% (85) in baccalaureate degree programs, 0.3% (1) in a master's degree program, 0.3% (1) in a doctoral degree program, and 0.8% (3) did not provide a response.

Figure 4: Highest Academic Achievement of LPNs
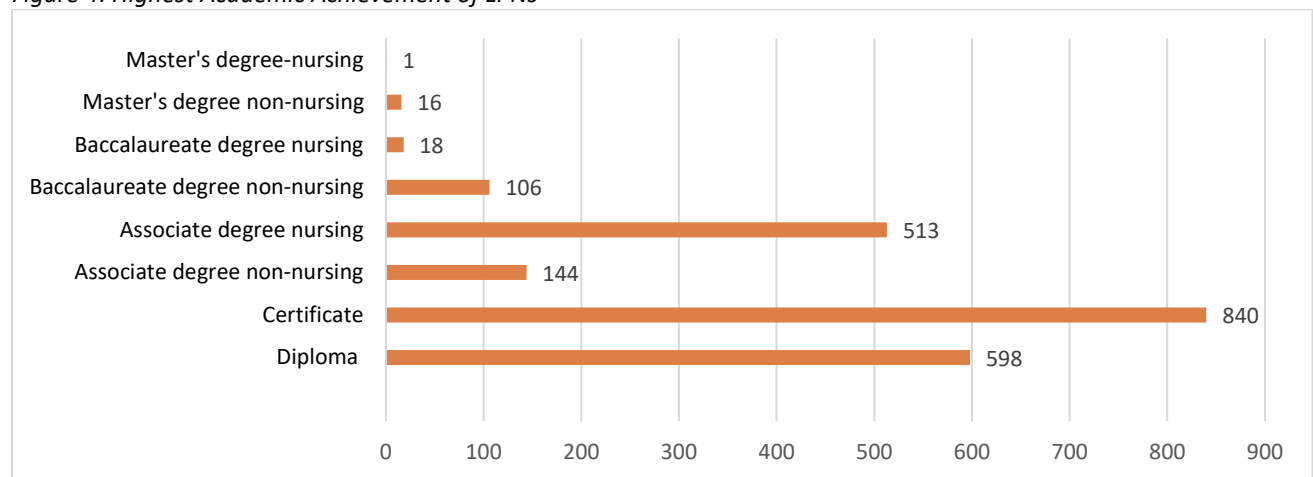
Employment Characteristics

Primary State of Practice The majority of LPNs, 80.8% (1,806), reported their primary place of employment and practice was in the state of South Dakota, Figure 5. LPNs that reported employment in a neighboring state of Iowa, Minnesota, Montana, Nebraska, North Dakota, or Wyoming comprised 5.8% (130) and 3.4% (77) were employed in other states.

Figure 5: Primary State of Practice
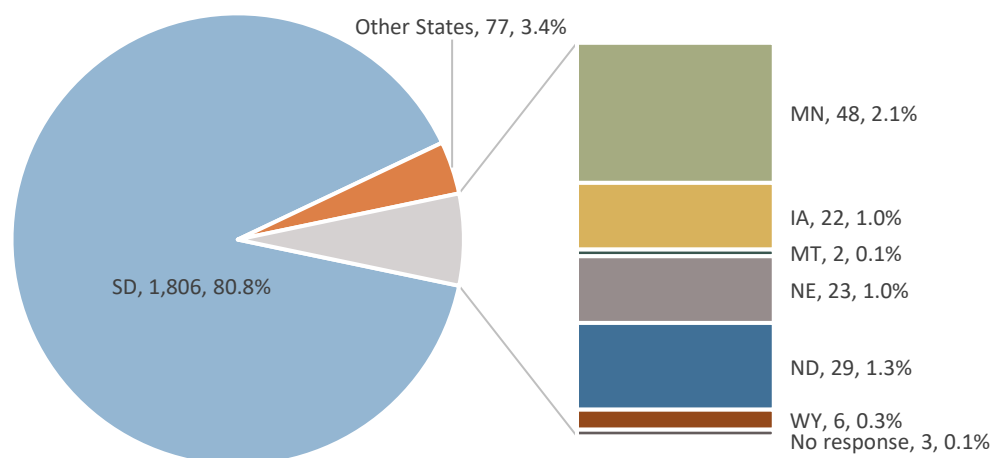
Number of positions held Most LPNs, 79.8% (1,785), reported they held employment and practiced as a nurse for one employer, 9.0% (202) reported they had two employers, and 1.2% (27) reported three or more. Similar to previous reports, LPNs who were not employed in a nursing position comprised 9.8% (220) of respondents and 0.1% (2) did not respond. Nationally[2] 79.2% of LPNs held one position, 17.4% held two, and 3.5% held three or more positions.

*Employment Status* Employment data reflected a high percentage of LPNs, 90.2% (2,016), reported they were employed in the nursing profession either full-time, part-time, or on a per diem basis. This finding is consistent with previous South Dakota Nursing Workforce Supply reports published from 1999 to 2023 which revealed 82% – 91% of LPNs actively employed in nursing.

As shown in Figure 6, most LPN respondents, 73.4% (1,640), reported being employed full-time, working 32 or more hours per week. The average number of hours worked by full-time LPNs was 38.1 hours per week. Only 11.6% (259) of respondents worked part-time, 31 hours or less per week; they reported working an average of 21.6 hours per week. LPNs who worked on a per diem basis, an arrangement wherein a nurse is employed on an as needed basis, comprised 5.2% (117) of respondents and their average hours worked per week was 17.1. Nationally[2] 71.0% of LPN respondents were employed full-time, 10.3% part-time, and 6.5% per diem.

Figure 6: Employment Status
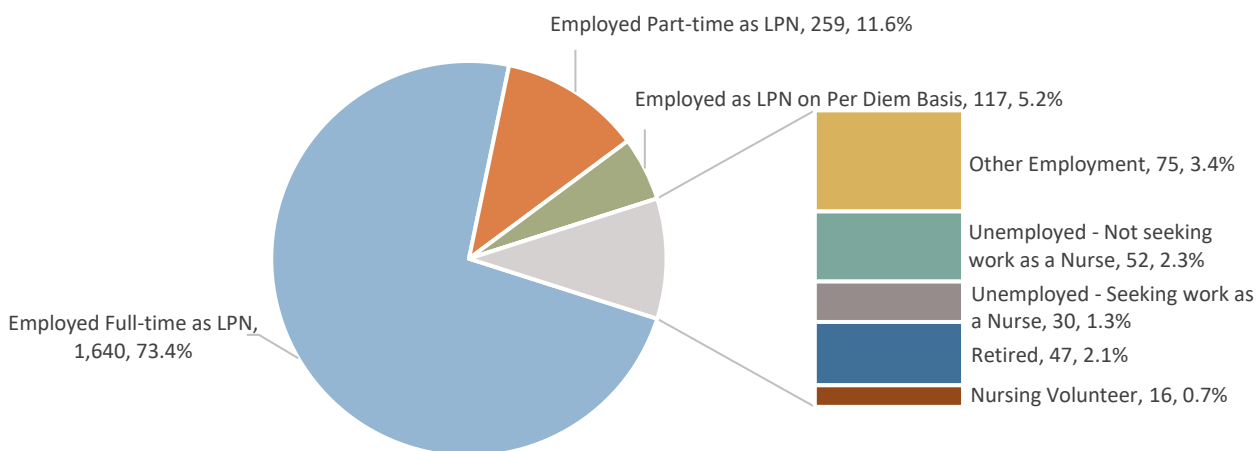
LPN Availability to the Workforce The active licensed supply of 2,741 LPNs can overstate the number of nurses engaged in nursing practice and available to the workforce, therefore data on the number of hours worked in nursing were used to estimate the number of LPN FTEs available to employers. Table 6 displays the formula used to identify the estimated 2,242.1 LPN FTEs available to the workforce.

Table 6: Estimated FTEs Available

Percentage that worked 32 or more hours per week (Full-time)	Percentage that worked 31 or less hours per week (Part-time+Per Diem)	Estimated actively licensed LPN FTEs available
2,741 LPNs x 73.4% FT = 2,011.9 FTEs	2,741 LPNs x 16.8% PT x 0.5 = 230.2 FTEs	2,011.9 + 230.2 = 2,242.1 Total FTEs

Reasons for Unemployment in Nursing LPNs who were not employed in a nursing position accounted for 9.8% (220) of respondents; of them 47 were retired, 16 volunteered as a nurse, 75 were employed in non-nursing positions, 52 were unemployed and not seeking work as a nurse, and 30 were unemployed and seeking work as a nurse. The most common reasons selected by the 82 respondents for being unemployed was "other" and "taking care of home and family"; Table 7.

Table 7: Reasons for Unemployment

Reasons for Unemployment	Number	Percent	National Data[2]
Taking care of home and family	33	40.2%	41.9%
Disabled	6	7.3%	13.0%
Inadequate salary	1	1.2%	10.9%
School	9	11.0%	14.2%
Difficulty in finding a nursing position	3	3.7%	8.9%
Other	29	35.4%	35.7%
COVID-19 pandemic	--	--	20.2%
No response	1	1.2%	--
Total	82	100.0%	--

Practice Characteristics

Primary Employment As shown in Figure 7 and Tables 8 and 9, the majority of LPN respondents held primary employment in nursing home/extended care/assisted living, 25.8% (576), ambulatory care, 25.5% (569), 'other' settings, 13.4% (300), or a hospital, 9.6% (214). Most, 23.0% (513), practiced in the specialty area of geriatric/gerontology and 15.6% (348) practiced in adult health/family health. A comparison to national data findings is shown in Tables 8 and 9.

Secondary Employment A total of 229 LPNs indicated they worked for two or more employers. The majority, 35.8% (82), were employed in nursing home/extended care/assisted living and 31.0% (71) reported geriatric/gerontology as their specialty area of practice; Figure 7 and Tables 8 and 9.

Table 8: LPN Employment Settings

Employment Settings	Primary		National Data[2] Primary	Secondary	
Ambulatory care	569	25.5%	8.6%	45	19.7%
Assisted living facility	94	4.2%	6.6%	15	6.5%
Community health	85	3.8%	3.4%	1	0.4%
Correctional facility	34	1.5%	2.2%	8	3.5%
Dialysis center	13	0.6%	0.7%	2	0.9%
Home health	107	4.8%	11.6%	18	7.9%
Hospice	23	1.0%	1.6%	4	1.8%
Hospital	214	9.6%	11.7%	0	0.0%
Insurance claims/benefits	22	1.0%	1.2%	1	0.4%
Nursing home/extended care	482	21.6%	30.6%	67	29.3%
Occupational health	11	0.5%	0.6%	2	0.9%
Other	300	13.4%	15.3%	24	10.5%
Policy/planning/regulatory/ licensing agency	0	0.0%	0.0%	0	0.0%
Public health	32	1.4%	2.3%	6	2.6%
School health services	24	1.1%	3.3%	3	1.3%
School of nursing	5	0.2%	0.3%	1	0.4%
Unemployed/retired/volunteer/other emp.	220	9.8%	--	--	--
No response	1	0.0%	--	32	13.9%
Total	2,236	100.0%	100.0%	229	100.0%

Figure 7: LPN Employment Settings

Figure 7: LPN Employment Settings

Setting	Primary Employment Setting	Secondary Employment Setting
Ambulatory care	569	45
Assisted living facility	94	15
Community health	85	1
Correctional facility	34	8
Dialysis center	13	2
Home health	107	18
Hospice	23	4
Hospital	214	0
Insurance claims/benefits	22	1
Nursing home/extended care	482	67
Occupational health	11	2
Other	300	24
Policy/planning/regulatory/licensing agency	0	0
Public health	32	6
School health services	24	3
School of nursing	5	1
Unemployed/retired/volunteer/other employment	220	
No response	1	32

Table 9: LPN Employment Position Specialty

Position Specialty	Primary		National Data[2] Primary	Secondary	
Acute care/critical care	56	2.5%	3.4%	28	12.2%
Adult health	94	4.2%	7.0%	9	4.0%
Anesthesia	1	0.0%	0.1%	0	0.0%
Cardiology	30	1.3%	0.9%	0	0.0%
Community	22	1.0%	1.1%	3	1.3%
Emergency/trauma	11	0.5%	1.5%	2	0.9%
Family health	254	11.4%	5.1%	10	4.4%
Genetics	20	0.9%	1.5%	4	1.7%
Geriatric/gerontology	513	23.0%	31.3%	71	31.0%
Home health	74	3.3%	8.4%	16	7.0%
Informatics	7	0.3%	0.1%	0	0.0%
Maternal-child health/obstetrics	19	0.9%	0.9%	0	0.0%
Medical-surgical	111	5.0%	3.9%	7	3.1%
Neonatal	1	0.0%	0.1%	0	0.0%
Nephrology	15	0.7%	1.1%	3	1.3%
Neurology/Neurosurgical	29	1.3%	0.5%	1	0.4%
Occupational health	10	0.5%	0.7%	1	0.4%
Oncology	12	0.5%	0.8%	0	0.0%
Orthopedic	53	2.4%	0.7%	1	0.4%
Palliative care/hospice	15	0.7%	1.8%	1	0.4%
Pediatrics	87	3.9%	7.4%	7	3.1%
Perioperative	4	0.2%	0.5%	1	0.4%
Primary Care	103	4.6%	4.8%	0	0.0%
Psychiatric/mental health/substance abuse	68	3.0%	2.9%	5	2.2%
Public health	8	0.4%	1.3%	2	0.9%
Rehabilitation	27	1.2%	2.8%	1	0.4%
School health	16	0.7%	1.8%	2	0.9%
Urologic	10	0.5%	0.2%	0	0.0%
Women's health	33	1.5%	0.7%	2	0.9%
Other specialty	312	13.8%	6.8%	14	6.1%
Unemployed/retired/volunteer/other emp.	220	9.8%	--	--	--
No response	1	0.0%	--	38	16.6%
TOTAL	2,236	100.0%	--	229	100.0%

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

Figure 8: Percentage of Time Involved in Direct Patient Care
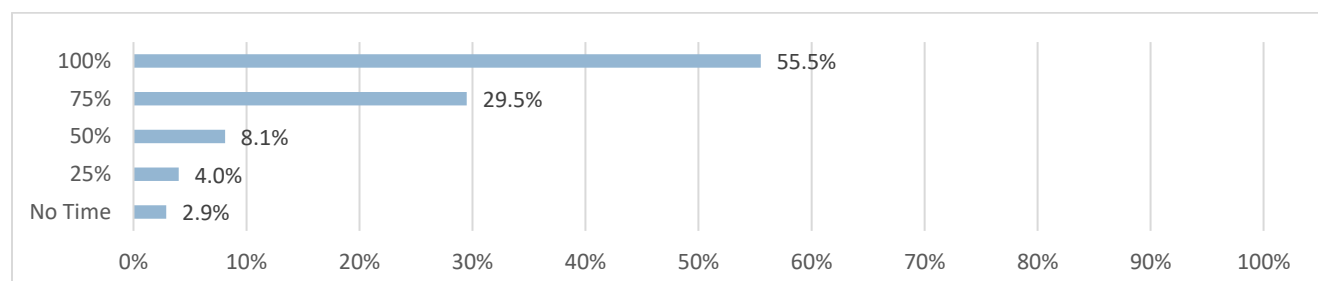
LPN Distribution in South Dakota

South Dakota's 12 regions are shown on the map in Figure 9. The number of LPNs who resided in the regions as of December 5, 2024 is provided in Table 10. The U.S. Census Bureau's[3] annual estimate of South Dakota's population was used to compare the state's county population to the number of LPNs residing in a county or region. The ratio of LPNs to population was estimated to provide a basis to compare the number of LPNs available to the workforce in an area. The ratio of LPNs to population of 100,000 was 228.0. The limitations of comparing ratios are the assumptions that citizens will receive nursing services in the region they reside and that the same types of health care services are available in each region. The number and distribution of nurses in a region may need to be higher based on the needs of that region.
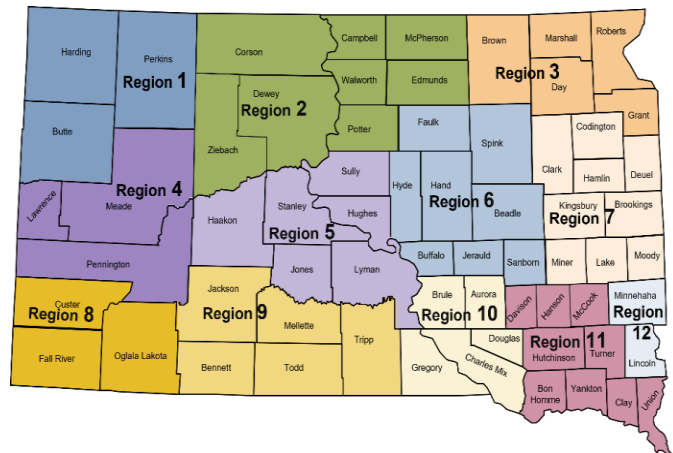

Figure 9: Regional State Map

Table 10: LPN Regional Distribution

Region	Counties/State	Region Population[3]	Region's % of State Population	Number of LPNs Residing in Region	Region's % of SD LPN Population	LPN to Population Ratio
Region 1	3 Counties: Butte, Harding, and Perkins	15,021	1.6%	47	1.8%	255.9
Region 2	8 Counties: Campbell, Corson, Dewey, Edmunds, McPherson, Potter, Walworth, and Ziebach	26,725	3.0%	80	3.1%	244.9
Region 3	5 Counties: Brown, Day, Grant, Marshall, and Roberts	65,333	7.1%	200	7.8%	250.4
Region 4	3 Counties: Lawrence, Meade, and Pennington	174,910	19.0%	476	18.6%	222.6
Region 5	6 Counties: Haakon, Hughes, Jones, Lyman, Stanley, and Sully	28,572	3.1%	60	2.3%	171.8
Region 6	8 Counties: Beadle, Buffalo, Faulk, Hand, Hyde, Jerauld, Sanborn, and Spink	38,144	4.1%	116	4.5%	248.8
Region 7	9 Counties: Brookings, Clark, Codington, Deuel, Hamlin, Kingsbury, Lake, Miner, and Moody	104,741	11.4%	314	12.3%	245.2
Region 8	3 Counties: Custer, Fall River, and Oglala Lakota	29,944	3.3%	56	2.2%	153.0
Region 9	5 Counties: Bennett, Jackson, Mellette, Tripp, and Todd	22,752	2.5%	47	1.8%	169.0
Region 10	5 Counties: Aurora, Brule, Charles Mix, Douglas, and Gregory	24,189	2.6%	67	2.6%	226.6
Region 11	9 Counties: Bon Homme, Clay, Davison, Hanson, Hutchinson, McCook, Turner, Union, and Yankton	108,819	11.8%	258	10.1%	193.9
Region 12	2 Counties: Lincoln and Minnehaha	280,168	30.5%	841	32.8%	245.5
In-State Total	**66 counties**	**919,318**	**100.0%**	**2,562 (93.5%)**	**100.0%**	**228.0**
Out-of-State	Minnesota	--	--	107 (3.9%)	--	--
	Other States/Jurisdictions	--	--	72 (2.6%)	--	--
Total		--	--	**2,741 (100.0%)**	--	--

Table 11 displays the number of LPNs in each of the state's 66 counties.

Table 11: LPN County Distribution

County	County Population[3]	Number of LPNs	County	County Population[3]	Number of LPNs
Aurora	2,782	9	Jackson	2,776	6
Beadle	19,591	50	Jerauld	1,660	4
Bennett	3,305	5	Jones	855	2
Bon Homme	7,065	16	Kingsbury	5,276	15
Brookings	35,980	74	Lake	11,031	21
Brown	37,733	96	Lawrence	28,053	55
Brule	5,311	13	Lincoln	73,238	216
Buffalo	1,884	3	Lyman	3,705	6
Butte	10,863	35	Marshall	4,390	14
Campbell	1,340	7	McCook	5,809	20
Charles Mix	9,240	14	McPherson	2,334	7
Clark	3,948	12	Meade	30,954	87
Clay	15,431	21	Mellette	1,851	4
Codington	28,971	114	Miner	2,280	10
Corson	3,782	4	Minnehaha	206,930	625
Custer	9,117	20	Moody	6,450	19
Davison	19,922	52	Oglala Lakota	13,434	3
Day	5,451	16	Pennington	115,903	334
Deuel	4,354	17	Perkins	2,834	10
Dewey	5,208	10	Potter	2,413	8
Douglas	2,838	18	Roberts	10,206	32
Edmunds	4,057	13	Sanborn	2,399	15
Fall River	7,393	33	Spink	6,166	24
Faulk	2,151	3	Stanley	3,043	9
Grant	7,553	42	Sully	1,494	1
Gregory	4,018	13	Todd	9,199	19
Haakon	1,851	9	Tripp	5,621	13
Hamlin	6,451	32	Turner	9,027	36
Hand	3,107	11	Union	17,183	41
Hanson	3,471	4	Walworth	5,269	25
Harding	1,324	2	Yankton	23,517	54
Hughes	17,624	33	Ziebach	2,322	6
Hutchinson	7,394	14	**In-State Total**	**919,318**	**2,562**
Hyde	1,186	6	Out-of-State	--	179
			Total	--	**2,741**

Registered Nurses

South Dakota Supply Trends

Figure 10: Actively Licensed RNs

Licensure Status As of December 5, 2024, the SDBON reported 19,944 actively licensed RNs in South Dakota's supply, Figure 10. Data revealed a gain of 264 nurses from 2022 to 2024.

As shown in Figure 11, during the data collection time period from January 1, 2023 to December 5, 2024, a total of 2,789 RNs were added to South Dakota's active supply; 1,328 RNs were added as new graduates and 1,461 by endorsement from another state. Overall, South Dakota had an increase in supply during this time period of 264 RNs with a net loss of 2,525 RNs.

The net loss of RNs is consistent with findings from previous workforce reports. Reasons for the loss were due to retirement, leaving the profession, moving out of South Dakota, inactivating the license, or left the workforce as a result of the COVID-19 pandemic[2]. Additionally, South Dakota is a member of the Nurse Licensure Compact. As more states joined the compact, nurses residing in the new compact state inactivated their South Dakota license.
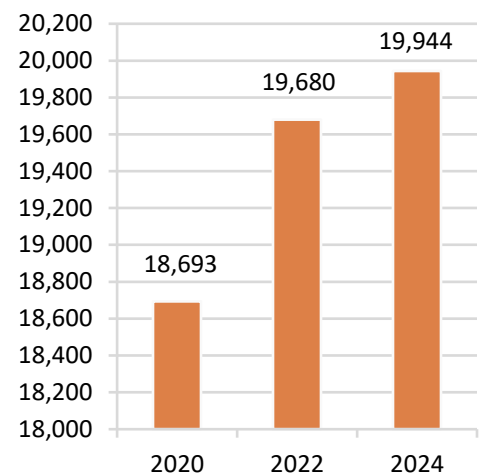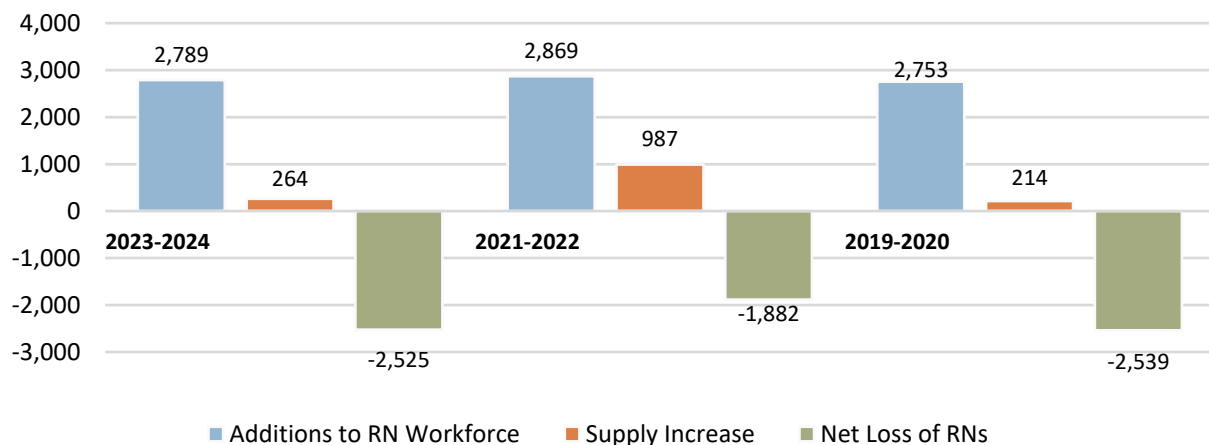
Figure 11: RN Workforce Gains and Losses

Legend: Additions to RN Workforce ■ Supply Increase ■ Net Loss of RNs

Demographics of RN Supply

Gender Consistent with previous reports the majority, 89.5%, of actively licensed RNs in South Dakota were female. Nationally female RNs comprised 88.5% of the population[2].

Table 12: RN Gender Distribution

	2024		2022		2020	
Male RNs	2,090	10.5%	1,955	9.9%	1,750	9.4%
Female RNs	17,854	89.5%	17,725	90.1%	16,943	90.6%
TOTAL	19,944	100.0%	19,680	100.0%	18,693	100.0%

Race/Ethnicity The majority of RNs were white/Caucasian. Minority nurse populations continue to be under-represented. Table 13 presents comparisons of ethnic distribution of the United States, South Dakota, and actively licensed RNs in the United States and South Dakota.

Table 13: RN Race/Ethnic Distribution

	American Indian/Alaska Native	Asian/Pacific Islander	Black/African American	Hispanic/ Latino	Two or More Races/Other	White/ Caucasian
U.S. Population[3]	1.3%	6.7%	13.7%	19.5%	3.1%	58.4%
U.S. RNs[2]	0.4%	7.8%	6.3%	6.9%	5.5%	80.0%
SD Population[3]	8.5%	1.9%	2.6%	5.1%	2.8%	80.5%
SD RNs	2.1% (422)	2.4% (480)	1.9% (379)	1.3% (257)	1.2% (233)	91.1% (18,173)

Age Age distribution of actively licensed RNs is shown in Table 14 and Figure 12. The percentage of RNs who were 51 years or older comprised 31.9% (6,359) of active supply; RNs who were 35 years or younger comprised 31.2% (6,231). The average age of an RN was 44. Nationally[2] 42.9% of RNs were 50 years or older. South Dakota RN employment data revealed 14.7% (2,585) of RNs were retired or intend "to leave or retire from nursing within the next five years".

Table 14: RN Age

Age Range	2024		2022		2020	
<26	1,310	6.5%	1,262	6.4%	1,071	5.7%
26-30	2,336	11.7%	2,334	11.9%	2,204	11.8%
31-35	2,585	13.0%	2,711	13.8%	2,608	14.0%
36-40	2,966	14.9%	2,785	14.2%	2,616	14.0%
41-45	2,496	12.5%	2,235	11.3%	1,987	10.6%
46-50	1,892	9.5%	1,788	9.1%	1,662	8.9%
51-55	1,673	8.4%	1,632	8.3%	1,539	8.2%
56-60	1,515	7.6%	1,783	9.0%	1,889	10.1%
61-65	1,656	8.3%	1,734	8.8%	1,778	9.5%
>65	1,515	7.6%	1,416	7.2%	1,339	7.2%
Total	19,944	100.0%	19,680	100.0%	18,693	100.0%

Figure 12: RN Age Distribution
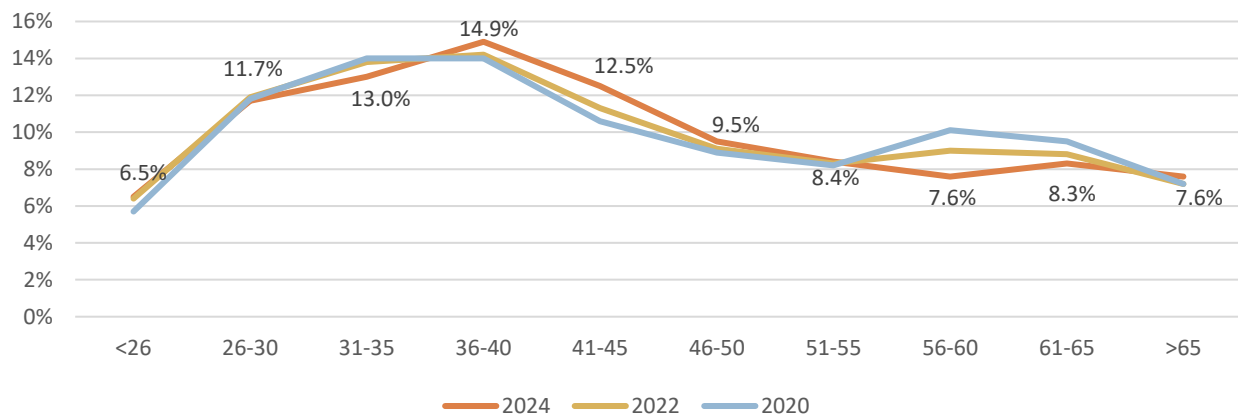
Highest Academic Achievement As shown in Figure 13, most RNs, 53.7% (9,459), highest academic preparation was a baccalaureate degree, a 0.7% increase from 2023. RNs who held an associate degree comprised 24.4% (4,298), a decrease of 1.7% from 2023. Those holding a diploma comprised only 2.2% (389), a decrease of 0.7% from 2023. RNs who were prepared with a graduate degree increased. Those holding a master's degree comprised 16.5% (2,896), an increase of 1.1% from 2023; and those holding a doctoral degree comprised 3.2% (562), an increase of 0.6%.

Figure 13: Highest Academic Achievement of RNs
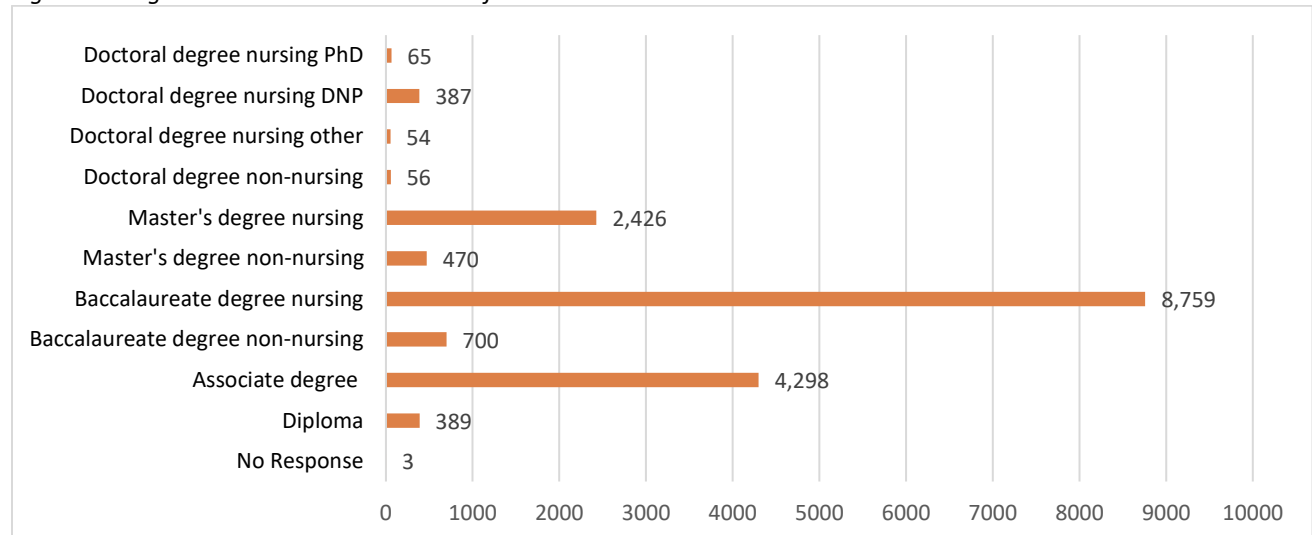
The Institute of Medicine's (IOM) report, <u>The Future of Nursing Leading Change, Advancing Health</u>[1], recommended increasing the number of nurses prepared with a baccalaureate degree to 80% by 2020. Baseline data in 2009 revealed South Dakota had 39.0% of RNs prepared with a baccalaureate or higher degree. Data collected during this time period revealed 73.4% (12,917) held a baccalaureate or higher degree, a 2.4% increase from 2023; short by 6.6% of the goal. Nationally, 71.7% of RNs held a baccalaureate or higher degree[2]. The IOM report also recommended doubling the number of RNs prepared with a doctoral degree by 2020. South Dakota met this recommendation; 65 RNs were doctoral prepared in 2009, during this reporting period 562 RNs held a doctoral degree.

Enrolled in Advanced Nursing Degree Consistent with previous reports, several RNs, 4.9% (865), reported they were "currently enrolled in education classes leading to an advanced nursing degree". Table 15 displays the types of degrees sought.

Table 15: RNs Enrolled in Nursing Education Programs

Nursing Degree Sought		
Baccalaureate in Nursing	162	18.7%
Master's in Nursing	456	52.7%
Doctorate of Nursing Practice (DNP)	210	24.3%
PhD	19	2.2%
Other	18	2.1%
Total	865	100.0%

Employment Characteristics

Primary State of Practice The majority of RN respondents, 65.5% (11,534), reported their primary place of practice within the state of South Dakota, Figure 14. RNs practicing in neighboring states of Iowa, Minnesota, Montana, Nebraska, North Dakota, and Wyoming comprised 6.9% (1,222), and RNs practicing in other states comprised 8.1% (1,429). RNs licensed in the role of an advanced practice registered nurse (APRN) comprised 12.1% (2,130). Respondents who reported as unemployed, employed in other field, retired, or volunteering comprised 7.3% (1,278). The remaining 0.1% (14) did not respond.
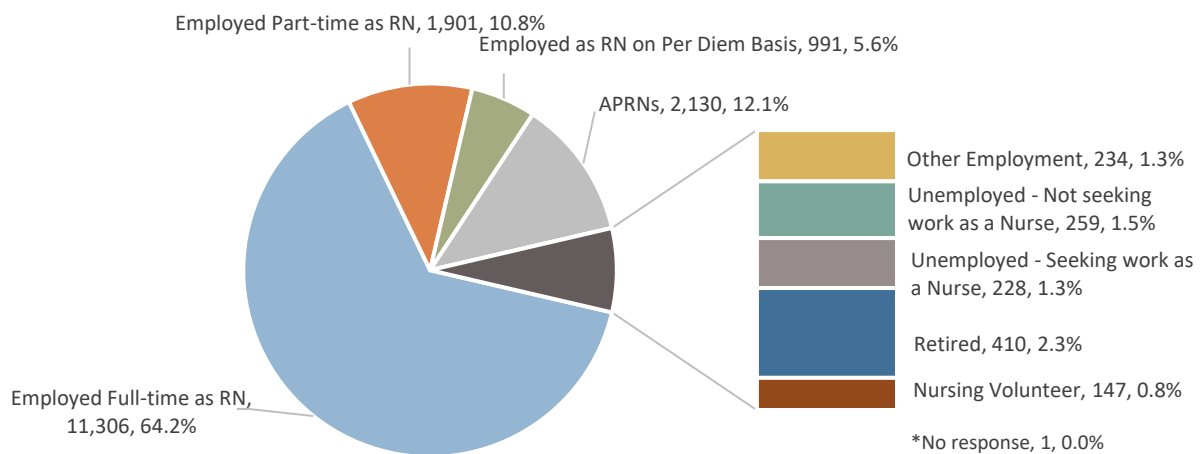
Figure 14: Primary State of Practice
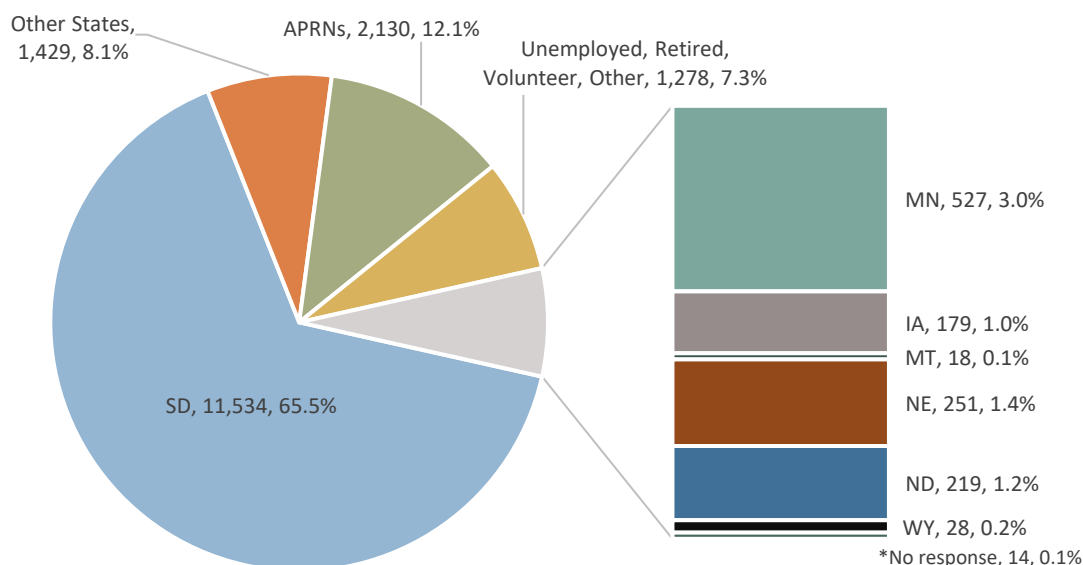
Number of Positions Held Most RNs, 71.6% (12,602), reported employment and practicing as a nurse for only one employer, 8.1% (1,424) reported having two employers, and 1.0% (162) reported three or more. RNs who were unemployed, retired, volunteers, employed in other field, or practicing as APRNs comprised 19.4% (3,408) of respondents. The remaining 0.1% (11) did not respond. Nationally[2] 82.4% held one position, 15.0% held two, and 2.6% held three or more positions.

Employment Status Employment data reflected a high percentage of RN respondents*, 80.6% (14,198), employed in the nursing profession either full-time, part-time, or on a per diem basis. As shown in Figure 15, most, 64.2% (11,306), reported being employed full-time, working 32 or more hours per week. The average number of hours worked by full-time RNs was 43.1 hours per week. Only 10.8% (1,901) of respondents worked part-time, 31 hours or less per week; they worked an average of 22.1 hours per week. RNs who worked on a per diem basis, an arrangement wherein a nurse is employed on an as needed basis, comprised 5.6% (991) with an average of 15 hours worked per week. Nationally[2] 70.2% of RN respondents were employed full-time, 10.9% part-time, and 7.8% per diem.

Excluded licensed APRNs, unemployed, retired, volunteer, or employed in other field.

Figure 15: Employment Status

Employed Part-time as RN, 1,901, 10.8%

Employed as RN on Per Diem Basis, 991, 5.6%

APRNs, 2,130, 12.1%

Employed Full-time as RN, 11,306, 64.2%

Other Employment, 234, 1.3%

Unemployed - Not seeking work as a Nurse, 259, 1.5%

Unemployed - Seeking work as a Nurse, 228, 1.3%

Retired, 410, 2.3%

Nursing Volunteer, 147, 0.8%

*No response, 1, 0.0%

RN Availability to the Workforce The active licensed supply of 19,944 RNs can overstate the number of nurses engaged in nursing practice and available to the workforce, therefore data on the number of hours worked in nursing were used to estimate the number of RN FTEs available to employers. Table 16 displays the formula used to identify an estimated 14,439.4 RN FTEs available to the workforce.

Table 16: Estimated FTEs Available

Percentage that worked 32 or more hours per week (Full-time)	Percentage that worked 31 or less hours per week (Part-time+Per diem)	Estimated actively licensed RN FTEs available
19,944 RNs x 64.2% FT = 12,804.0 FTEs	19,944 RNs x 16.4% PT x 0.5 = 1,635.4 FTEs	12,804.0 + 1,635.4 = 14,439.4 Total FTEs

Reasons for Unemployment in Nursing RNs who were not employed in a nursing position accounted for 7.3% (1,278) of respondents; of them, 410 were retired, 147 volunteered as a nurse, 234 were employed in non-nursing positions, 259 were unemployed and not seeking work as a nurse, and 228 were unemployed and seeking work as a nurse. The most common reason selected by the 487 respondents for being unemployed was "taking care of home and family"; Table 17.

Table 17: Reasons for Unemployment

| Reasons for Unemployment	Number	Percent	National Data[2]
Taking care of home and family	201	41.3%	46.8%
Disabled	23	4.7%	7.2%
Inadequate salary	5	1.0%	11.9%
School	62	12.7%	9.5%
Difficulty in finding a nursing position	12	2.5%	10.7%
Other	171	35.1%	36.2%
COVID-19 Pandemic	--	--	22.6%
No response	13	2.7%	--
Total	487	100.0%	--

Practice Characteristics

Primary Employment Settings As shown in Table 18 and Figure 16, most RN respondents held primary employment in a hospital, 37.7% (6,636), ambulatory care setting, 12.8% (2,250), or 'other' setting, 10.0% (1,759).

Secondary Employment Settings A total of 9.0% (1,586) of respondents worked for two or more employers. The majority were employed in 'other' settings, 30.6% (486), ambulatory care, 16.1% (255), and nursing home/extended care, 11.2% (179).

Table 18: RN Employment Settings

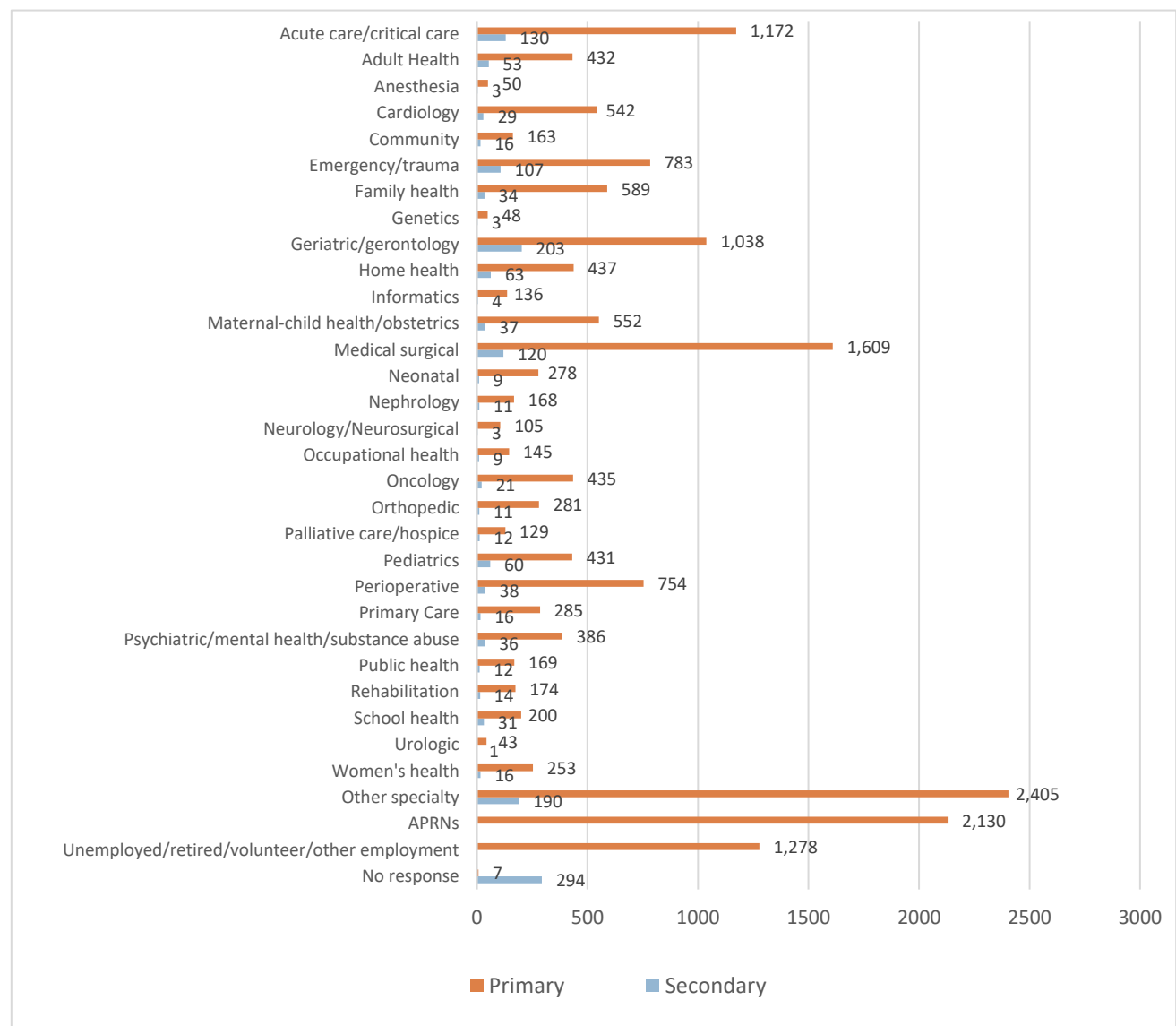| Employment Settings	Primary		National Data[2] Primary	Secondary	
Ambulatory care	2,250	12.8%	10.4%	255	16.1%
Assisted living facility	173	1.0%	0.5%	40	2.5%
Community health	251	1.4%	2.0%	28	1.8%
Correctional facility	71	0.4%	0.7%	15	0.9%
Dialysis center	150	0.8%	1.1%	13	0.8%
Home health	457	2.6%	3.4%	93	5.9%
Hospice	221	1.3%	1.8%	24	1.5%
Hospital	6,636	37.7%	57.5%	0	0.0%
Insurance claims/benefits	512	2.9%	2.0%	11	0.7%
Nursing home/extended care	926	5.2%	3.9%	179	11.2%
Occupational health	89	0.5%	0.7%	11	0.7%
Other	1,759	10.0%	9.6%	486	30.6%
Policy/planning/regulatory/licensing agency	41	0.2%	0.3%	6	0.4%
Public health	192	1.1%	1. 7%	17	1.1%
School health services	256	1.5%	2.3%	30	1.9%
School of nursing	208	1.2%	2.1%	90	5.7%
APRNs	2,130	12.1%	--	--	--
Unemployed/retired/volunteer/other emp.	1,278	7.3%	--	--	--
No response	7	0.0%	--	288	18.2%
Total	17,607	100.0%	100.0%	1,586	100.0%

Figure 16: RN Employment Settings
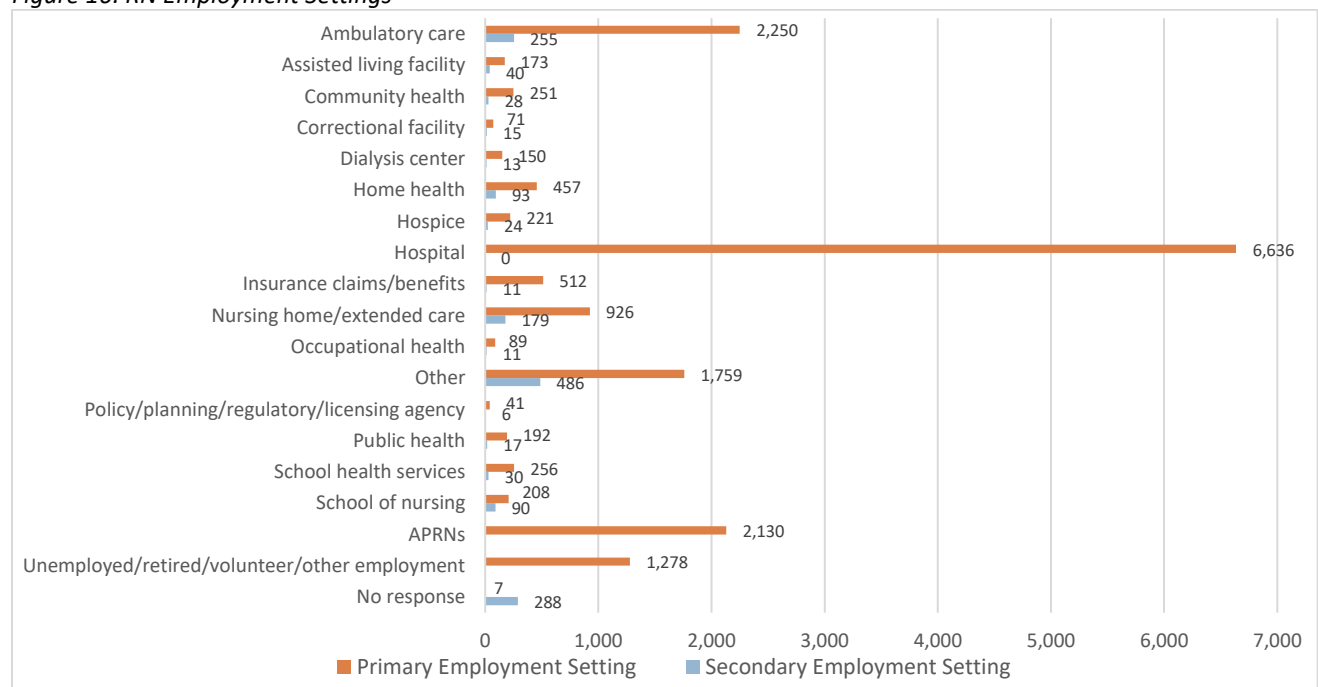
Primary Employment Position Specialty Most RN respondents were employed in 'other' specialty, 13.6% (2,405), medical-surgical specialty, 9.1% (1,609), or acute care/critical care, 6.7% (1,172), Table 19 and Figure 17.

Secondary Employment Position Specialty Most respondents who were employed in a second nursing position were employed in geriatric/gerontology specialty, 12.8% (203) and 'other' specialty, 12.0% (190).

Table 19: RN Employment Position Specialty

Position Specialty	Primary		National Data[2] Primary	Secondary	
Acute care/critical Care	1,172	6.7%	16.5%	130	8.2%
Adult health	432	2.5%	2.6%	53	3.3%
Anesthesia	50	0.3%	1.8%	3	0.2%
Cardiology	542	3.1%	3.7%	29	1.8%
Community	163	1.0%	1.0%	16	1.0%
Emergency/trauma	783	4.4%	8.1%	107	6.7%
Family health	589	3.3%	2.6%	34	2.1%
Genetics	48	0.3%	0.2%	3	0.2%
Geriatric/gerontology	1,038	5.9%	4.4%	203	12.8%
Home health	437	2.5%	3.0%	63	3.9%
Informatics	136	0.8%	0.5%	4	0.2%
Maternal-child health/obstetrics	552	3.1%	4.5%	37	2.3%
Medical-surgical	1,609	9.1%	10.0%	120	7.6%
Neonatal	278	1.6%	2.4%	9	0.6%
Nephrology	168	1.0%	1.6%	11	0.7%
Neurology/Neurosurgical	105	0.6%	1.0%	3	0.2%
Occupational health	145	0.8%	1.0%	9	0.6%
Oncology	435	2.5%	3.3%	21	1.3%
Orthopedic	281	1.6%	1.2%	11	0.7%
Palliative care/hospice	129	0.7%	2.1%	12	0.8%
Pediatrics	431	2.4%	4.9%	60	3.8%
Perioperative	754	4.3%	6.4%	38	2.4%
Primary Care	285	1.6%	2.3%	16	1.0%
Psychiatric/mental health/substance abuse	386	2.2%	2.5%	36	2.3%
Public health	169	1.0%	1.7%	12	0.8%
Rehabilitation	174	1.0%	0.9%	14	0.9%
School health	200	1.1%	1.2%	31	2.0%
Urologic	43	0.2%	0.0%	1	0.1%
Women's health	253	1.4%	1.1%	16	1.0%
Other specialty	2,405	13.6%	7.4%	190	12.0%
APRNs	2,130	12.1%	--	--	--
Unemployed/retired/volunteer/other emp.	1,278	7.3%	--	--	--
No response	7	0.0%	--	294	18.5%
TOTAL	17,607	100.0%	--	1,586	100.0%

Figure 17: RN Employment Position Specialty

Acute care/critical care — Secondary 130, Primary 1,172
Adult Health — Secondary 53, Primary 432
Anesthesia — Secondary 3, Primary 50
Cardiology — Secondary 29, Primary 542
Community — Secondary 16, Primary 163
Emergency/trauma — Secondary 107, Primary 783
Family health — Secondary 34, Primary 589
Genetics — Secondary 3, Primary 48
Geriatric/gerontology — Secondary 203, Primary 1,038
Home health — Secondary 63, Primary 437
Informatics — Secondary 4, Primary 136
Maternal-child health/obstetrics — Secondary 37, Primary 552
Medical surgical — Secondary 120, Primary 1,609
Neonatal — Secondary 9, Primary 278
Nephrology — Secondary 11, Primary 168
Neurology/Neurosurgical — Secondary 3, Primary 105
Occupational health — Secondary 9, Primary 145
Oncology — Secondary 21, Primary 435
Orthopedic — Secondary 11, Primary 281
Palliative care/hospice — Secondary 12, Primary 129
Pediatrics — Secondary 60, Primary 431
Perioperative — Secondary 38, Primary 754
Primary Care — Secondary 16, Primary 285
Psychiatric/mental health/substance abuse — Secondary 36, Primary 386
Public health — Secondary 12, Primary 169
Rehabilitation — Secondary 14, Primary 174
School health — Secondary 31, Primary 200
Urologic — Secondary 1, Primary 43
Women's health — Secondary 16, Primary 253
Other specialty — Secondary 190, Primary 2,405
APRNs — Primary 2,130
Unemployed/retired/volunteer/other employment — Primary 1,278
No response — Secondary 7, Primary 294

Legend: Primary, Secondary

Time Involved in Direct Patient Care Similar to previous workforce reports, a large number of RNs who reported working in a nursing position spent a significant percentage of their time in direct patient care; Figure 18.

Figure 18: Percentage of Time Involved in Direct Patient Care

100% — 52.0%
75% — 17.7%
50% — 8.1%
25% — 8.9%
No Time — 13.2%
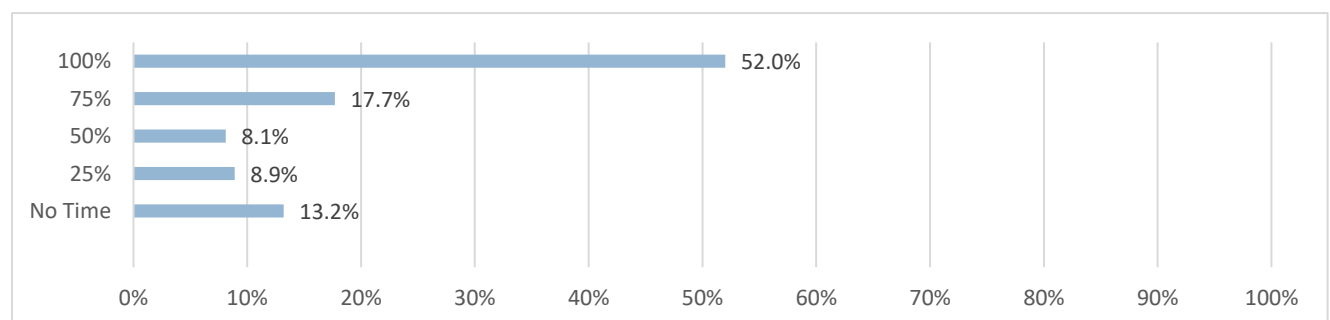
RN Distribution in South Dakota

South Dakota's 12 regions are shown on the map in Figure 19. The number of RNs who resided in these regions as of December 5, 2024 is provided in Table 20. The U.S. Census Bureau's[3] annual estimate of South Dakota's population was used to compare the state's county population to the number of RNs residing in a county or region. The ratio of RNs to population was estimated to provide a basis to compare the number of RNs available to the workforce in an area. The ratio of RNs to population of 100,000 was 1,366.1. The limitations of comparing ratios are the assumptions that citizens will receive nursing services in the region they reside and that the same types of health care services are available in each region. The number and distribution of nurses in a region may need to be higher based on the needs of that region.

Figure 19: Regional State Map
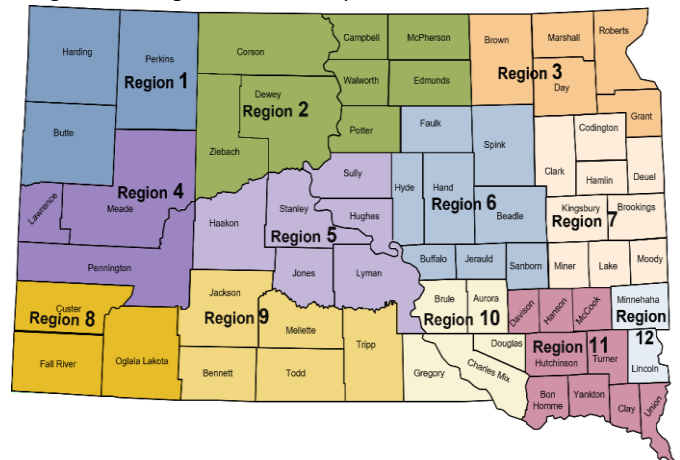
Table 20: RN Regional Distribution

Region	Counties/State	Region Population[3]	Region's % of State Population	Number of RNs Residing in Region	Region's % of SD RN Population	RN to Population Ratio
Region 1	3 Counties: Butte, Harding, and Perkins	15,021	1.6%	158	0.9%	761.5
Region 2	8 Counties: Campbell, Corson, Dewey, Edmunds, McPherson, Potter, Walworth, and Ziebach	26,725	3.0%	332	1.9%	899.4
Region 3	5 Counties: Brown, Day, Grant, Marshall, and Roberts	65,333	7.1%	911	5.2%	1,009.5
Region 4	3 Counties: Lawrence, Meade, and Pennington	174,910	19.0%	3,410	19.7%	1,411.5
Region 5	6 Counties: Haakon, Hughes, Jones, Lyman, Stanley, and Sully	28,572	3.1%	400	2.3%	1,013.6
Region 6	8 Counties: Beadle, Buffalo, Faulk, Hand, Hyde, Jerauld, Sanborn, and Spink	38,144	4.1%	428	2.5%	812.4
Region 7	9 Counties: Brookings, Clark, Codington, Deuel, Hamlin, Kingsbury, Lake, Miner, and Moody	104,741	11.4%	1,437	8.3%	993.3
Region 8	3 Counties: Custer, Fall River, and Oglala Lakota	29,944	3.3%	341	2.0%	824.5
Region 9	5 Counties: Bennett, Jackson, Mellette, Tripp, and Todd	22,752	2.5%	187	1.1%	595.1
Region 10	5 Counties: Aurora, Brule, Charles Mix, Douglas, and Gregory	24,189	2.6%	405	2.3%	1,212.2
Region 11	9 Counties: Bon Homme, Clay, Davison, Hanson, Hutchinson, McCook, Turner, Union, and Yankton	108,819	11.8%	2,082	12.0%	1,385.2
Region 12	2 Counties: Lincoln and Minnehaha	280,168	30.5%	7,256	41.8%	1,875.1
In-State Total	66 counties	919,318	100.0%	17,347 (87.0%)	100.0%	1,366.1
Out-of-State	Minnesota	--	--	1,074 (5.4%)	--	--
	Other States/Jurisdictions	--	--	1,523 (7.6%)	--	--
Total		--	--	19,944 (100.0%)	--	--

Table 21 displays the number of RNs in each of the state's 66 counties.

Table 21: RN County Distribution

County	County Population[3]	Number of RNs	County	County Population[3]	Number of RNs
Aurora	2,782	54	Jackson	2,776	31
Beadle	19,591	188	Jerauld	1,660	22
Bennett	3,305	31	Jones	855	14
Bon Homme	7,065	115	Kingsbury	5,276	99
Brookings	35,980	381	Lake	11,031	175
Brown	37,733	580	Lawrence	28,053	425
Brule	5,311	78	Lincoln	73,238	2,374
Buffalo	1,884	6	Lyman	3,705	27
Butte	10,863	119	Marshall	4,390	53
Campbell	1,340	26	McCook	5,809	109
Charles Mix	9,240	123	McPherson	2,334	26
Clark	3,948	39	Meade	30,954	581
Clay	15,431	194	Mellette	1,851	11
Codington	28,971	437	Miner	2,280	49
Corson	3,782	14	Minnehaha	206,930	4,882
Custer	9,117	150	Moody	6,450	108
Davison	19,922	316	Oglala Lakota	13,434	79
Day	5,451	80	Pennington	115,903	2,404
Deuel	4,354	62	Perkins	2,834	30
Dewey	5,208	46	Potter	2,413	43
Douglas	2,838	65	Roberts	10,206	98
Edmunds	4,057	84	Sanborn	2,399	40
Fall River	7,393	112	Spink	6,166	82
Faulk	2,151	22	Stanley	3,043	54
Grant	7,553	100	Sully	1,494	9
Gregory	4,018	85	Todd	9,199	31
Haakon	1,851	39	Tripp	5,621	83
Hamlin	6,451	87	Turner	9,027	161
Hand	3,107	48	Union	17,183	461
Hanson	3,471	79	Walworth	5,269	68
Harding	1,324	9	Yankton	23,517	502
Hughes	17,624	257	Ziebach	2,322	25
Hutchinson	7,394	145	In-State Total	**919,318**	**17,347**
Hyde	1,186	20	Out-of-State	--	2,597
			Total	--	**19,944**

Advanced Practice Registered Nurses

Certified Nurse Midwives

South Dakota Supply Trends

Licensure Status As of December 5, 2024, the SDBON reported 58 actively licensed CNMs in South Dakota's supply, Figure 20; a gain of 6 nurses from 2022 to 2024, a 11.5% increase since 2022.

From January 1, 2023 to December 5, 2024, a total of 16 CNMs were added to South Dakota's active supply of CNMs; 4 as new graduates and 12 by endorsement from another state, Figure 21. Overall, South Dakota had an increase in supply during this time period of 6 CNMs with a net loss of 10 CNMs. According to the 2023 Workforce Report, 6 CNMs indicated during that time period that they planned to retire in the next five years, which may account for the number of CNMs lost.

Figure 20: Actively Licensed CNMs
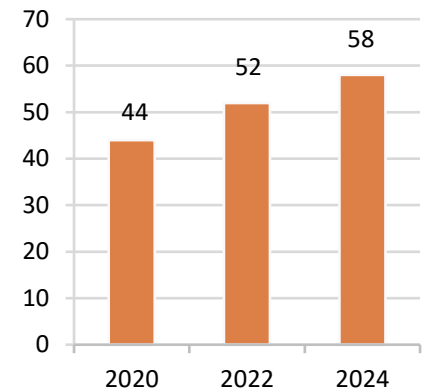
Figure 21: CNM Workforce Gains and Losses
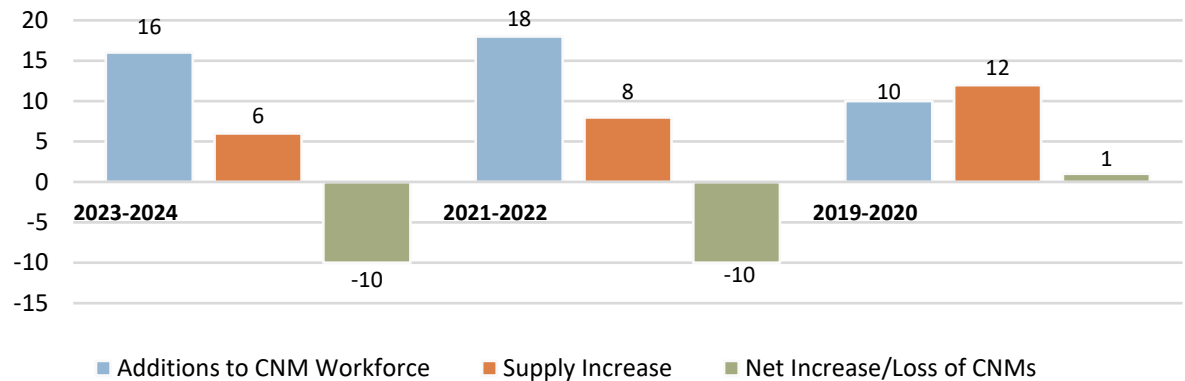
Certification/Practice Focus All actively licensed CNMs held certification through the American Midwifery Certification Board (AMCB) as certified nurse midwives.

Demographics of CNM Supply

Gender/Race/Ethnicity Consistent with previous reports, licensure data revealed the majority of actively licensed CNMs, 98.3% (57) were female and white/Caucasian. Table 22 displays comparisons of race/ethnic distribution in the United States, South Dakota, and of actively licensed CNMs.

Table 22: CNM Race/Ethnic Distribution

	American Indian/Alaska Native	Asian/Pacific Islander	Black/African American	Hispanic/ Latino	Two or More Races/Other	White/ Caucasian
U.S. Population[3]	1.3%	6.7%	13.7%	19.5%	3.1%	58.4%
SD Population[3]	8.5%	1.9%	2.6%	5.1%	2.8%	80.5%
SD CNMs	0.0% (0)	0.0% (0)	1.7% (1)	1.7% (1)	3.5% (2)	93.1% (54)

Age Age distribution of actively licensed CNMs is shown in Table 23 and Figure 22. The average age of a CNM was 49 years. Data revealed 17.4% (8) of CNMs were retired or intend "to leave or retire from nursing within the next five years."

Table 23: CNM Age Distribution

Age Range	2024		2022		2020	
<26	0	0.0%	0	0.0%	0	0.0%
26-30	1	1.7%	1	1.9%	2	4.5%
31-35	5	8.6%	7	13.5%	3	6.8%
36-40	7	12.1%	10	19.2%	10	22.7%
41-45	16	27.6%	7	13.5%	5	11.4%
46-50	7	12.1%	5	9.6%	4	9.1%
51-55	7	12.1%	5	9.6%	1	2.3%
56-60	2	3.4%	5	9.6%	6	13.6%
61-65	3	5.2%	4	7.7%	7	16.0%
>65	10	17.2%	8	15.4%	6	13.6%
Total	58	100.0%	52	100.0%	44	100.0%

Figure 22: CNM Age Distribution
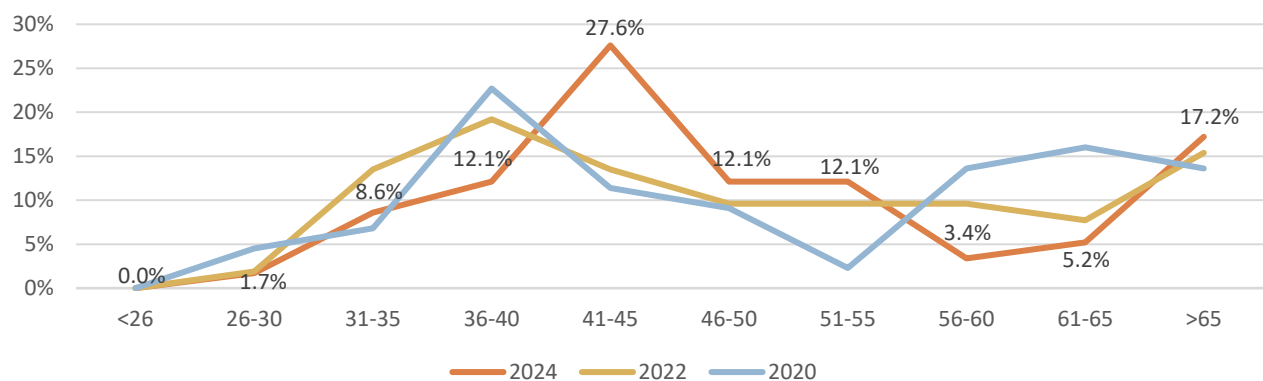
Highest Academic Achievement Consistent with previous SD nursing workforce reports, most of the 46 CNM respondents, 93.5% (43), held a graduate degree, Figure 23. Two CNMs reported they were "currently enrolled in education classes leading to an advanced nursing degree." Only 6.5% (3) did not hold a graduate degree; they were licensed prior to the graduate degree requirement.

Figure 23: Highest Academic Achievement of CNMs
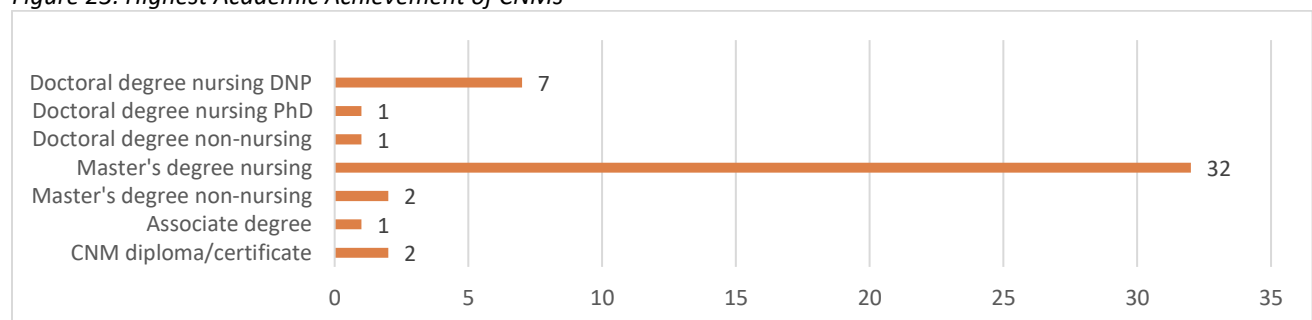
Employment and Practice Characteristics

The primary place of employment for most CNM respondents, 65.2% (30), was in the state of South Dakota; 10.9% (5) reported employment in neighboring states of Iowa, Minnesota, and Wyoming; 19.6% (9) in other states; and 4.3% (2) were not employed in the nursing profession. The majority, 73.9% (34), were employed by one employer, 10.9% (5) by two employers, and 10.9% (5) by three or more employers. Consistent with previous reports, data reflected a high number were employed full-time, 78.3% (36), working 32 or more hours per week; part- time, 13.0% (6), working 31 hours or less per week in the nursing profession; or per diem, an arrangement wherein a nurse is employed on an as needed basis, comprised 4.3% (2). Only 4.3% (2) were retired, unemployed, volunteer, or employed in other field. The average number of hours worked by CNMs full-time was 44.8; part-time 22.0; and per diem 9.0.

Work settings with the highest percent of CNMs employed were hospitals, 45.7% (21), and 'other' settings, 19.6% (9). The majority, 84.8% (39), indicated their primary area of practice was in the specialty area of maternal-child health and women's health. Figure 24 provides the percentage of time CNMs, who reported practicing as a nurse, were involved in direct patient care.

Figure 24: Percentage of Time Involved in Direct Patient Care
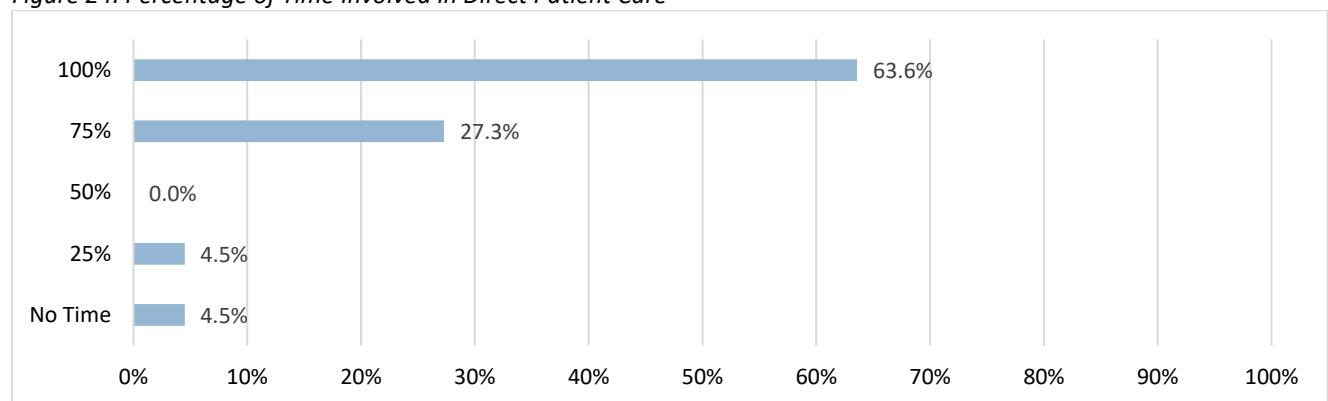
Certified Nurse Practitioners

South Dakota Supply Trends

Figure 25: Actively Licensed CNPs

Licensure Status As of December 5, 2024, the SDBON reported 2,616 actively licensed CNPs in South Dakota's supply, Figure 25; a gain of 652 nurses from 2022 to 2024, a 33.2% increase since 2022.

From January 1, 2023 to December 5, 2024, a total of 826 CNPs were added to South Dakota's active supply; 211 were added as new graduates and 615 were added by endorsement from another state. Overall, South Dakota had an increase in supply during this time period of 652 nurses with a net loss of 174 CNPs, Figure 26. Possible reasons for the loss may be due to retiring from the profession, moving out of South Dakota, or leaving the profession. According to the 2023 Workforce Report, 121 CNPs indicated during that time period that they planned to retire in the next five years, which may account for the large number of CNPs lost.

Figure 26: CNP Workforce Gains and Losses

Legend: ■ Additions to CNP Workforce ■ Supply Increase ■ Net Loss of CNPs
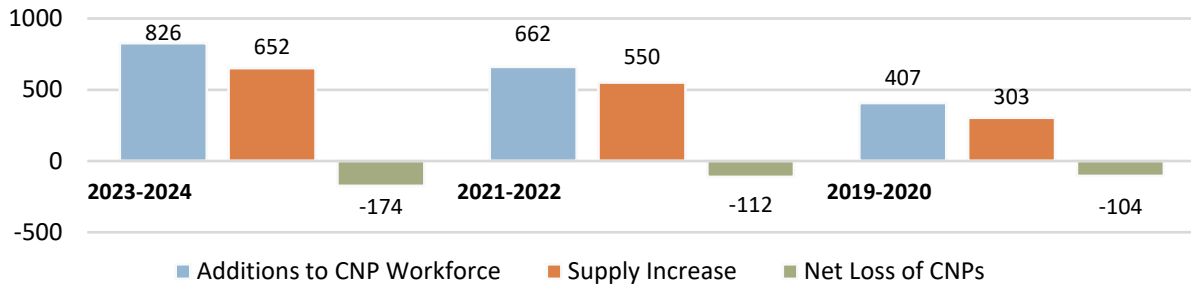
Certification/Practice Foci CNPs were required to hold national certification in at least one focus/specialty area of practice, consistent with their NP education preparation, to meet licensure requirements. Recognized certification included: acute care, adult, gerontology, acute adult/gerontology, primary care adult/gerontology, family across the lifespan, neonatal, acute pediatric, primary care pediatric, psychiatric-mental health, and women's health. CNPs may complete additional graduate nursing education to qualify to hold more than one type of certification; 4.9% (127) held two or more types of certification.

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

Figure 27 displays the percentage of CNPs licensed within six nationally recognized focus areas. The majority, 80.3% (2,100) were educated, certified, and licensed as family NPs and 9.5% (248) as adult/gerontology acute or primary care NPs. The remaining NPs held the following certifications: neonatal 2.4% (64), psychiatric-mental health 8.7% (228), women's health 2.1% (54), and pediatric acute or primary care 1.9% (49).

Figure 27: CNP Certification Focus Areas
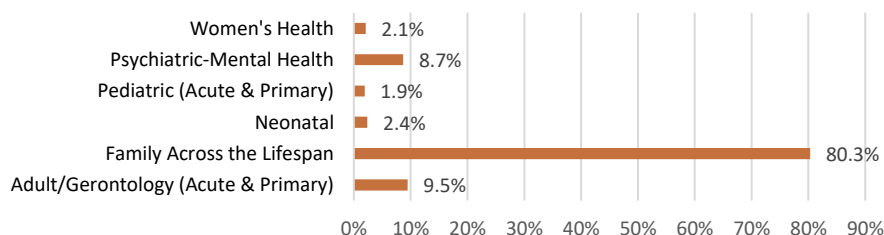
Demographics of CNP Supply

Gender/Race/Ethnicity Consistent with previous reports the majority of actively licensed CNPs, 90.0% (2,355) were female and white/Caucasian. Only 10.0% (261) of CNPs were male. Table 24 displays comparisons of race/ethnic distribution in the United States, South Dakota, and of actively licensed CNPs.

*Table 24: CNP Race/Ethnic Distribution*

	American Indian/Alaska Native	Asian/Pacific Islander	Black/African American	Hispanic/ Latino	Two or More Races/Other	White/ Caucasian
U.S. Population[3]	1.3%	6.7%	13.7%	19.5%	3.1%	58.4%
SD Population[3]	8.5%	1.9%	2.6%	5.1%	2.8%	80.5%
SD CNPs	0.7% (19)	3.6% (94)	5.1% (134)	1.9% (49)	1.2% (30)	87.5% (2,290)

Age Age distribution of actively licensed CNPs is shown in Table 25 and Figure 28. A large percentage of CNPs, 44.1%, (1,152) were 40 years or younger and 15.5% (404) were 56 years or older. The average age of a CNP was 44. Employment data also revealed 7.5% (150) of CNPs were retired or intend "to leave or retire from nursing within the next five years".

Table 25: CNP Age Distribution

Age Range	2024		2022		2020	
<26	2	0.1%	3	0.2%	0	0.0%
26-30	117	4.5%	130	6.6%	93	6.6%
31-35	423	16.2%	367	18.7%	265	18.7%
36-40	610	23.3%	432	22.0%	320	22.6%
41-45	527	20.1%	315	16.0%	197	14.0%
46-50	297	11.3%	214	10.9%	140	10.0%
51-55	236	9.0%	162	8.2%	107	7.5%
56-60	160	6.1%	123	6.3%	116	8.2%
61-65	135	5.2%	136	6.9%	116	8.2%
>65	109	4.2%	82	4.2%	60	4.2%
Total	2,616	100.0%	1,964	100.0%	1,414	100.0%

Figure 28: CNP Age Distribution
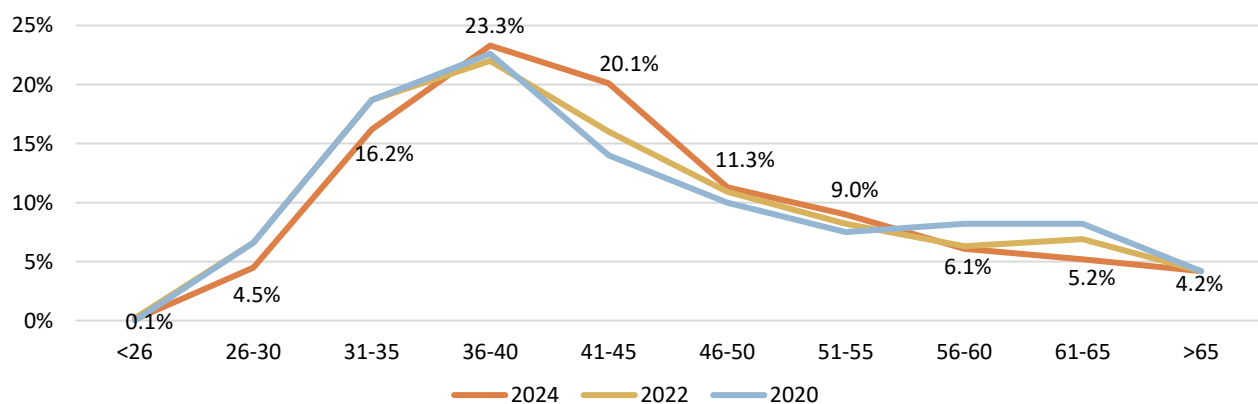
Highest Academic Achievement As shown in Figure 29, 99.4% (1,979) of CNPs reported they held a graduate degree as their highest level of education; 78.5% (1,562) held a master's degree in nursing. Only 0.6% (12) did not hold a graduate degree; they were licensed prior to the nursing graduate degree requirement. CNPs enrolled in a program leading to an advanced nursing degree comprised 2.2% (44) of respondents; 20 were enrolled in a doctorate of nursing practice (DNP) program, 5 in a PhD program, and 19 in a master's program.

Figure 29: CNP Highest Academic Achievement
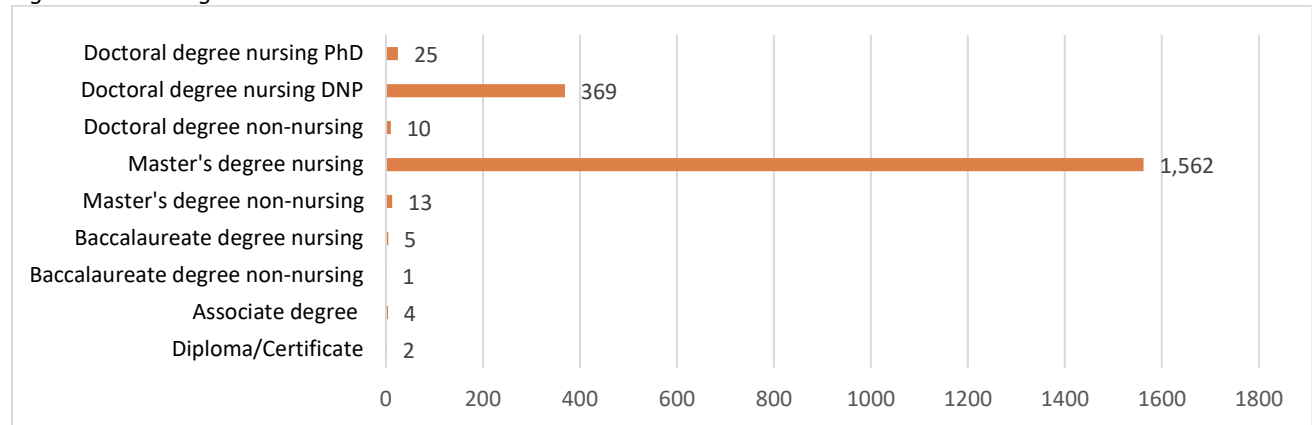
Employment and Practice Characteristics

As shown in Figure 30, 61.5% (1,225) of CNPs reported their primary place of employment was in South Dakota; 10.5% (209) reported employment in neighboring states of Iowa, Minnesota, Montana, Nebraska, North Dakota, and Wyoming; and 25.7% (512) reported other states. The majority, 77.6% (1,546), were employed by one employer, 16.7% (332) by two employers, and 3.4% (68) by three or more employers. The remaining 2.3% (45) were not employed in a nursing position.

Figure 30: Primary State of Practice
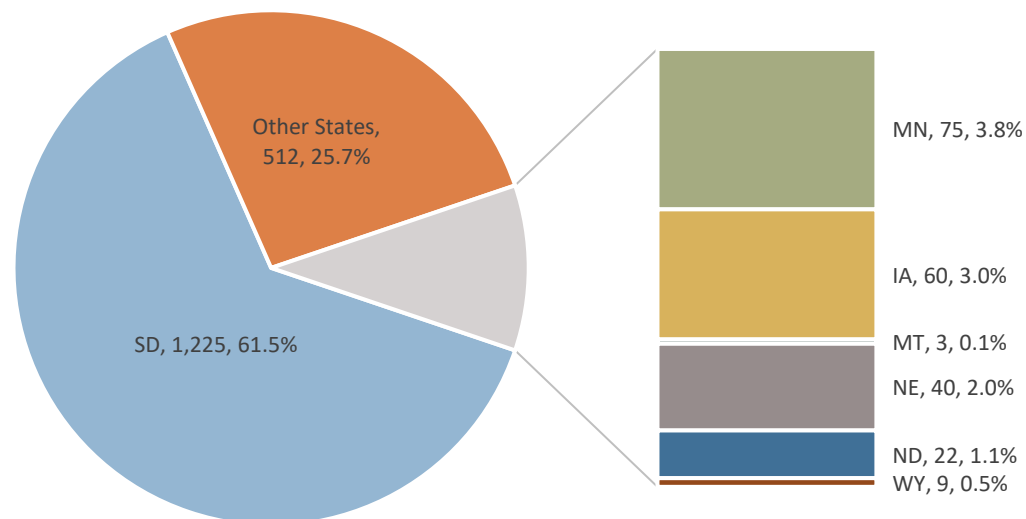
Consistent with previous reports, most CNPs, 85.9% (1,710) reported being employed full-time, working 32 or more hours per week. The average number of hours worked by full-time CNPs was 40.8 hours per week. Only 9.6% (191) respondents worked part-time, 31 hours or less per week; they worked an average of 26.1 hours per week. CNPs who worked on a per diem basis, an arrangement wherein a nurse is employed on an as needed basis, comprised 2.2% (45) with an average of 18.9 hours worked per week. Only 2.3% (45) were retired (15), unemployed and not seeking work as a nurse (7), unemployed and seeking work as a nurse (3), employed in other non-nursing positions (13), or volunteering (7). Reasons given for unemployment were "caring for home and family" and "other", Figure 31.

Figure 31: Employment Status
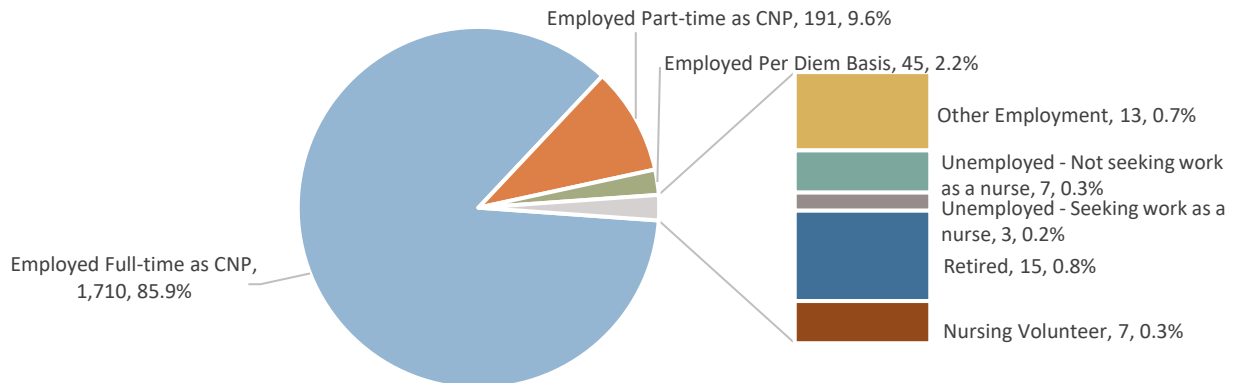
Time Involved in Direct Patient Care As shown in Figure 32, most CNPs, who reported practicing as a nurse, indicated they spent a significant percentage of time involved in direct patient care.

Figure 32: Percentage of Time Spent in Direct Patient Care
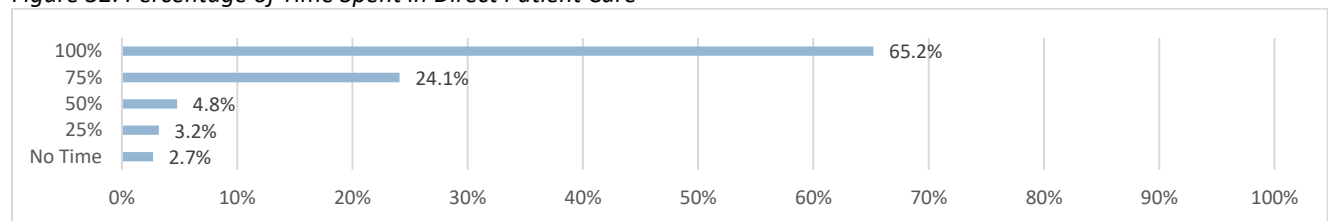
Primary and Secondary Employment Settings As shown in Table 26, the highest percentage of CNPs were primarily employed in ambulatory care, 35.4% (704), 'other' settings, 28.4% (566), and hospitals, 21.0% (419). Those who reported they worked for two or more employers comprised 20.1% (400) of respondents; of those respondents, the majority, 31.5% (126), were employed in 'other' settings.

Table 26: CNP Employment Setting

Employment Settings	Primary		Secondary	
Ambulatory care	704	35.4%	106	26.5%
Community health	113	5.7%	14	3.5%
Correctional facility	15	0.7%	4	1.0%
Dialysis center	2	0.1%	1	0.2%
Home health	20	1.0%	2	0.5%
Hospice	9	0.4%	5	1.3%
Hospital	419	21.0%	0	0.0%
Insurance claims/benefits	6	0.3%	2	0.5%
Nursing home/extended care/assisted living	23	1.2%	11	2.8%
Occupational health	15	0.7%	1	0.2%
Policy/planning/regulatory/licensing agency	3	0.2%	0	0.0%
Public health	11	0.6%	4	1.0%
School health services	3	0.2%	0	0.0%
School of nursing	36	1.8%	42	10.5%
Other	566	28.4%	126	31.5%
Unemployed/retired/volunteer/other emp.	45	2.3%	--	--
No response	1	0.0%	82	20.5%
Total	1,991	100.0%	400	100.0%

Primary and Secondary Employment Position Specialty As displayed in Table 27, most CNPs were primarily employed in the practice specialty areas of adult health/family health, 37.3% (743), 'other' specialty, 11.3% (225), acute care/critical care/emergency/trauma, 9.3% (186), and psychiatric/mental health/substance abuse, 8.2% (164). CNPs who worked for two or more employers also reported their secondary positions were in these same areas.

Table 27: CNP Employment Position Specialty

Position Specialty	Primary		Secondary	
Acute care/critical care	110	5.5%	27	6.8%
Adult health	133	6.7%	20	5.0%
Anesthesia	4	0.2%	0	0.0%
Cardiology	72	3.6%	4	1.0%
Community health	14	0.7%	5	1.3%
Emergency/trauma	76	3.8%	26	6.5%
Family health	610	30.6%	92	23.0%
Genetics	3	0.1%	0	0.0%
Geriatric/gerontology	36	1.8%	10	2.5%
Home health	8	0.4%	2	0.5%
Informatics	1	0.1%	0	0.0%
Maternal-child health/obstetrics	12	0.6%	1	0.2%
Medical-surgical	31	1.6%	3	0.8%
Neonatal	51	2.6%	3	0.8%
Nephrology	15	0.7%	1	0.2%
Neurology/Neurosurgical	46	2.3%	1	0.2%
Occupational health	13	0.6%	1	0.2%
Oncology	48	2.4%	2	0.5%
Orthopedic	43	2.2%	1	0.2%
Palliative care/hospice	16	0.8%	2	0.5%
Pediatrics	43	2.2%	4	1.0%
Perioperative	4	0.2%	0	0.0%
Primary care	87	4.4%	10	2.5%
Psychiatric/mental health/substance abuse	164	8.2%	32	8.0%
Public health	0	0.0%	0	0.0%
Radiology	1	0.1%	0	0.0%
Rehabilitation	4	0.2%	0	0.0%
School health	1	0.1%	1	0.2%
School of nursing	0	0.0%	0	0.0%
Urologic	11	0.5%	0	0.0%
Women's health	64	3.2%	10	2.5%
Other specialty	225	11.3%	54	13.6%
Unemployed/retired/volunteer/other emp.	45	2.3%	--	--
No response	0	0.0%	88	22.0%
TOTAL	1,991	100.0%	400	100.0%

Certified Registered Nurse Anesthetists
South Dakota Supply Trends

Licensure Status As of December 5, 2024, the SDBON reported 554 actively licensed CRNAs in South Dakota's supply, Figure 33; a gain of 35 nurses from 2022 to 2024, a 6.7% increase since 2022.

From January 1, 2023 to December 5, 2024, a total of 74 CRNAs were added to South Dakota's active supply; 38 were added as new graduates and 36 were added by endorsement from another state. Overall, South Dakota had an increase in supply during this time period of 35 nurses with a net loss of 39 CRNAs, Figure 34. Possible reasons for the loss of these nurses may be due to retiring from the profession, moving out of South Dakota, or leaving the profession. According to the 2023 Workforce Report, 64 CRNAs indicated during that time period that they planned to retire or leave in the next five years. This may account for the majority of the CRNAs lost from South Dakota's workforce.

Figure 33: Actively Licensed CRNAs
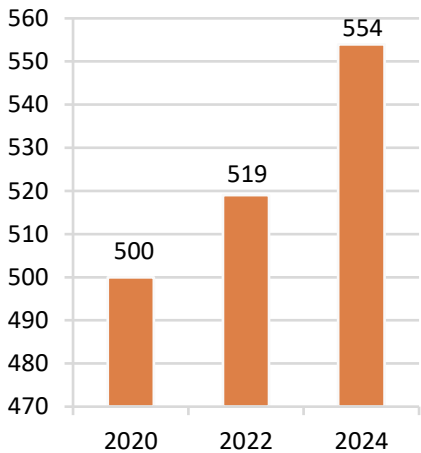
Figure 34: CRNA Workforce Gains and Losses
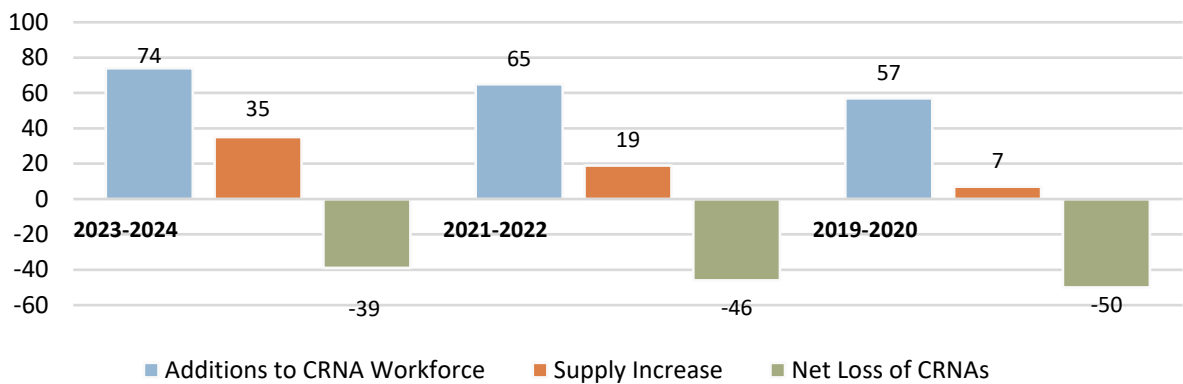
Certification/Practice Focus All actively licensed CRNAs held certification through the National Board of Certification and Recertification for Nurse Anesthetists (NBCRNA).

Demographics of CRNA Supply

Gender/Race/Ethnicity Licensure data revealed 51.3% (284) of actively licensed CRNAs were male and 48.7% (270) were female. The majority of actively licensed CRNAs, 97.3% (539) were white/Caucasian. Table 28 displays comparisons of race/ethnic distribution in the United States, South Dakota, and of actively licensed CRNAs.

Table 28: CRNA Race/Ethnic Distribution

	American Indian/Alaska Native	Asian/Pacific Islander	Black/African American	Hispanic/ Latino	Two or More Races/Other	White/ Caucasian
U.S. Population[3]	1.3%	6.7%	13.7%	19.5%	3.1%	58.4%
SD Population[3]	8.5%	1.9%	2.6%	5.1%	2.8%	80.5%
SD CRNAs	0.0% (0)	0.5% (3)	0.4% (2)	0.7% (4)	1.1% (6)	97.3% (539)

Age Age distribution of actively licensed CRNAs is shown in Table 29 and Figure 35. A large percentage of CRNAs, 32.1% (178) were 40 years or younger and 23.5% (130) were 56 years or older. The average age of a CRNA in South Dakota was 55.4 years. Employment data revealed 14.1% (69) of CRNAs were retired or intend "to leave or retire from nursing within the next five years".

Table 29: CRNA Age

Age Range	2024		2022		2020	
<26	0	0.0%	0	0.0%	0	0.0%
26-30	14	2.5%	16	3.1%	8	1.6%
31-35	70	12.6%	67	12.9%	70	14.0%
36-40	94	17.0%	97	18.7%	98	19.6%
41-45	99	17.9%	83	16.0%	75	15.0%
46-50	80	14.4%	73	14.0%	65	13.0%
51-55	67	12.1%	57	11.0%	52	10.4%
56-60	51	9.2%	48	9.2%	42	8.4%
61-65	41	7.4%	46	8.9%	53	10.6%
>65	38	6.9%	32	6.2%	37	7.4%
Total	554	100.0%	519	100.0%	500	100.0%

Figure 35: CRNA Age
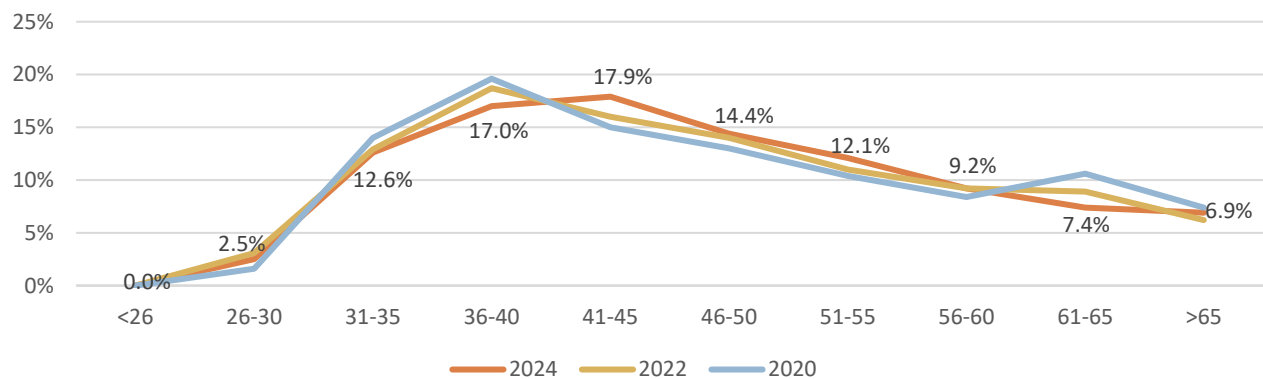
Highest Academic Achievement As shown in Figure 36, 94.3% (463) of CRNAs reported they held a graduate degree as their highest educational degree; 66.6% (327) held a nursing master's degree. CRNAs enrolled in a program leading to an advanced nursing degree comprised 0.8% (4) of respondents; 3 were enrolled in a doctorate of nursing practice (DNP) program and 1 in a master's program. Only 5.7% (28) did not hold a graduate degree; they were licensed prior to the graduate degree requirement.

Figure 36: CRNA Highest Academic Achievement
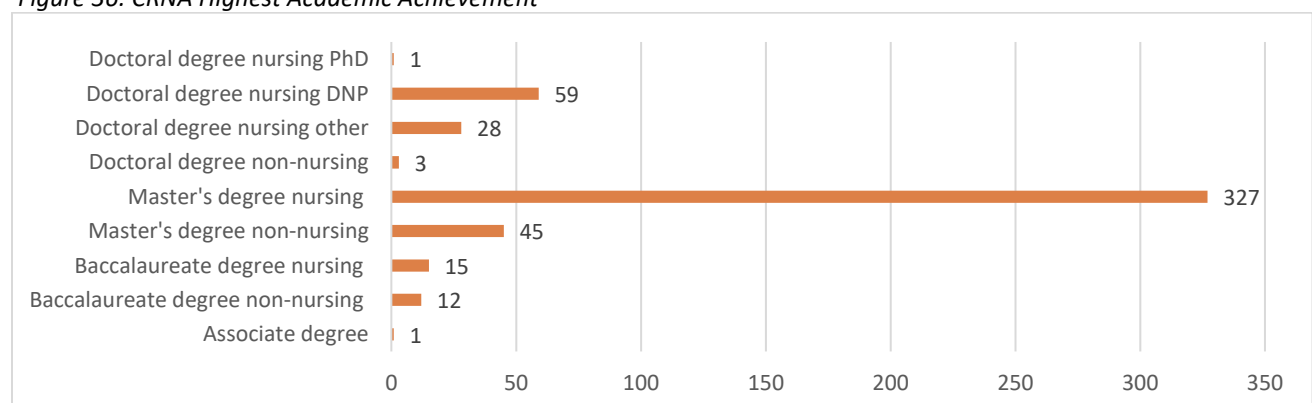
Employment and Practice Characteristics

Most CRNAs, 80.8% (397), reported their primary place of employment within the state of South Dakota; 14.7% (72) reported neighboring states of Iowa, Minnesota, Montana, Nebraska, North Dakota, and Wyoming; 3.9% (19) in other states; and 0.6% (3) were not employed in a nursing position. The majority, 83.1% (408) were employed by one employer, 10.4% (51) by two employers, and 5.9% (29) by three or more employers.

Consistent with previous reports, most CRNAs, 84.3% (414) reported being employed full-time, working 32 or more hours per week. The average number of hours worked by full-time CRNAs was 40.8 hours per week. CRNAs who worked part-time, 31 hours or less per week, comprised 10.4% (51) of respondents; they worked an average of 28.4 hours per week. The 4.7% (23) of CRNAs who reported working on a per diem basis, an arrangement wherein a nurse is employed on an as needed basis, worked an average of 19.9 hours per week. The remaining 0.6% (3) of CRNAs were retired and employed in non-nursing positions.

Time Involved in Direct Patient Care As shown in Figure 37, most CRNAs, who reported practicing as a nurse, indicated they spent a significant percentage of time involved in direct patient care.

Figure 37: Percentage of Time Spent in Direct Patient Care
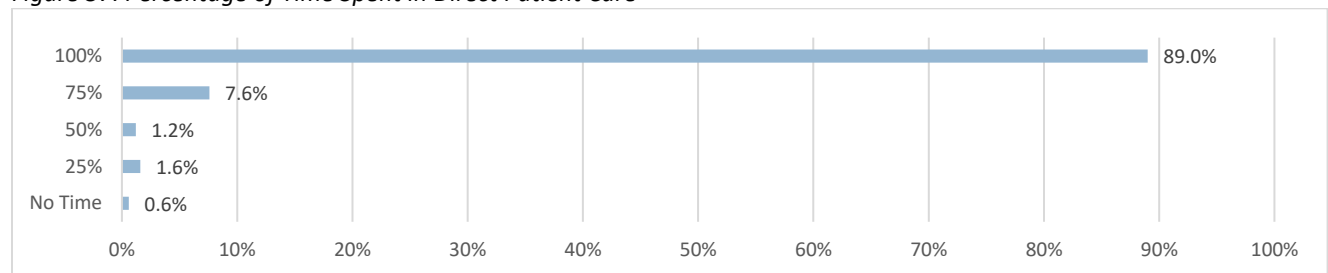
Primary Employment Setting As shown in Figure 38, the majority of CRNAs were employed in hospitals, 85.5% (420), and ambulatory care settings, 9.6% (47). CRNA respondents employed in academia/school of nursing comprised 1.0% (5), the remaining were employed in hospice care, 0.6% (3), 'other' settings, 2.7% (13), and 0.6% (3) were unemployed, retired, or employed in other fields.

The majority of CRNAs indicated their primary area of practice was in the specialty area of anesthesia, 97.4% (478), 1.0% (5) reported 'other' clinical areas, and 1.6% (8) did not respond.

Figure 38: CRNA Primary Employment Setting
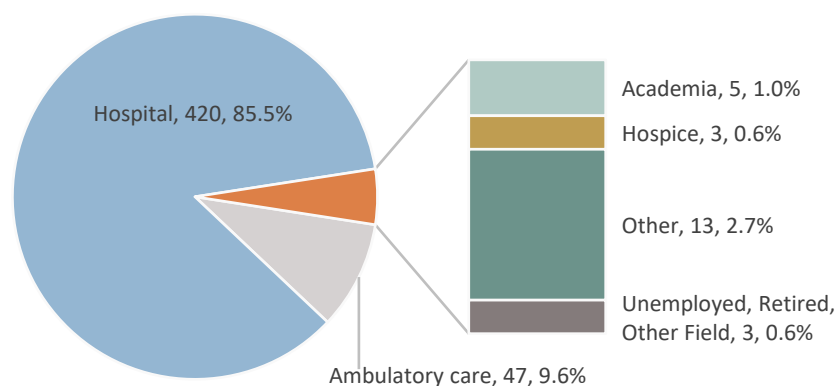
Secondary Employment Setting CRNAs who worked for two or more employers comprised 16.3% (80) of respondents. Of those respondents, 17 CRNAs worked in ambulatory care, 1 in academia, 23 in 'other' settings, and 39 did not provide a response; see Figure 39.

Figure 39: CRNA Secondary Employment Setting
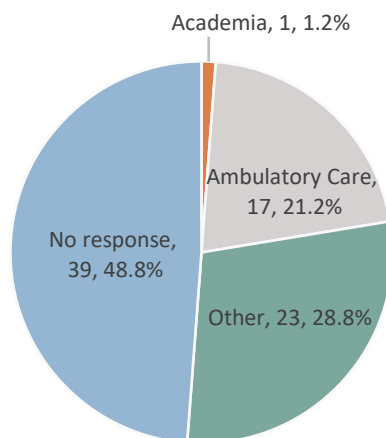
Clinical Nurse Specialists
South Dakota Supply Trends

Licensure Status As of December 5, 2024, the SDBON reported 43 actively licensed CNSs in South Dakota's supply, Figure 40; a loss of 6 nurses from 2022 to 2024, a 12.2% decrease since 2022.

From January 1, 2023 to December 5, 2024, a total of 2 CNSs were added to South Dakota's active supply; 1 was added as a new graduate and 1 was added by endorsement from another state. Overall, South Dakota had a decrease in supply during this time period of 6 nurses with a net loss of 4 CNSs, Figure 41. Possible reasons for the loss of these nurses may be due to retirement, moving out of South Dakota, or leaving the profession. According to the 2023 Workforce Report, 20 CNSs indicated they planned to retire or leave in the next five years, accounting for the loss in workforce.

Figure 40: Actively Licensed CNSs
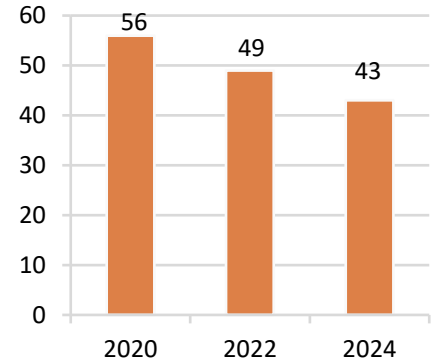
Figure 41: CNS Workforce Gains and Losses

Additions to CNS workforce — Supply Decrease — Net Loss of CNSs
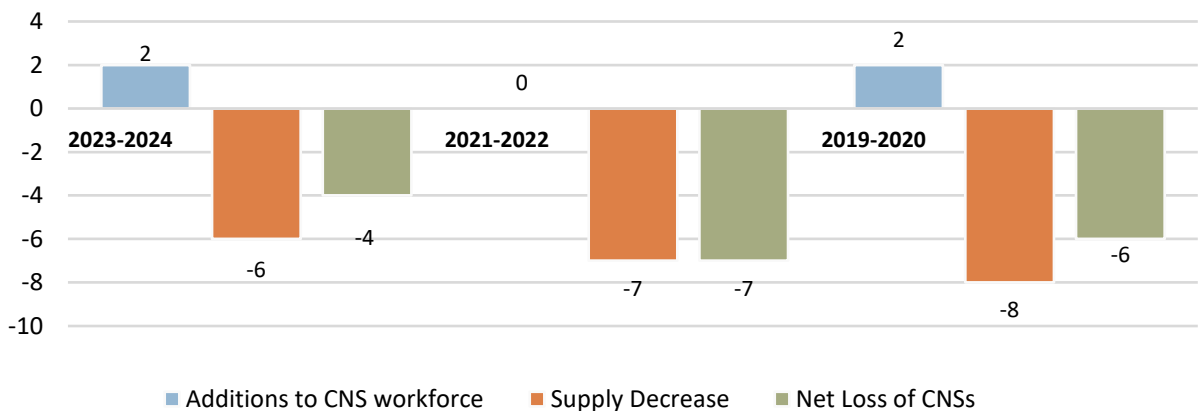
Certification/Practice Foci CNSs were required to hold national certification in at least one focus/specialty area of practice to meet licensure requirements. The majority of CNSs however, 55.8% (24), were waived from this requirement because they were licensed prior to July 1, 1996. Figure 42 shows the most common areas of certification for the remaining 44.2% (19) of CNSs, adult/gerontology 23.3% (10), psychiatric-mental health 14.0% (6), diabetes 4.6% (2), and pediatrics 2.3% (1).

Figure 42: CNS Certification Focus Areas
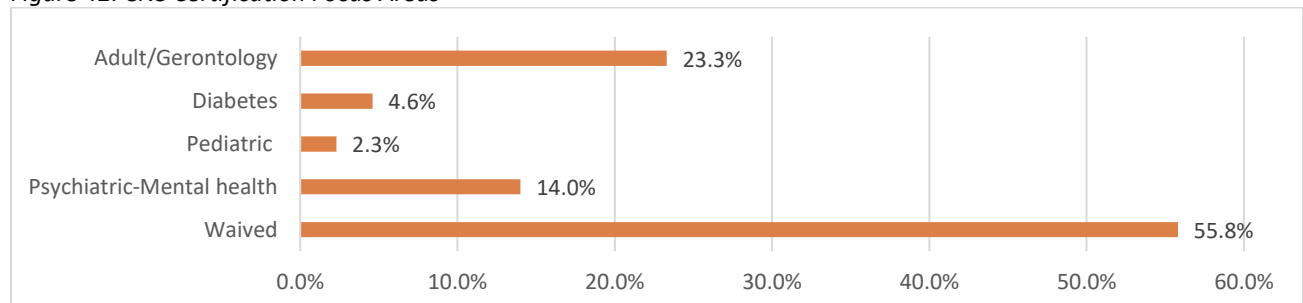
Demographics of CNS Supply

Gender/Race/Ethnicity Consistent with previous reports, the majority of actively licensed CNSs, 95.4% (41) were female and white/Caucasian. Table 30 displays comparisons of ethnic distribution in the United States, South Dakota, and of actively licensed CNSs.

*Table 30: CNS Race/Ethnic Distribution*

	American Indian/Alaska Native	Asian/Pacific Islander	Black/African American	Hispanic/ Latino	Two or More Races/Other	White/ Caucasian
U.S. Population[3]	1.3%	6.7%	13.7%	19.5%	3.1%	58.4%
SD Population[3]	8.5%	1.9%	2.6%	5.1%	2.8%	80.5%
SD CNSs	2.3% (1)	0.0% (0)	0.0% (0)	0.0% (0)	2.3% (1)	95.4% (41)

Age Distribution of actively licensed CNSs by age is shown in Table 31 and Figure 43. A large percentage, 76.8% (33), were 56 years or older; the average age was 62. Renewal data revealed 55.0% (22) of CNSs were retired or intend "to leave or retire from nursing within the next five years".

Table 31: CNS Age

Age Range	2024		2022		2020	
<26	0	0.0%	0	0.0%	0	0.0%
26-30	0	0.0%	0	0.0%	0	0.0%
31-35	0	0.0%	1	2.0%	1	1.8%
36-40	2	4.6%	1	2.0%	1	1.8%
41-45	1	2.3%	0	0.0%	1	1.8%
46-50	3	7.0%	3	6.1%	4	7.1%
51-55	4	9.3%	4	8.2%	4	7.1%
56-60	2	4.6%	6	12.2%	12	21.4%
61-65	13	30.2%	21	43.0%	23	41.1%
>65	18	42.0%	13	26.5%	10	17.9%
Total	43	100.0%	49	100.0%	56	100.0%

Figure 43: CNS Age
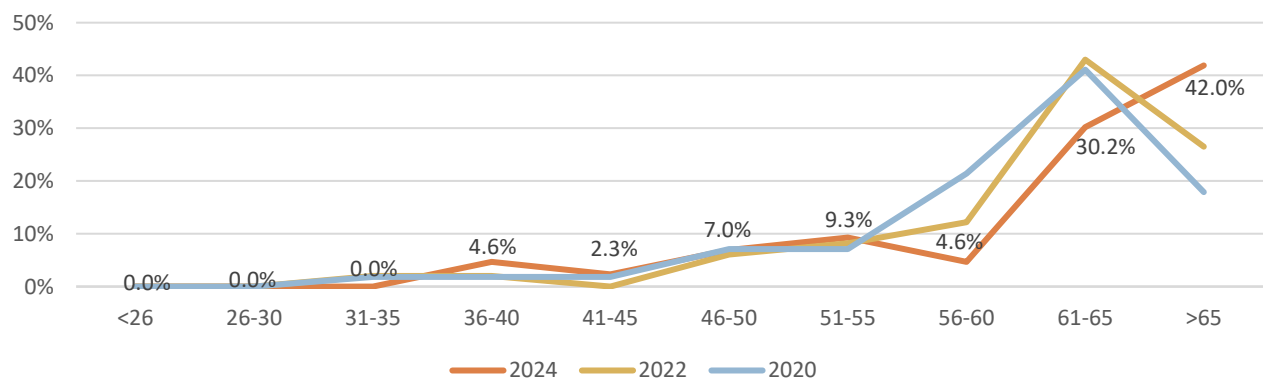
Highest Academic Achievement All respondents (40) reported their highest educational preparation as a graduate degree; those prepared with a doctoral degree comprised 32.5% (13) and 67.5% (27) held a master's degree in nursing. No CNS respondents reported enrollment in a program leading to an advanced nursing degree.

Figure 44: CNS Highest Academic Achievement
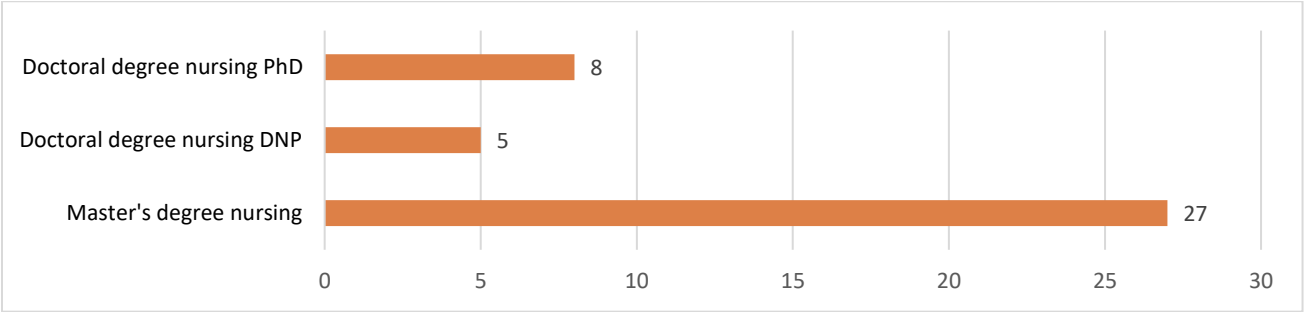
Employment and Practice Characteristics

Most CNS respondents, 65.0% (26), reported their primary place of employment within the state of South Dakota; 2.5% (1) reported employment in neighboring states of Iowa, North Dakota, and Wyoming; and 12.5% (5) in other states. The majority, 72.5% (29) were employed by one employer, 7.5% (3) by two employers, and the remaining 20.0% (8) were retired or not employed in a nursing position.

Consistent with previous reports, most CNSs, 50.0% (20) reported being employed full-time, working 32 or more hours per week. The average number of hours worked by full-time CNSs was 41.6 hours per week. CNSs who worked part-time, 31 hours or less per week, comprised 27.5% (11) of respondents; they worked an average of 18.3 hours per week. Only 2.5% (1) CNSs reported working on a per diem basis, an arrangement wherein a nurse is employed on an as needed basis, worked an average of 4 hours per week. The remaining 20.0% (8) of CNSs were retired (3), volunteering (4), or employed in non-nursing positions (1).

Time Involved in Direct Patient Care Figure 45 provides the percentage of time CNSs, who reported practicing as a nurse, were involved in direct patient care.

Figure 45: Percentage of Time Spent in Direct Patient Care
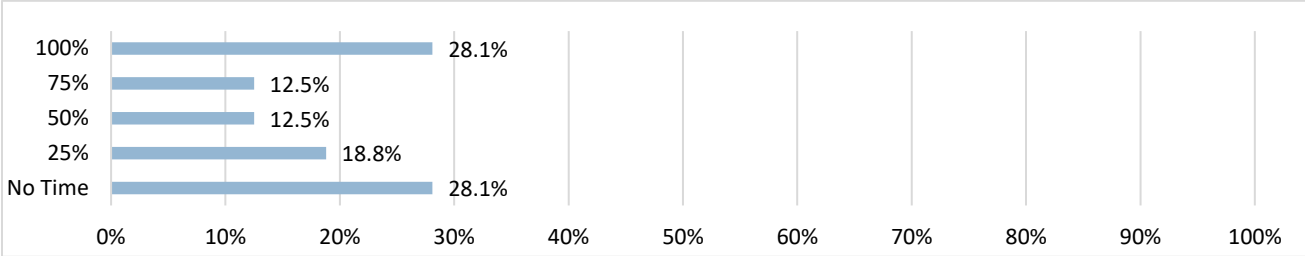
Primary and Secondary Employment Settings As shown in Table 32, the highest percentage of CNSs were employed in the hospital setting, 30.0% (12) and ambulatory care, 15.0% (6). CNSs who indicated they worked for two or more employers comprised 7.5% (3) of respondents; those CNSs were employed in community health and 'other' settings.

Table 32: CNS Employment Setting

Employment Settings	Primary		Secondary	
Ambulatory care	6	15.0%	0	0.0%
Community/home/public health	4	10.0%	1	33.3%
Hospital	12	30.0%	0	0.0%
Nursing home/extended care/assisted living facility	1	2.5%	0	0.0%
Policy/planning/regulatory/licensing agency	0	0.0%	0	0.0%
School health services	1	2.5%	0	0.0%
School of nursing	3	7.5%	0	0.0%
Other	5	12.5%	2	66.7%
Unemployed/retired/volunteer/other employment	8	20.0%	--	--
No response	--	--	--	--
Total	40	100.0%	3	100.0%

Primary and Secondary Employment Position Specialty As displayed in Table 33, most CNSs were primarily employed in the practice specialty areas of 'other' specialty, 20.0% (8), psychiatric/mental health/substance abuse, 12.5% (5), and acute care/critical care, 12.5% (5). Three CNSs reported working for two or more employers.

Table 33: CNS Employment Position Specialty

Position Specialty	Primary		Secondary	
Acute care/critical care	5	12.5%	0	0.0%
Adult/family health	2	5.0%	1	33.3%
Community/home/public health	2	5.0%	1	33.3%
Geriatric/gerontology	3	7.5%	0	0.0%
Medical-surgical	2	5.0%	0	0.0%
Neonatal	1	2.5%	0	0.0%
Neurology-Neurosurgical	1	2.5%	0	0.0%
Oncology	1	2.5%	0	0.0%
Palliative care/hospice	1	2.5%	0	0.0%
Psychiatric/mental health/substance abuse	5	12.5%	0	0.0%
Rehabilitation	1	2.5%	0	0.0%
Other specialty	8	20.0%	1	33.3%
Retired/unemployed/volunteer/other employment	8	20.0%	--	--
No response	--	--	--	--
TOTAL	40	100.0%	3	100.0%

APRN Distribution

South Dakota's 12 regions are shown on the map in Figure 46. The number of APRNs who resided in these regions as of December 5, 2024 is provided in Table 34. The U.S. Census Bureau's[3] annual estimate of South Dakota's population was used to compare the state's county population to the number of APRNs residing in a county or region. Consistent with previous reports, the majority of nurses resided in Minnehaha and Pennington counties (Regions 4 and 12).

Figure 46. Regional State Map
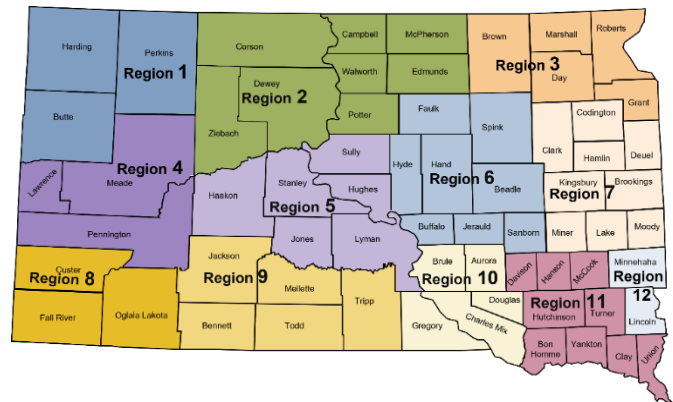
Table 34: APRN Regional Distribution

Region	Counties / State	Region Population[3]	Region's % of State Population	Number Residing in Region (Percent of Total APRN Population)			
				CNMs	CNPs	CRNAs	CNSs
Region 1	3 Counties: Butte, Harding, and Perkins	15,021	1.6%	0 (0.0%)	13 (0.9%)	0 (0.0%)	0 (0.0%)
Region 2	8 Counties: Campbell, Corson, Dewey, Edmunds, McPherson, Potter, Walworth, and Ziebach	26,725	3.0%	1 (2.8%)	27 (1.8%)	5 (1.1%)	0 (0.0%)
Region 3	5 Counties: Brown, Day, Grant, Marshall, and Roberts	65,333	7.1%	0 (0.0%)	79 (5.4%)	19 (4.1%)	0 (0.0%)
Region 4	3 Counties: Lawrence, Meade, and Pennington	174,910	19.0%	8 (22.2%)	306 (20.7%)	107 (23.2%)	6 (15.8%)
Region 5	6 Counties: Haakon, Hughes, Jones, Lyman, Stanley, and Sully	28,572	3.1%	1 (2.8%)	35 (2.4%)	10 (2.2%)	0 (0.0%)
Region 6	8 Counties: Beadle, Buffalo, Faulk, Hand, Hyde, Jerauld, Sanborn, and Spink	38,144	4.1%	0 (0.0%)	36 (2.4%)	3 (0.6%)	0 (0.0%)
Region 7	9 Counties: Brookings, Clark, Codington, Deuel, Hamlin, Kingsbury, Lake, Miner, and Moody	104,741	11.4%	0 (0.0%)	97 (6.6%)	21 (4.6%)	1 (2.6%)
Region 8	3 Counties: Custer, Fall River, and Oglala Lakota	29,944	3.3%	3 (8.3%)	28 (1.9%)	1 (0.2%)	1 (2.6%)
Region 9	5 Counties: Bennett, Jackson, Mellette, Tripp, and Todd	22,752	2.5%	1 (2.8%)	25 (1.7%)	4 (0.9%)	1 (2.6.%)
Region 10	5 Counties: Aurora, Brule, Charles Mix, Douglas, and Gregory	24,189	2.6%	2 (5.6%)	40 (2.7%)	4 (0.9%)	1 (2.6%)
Region 11	9 Counties: Bon Homme, Clay, Davison, Hanson, Hutchinson, McCook, Turner, Union, and Yankton	108,819	11.8%	3 (8.3%)	154 (10.4%)	50 (10.9%)	3 (7.9%)
Region 12	2 Counties: Lincoln and Minnehaha	280,168	30.5%	17 (47.2%)	635 (43.1%)	236 (51.3%)	25 (65.8%)
In-State Total	**66 counties**	**919,318**	**100.0%**	**36 (62.0%)**	**1,475 (56.4%)**	**460 (83.0%)**	**38 (88.4%)**
Out-of-State	Iowa, Minnesota, Montana, Nebraska, North Dakota, and Wyoming	--	--	11 (19.0%)	312 (11.9%)	68 (12.3%)	3 (7.0%)
	Other States/Jurisdictions	--	--	11 (19.0%)	829 (31.7%)	26 (4.7%)	2 (4.6%)
Total		--	--	**58 (100%)**	**2,616 (100%)**	**554 (100%)**	**43 (100%)**

Table 35 displays the number of APRNs in each of the state's 66 counties.

Table 35: APRN County Distribution

County	County Population[3]	CNMs	CNPs	CRNAs	CNSs	County	County Population[3]	CNMs	CNPs	CRNAs	CNSs
Aurora	2,782	1	3	1	0	Jackson	2,776	0	3	1	1
Beadle	19,591	0	12	3	0	Jerauld	1,660	0	4	0	0
Bennett	3,305	0	4	0	0	Jones	855	0	2	0	0
Bon Homme	7,065	0	10	2	0	Kingsbury	5,276	0	7	1	0
Brookings	35,980	0	29	5	0	Lake	11,031	0	12	4	0
Brown	37,733	0	49	15	0	Lawrence	28,053	2	50	14	0
Brule	5,311	0	7	1	1	Lincoln	73,238	7	231	96	6
Buffalo	1,884	0	1	0	0	Lyman	3,705	0	1	1	0
Butte	10,863	0	12	0	0	Marshall	4,390	0	5	0	0
Campbell	1,340	0	1	1	0	McCook	5,809	1	8	0	0
Charles Mix	9,240	1	17	1	0	McPherson	2,334	0	1	0	0
Clark	3,948	0	3	0	0	Meade	30,954	0	42	12	2
Clay	15,431	0	9	2	0	Mellette	1,851	1	4	0	0
Codington	28,971	0	22	11	0	Miner	2,280	0	4	0	0
Corson	3,782	0	3	0	0	Minnehaha	206,930	10	404	140	19
Custer	9,117	1	16	1	1	Moody	6,450	0	12	0	1
Davison	19,922	0	22	7	0	Oglala Lakota	13,434	1	4	0	0
Day	5,451	0	6	0	0	Pennington	115,903	6	214	81	4
Deuel	4,354	0	3	0	0	Perkins	2,834	0	1	0	0
Dewey	5,208	0	5	0	0	Potter	2,413	0	2	0	0
Douglas	2,838	0	5	1	0	Roberts	10,206	0	10	3	0
Edmunds	4,057	0	6	3	0	Sanborn	2,399	0	4	0	0
Fall River	7,393	1	8	0	0	Spink	6,166	0	7	0	0
Faulk	2,151	0	2	0	0	Stanley	3,043	0	4	2	0
Grant	7,553	0	9	1	0	Sully	1,494	0	3	0	0
Gregory	4,018	0	8	0	0	Todd	9,199	0	3	0	0
Haakon	1,851	0	0	0	0	Tripp	5,621	0	11	3	0
Hamlin	6,451	0	5	0	0	Turner	9,027	0	13	1	0
Hand	3,107	0	4	0	0	Union	17,183	1	38	27	2
Hanson	3,471	0	6	1	0	Walworth	5,269	1	7	1	0
Harding	1,324	0	0	0	0	Yankton	23,517	1	37	6	0
Hughes	17,624	1	25	7	0	Ziebach	2,322	0	2	0	0
Hutchinson	7,394	0	11	4	1	In-State Total	919,318	36	1,475	460	38
Hyde	1,186	0	2	0	0	Out-of-State		22	1,141	94	5
						Total		58	2,616	554	43

Employment Data Collection Form

1. What type of nursing degree / credential qualified you for your first U.S. nursing license?
   - ☐ Vocational / Practical Certificate Nursing
   - ☐ Diploma – Nursing
   - ☐ Associate Degree – Nursing
   - ☐ Baccalaureate Degree – Nursing
   - ☐ Master's Degree – Nursing
   - ☐ Doctoral Degree – Nursing (PhD)
   - ☐ Doctoral Degree – Nursing (DNP)

2. What is your highest level of education?
   - ☐ Vocational / Practical Certificate Nursing
   - ☐ Diploma – Nursing
   - ☐ Associate Degree – Nursing
   - ☐ Associate Degree – Non-Nursing
   - ☐ Baccalaureate Degree – Nursing
   - ☐ Baccalaureate Degree – Non-Nursing
   - ☐ Master's Degree – Nursing
   - ☐ Master's Degree – Non-Nursing
   - ☐ Doctoral Degree – Nursing (PhD)
   - ☐ Doctoral Degree – Nursing Practice (DNP)
   - ☐ Doctoral Degree – Nursing Other
   - ☐ Doctoral Degree – Non-Nursing

3. Year of initial U.S. Licensure: _____

4. Country of entry-level education: _____

5. What is your employment status?
   - ☐ Actively employed in nursing or in a position that requires a nurse license (select one)
     - ☐ Full-time
     - ☐ Part-time
     - ☐ Per diem
   - ☐ Actively employed in a field other than nursing (select one)
     - ☐ Full-time
     - ☐ Part-time
     - ☐ Per diem
   - ☐ Working in nursing only as a volunteer
   - ☐ Unemployed (select one)
     - ☐ Seeking work as a nurse
     - ☐ Not seeking work as a nurse
   - ☐ Retired

6. In how many positions are you currently employed as a nurse?
   - ☐ 1
   - ☐ 2
   - ☐ 3 or more

7. How many hours do you work during a typical week in all your nursing positions?
   - ☐ <10 hours
   - ☐ 11-20 hours
   - ☐ 21-30 hours
   - ☐ 31-40 hours
   - ☐ 41-50 hours
   - ☐ 51-60 hours
   - ☐ >60 hours

8. Indicate the zip code, city, state, and county of your primary employer.
   - Zip Code: _____
   - City: _____
   - State: _____
   - County: _____

9. Identify the type of setting that most closely corresponds to your nursing practice position.
    - ☐ Ambulatory Care Setting
    - ☐ Assisted Living Facility
    - ☐ Community Health
    - ☐ Correctional Facility
    - ☐ Dialysis Center
    - ☐ Home Health
    - ☐ Hospice
    - ☐ Hospital
    - ☐ Insurance Claims / Benefits
    - ☐ Nursing Home / Extended Care
    - ☐ Occupational Health
    - ☐ Policy / Planning Regulatory / Licensing Agency
    - ☐ Public Health
    - ☐ School Health Services
    - ☐ School of Nursing
    - ☐ Other

10. Identify the position title that most closely corresponds to your nursing practice position.
    - ☐ Advanced Practice Registered Nurse
    - ☐ Case Manager
    - ☐ Consultant
    - ☐ Nurse Executive
    - ☐ Nurse Faculty / Educator
    - ☐ Nurse Manager
    - ☐ Nurse Researcher
    - ☐ Staff Nurse
    - ☐ Other – Health Related
    - ☐ Other – Non-Health Related

11. Identify the employment specialty that most closely corresponds to your nursing practice position.
    - ☐ Acute Care/ Critical Care
    - ☐ Adult Health
    - ☐ Anesthesia
    - ☐ Cardiology
    - ☐ Community
    - ☐ Emergency / Trauma
    - ☐ Family Health
    - ☐ Genetics
    - ☐ Geriatric / Gerontology
    - ☐ Home Health
    - ☐ Informatics
    - ☐ Information Technology
    - ☐ Maternal-Child Health / Obstetrics
    - ☐ Medical / Surgical
    - ☐ Neonatal
    - ☐ Nephrology
    - ☐ Neurology / Neurosurgical
    - ☐ Occupational Health
    - ☐ Oncology
    - ☐ Orthopedic
    - ☐ Palliative Care / Hospice
    - ☐ Pediatrics
    - ☐ Perioperative
    - ☐ Primary Care
    - ☐ Psychiatric / Mental Health / Substance Abuse
    - ☐ Public Health
    - ☐ Radiology
    - ☐ Rehabilitation
    - ☐ School Health
    - ☐ Urologic
    - ☐ Women's Health
    - ☐ Other – Clinical Specialties
    - ☐ Other – Non-Clinical Specialties

12. What percent of your current position involves direct patient care?
    - ☐ 0%
    - ☐ 25%
    - ☐ 50%
    - ☐ 75%
    - ☐ 100%

13. If unemployed, please indicate the reasons.
    - ☐ Difficulty in finding a nursing position
    - ☐ Disabled
    - ☐ Inadequate Salary
    - ☐ School
    - ☐ Taking care of home and family
    - ☐ Other

14. Formal Education
    - ☐ I am not taking courses toward an advanced degree in nursing
    - ☐ I am currently taking courses toward an advanced degree in nursing

15. Do you intend to leave / retire from nursing practice in the next 5 years?
    - ☐ Yes
    - ☐ No

16. Other states in which you have ever held a license:
    Active License: _____
    Inactive License: _____
    List all states where currently practicing nursing, whether physically or electronically: _____

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