RURAL NURSING EDUCATION PROGRAM

The Rural Nursing Education Program (RNEP) is transforming Washington's rural nursing workforce by providing online education, local clinical training in rural communities, and support for students from rural and disadvantaged backgrounds preparing to serve rural communities. ***The program was developed and is guided by ongoing engagement with rural communities and the Washington State Board of Nursing.***

KEY FACTS

55 CURRENT RNEP STUDENTS

16 CRITICAL ACCESS HOSPITAL PARTNERS

110 NURSE PRECEPTORS

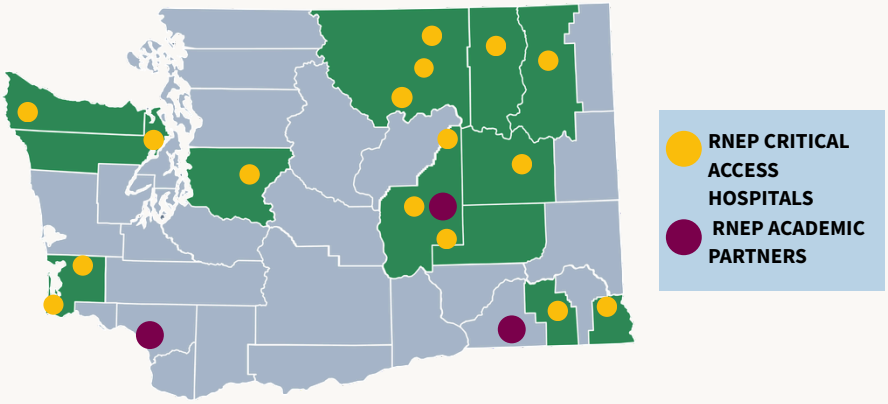
3 ACADEMIC PARTNERS

155 RNEP NURSES PROJECTED TO GRADUATE BY 2030

STUDENT RESOURCES

1:1 ACADEMIC COACHING
TUTORING
COMPUTERS
TUITION SUPPORT
BOOKS AND SUPPLIES
PEER MENTORING
FINANCIAL STIPENDS
SOCIAL WELL-BEING

OUR PARTNERS ACROSS WASHINGTON



PROGRAM IMPACT

"The RNEP Program has saved me and finally given me the chance I need to become a nurse." *-RNEP Student*

"We are so excited to 'grow our own' and are so thankful for this amazing opportunity, and our students are still in disbelief that their dream will soon be a reality."
-Critical Access Hospital Partner

"As an academic partner, we believe this program is essential to the health of rural populations and the sustainability of local healthcare systems, and we are proud to support this innovative approach to nursing education."
-Walla Walla Community College

Financial and geographic barriers to attend nursing school remain the greatest obstacles to entering and completing nursing education.

Among students responding to the intake survey, 80% reported they would have been either very unlikely or only somewhat likely to pursue nursing education without the program.

WASHINGTON RURAL HEALTH TRANSFORMATION

Washington State Department of HEALTH

STUDENTS AT A GLANCE

34
AVERAGE STUDENT AGE

100 %
OF STUDENTS REPORT COMING FROM A DISADVANTAGED BACKGROUND

Early survey results are encouraging and suggest the program is advancing its goal of strengthening Washington's rural healthcare workforce while creating educational opportunities for students who may otherwise have been unable to pursue nursing careers.

WHY RNEP MATTERS

STUDENTS

- **Earn while learning**
- **Stay connected to family and community**
- **Reduce travel and relocation costs**
- **Build careers close to home**

HEALTHCARE FACILITIES

- **Strengthen recruitment**
- **Improve retention**
- **Develop future nurse leaders**
- **Build sustainable workforce pipelines**

RURAL COMMUNITIES

- **Increased access to healthcare**
- **Stronger local healthcare systems**
- **Improved economic stability**
- **Better patient outcomes**

PROGRAM INNOVATION

RNEP leverages innovative technology and educational approaches to expand access and strengthen rural clinical training.

- **Telepresence robots for remote monitoring of students by college faculty**
- **Virtual reality simulation to enhance clinical training**
- **Development of a long-term care immersion course**
- **Development of a rural nurse preceptor training program**

THE FUTURE OF RNEP

The 2026 NSI National Health Care Retention & RN Staffing Report estimates that converting one travel-staffed nursing position to a permanent RN position saves a hospital approximately $66,081 annually. Using this estimate, the potential savings associated with RNEP are over $10 million annually if all 155 students fill travel-dependent positions.

RNEP was established via legislative provisos for fiscal years 2024, 2026, and 2027. With support from federal grants, RNEP expanded to enroll students across 16 rural communities in WA. With existing funding slated to end in 2030, RNEP will need to stop enrolling new students starting in 2028. Continued investment will be necessary to sustain RNEP's role in maintaining the rural nursing pipeline.

This program is supported by the Centers for Medicare & Medicaid Services (CMS) of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling $181,257,515.06 to the Washington State Health Care Authority with 80 percent funded by CMS/HHS and $914,538 and 20 percent funded by other source(s). The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement by, CMS/HHS or the U.S. Government.