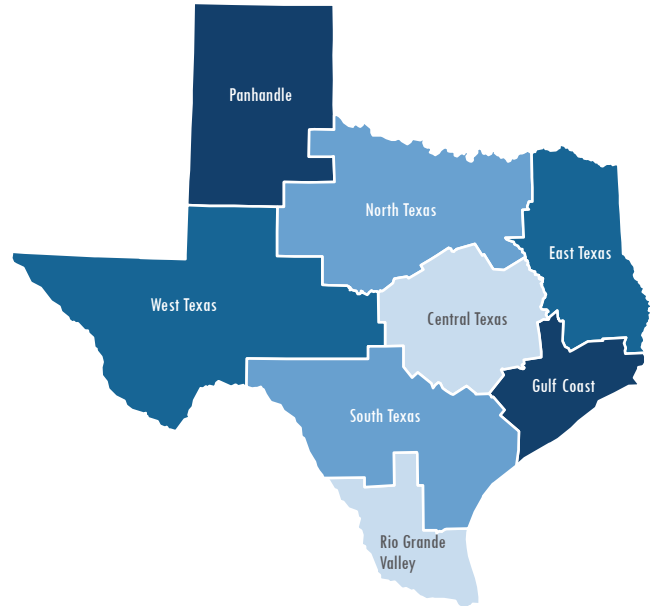




**T**he Hospital Nurse Staffing Survey (HNSS) assesses the size and effects of the nursing shortage in hospitals, Texas' largest employer of nurses. During the spring of 2014, the TCNWS administered the HNSS to 619 Texas hospitals. These included for-profit, non-profit, public, and Texas Department of State Health Services-operated hospitals, as well as hospitals linked to academic institutions; military hospitals were not surveyed. The facilities surveyed were general acute care, psychiatric, special, and rehabilitation hospitals. 428 (69.1%) hospitals responded to the survey. The hospitals that completed the 2014 HNSS were representative of all Texas hospitals by region and bed size.

Please refer to the full set of reports for more details on each topic. The following are highlights from the findings of the 2014 Hospital Nurse Staffing Survey.



## 2014 HNSS: Vacancy and Turnover

Nurse vacancy and turnover rates are among the key measures for assessing a nursing workforce shortage, the severity of the shortage, and changes in the nursing labor market over time. High vacancy and turnover rates can lead to negative outcomes that can affect quality of care such as losing experienced staff and increasing the workload and stress levels of existing staff.<sup>1</sup>

The position vacancy rate describes the proportion of all full-time equivalent (FTE) positions vacant across all responding hospitals in an area. The median facility turnover rate describes the mid-point of responses for each hospital.

### Vacancy Rates

#### RN Position Vacancy Rate (387 of 428 hospitals responded):

- The RN position vacancy rate remained constant between 2012 and 2014 at 8.1%.
- Regionally, RN position vacancy rates ranged from 5.2% in the Panhandle to 15.6% in Central Texas.
- Of 69,719 RN FTE positions reported statewide, 5,632 were vacant.

#### Advanced Practice Registered Nurses Position Vacancy Rate (153 of 428 hospitals responded):

- Responding hospitals reported 171 vacant FTEs out of 1,970 total APRN FTEs across the state.
- The statewide position vacancy rate for NPs was 10.6%, two percentage points lower than the vacancy rate in 2012 (12.5%). Regional vacancy rates for NPs ranged from 3.2% in the Rio Grande Valley to 19.9% in East Texas.
- For CNSs, the statewide position vacancy rate was 5.8%. This represents a considerable decrease from the 2012 vacancy rate for 17.9%. Regional position vacancy rates for Clinical Nurse Specialists ranged from 0% in the Rio Grande Valley to 50% in West Texas.
- The statewide CRNA position vacancy rate was 1.4%, two percentage points lower than the vacancy rate for this position in 2012 (3.5%). Regional rates ranged from 0% in Central and South Texas to 16.7% in the Panhandle.
- The statewide position vacancy rate for CNMs was 13.1%. These positions existed in eight responding

<sup>1</sup>American Association of Colleges of Nursing, "Nursing Shortage Fact Sheet", 2012, <http://www.aacn.nche.edu/media-relations/NrsgShortageFS.pdf>



hospitals in the North Texas, East Texas, Gulf Coast, and South Texas regions.

#### **LVN Position Vacancy Rate (368 of 428 hospitals responded):**

- The position vacancy rate for LVNs was 3.3%. Vacancy rates for LVNs have been on the decline since 2010.
- Regionally, LVN vacancy rates ranged from 0.8% in Central Texas to 6.0% in South Texas.
- Of a total 6,111 budgeted LVN FTE positions, 200 were vacant.

#### **Nurse Aide Position Vacancy Rate (377 of 428 hospitals responded):**

- The statewide position vacancy rate for NAs increased from 7.5% in 2012 to 9.0% in 2014.
- Regionally, NA vacancy rates ranged from 5.3% in the Rio Grande Valley to 12.7% in South Texas.
- Of the 17,387 NA FTE positions reported statewide, 1,562 were vacant.

## **Turnover Rates**

#### **RN Median Facility Turnover Rate (362 of 428 hospitals responded):**

- The median facility turnover rate among RNs in Texas hospitals was 23.6%. RN turnover rates in Texas hospitals ranged from 0% to 544% in 2014.

- Across the 8 regions, the median facility turnover rate for RNs ranged from 18.1% in the Gulf Coast to 28.6% in West Texas.

#### **Advanced Practice Registered Nurse Median Turnover Rate (147 of 428 hospitals responded):**

- The statewide median turnover rate was 0% for all APRN types with the exception of a 16.7% rate for CNMs.
- Median facility turnover rates for APRNs ranged from 0% to 400%.

#### **LVN Turnover Rate (323 of 428 hospitals responded):**

- The median facility turnover rate for LVNs remained unchanged from 2012 at 20%.
- The turnover rate between regions ranged from 13.8% in the Rio Grande Valley to 31.6% in East Texas.

#### **Nurse Aide Turnover Rate (343 of 428 hospitals responded):**

- The statewide median facility turnover rate among Nurse Aides was 28.6%.
- Regionally it ranged from 21.9% in the Gulf Coast to 42.9% in East Texas.

## **2014 HNSS: Recruitment**

#### **Where Hospitals Recruit (428 of 428 hospitals responded):**

- 98.4% of hospitals reported recruiting in Texas, while 27.1% recruited in other states and 10.7% recruited internationally.

#### **Filling Positions (428 of 428 hospitals responded):**

- The majority of nursing position types are filled within 60 days, though most positions in OR/ Recovery Care and Pediatric ICU/CCU take longer to fill.

## **2014 HNSS: Methods of Interim Staffing**

In all, 285 hospitals responded to questions related to the hours and costs of interim staffing and reported spending a total of \$635.1 million on interim staffing methods to fill over 16.7 million hours of interim staffing needs. Reported interim staffing methods included voluntary overtime, in-house staffing pool, contract/traveling nurses, per diem nurses, temporary staffing agencies, and managerial staff to provide staffing coverage.

- Voluntary overtime was the most frequently method used by the most hospitals in providing staffing coverage with 244 hospitals reporting the use of this method for over 6.4 million hours at a cost of over \$218 million.
- The use of contract/traveling nurses and managerial staff were the most costly methods of interim staffing per hour, averaging \$58.65 and \$51.82 respectively.



## 2014 HNSS: Hospital Staffing

- As a means of gauging trends in employment, hospitals were asked if there had been changes in the number of RN positions at their facility over the past two years. 44.4% of hospitals reported an increase in RNs positions, while 18.9% reported a decrease.
- When asked how many additional FTEs expected to be added in the coming fiscal year, 344 responding hospitals reported plans to hire an additional 2384.8 new FTE positions among all nurse types, mostly in Central and East Texas.

## 2014 HNSS: Hiring Practices

- 280 responding hospitals reported hiring 6,757 newly licensed RNs during their organization's last fiscal year. 62% of those hires had a Bachelor's in Nursing degree.
- In general, hospitals ranked past relevant nursing experience as the most important attribute when hiring new staff, followed by a Bachelor's in nursing or higher education, past non-relevant nursing experience, and bilingualism.
- Statewide, 46.6% of responding hospitals said that a bachelor's in nursing education for their RN staff is important or very important. Regionally, a majority of hospitals in North Texas (50.4%) and the Gulf Coast (51.3%) agreed.
- Among other attributes that hospitals look for when hiring staff, good communication and interpersonal skills were cited by 31% of responding hospitals.

## 2014 HNSS: Transition to Practice Programs for Newly Licensed RNs

- 301 hospitals (70.3%) reported having a transition to practice program.
- Orientation-based transition to practice programs were the most commonly used model by responding hospitals.
- 94.5% of hospitals reported that their transition to practice programs were employment models.
- The four most frequently cited outcomes of transition to practice programs were improved clinical competence among first year nurses (61.5%), improved clinical decision-making abilities (49.5%), increased numbers of new graduates applying for RN position in their organizations (40.9%), and decreased turnover of newly licensed RNs in the first year of employment (38.5%).



## Discussion of Findings and Conclusions

The findings of the 2014 Hospital Nurse Staffing Survey show that vacancy and turnover rates have remained relatively steady since 2012. However, it is worth noting that vacancy and turnover rates are still high, especially in comparison to other states.

In 2010, the statewide position vacancy rate for RNs reached a low of 6.7%, but increased to 8.1% in 2012 and remained steady in 2014. Hospitals in Texas continue to have a higher RN vacancy rate than those seen in other comparably sized states such as California (4.2%),<sup>2</sup> Florida (6.0%),<sup>3</sup> and New York (5.6%)<sup>4</sup> underscoring the state's need for more qualified nurses to fill currently vacant patient care positions.

Moreover, the median facility turnover rates in Texas hospitals among RNs (23.6%), LVNs (20%), and nurse aides (28.6%) are higher than RN turnover rates reported by California (2.3%),<sup>2</sup> Florida (18.4%),<sup>3</sup> and New York (10.1%).<sup>4</sup> The increase in hospital turnover rates indicate that retention of nurses continues to be an issue for Texas hospitals. With more than a third of hospitals with transition to practice programs reporting decreased turnover of newly licensed RNs, the increased

implementation of transition to practice could help relieve some of the turnover currently occurring. High turnover rates also present an important economic concern as evidenced by the 285 hospitals that reported spending at least \$635.1 million on interim staffing during the 2014 HNSS reporting year in order to provide over 16.7 million hours of interim staff coverage.

As a result of these general findings, stakeholders and policymakers must continue to strengthen the current nursing workforce and find ways of expanding the long-term supply of nurses by:

- Improving work and nursing practice environments through recruitment and retention measures;
- Addressing safety and quality issues;
- Opening educational pipelines and removing barriers in order to encourage nurses to continue their education; and
- Continuing to investigate and monitor the infrastructure and social barriers to increase capacity and output of nursing education programs including the need to infuse resources into nursing education.

<sup>2</sup>Spetz, J., Hollingsworth, T., & Berg, J. (2014, August). Economic Recovery and the Nursing Labor Market in California [Webinar]. Retrieved from [http://rnworkforce.ucsf.edu/sites/rnworkforce.ucsf.edu/files/CaliforniaEmployerWebinar2014\\_Slides.pdf](http://rnworkforce.ucsf.edu/sites/rnworkforce.ucsf.edu/files/CaliforniaEmployerWebinar2014_Slides.pdf)

Note: California staffing numbers are based only on full-time personnel.

<sup>3</sup>Florida Center for Nursing, Demand for Nurses in Florida: The 2013 Survey of Florida's Nurse Employers, February 2014, <http://www.flcenterfornursing.org/StatewideData/NurseDemandReports.aspx>

<sup>4</sup>Healthcare Association of New York State, 2013 Nursing and Allied Health Care Professionals Workforce Survey Report, [http://www.hanys.org/workforce/survey/reports/2013\\_nursing\\_allied\\_workforce\\_survey\\_report.pdf](http://www.hanys.org/workforce/survey/reports/2013_nursing_allied_workforce_survey_report.pdf)

