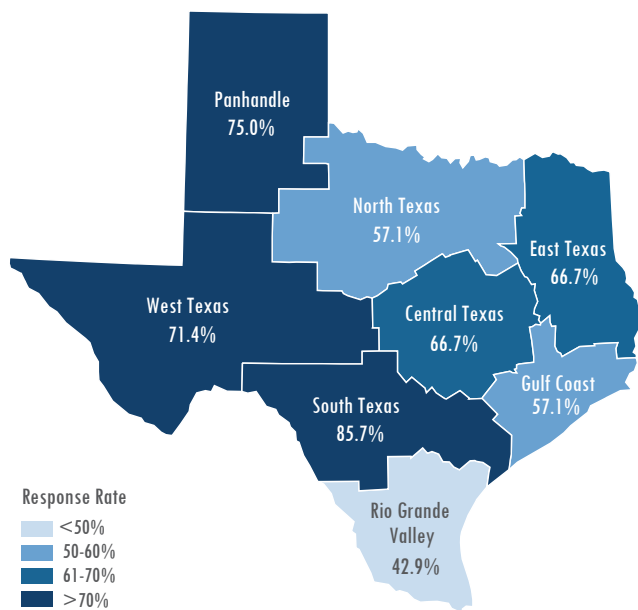


The Texas Governmental Public Health Nurse Staffing Survey (TGPHNSS) assesses nurse staffing and related issues in Texas governmental public health agencies. In the spring of 2019, the Texas Center for Nursing Workforce Studies (TCNWS) administered the TGPHNSS to 80 public health agencies in Texas. This included local health departments, public health service regions, and Department of State Health Services (DSHS) and Health and Human Services (HHS) central offices in Austin. DSHS and HHS central office programs will be referred to as state offices. A total of 51 agencies participated for a final response rate of 63.8%.

This report provides data on agency types as well as the response rate by agency type, region, and geographic designation. Also included in the report are agency characteristics such as administration of nursing services, nurses on boards, and program areas.

### Geographic Characteristics of Public Health Agencies

Figure 1. Response rate by region



The final response rate, with 51 of the 80 public health agencies responding, was 63.8%, which was an increase from 2017 (58.5%).

#### Response Rate by Region

Figure 1 and Table 1 show the response rate of public health agencies by region.

- South Texas and the Panhandle had the highest response rates, with 85.7% and 75.0%, respectively.
- The Rio Grande Valley had the lowest response rate in the state (42.9%), followed by North Texas and Gulf Coast, each with 57.1%.

Table 1. Response rate by region

Region	# of Respondents in Region	Total # of Public Health Agencies in Region	Response Rate
Central Texas	12	18	66.7%
East Texas	6	9	66.7%
Gulf Coast	8	14	57.1%
North Texas	8	14	57.1%
Panhandle	3	4	75.0%
Rio Grande Valley	3	7	42.9%
South Texas	6	7	85.7%
West Texas	5	7	71.4%
<b>Texas</b>	<b>51</b>	<b>80</b>	<b>63.8%</b>

- Analysis found that there was no significant difference between responding agencies and non-responding agencies by region.<sup>1</sup>

#### Response Rate by Geographic Designation

Table 2 displays the response rate by metropolitan and border status (geographic designation). Please see Appendix D for the list of all Texas counties by metropolitan and border status.

- Similar to 2017, agencies in border counties had the highest response rate. Non-metropolitan border agencies had a response rate of 100% and metropolitan border agencies had a response rate of 66.7%.

- Agencies in non-metropolitan non-border counties had a final response rate of 66.7%.
- Metropolitan non-border counties again had the lowest response rate (62.1%) among geographic designations.
- Analysis found that there was no significant difference between responding agencies and non-responding agencies by geographic designation.<sup>2</sup>

Agencies were asked to best characterize their agency; multiple selections were allowed. Figure 2 displays the frequency of agency types selected. 3 of the 51 agencies selected more than one type of local health department.

- Most agencies (72.5%, n=37) reported being characterized by at least 1 of 3 types of local health departments.
- Local health department – county was the most frequently reported agency type (n=18).

**Table 2. Response rate by geographic designation**

Geographic Designation	# of Respondents in Designation	Total # of Agencies in Designation	Response Rate
Metro Border	4	6	66.7%
Metro Non-Border	36	58	62.1%
Non-Metro Border	1	1	100%
Non-Metro Non-Border	10	15	66.7%

### Response Rate by Agency Type

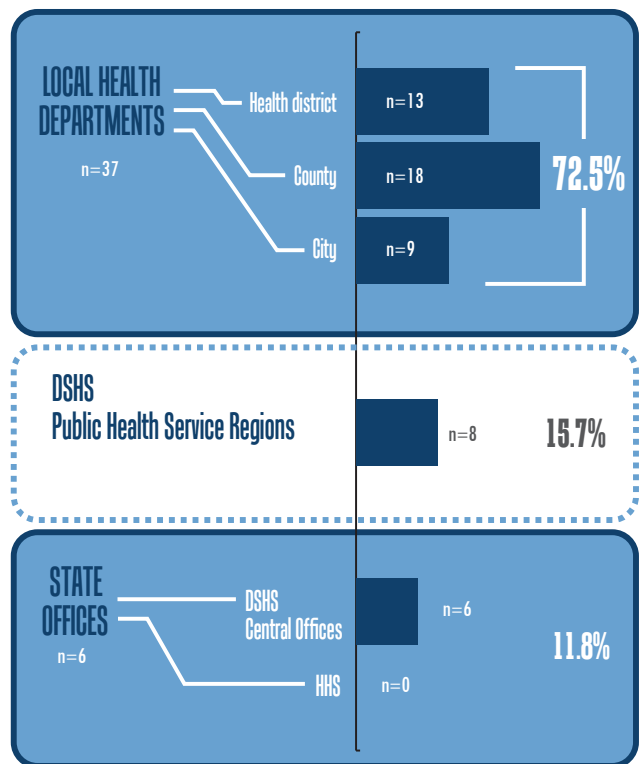
Table 3 displays the response rate by agency type. City, health district and county agencies are consolidated and represented by local health departments. DSHS central offices and Health and Human Services (HHS) are consolidated into state offices.

- All 8 DSHS public health service regions responded to the survey (100.0% response rate).
- Local health departments had a response rate of 59.7%, with 37 of 62 agencies responding to the survey.
- The response rate for state offices was 60.0%.
- Analysis found that there was no significant difference between responding agencies and non-responding agencies by agency type.<sup>3</sup>

**Table 3. Response rate by agency type**

Agency Type	# of Responding Agencies	# of Agencies in Population	Response Rate
Public Health Service Regions	8	8	100.0%
Local Health Departments	37	62	59.7%
State Offices	6	10	60.0%

**Figure 2. Agency types reported by respondents**



<sup>1</sup>(X<sup>2</sup> (df = 7, N = 51) = 1.381, p = 0.986)

<sup>2</sup>(X<sup>2</sup> (df = 3, N = 51) = 0.260, p = 0.967)

<sup>3</sup>(X<sup>2</sup> (df = 2, N = 51) = 2.044, p = 0.360)

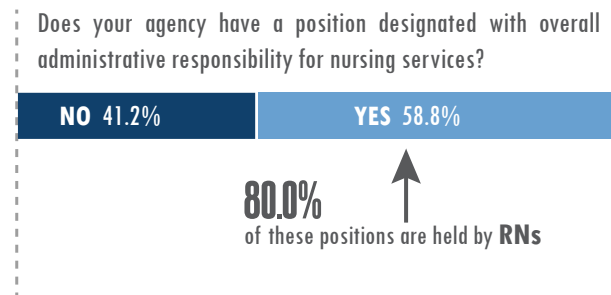


## Administration of Nursing Services

Agencies were asked if they had a position designated with overall administrative responsibility for nursing services. Those agencies that did have a position designated were then asked if the position was filled by a RN. As seen in Figure 3:

- Overall, 58.8 of the agencies reported having a position designated with overall administrative responsibility for nursing services.
- Among respondents who did have a person with administrative responsibility for nursing services, 80.0% reported that the person was a RN.

Figure 3. Administration of nursing services



## Nurses on Boards

The Institute of Medicine (IOM) has recommended preparing and enabling nurses to lead change to advance health, which includes having representation on boards and other key leadership positions.<sup>4</sup> The 2019 TGPHNSS tracked this indicator by asking if the respondent's organizational board had any RN members. The question did not ask for any specific type of board and the broadness of the question was a limitation of the study.

- Of the 50 agencies that responded to the question, only 10 reported (20.0%) having a RN on their board.

- Over one half of respondents (n=29) selected “not applicable or unknown” and 22.0% (n=11) of agencies selected “no” on the question.
- All (n=10) of the respondents who did have RN board members reported the RNs had voting privileges.

<sup>4</sup>Institute of Medicine, Committee on the Robert Wood Johnson Foundation Initiative on the Future of Nursing. (2011). Front matter. *The future of nursing: Leading change, advancing health.*

## Conclusion and Recommendations

### Conclusion

The final response rate, with 51 of the 80 public health agencies responding, was 63.8%, which was an increase from 2017 (58.5%). Public health service regions had the highest response rate (100.0%) among agency types. South Texas (85.7%) and Panhandle (75.0%) regions had the highest response rates, the Rio Grande Valley (42.9%), Gulf Coast and North Texas had the lowest response rates (both 57.1%).

Of the responding agencies, 58.8% reported having a position designated with overall administrative responsibility, and among those that had such a position, 80.0% staffed the position with a RN. This is in line with

the IOM recommendation that public health implement formal career ladders and collaborative governance structures that provide public health nurses with greater autonomy, responsibility, and opportunities to serve in leadership roles.<sup>1</sup> The 2019 TGPHNSS also tracked nurses on boards and 20.0% of responding agencies had a RN board member. Of the RNs that were board members, all had voting privileges.

<sup>1</sup>Institute of Medicine, Committee on the Robert Wood Johnson Foundation Initiative on the Future of Nursing. (2011). Front matter. *The future of nursing: Leading change, advancing health.*