



Highlights

This study provides an overview of the current state of the Texas long term care nursing workforce. The main findings are:

- 1,202 public health agencies were surveyed and 439 responded, for a response rate of 36.5%, a decrease from 2014 (37.2%).
- Chi-Square analyses found that the 439 respondents were not significantly different than the 763 non-responding facilities regarding facility size, county designation, and region.
- Long term care facilities reported employing registered nurses (RNs), licensed vocational nurses (LVNs), advanced practice registered nurses (APRNs), certified nurse aides (CNAs), and certified medical aides (CMAs).
 - CNAs made up the majority (57.2%) of the direct resident care staff within long term care facilities.
 - Direct resident care RNs and LVNs were more numerous than their administrative counterparts.
 - 52.2% of direct resident care RNs were between the ages of 30 – 49.
 - More than half of responding facilities reported they would need more RNs and CNAs over the next two years, 54.7% and 60.9% respectively.
 - Voluntary overtime was the most frequently used interim staffing method, with 56.3% of facilities reporting the use of this strategy.
 - A total of 455,388 hours of interim staffing coverage at a cost of almost \$10 million, which were both increases from the 2014 LCTNSS (351,547.2 hours and \$7,478,614.69).
- Only 4 of the 439 responding facilities reported not having a Director of Nursing (DON) at the time of data submission.
 - 66.5% of 430 DONs had 6 or more years of experience in a long term care setting.
 - Almost 50% of 421 DONs held their current position for less than 1 year.
 - The median DON salary range was between \$90,000 and \$99,999 in 2016.
- The most frequently selected recruitment and recruitment strategies for full time employees were paid vacation days, health insurance, and employee recognition programs.
 - For each staff type, the largest proportion of responses indicated relative difficulty in recruiting staff.
 - Over 80% of 233 facilities said past relevant nursing experience was the most important characteristic when hiring an RN.
 - More than half of the respondents reported increased workloads, increase in voluntary overtime, low staffing morale, and using administrative staff to cover nurse duties were consequences of inadequate staffing.
- Position vacancy rates for nurses in long term care facilities were higher than vacancy rates for these positions within Texas hospitals.
 - Direct resident care RNs had the highest position vacancy rates in the state (15.7%).
 - The statewide position vacancy rates for most direct resident care staff have increased since 2014, with the only exceptions being direct resident care RNs.
 - The majority of facilities reported zero vacancy for most nurse types with the exception of direct resident care LVNs and CNAs.
- Median turnover rates for administrative RNs and LVNs were lower than their direct resident care counterparts.
 - The highest overall median facility turnover rate was among CNAs.
- 29.8% of 439 survey respondents reported using at least one of the methods listed in Table 1 as a transition to practice program for all nursing staff.
 - 18.3% of long term care facilities used internship/fellowship/residency as a method. For a point of comparison, 65.2% of hospitals in Texas utilize some combination of internships, fellowships, and residencies as a transition to practice program.

Recruitment and Retention

According to respondents of the study, long term care nursing facilities have difficulty in recruiting nursing staff. Similar studies (2016 Hospital Nurse Staffing Study) reported that having relevant experience was the most desirable attribute to employers. Study results indicate that few agencies plan on increasing the number of budgeted nursing positions in the next fiscal year. In order to adequately prepare nurses for their role in public health, and to ensure funding for governmental public health nursing positions: Stakeholders should develop and implement solutions to address these issues, specifically:

- 22.4% of 303 survey respondents to the LTCNSS said that pay increases would be the most effective strategy for recruiting and retaining staff. Staff experience and longevity should be recognized through incremental wage increases over time.
- Over 65% of LTCNSS respondents reported the provision of health insurance for their full-time staff. However, it is unclear whether this insurance is available for licensed and unlicensed staff alike, as well as whether insurance is affordable for either.
- This study finds that 61.5% of respondents indicate that increased workloads is the most common consequence of inadequate staffing, which has implications for quality care. Therefore, facilities should provide staffing levels and skill mix sufficient to deliver quality care commensurate with resident acuity and quality outcomes at reasonable staff workload levels.
- More than half of facilities use employee recognition programs as a strategy to recruit and retain staff, and 7.6% of facilities reported that employee recognition had the greatest impact on retention. Leadership should ensure there is adequate appreciation/recognition of and respect for the valuable contributions of all levels of the nursing staff. This could include a strengthening of the relationship between supervisors and nursing staff.

Directors of Nursing (DON)

71.7% of facilities reported having a DON that held the position for less than 2 years and almost half of responding facilities currently had a DON who was at the facility less than a year. Stakeholders should develop and implement solutions to ensure the transition into the role of the DON, specifically:

- Owners and administrators must support DONs as they either transition in to the role of the DON for the first time or learn to effectively fulfill their role in a new long term care setting.

Staffing

According to survey respondents, over 50% of long term care facilities reported increased workload, increase in voluntary overtime, low nursing staff morale, using administrative staff to cover nurse duties, and increased nursing staff turnover as consequences of inadequate nurse staffing. Voluntary overtime was the most frequently used interim staffing method, with more than half of facilities reporting the use of this strategy. To more fully understand the implications of these findings nurse researchers should focus on the following issues for further study:

- Evaluate requirements for nurse aide training instructors. Consider decreasing requirement that instructors have 3 years of long term care experience to 1 year.
- CNAs are the most numerous staff type in long term care facilities, comprising 57% of staff providing direct resident care. Facilities should therefore consider management changes and job redesign to allow CNAs to become essential members of resident care teams and to have increased input in decision making. This approach could include CNA involvement in resident care planning and continuity in CNA assignment to residents.

Vacancy and Turnover

Respondents also reported vacancy rates for all nurse types in Texas governmental public health agencies are higher than vacancy rates for these positions within Texas hospitals. Turnover rates varied greatly by agency type and agency location across the state. To more fully understand the implications of these findings nurse researchers should focus on the following issues for further study:

- Effect of long term care nursing staff turnover on economic (e.g. costs of turnover, loss of human capital, cost of unrealized community/public health outcomes) and non-economic (e.g. quality of care) issues.
- To promote a better understanding of the long term care setting, facilities should join with other long term care facilities in partnerships with local community colleges and other educational programs to provide educational and clinical experiences for faculty and students.

Transition to Practice¹

55% of facilities who reported having a transition to practice program stated that improved clinical competence in resident/patient care was an outcome for first year nurses in transition to practice programs.

- Only 29.8% of respondents reported using a transition to practice program for newly licensed staff, with orientation being the most commonly used method. Facilities should develop and evaluate training and continuing education programs to ensure they are meeting facility goals of staff development, resident care, and quality outcomes.

¹Transition-to-practice: These programs may include extended orientations, prolonged preceptorships, and formal residency programs.

