

Health Care Workforce in the Texas Border Region

Prepared for the Task Force of Border Health Officials

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Office of Chief State Epidemiologist



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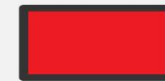
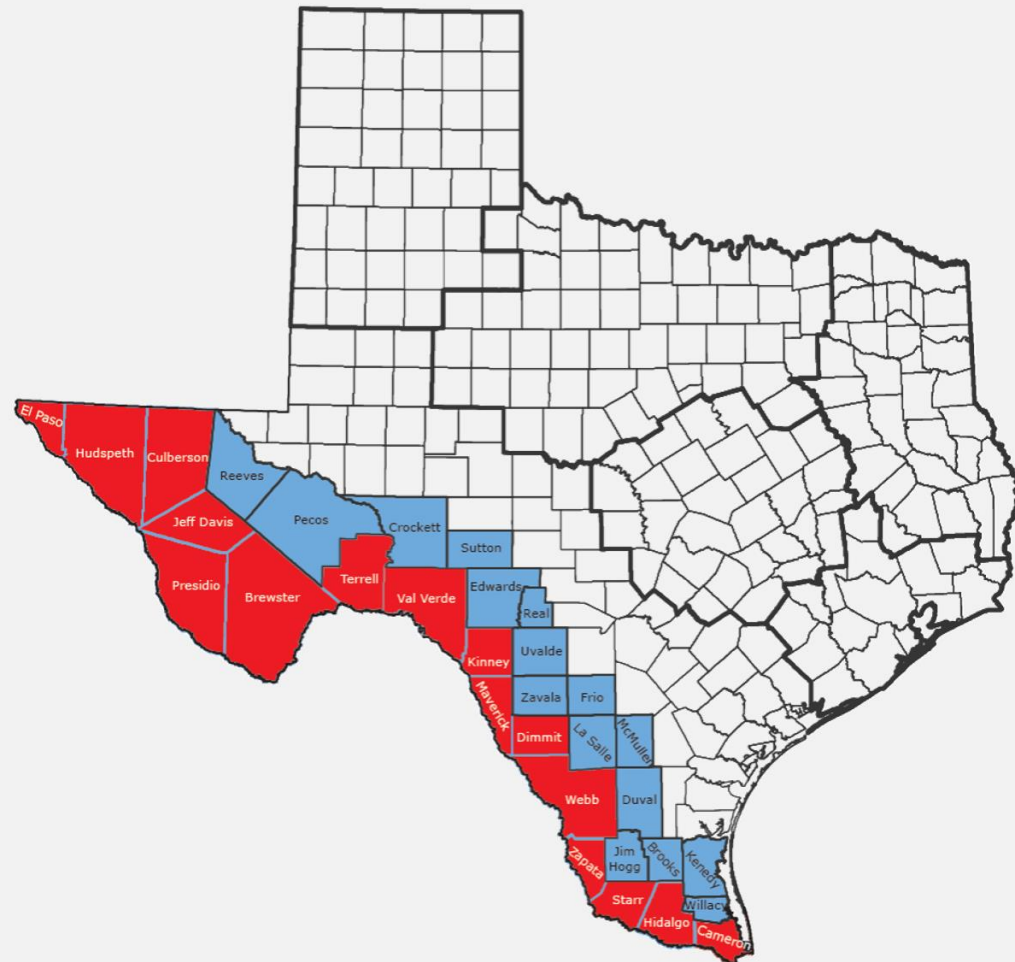
Presentation Content

- About Health Professions Resource Center and Texas Center for Nursing Workforce Studies
- Supply and Demographics of Primary Care Physicians, Dentists, and Hygienists
- Supply and Demand Projections of Healthcare Providers
- Nursing Workforce in Texas
 - Supply and Demographics of the Nursing Workforce
 - Vacancy and Turnover Among Nurse Employers
 - Nursing Education

Acronyms Used

- FTE – Full Time Equivalent
- LVN – Licensed Vocational Nurse
- PCP – Primary Care Physician
- RN – Registered Nurse

Border County Designations



Texas Health and Safety Code
16 counties immediately adjacent to the international boundary



La Paz Agreement of 1983
32 counties within 62 miles of the international boundary

Health Professions Resource Center

Supply and Distribution Tables

Factsheets

Texas Health Data Dashboards

Study and Report on Health Care Workforce Issues

- Texas Supply and Demand Projections for Physicians
- Texas Education Pipeline

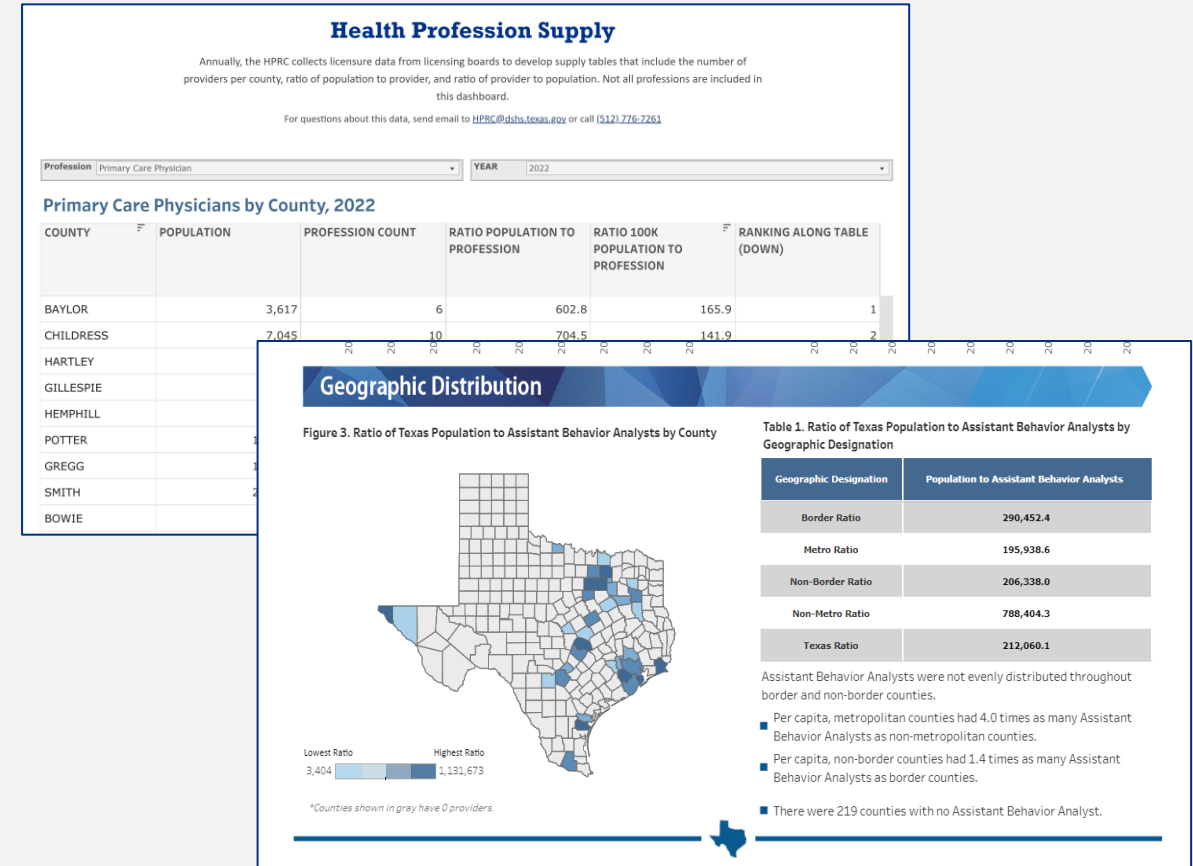
Support: the Statewide Health Coordinating Council

- Dissemination of the Texas State Health Plan

Site-MUP designation

Support: the Texas Primary Care Office

- Texas Conrad 30 J-1 Visa Waiver Program
- Statewide Needs Assessment
- Long Term Strategic Plan



Texas Center for Nursing Workforce Studies

Workplace Violence Prevention Programs

Implementation and Characteristics

298 hospitals, 258 nursing facilities, and 61 home health agencies responded that their organizations had implemented a program or policy that includes prevention of workplace violence against nurses (Figure 1).

- The percent of responding hospitals indicating they have implemented a workplace violence prevention policy has increased from 77.8% to 90.9% since 2018.

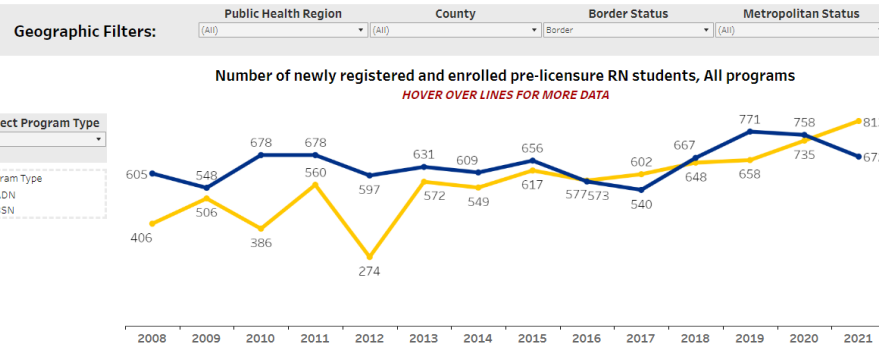
Figure 1. Percent of Responding Facilities that Have Implemented a Workplace Violence Policy



Table 5. Components Included in Facilities' Workplace Violence Prevention Policies

Component*	Hospital	NF	HHA
Investigation of reported incidents	90.9%	75.9%	76.6%
Required reporting of incidents	90.2%	75.6%	76.6%
Workplace violence prevention training	85.4%	68.4%	59.7%
Tracking of incidents and analysis of data	83.2%	50.3%	49.4%
Assessment of work areas for risk factors	75.9%	42.5%	55.8%
A multi-disciplinary incident response team	57.9%	30.3%	31.2%
Screening patients for risk of violence	48.2%	53.8%	40.3%
Signage placed throughout facility describing rules, responsibilities, and	40.5%	22.8%	-

New Admissions to Professional Nursing Programs



Number of newly registered and enrolled pre-licensure RN students by region and county, All programs

	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Statewide Total	1,011	1,054	1,064	1,238	871	1,203	1,158	1,273	1,150	1,142	1,315	1,429	1,493	1,485
Rio Grande	615	590	690	725	433	628	740	639	561	671	751	792	745	745
Cameron	140	152	167	180	142	104	85	162	27	0	30	30	63	53

Educational trends

- Nursing Education Program Information Survey

Supply and demand trends

Employer staffing

- Hospitals
- Nursing facilities
- Home health and hospice
- Governmental public health

Workforce demographics

- Licensure data

Workplace violence against nurses

- Surveys
- Grant program

Supply and Demographic Trends of Primary Care Physicians, Dentists, and Dental Hygienists



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Supply Trends for Primary Care Physicians

Figure. 1 Supply of PCPs, 2015-2024

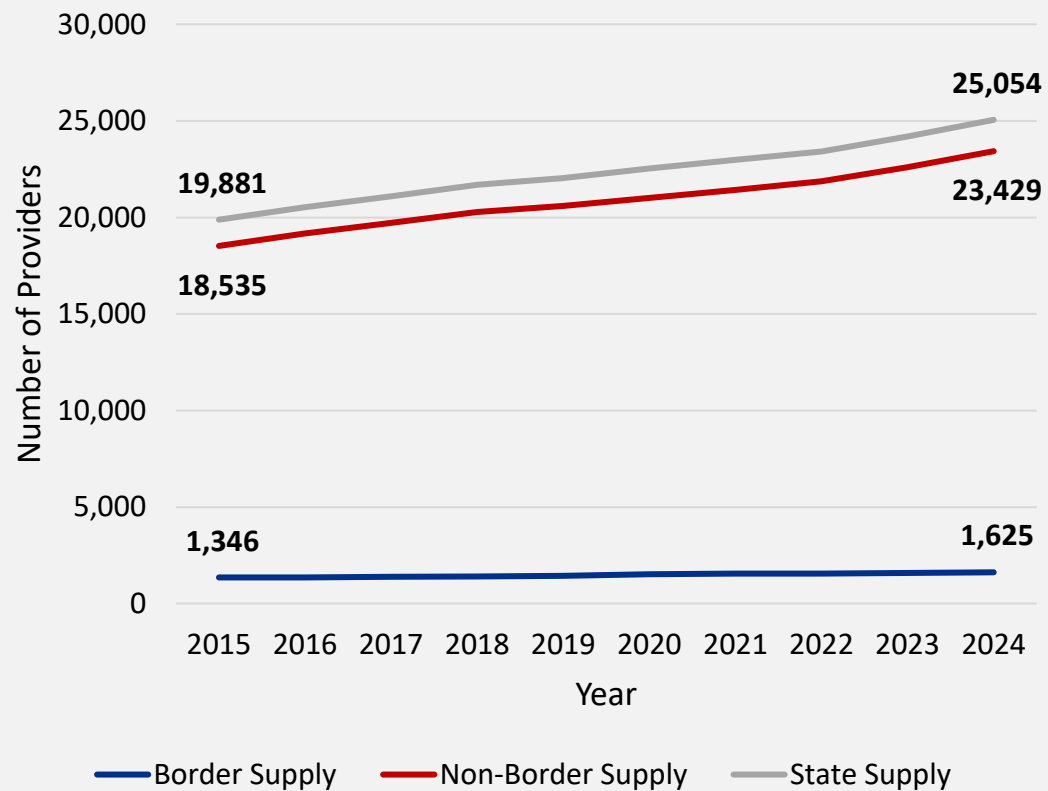
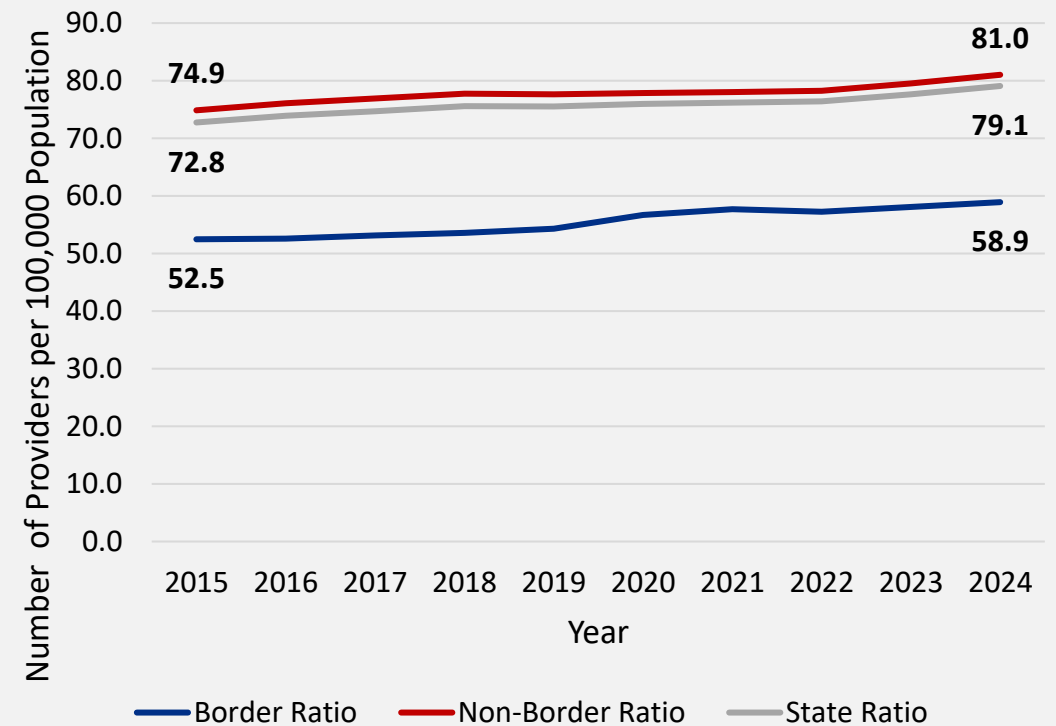


Figure 2. Ratio of PCPs per 100,000 Population, 2015-2024



Supply Trends for General Dentists

Figure 3. Supply of General Dentists, 2015-2024

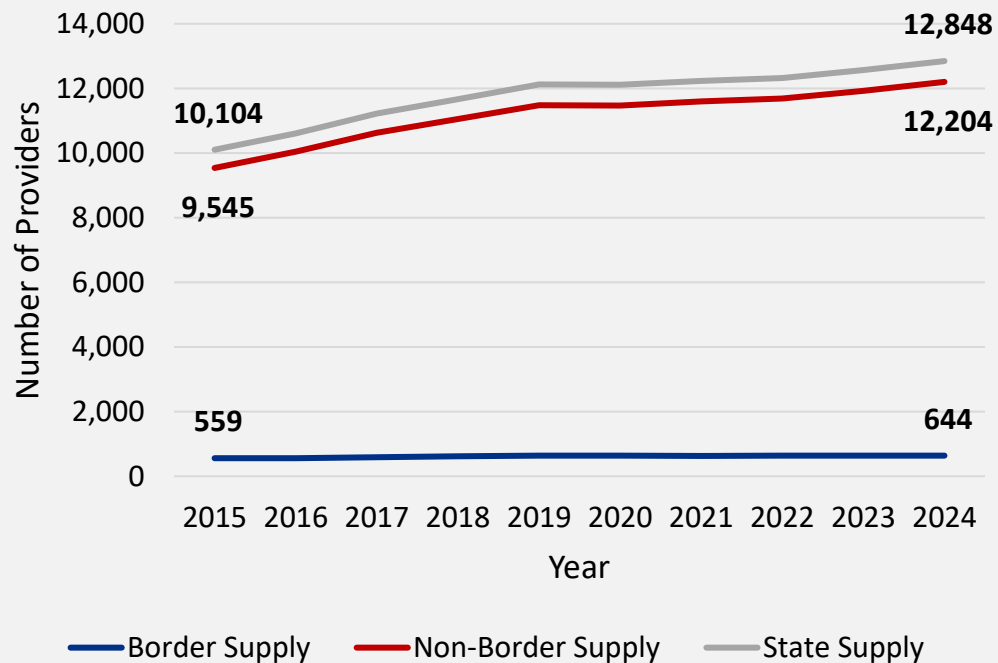
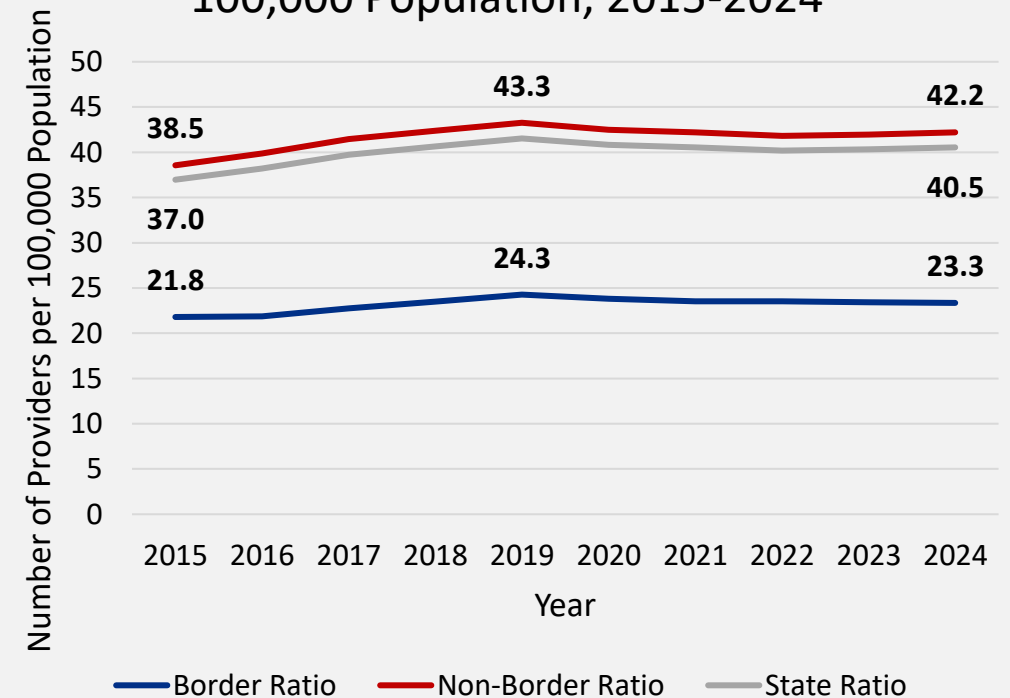


Figure 4. Ratio of General Dentists per 100,000 Population, 2015-2024



Supply Trends for Dental Hygienists

Figure 5. Supply of Dental Hygienists, 2015-2024

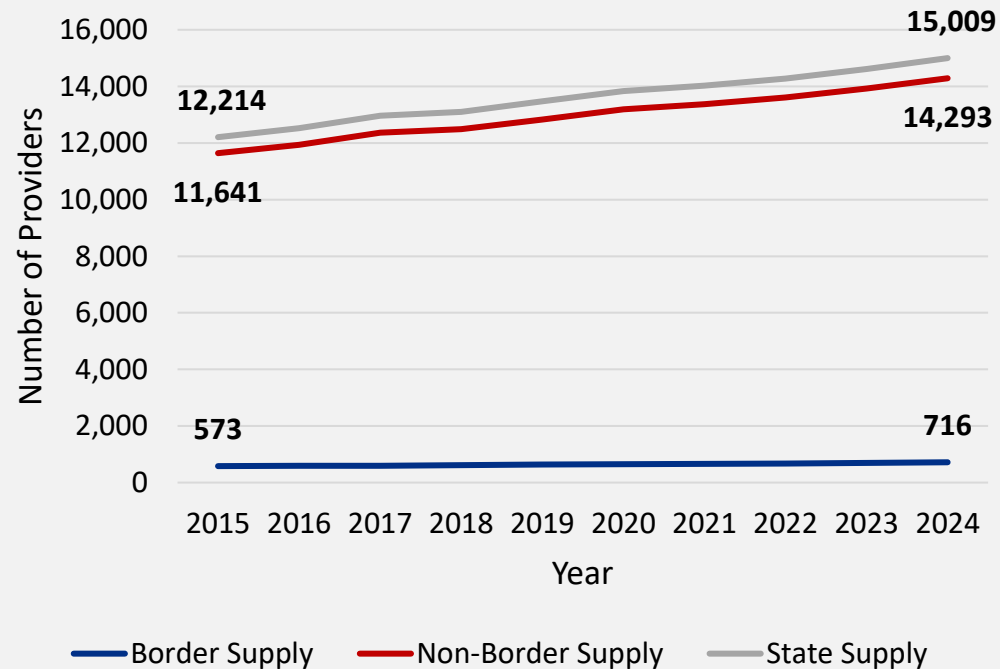
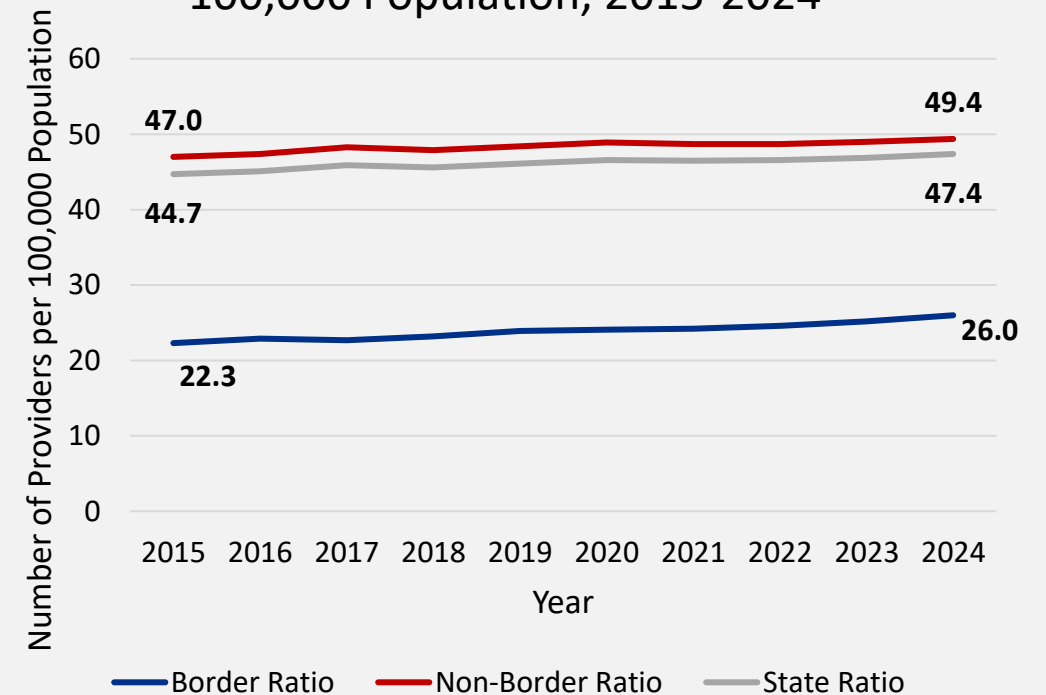
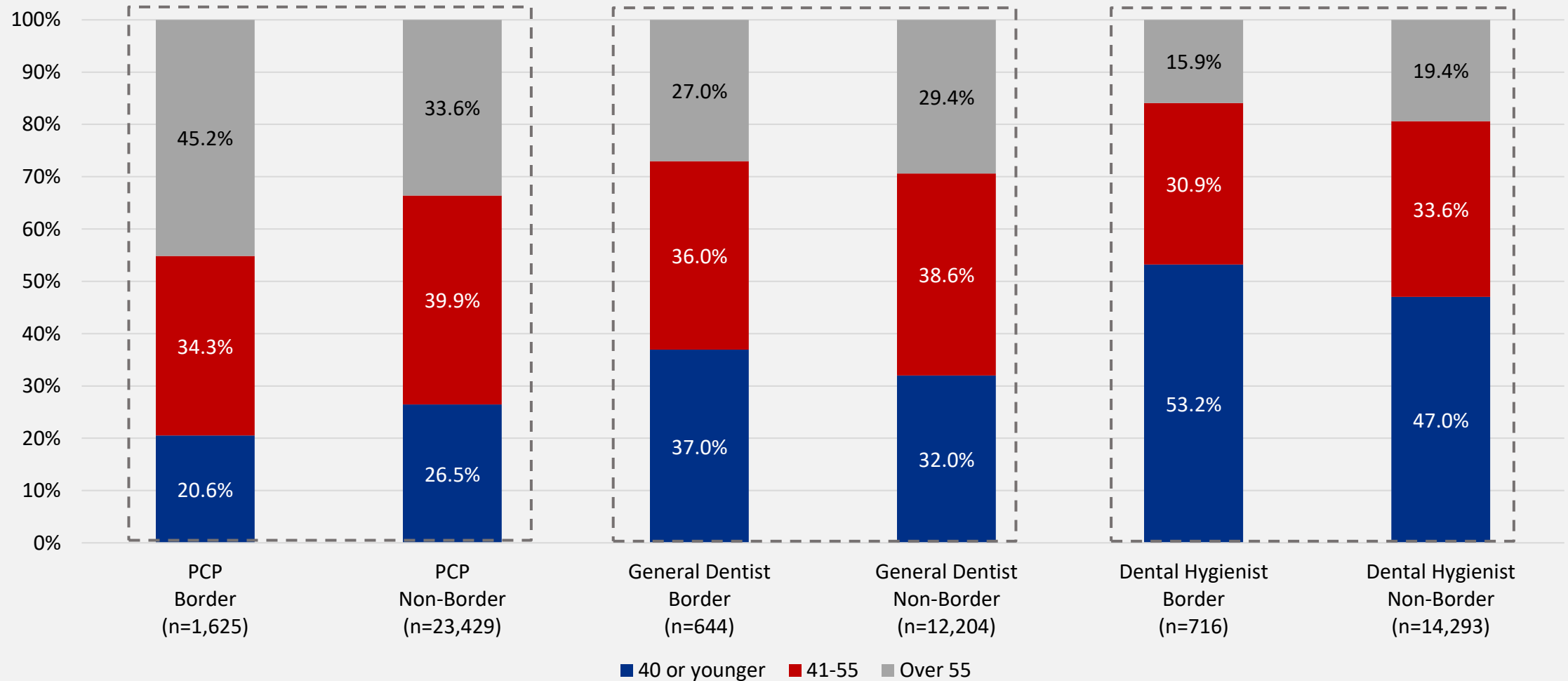


Figure 6. Ratio of Dental Hygienists per 100,000 Population, 2015-2024



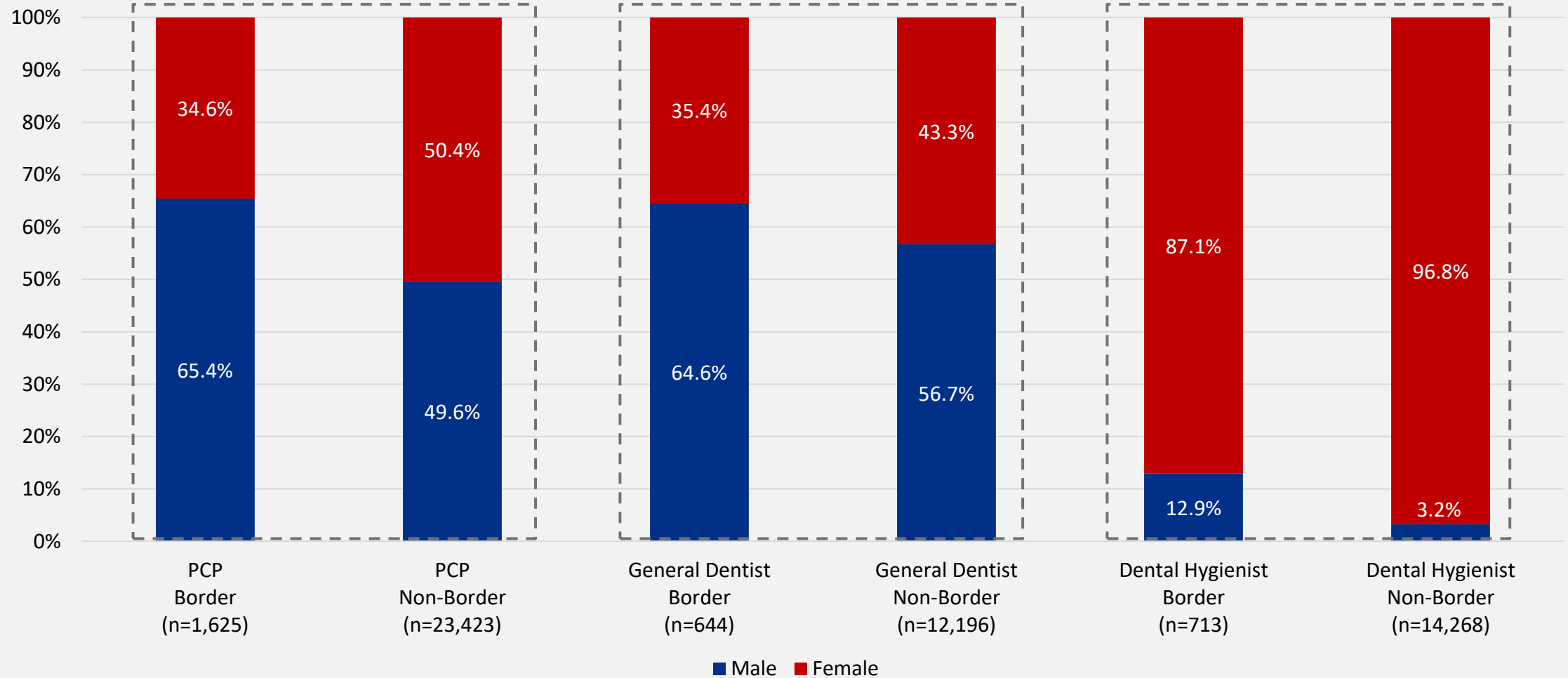
Age Distribution, 2024

Figure 7. Age Distribution of Healthcare Providers, 2024



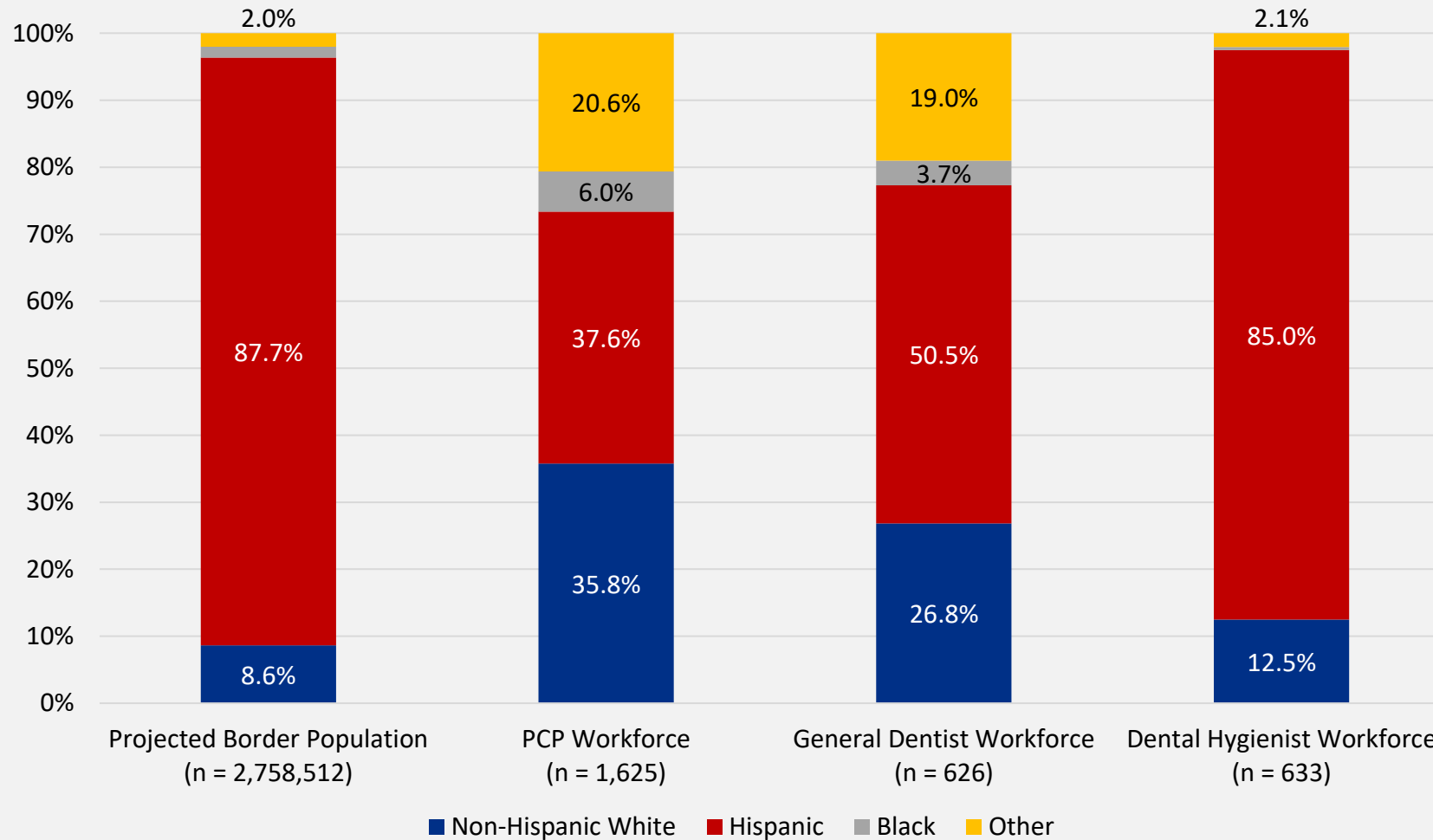
Gender Distribution, 2024

Figure 8. Gender Distribution of Healthcare Providers, 2024



Racial/Ethnic Distribution, 2024

Figure 9. Border Health Workforce Racial/Ethnic Demographics, 2024



Supply & Demand Projections, 2022-2036



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About the Projection Model

State level projections were developed for physicians, nurses, dentists, and mental/behavioral health providers.

- The model is also used by the Health Resources and Services Administration, American Association of Medical Colleges, and other state-level workforce entities.
- Supply projections were developed using data from 2018 – 2022.
- All projection numbers are Full-time Equivalents (FTEs).
- Projections are not predictions.

Healthcare Workforce Supply Model

- Models likely career choices of providers
- Uses info based on what we know about providers from licensure data, education data, and other sources such as the American Community Survey.

Healthcare Demand Model

- Based on population characteristics, healthcare use and delivery patterns, and staffing patterns.

Primary Care Physician Projections, 2022-2036

Figure 10. Projected Supply and Demand of PCPs, 2022-2036, Border Counties

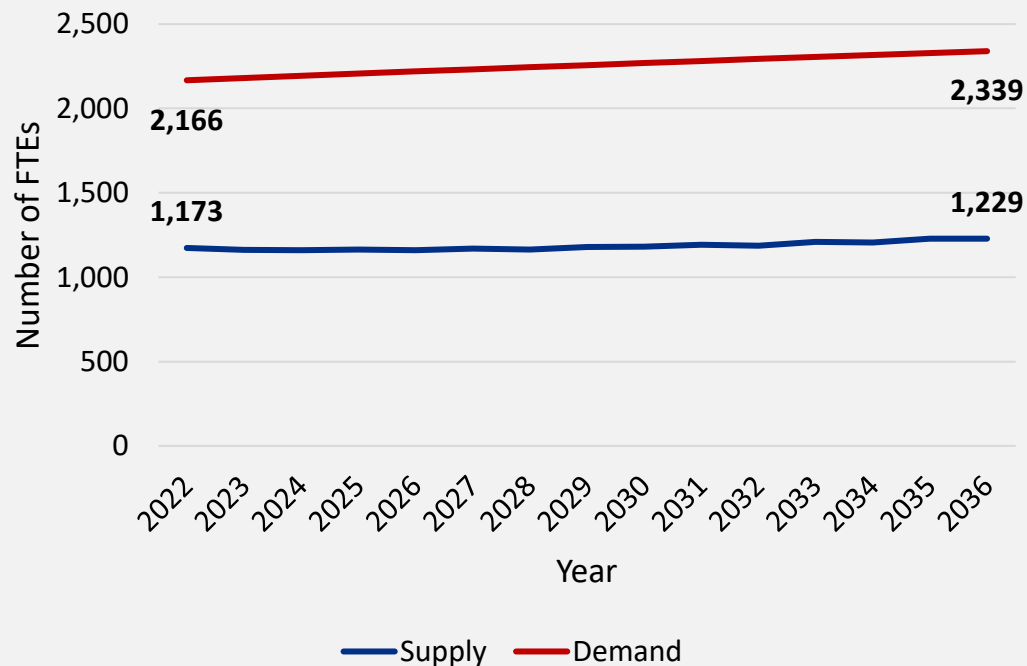
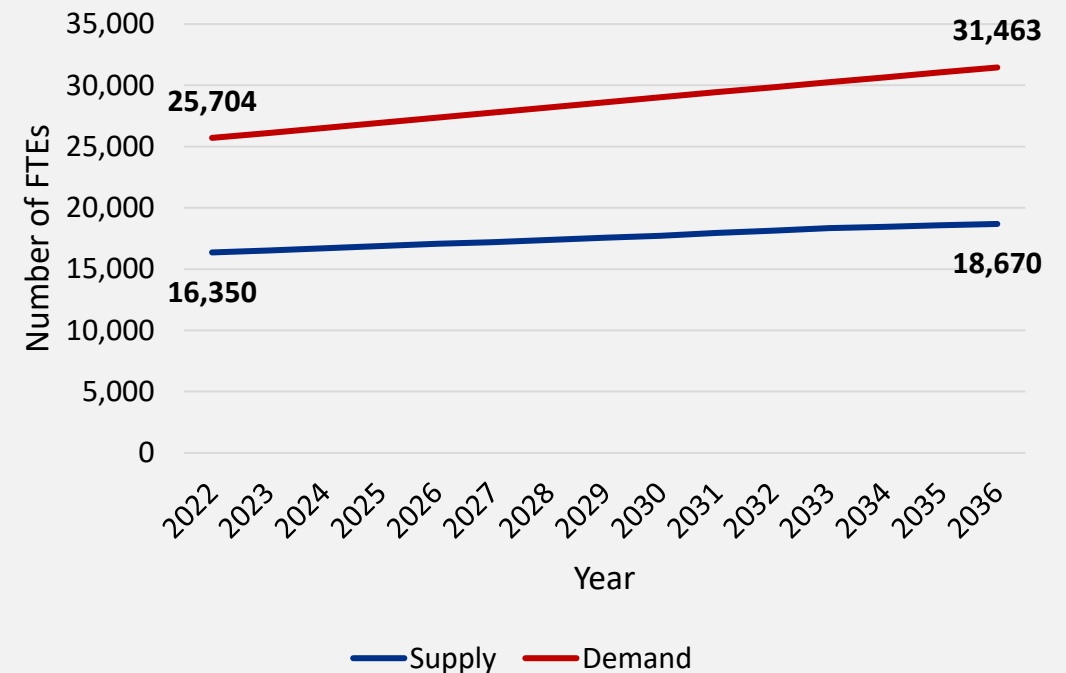


Figure 11. Projected Supply and Demand of PCPs, 2022-2036, Texas



Note 1: Unmet Demand = (Demand – Supply) / Demand.

**Note 2: The projections on the Texas Health Data dashboard include psychiatrists as PCPs.
The projections presented in this slide do not include psychiatrists as PCPs.**

General Dentist Projections, 2022-2036

Figure 12. Projected Supply and Demand of General Dentists, 2022-2036, Border Counties

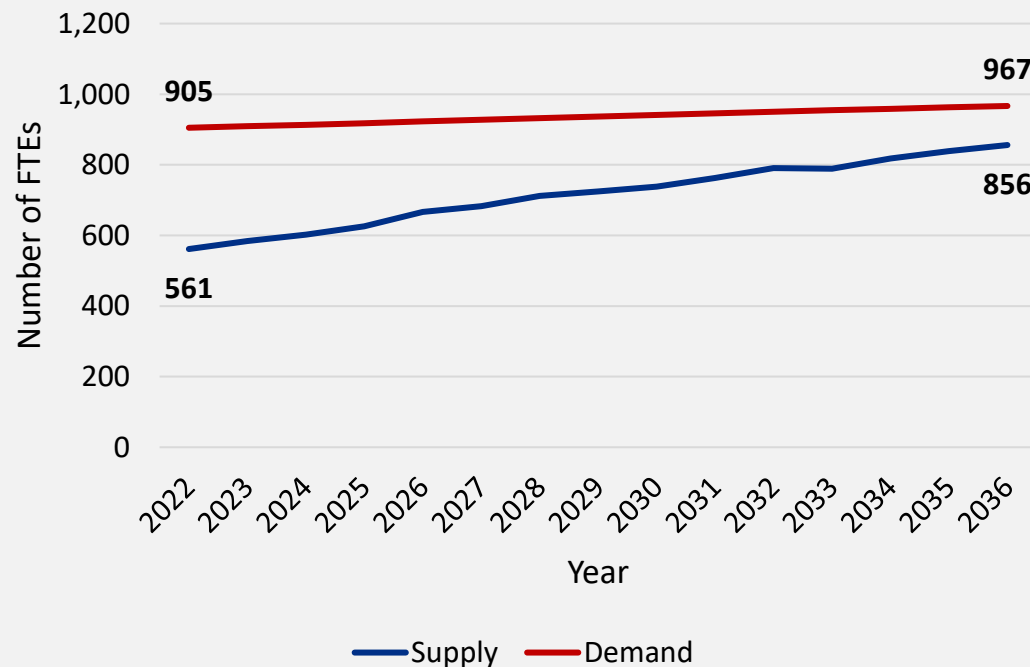
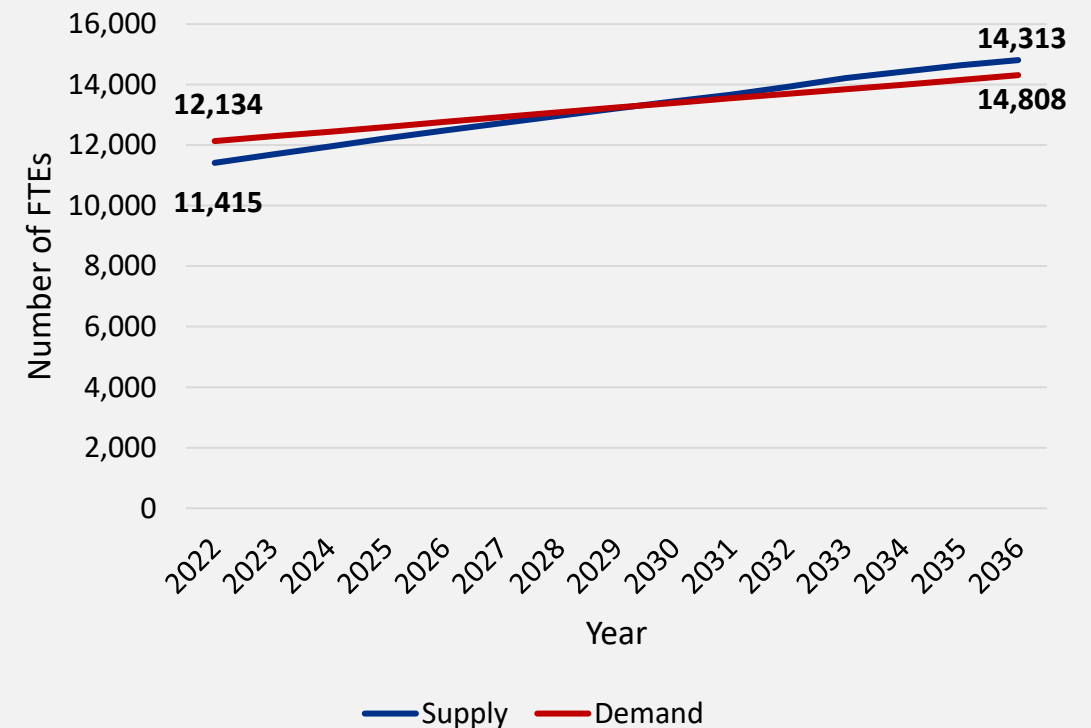


Figure 13. Projected Supply and Demand of General Dentists, 2022-2036, Texas



Note 1: Pediatric dentists are not included in these projections

Dental Hygienist Projections, 2022-2036

Figure 14. Projected Supply and Demand of Dental Hygienists, 2022-2036, Border Counties

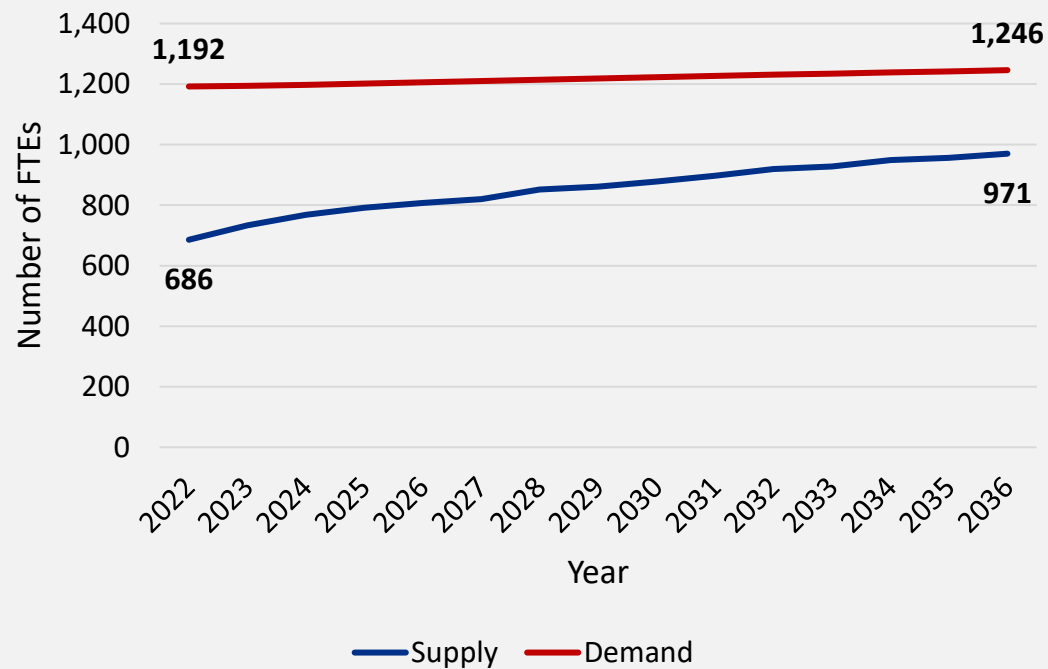
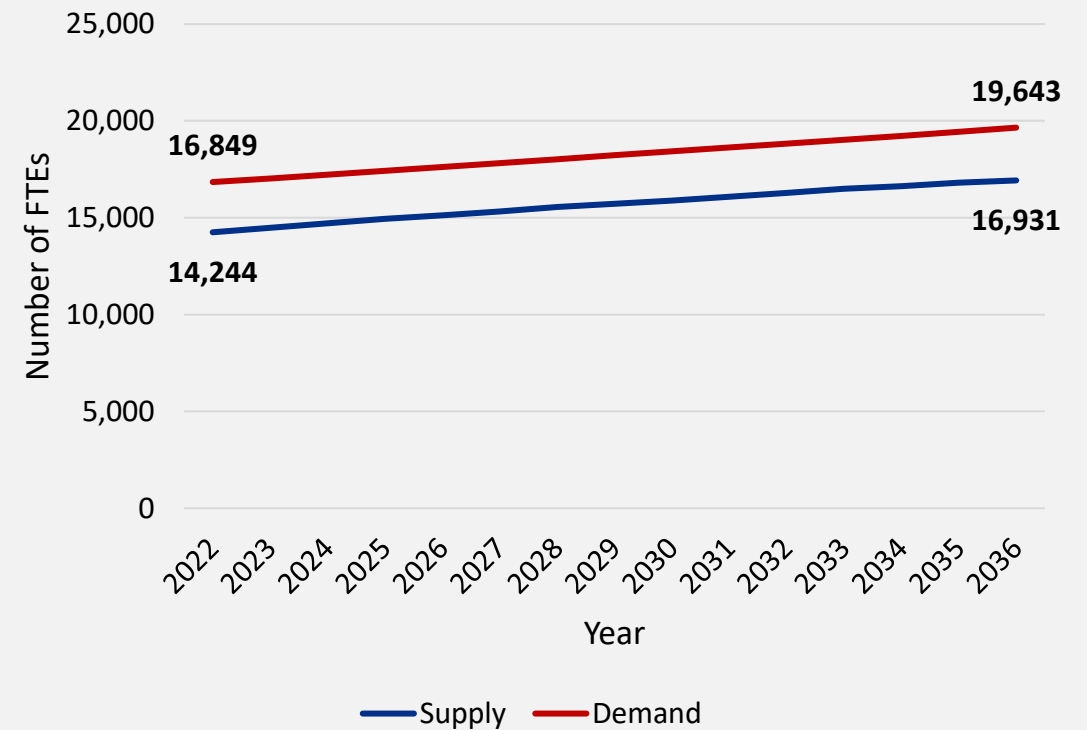


Figure 15. Projected Supply and Demand of Dental Hygienists, 2022-2036, Texas



Licensed Vocational Nurse Projections, 2022-2036

Figure 16. Projected Supply and Demand of LVNs, 2022-2036, Border Counties

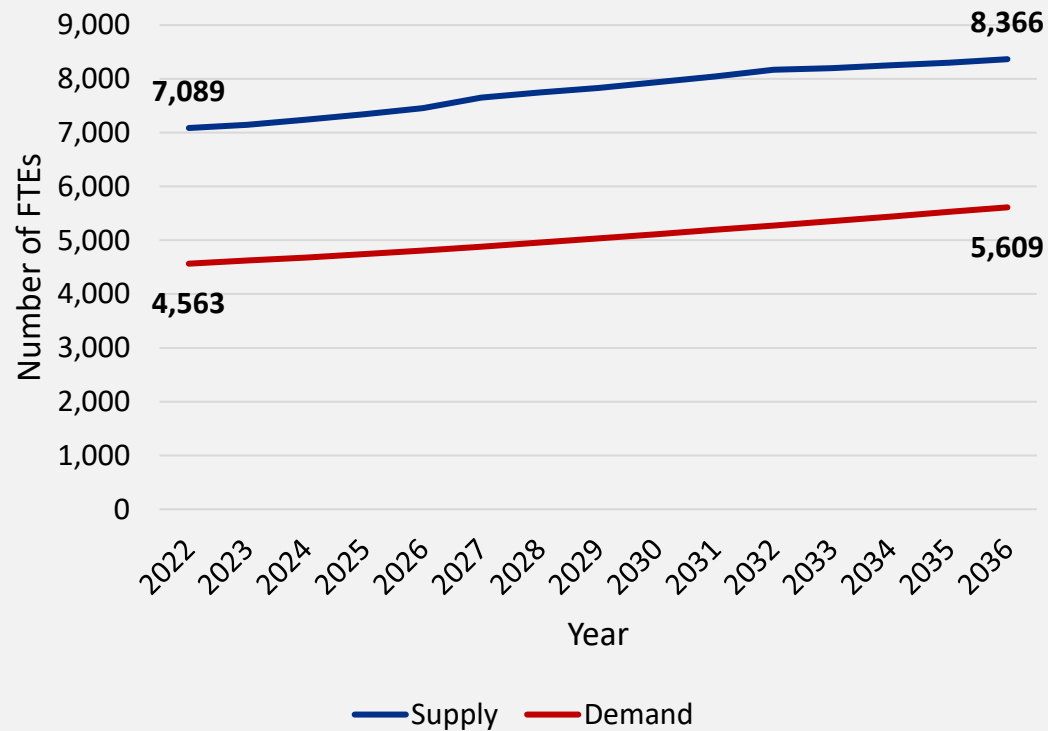
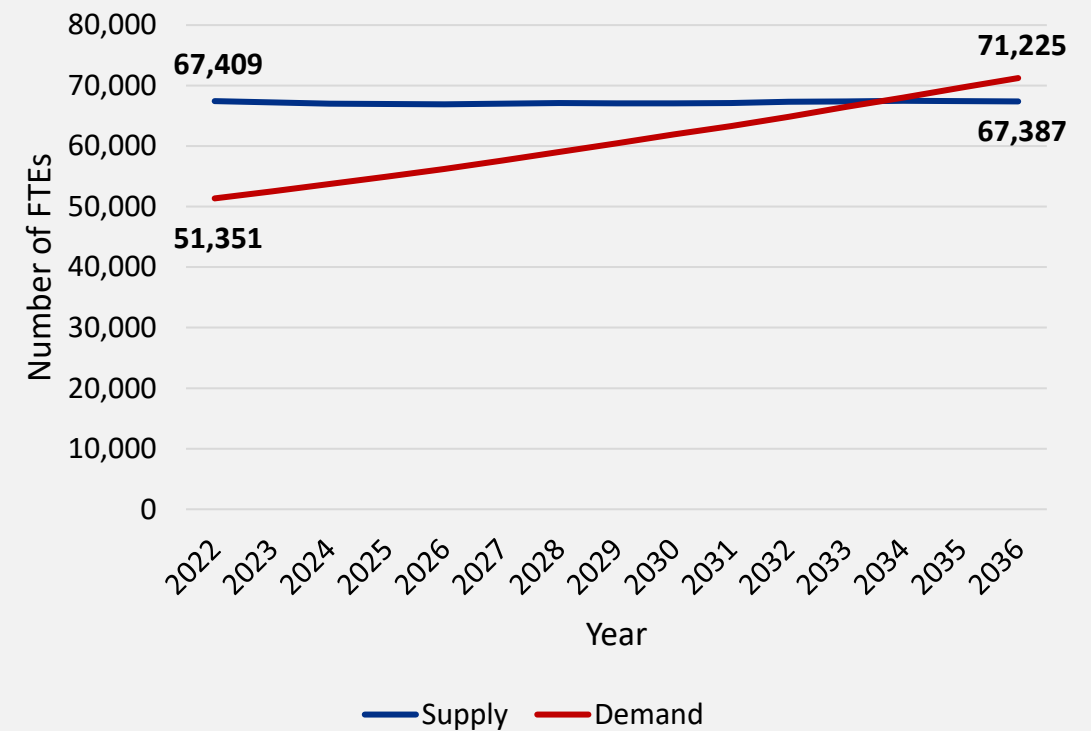


Figure 17. Projected Supply and Demand of LVNs, 2022-2036, Texas



Registered Nurse Projections, 2022-2036

Figure 18. Projected Supply and Demand of RNs, 2022-2036, Border Counties

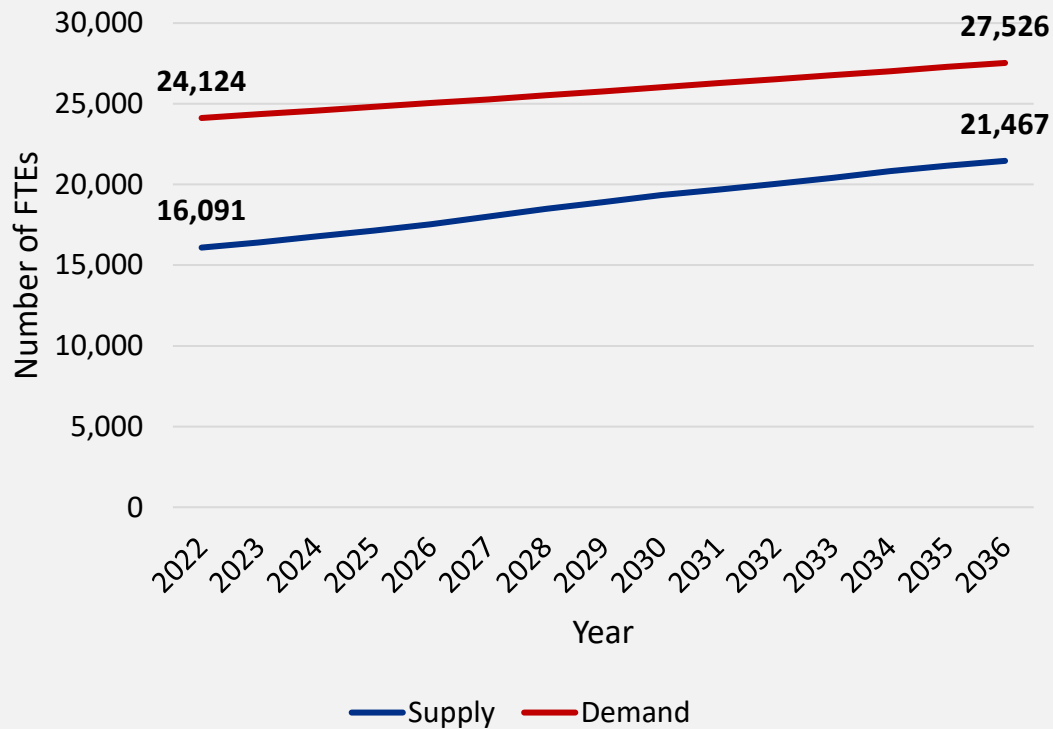
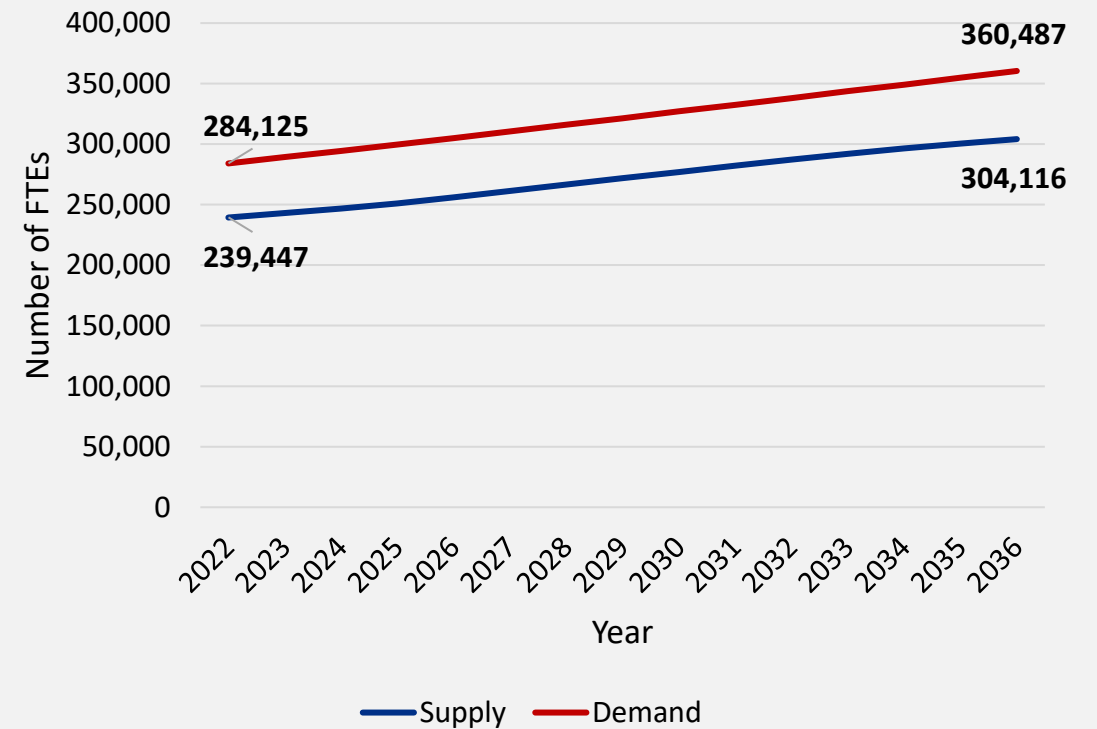


Figure 19. Projected Supply and Demand of RNs, 2022-2036, Texas

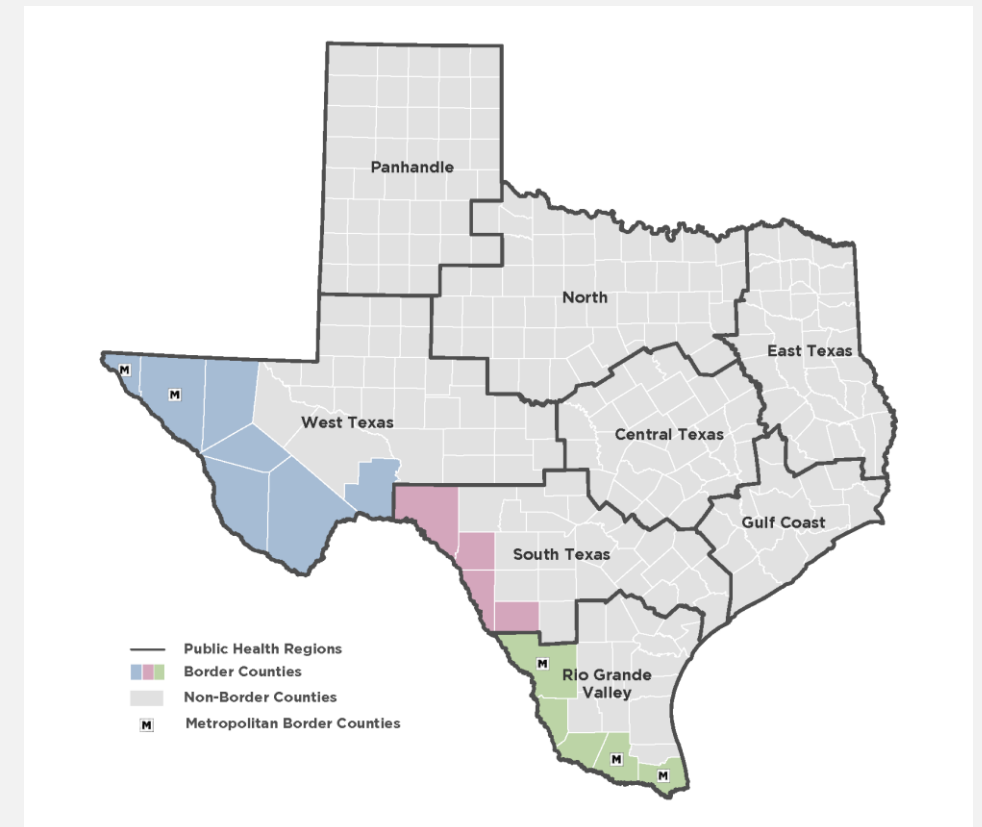


Projected Unmet Demand in Border Region, 2025

Table 1. Projected Unmet Demand in Border Region by Public Health Region and Metropolitan Status, 2025

Public Health Region	Metropolitan Status	LVN	RN	PCP	Dentists	Dental Hygienists
Rio Grande Valley	Metro	0%	39%	53%	37%	41%
	Non-Metro	8%	65%	84%	70%	81%
South Texas	Non-Metro	0%	49%	59%	62%	28%
West Texas	Metro	0%	10%	33%	16%	19%
	Non-Metro	66%	69%	20%	90%	77%

Figure 20. Map of Texas Public Health Regions, 2024



Nursing Workforce



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Nurses Along Texas Border

- Only includes nurses that:
 - had a license status marked “current”
 - were employed in nursing on a full-time, part-time or per-diem basis, and
 - had a primary practice or mailing address in Texas

As of September 2024, there are:

- 24,731 total
 - 24.2% are LVNs
 - 65.2% are RNs
 - 10.6% hold an APRN license
 - Nurse Practitioners (NPs)
 - Clinical Nurse Specialists (CNSs)
 - Certified Registered Nurse Anesthetists (CRNAs)
 - Certified Nurse Midwives (CNMs)

Supply Trends for Nurses

Figure 21. Ratio of LVNs per 100,000 Population, 2015-2024

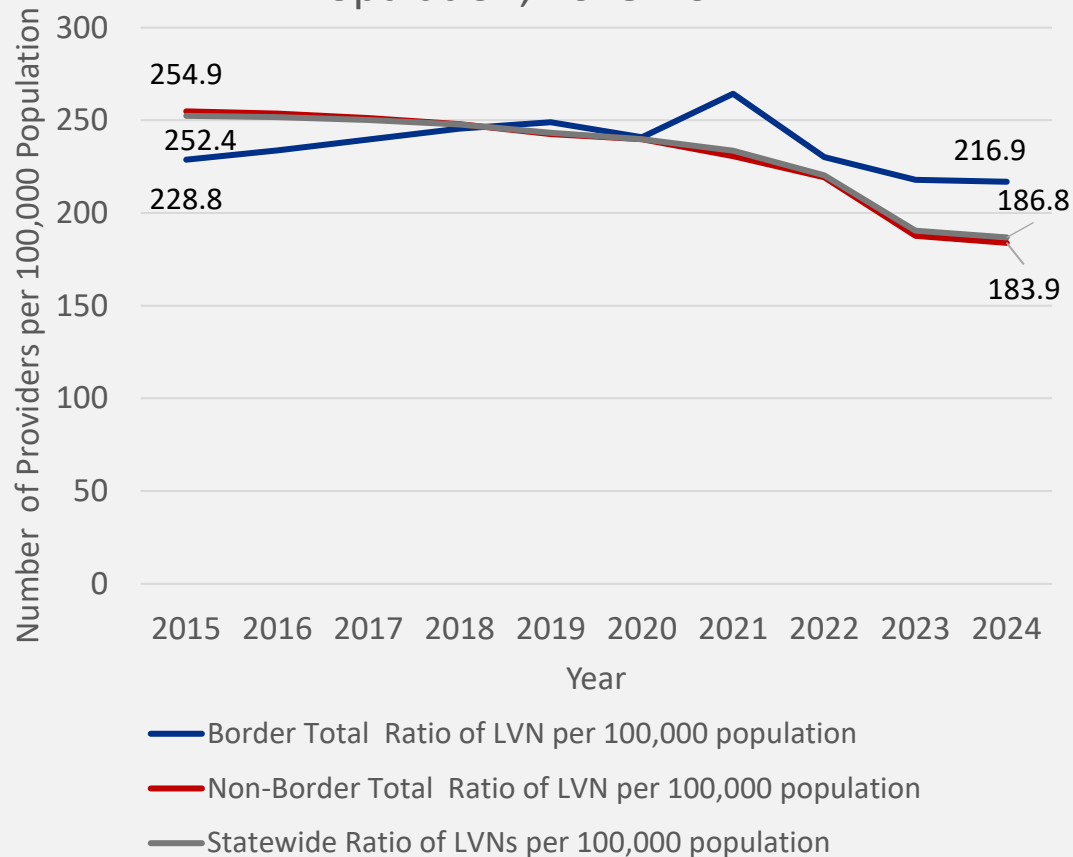
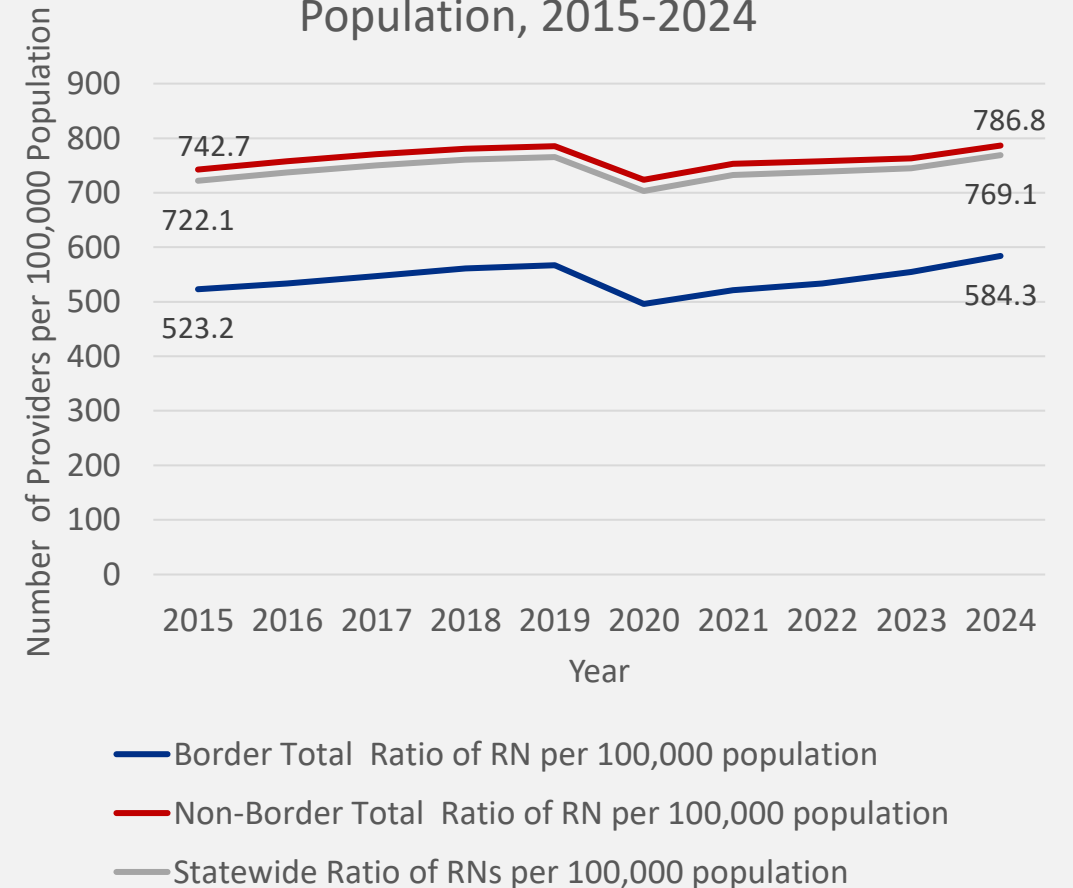
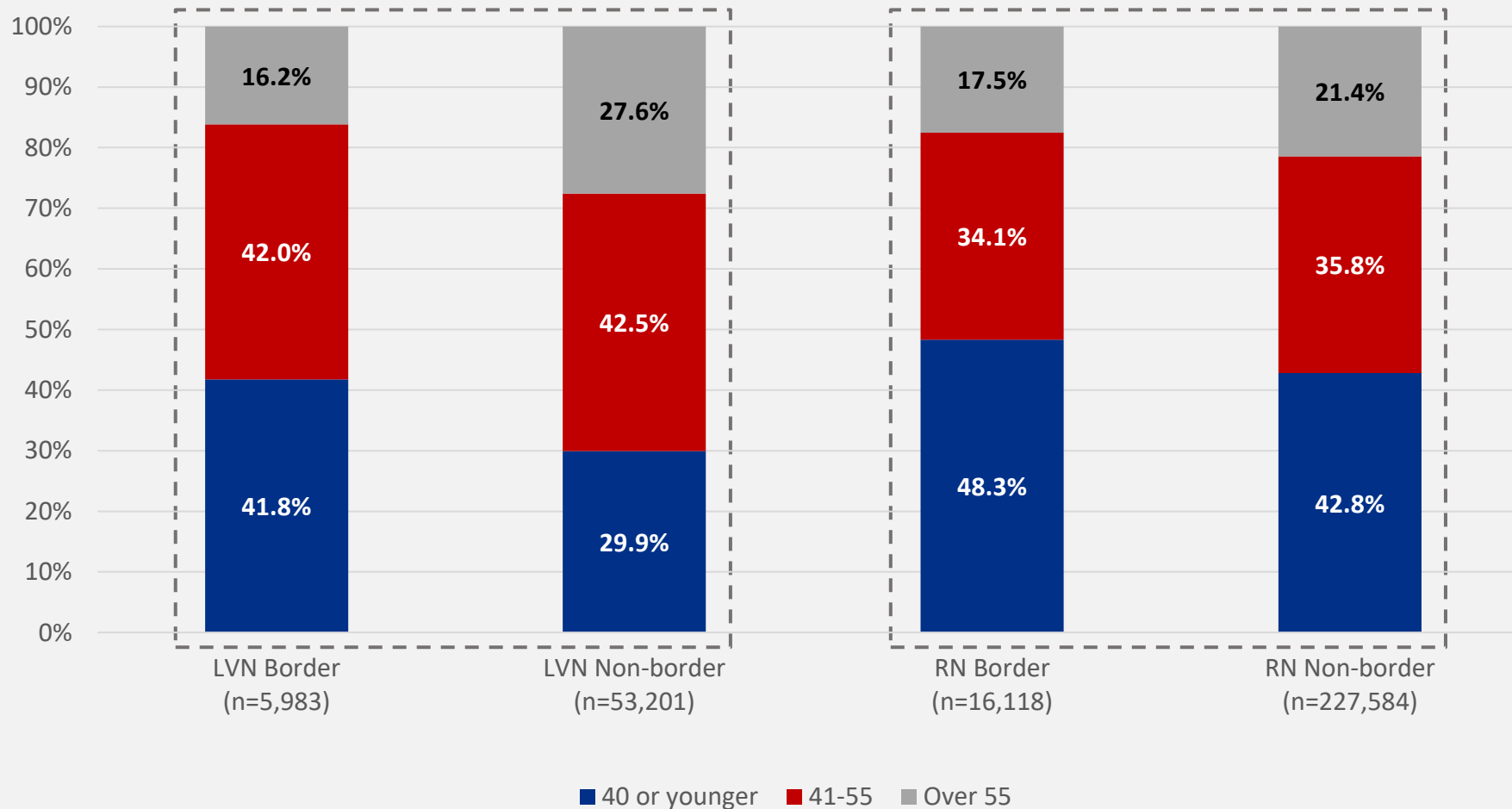


Figure 22. Ratio of RNs per 100,000 Population, 2015-2024



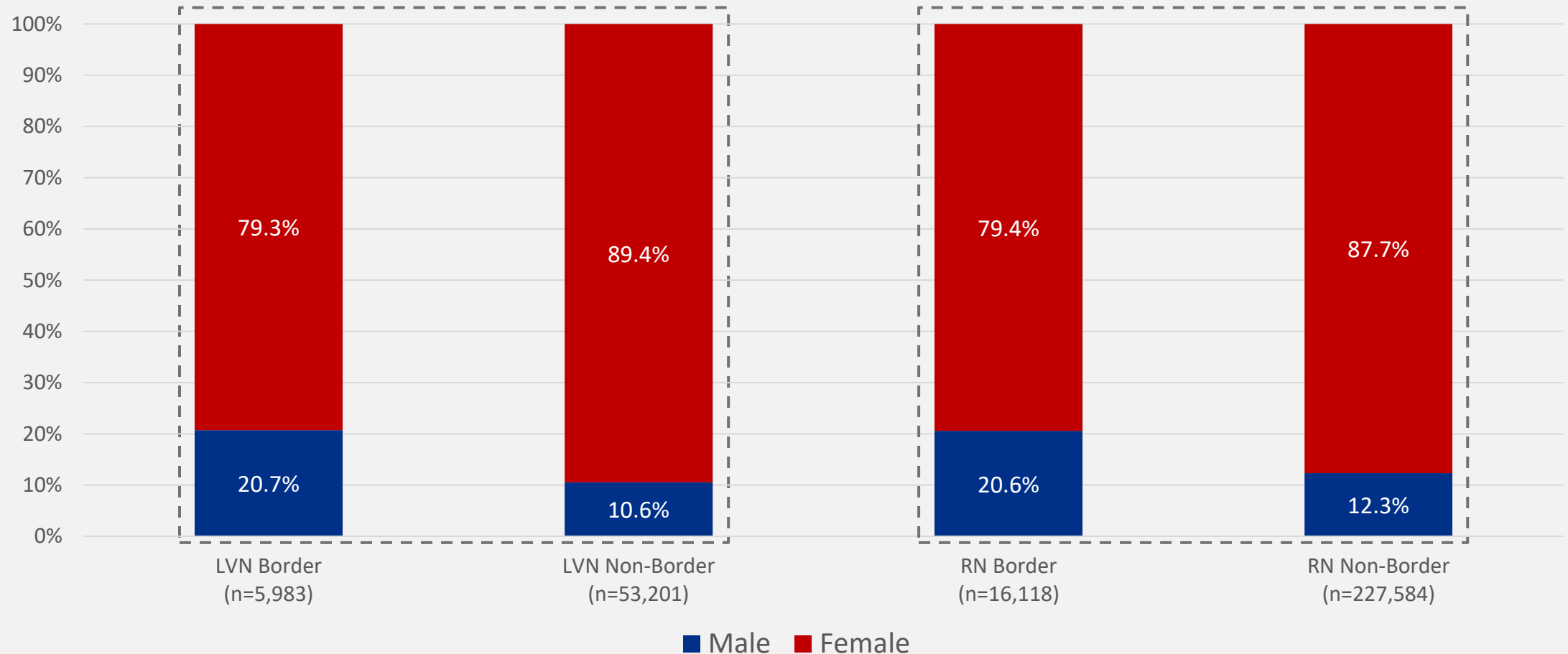
Age Distribution of Nurses, 2024

Figure 23. Age Distribution of LVNs and RNs in Border and Non-border Counties, 2024



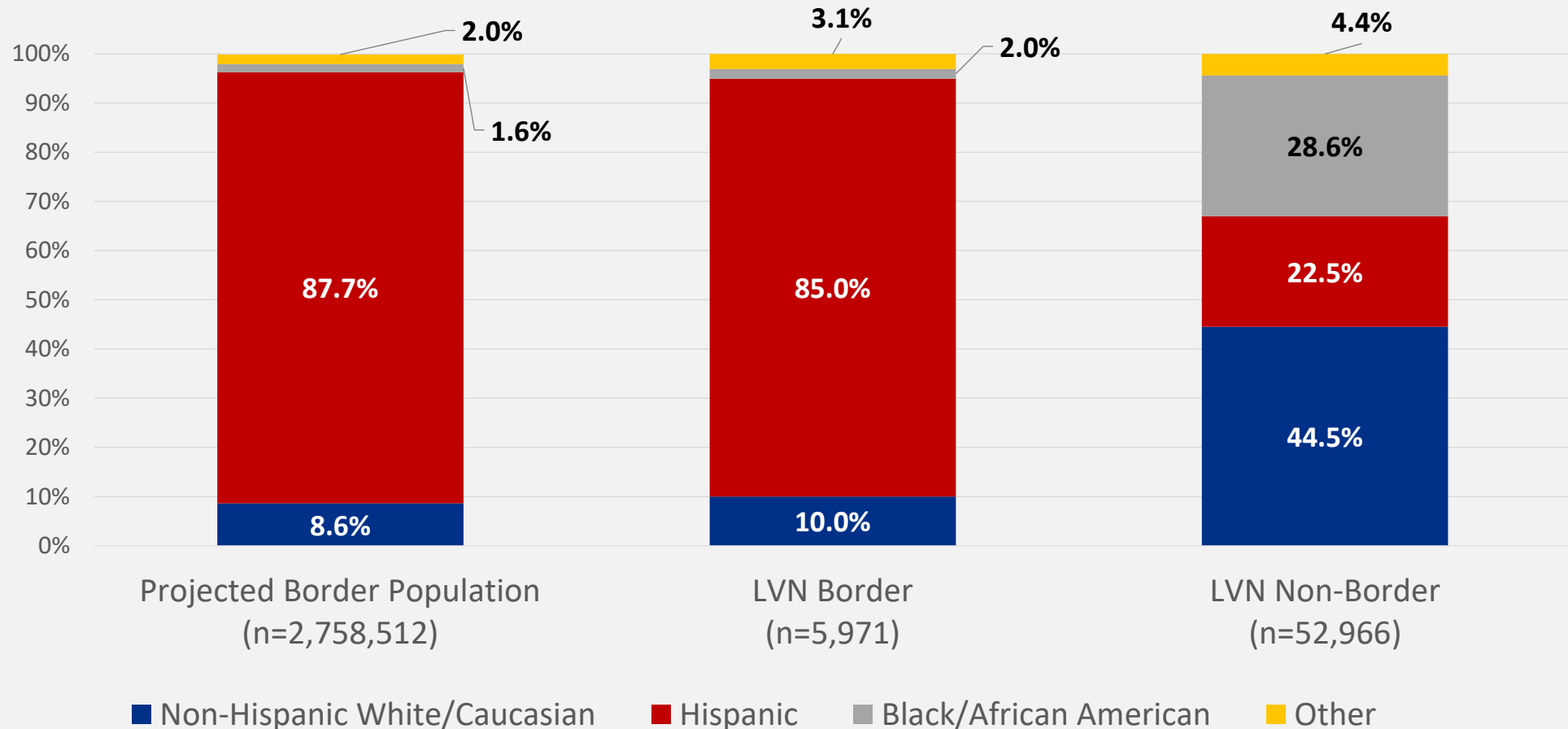
Gender Distribution of Nurses, 2024

Figure 24. Gender Distribution of LVNs and RNs, 2024

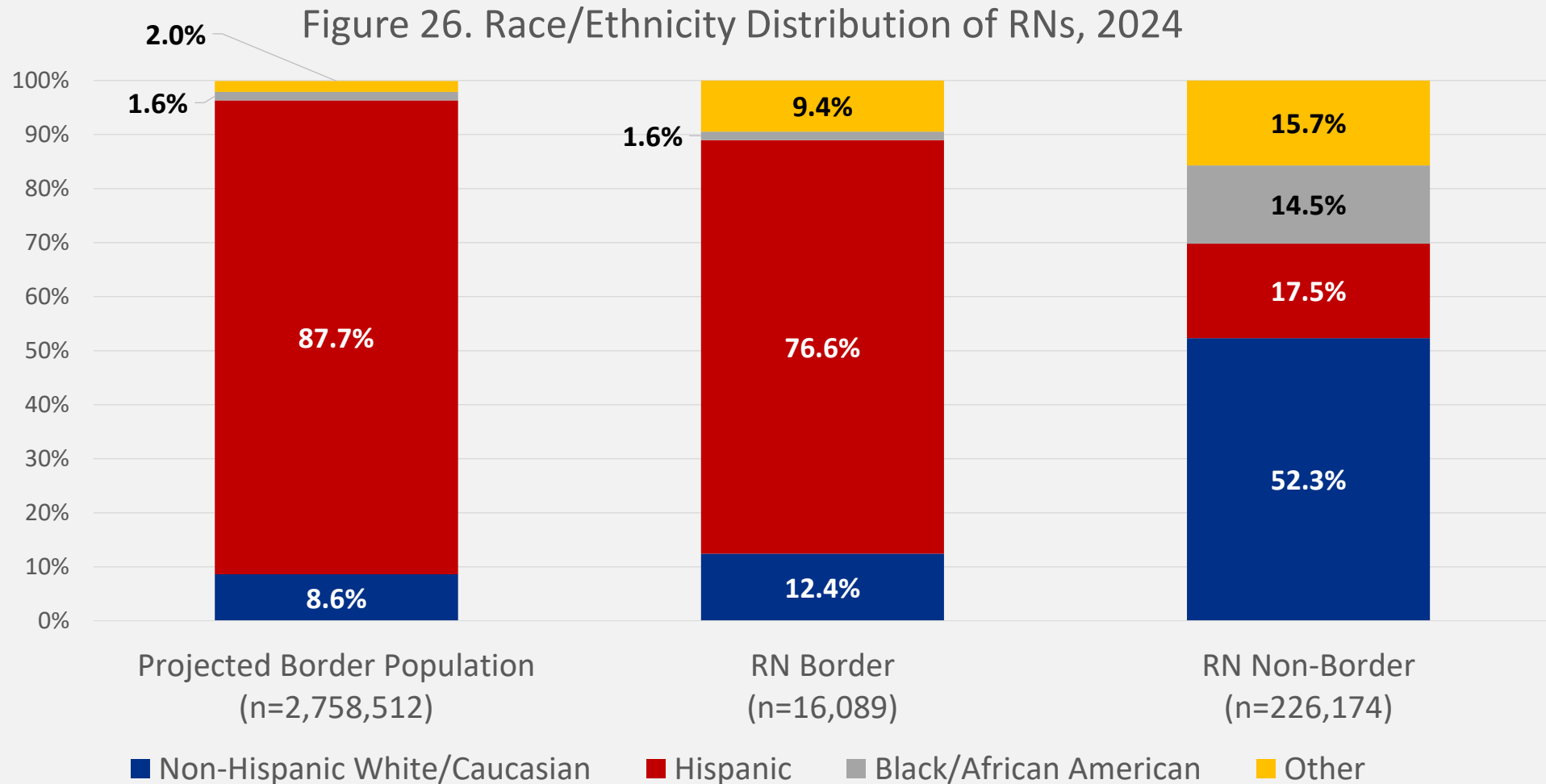


Racial/Ethnic Distribution of LVNs, 2024

Figure 25. Race/Ethnicity Distribution of LVNs, 2024



Racial/Ethnic Distribution of RNs, 2024



Vacancy and Turnover among Nurse Employers



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LVN Vacancy and Turnover Among Nurse Employers, 2024

Table 2. Vacancy and Turnover Rates of LVNs by Employer Type, 2024

	Average Facility Vacancy Rates of LVNs			Average Facility Turnover Rates of LVNs		
	Statewide	Border	Non-Border	Statewide	Border	Non-Border
Hospital	17.1%	14.7%	17.3%	28.8%	42.0%	28.0%
Hospice and Home Health	17.8%	12.3%	18.9%	33.6%	37.5%	33.0%
Gov't Public Health	9.7%	0.0%	11.1%	7.1%	0.0%	7.8%

RN Vacancy and Turnover Among Nurse Employers, 2024

Table 3. Vacancy and Turnover Rates of RNs, by Employer Type, 2024

	Average Facility Vacancy Rates of RN			Average Facility Turnover Rates of RNs		
	Statewide	Border	Non-Border	Statewide	Border	Non-Border
Hospital	12.7%	8.7%	17.3%	23.2%	24.1%	23.2%
Hospice and Home Health	17.0%	12.5%	17.9%	30.2%	11.1%	33.2%
Gov't Public Health	6.9%	11.1%	6.6%	16.9%	6.3%	17.6%

Nursing Education



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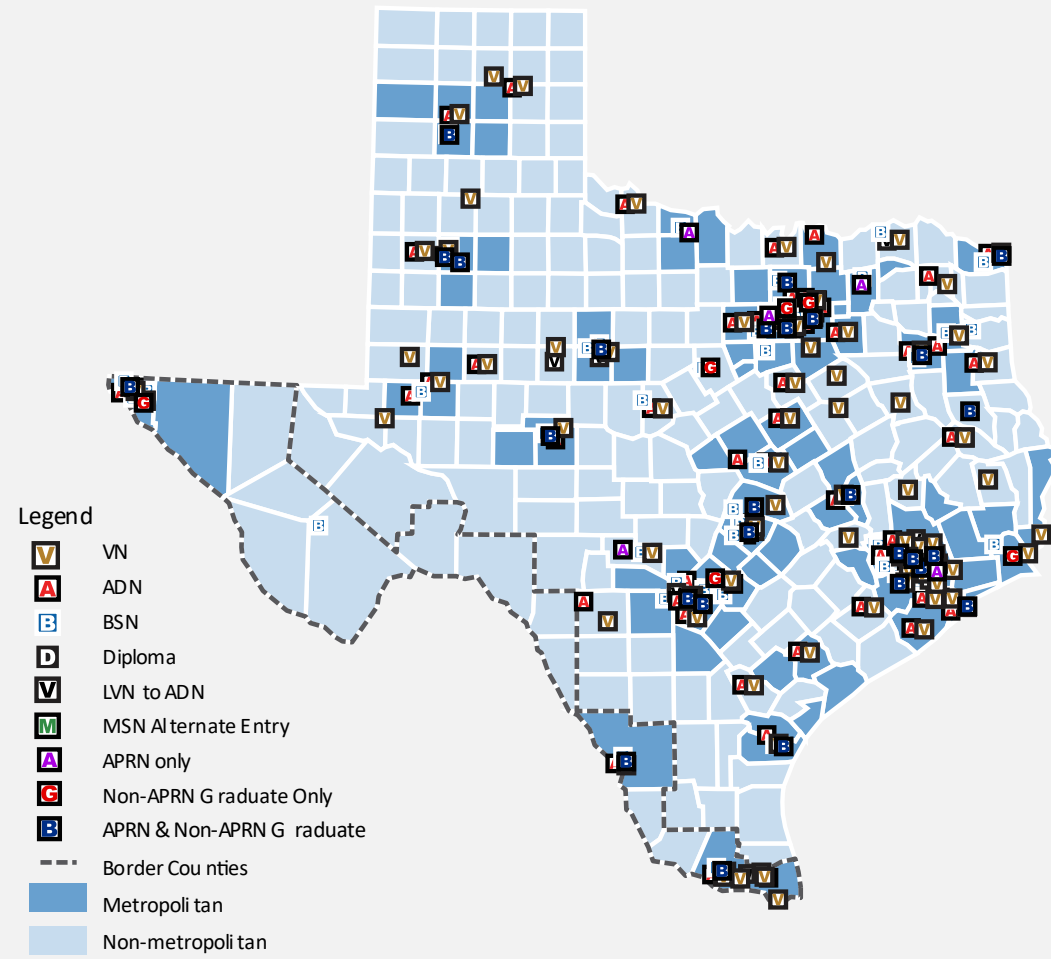
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Nursing Education Programs in Border Counties, 2024

Table 4. Number of Nursing Programs in Border and Non-Border Counties of Texas, 2015 and 2024

Type of Program	Number of Programs in 2015		Number of Programs in 2024	
	Border	Non-Border	Border	Non-Border
VN	9	82	8	76
RN	11	108	14	115
Graduate	1	20	4	34

Figure 27. Nursing Programs in Texas, 2024



Enrollment Trends of LVN and RN Programs

Figure 28. VN Programs Newly Enrolled Trends, 2015-2024

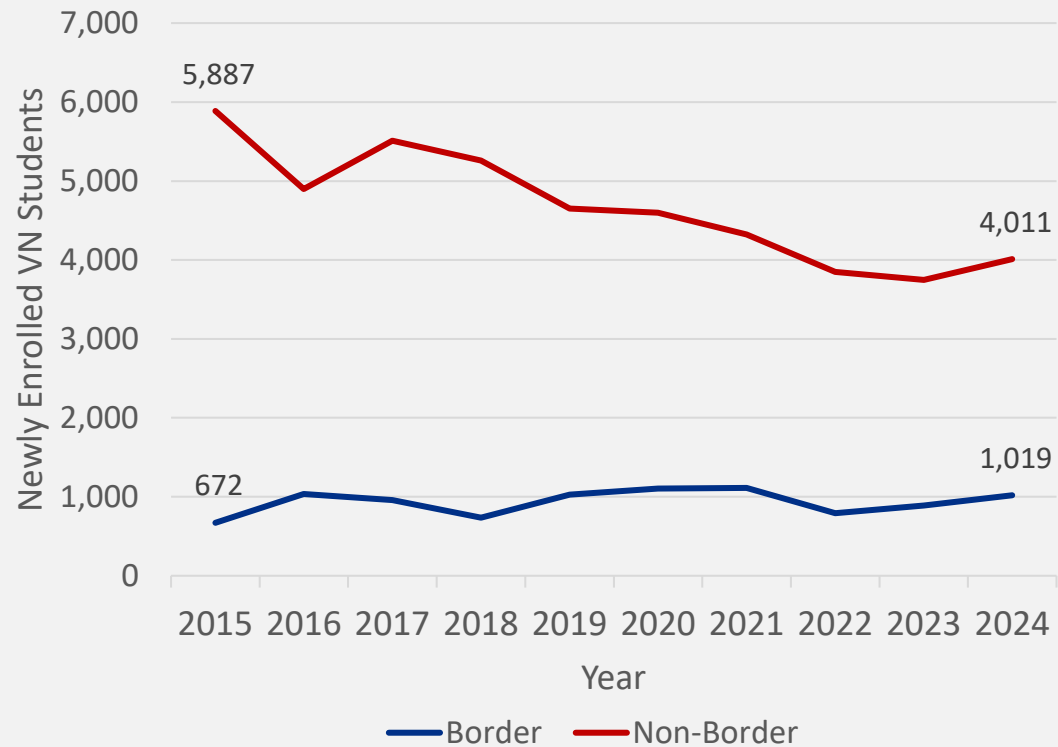
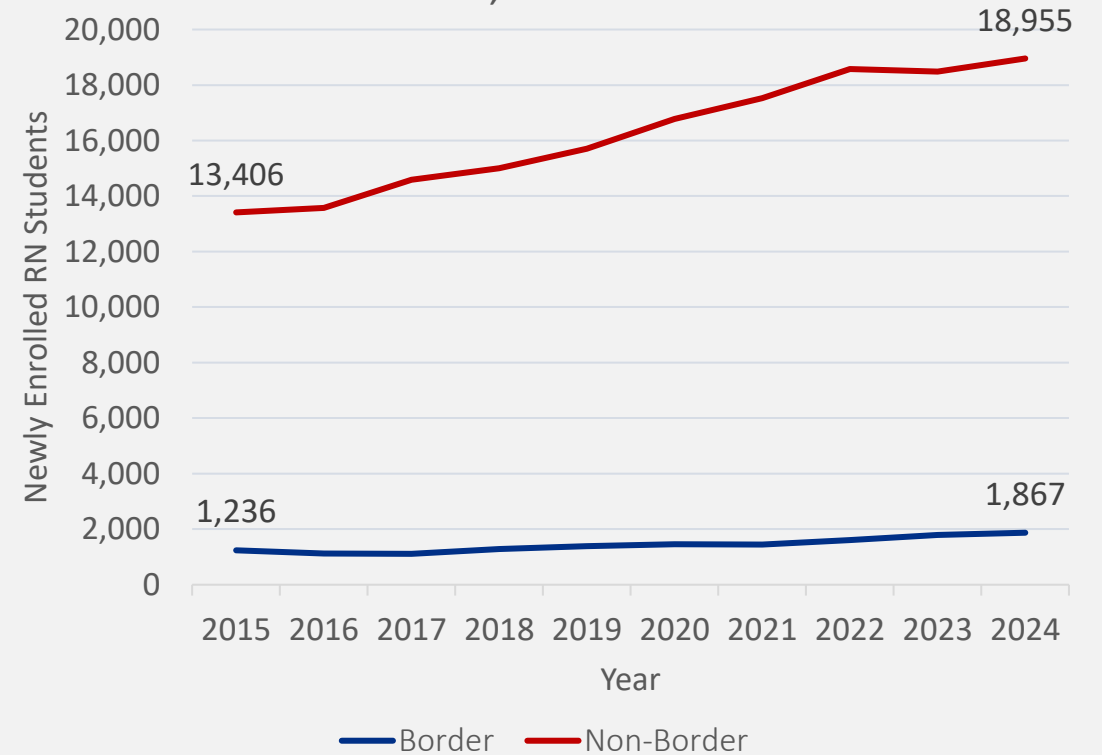


Figure 29. RN Programs Newly Enrolled Trends, 2015-2024



Admission to Nursing Programs, 2024

Table 5. Admission to Nursing Programs, 2024

	LVN		RN	
	Non-Border	Border	Non-Border	Border
Unfilled Seats	31.0%	20.0%	21.8%	9.7%
Qualified Applications Not Offered Admission (QANA)	15.5%	10.2%	27.0%	30.2%
Highest Ranked Reason – Not Admitting Qualified Applicants	Lack of clinical space	Delays in hiring faculty	Lack of clinical space	Lack of qualified faculty

Graduation Trends of LVN and RN Programs

Figure 30. LVN Program Graduation Trends, 2015-2024

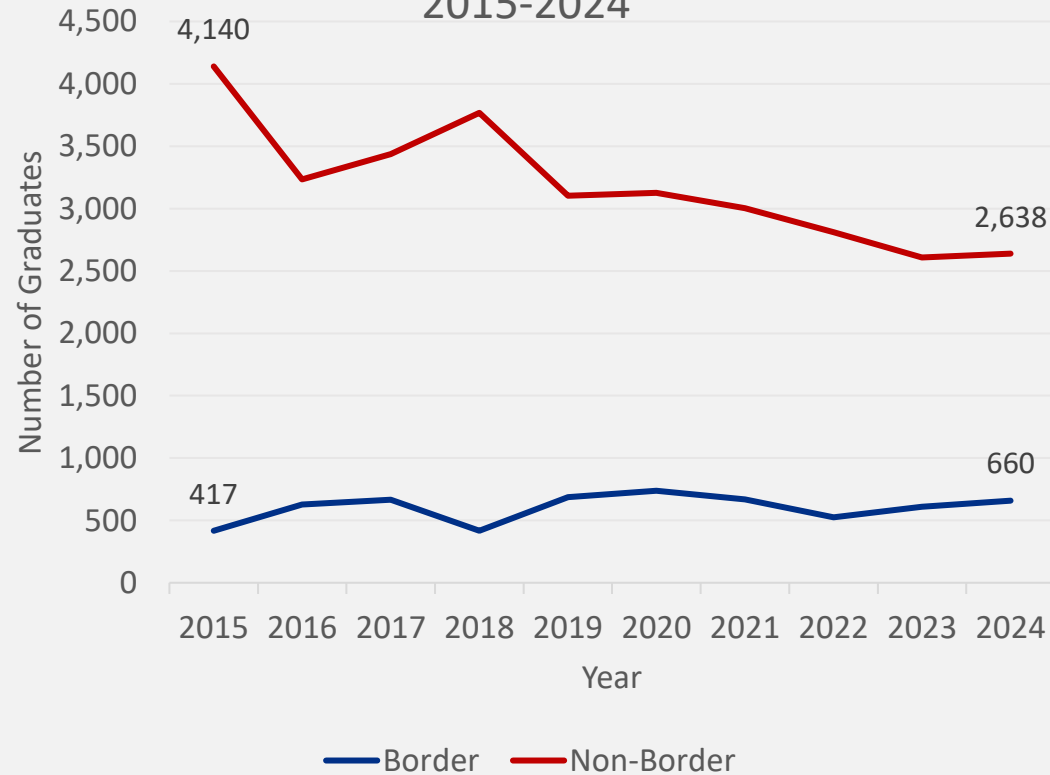
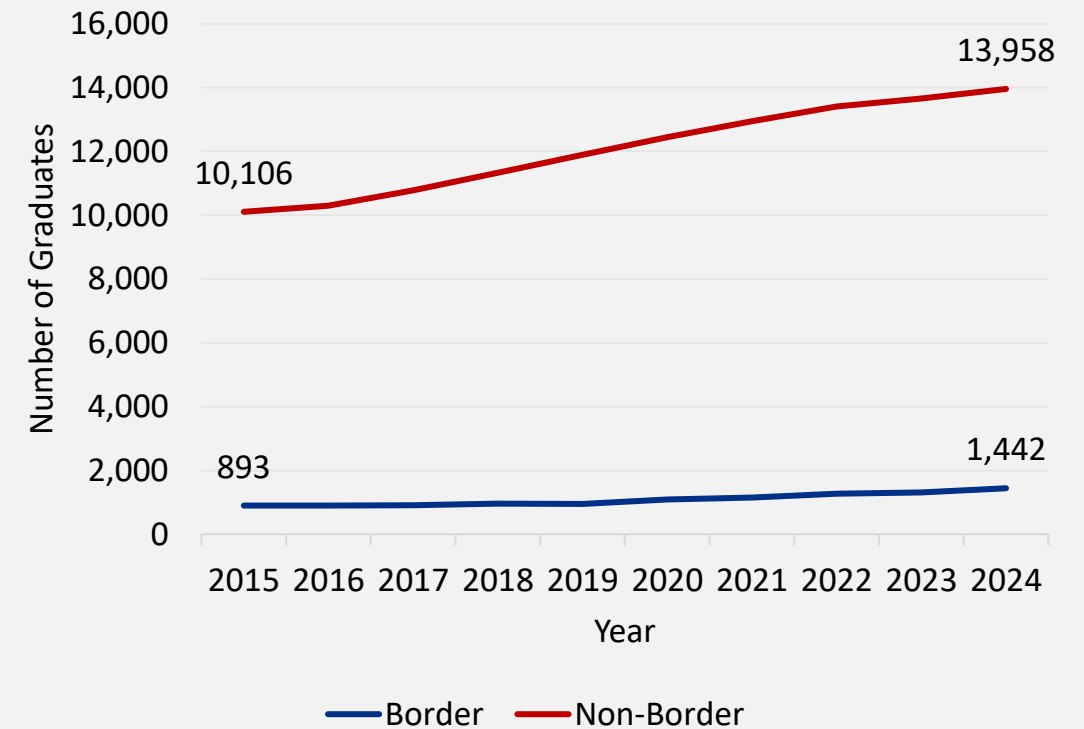


Figure 31. RN Program Graduation Trends, 2015-2024



Barriers to Increasing Graduates in Nursing Programs, 2024

VN Programs:

- No one reason was cited most frequently by programs in border region
- Non-border programs most frequently reported students not being able to meet the academic challenges of a nursing program as a barrier.
- 50% border and 34.5% of non-border programs reported no barriers

RN Programs:

- Border programs most frequently reported lack of student preparedness
- Non-border programs most frequently reported faculty shortage
- Most border programs (64.3%) reported no barriers

Summary



- Border counties have fewer healthcare providers per 100,000 population than non-border counties, except for LVNs.
- Border healthcare providers are more likely to be male.
- Border healthcare providers are younger, except for border PCPs.
- Projected unmet demand is higher in border counties for all healthcare providers except LVNs.
- Border facilities had lower LVN and RN vacancy rates, but border hospitals had higher LVN and RN turnover rates.
- Enrollment and graduation numbers are increasing in border VN and RN programs.

Contact Information

Health Professions Resource
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Email: HPRC@dshs.texas.gov

www.dshs.texas.gov/healthprofessions

Texas Center for Nursing
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Email: TCNWS@dshs.texas.gov

www.dshs.texas.gov/nursingworkforce

Visit our dashboards under “Healthcare” on Texas Health Data

<https://healthdata.dshs.texas.gov/>

References

Supply Trends

- Texas Department of State Health Services, Health Professions Resource Center (HPRC) and Center for Nursing Workforce Studies (CNWS). Licensure data from Texas Medical Board, Texas State Board of Dental Examiners, and Texas Board of Nursing as geocoded and processed by HPRC and CNWS, 2015-2024

Supply and Demand Projections

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Nurse Employer Data

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Nursing Education Data

- Texas Department of State Health Services, Center for Nursing Workforce Studies. Nursing Education Program Information Survey Reports, 2015-2024.

Thank you!



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