

2019

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%.

Recruitment is particularly difficult for public health agencies, especially when compared to hospitals.^{1,2} Research has shown that work environment characteristics have an impact on nurse workforce outcomes, which determine how well nurses are recruited and retained.^{1,3} This report presents the findings pertaining to recruitment and retention practices in Texas governmental public health agencies. Specifically, this report focuses on nursing staff hiring practices, days to fill vacant positions, recruitment and retention strategies, issues filling vacancies, and transition to practice programs.

¹Dingley, J & Yoder, L. (2013) The Public Health Nursing Work Environment: Review of the Literature. Journal of Public Health Management Practice, 19(4), 308-321.

²Health Resources Service Administration. (2005). Public Health Workforce.

³Cohen, J., Stuenkel D., & Nguyen, Q. (2009). Providing a healthy work environment for nurses: influence on retention. Journal of Nursing Care Quality. 24(4), 308-315.

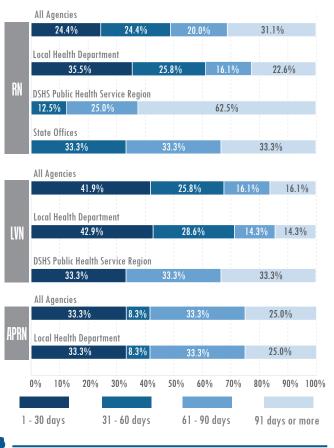
Recruitment and Hiring Practices

Recruitment Experiences

Figure 1 shows the average number of days it takes for responding public health agencies that employ that nurse type to fill vacant positions by agency type.

- 41.9% of responding agencies filled LVN positions in 1 – 30 days and 25.8% filled LVN positions in 31 – 60 days.
- Less than a quarter of agencies reported that they fill RN positions in under 30 days. DSHS Public Health Service regions have the most difficulty filling RN positions, with nearly 2/3 indicating that it takes them more than 90 days to fill these types of positions.
- 25.0% of public health agencies took more than 90 days to fill APRN positions.
- More than half of local health departments reported taking fewer than 60 days to fill vacant RN positions. This was fewer days than DSHS public health service regions and state offices.
- Two thirds or more of DSHS public health service regions and state offices reported taking more than 61 days to fill vacant RN positions.

Figure 1. Number of days to fill vacant nurse positions by agency type



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Recruitment and Retention Strategies

The 2019 TGPHNSS asked public health agencies about strategies for recruitment and retention. Table 1 shows the number and percentage of agencies that used various strategies for the recruitment and retention of nursing staff.

- The strategies most frequently used were paid vacation days and health insurance, 97.9% and 95.8% respectively.
- A retirement plan was the third most frequently used strategy for nursing staff in public health agencies (91.7%).
- Reimbursement for workshops/conferences was also frequently used (60.4%).
- 3 agencies reported using no strategies for nursing staff (6.3%).
- 12 agencies reported using other strategies that included a M-F 8-5pm work schedule (n=3), increased holidays/paid leave (n=3), continuing education and merit raises (both n=2).

Table 1. Recruitment and retention strategies used by public health agencies

Strategy	# of Agencies	% of Agencies
Paid vacation days	47	97.9%
Health insurance	46	95.8%
Retirement plan	44	91.7%
Reimbursement for workshops/conferences	29	60.4%
Employee recognition programs (employee of the month, staff dinners/luncheons, etc.)	15	31.3%
Merit bonus	15	31.3%
Payback for unused sick/vacation time	15	31.3%
Flexible scheduling or job sharing	14	29.2%
Other, please specify	12	25.0%
Tuition (reimbursement or direct payment for employees/new hires)	9	18.8%
Financial assistance in receiving certifications or further education	6	12.5%
NONE	3	6.3%
Sign-on bonus	0	0.0%
Bonus for recruiting nursing staff to the organization	0	0.0%

The 2019 TGPHNSS asked agencies to rank nurse retention interventions on a scale of 1 to 4 with 1 being the most impactful and 4 being the least impactful on nurse retention. Table 2 shows the results.

- 37 out of 47 (78.7%) agencies responding to the question ranked pay increase (1) as having the greatest impact on nurse retention.
- Employee recognition was ranked as the least impactful (4) by 20 out of 44 agencies (45.5%).
- 8 agencies reported other interventions, flexible scheduling, positive work environment, tuition reimbursement and insurance were all mentioned.

Table 2.	Recruitment	and retention	strategies	impactfulness
rankings	by public hea	Ith agencies		

	AGENCY RANKING			
Strategy	MOST Impactful	More Impactful	Less Impactful	LEAST Impactful
	1	2	3	4
Pay Increase	37	7	2	1
Employee recognition	0	3	18	20
Adequate staffing	1	18	14	11
Effective management/ leadership	7	17	12	11

Issues Filling Vacancies

The 2019 TGPHNSS asked an open ended question asking agencies to provide a description of the issues the agency faces filling vacant nursing positions; 43 agencies responded.

- Non-competitive salary was the most frequently reported reason agencies had issues filling vacant positions (69.8%, n=30).
- Inexperienced/not qualified applicants was also reported (23.3%, n=5) followed by too few applicants (4.7%, n=2).

Transition to Practice

In order to address the shortage of highly qualified practicing nurses, the Institute of Medicine's (IOM) report *The Future of Nursing: Leading Change, Advancing Health* recommends that employers of newly licensed RNs help ease the transition by implementing a transition to practice program.¹ Agencies were asked if they had a transition to practice program in the 2019 TGPHNSS.

- Of the 50 agencies that responded to the question, only 5 reported having a transition to practice program (10.0%), fewer than reported for 2017 (n=7, 14.6%)
- Four of the five agencies that reported having a transition to practice program were local health departments, the other one was a DSHS public health service region.
- All 5 agencies that reported having a transition to practice program were in metropolitan counties.

¹Institute 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

Less than a quarter of agencies reported that they fill RN positions in under 30 days. DSHS Public Health Service regions have the most difficulty filling RN positions, with nearly 2/3 indicating that it takes more than 90 days to fill.

The most frequently reported recruitment and retention strategies used by responding agencies were paid vacation days and health insurance (97.9% of reporting agencies), health insurance (95.8% of reporting agencies), followed by a retirement plan (91.7% of reporting agencies).

Non-competitive salary was the most frequently (69.8% of reporting agencies) reported reason agencies had issues filling vacant positions. Agencies ranked pay increase as the most impactful strategy on nurse retention (78.7% of reporting agencies).

Finally, of the 50 agencies, only 5 reported having a transition to practice program (10.0%), a decrease from 2017.