



The Long Term Care Nurse Staffing Study (LTCNSS) assesses nurse staffing and related issues in the long term care setting. In 2016, approximately 26% of licensed vocational nurses (LVNs) and 3% of registered nurses (RNs) in Texas worked in the nursing home/extended care setting. Long term care facilities may also employ certified nurse aides (CNAs), certified medication aides (CMAs), and advanced practice registered nurses (APRNs). During the spring of 2017, the TCNWS administered the LTCNSS to 1,213 Texas nursing facilities. A total of 439 facilities participated, for a final response rate of 36.2%.

Please refer to the full set of reports for more details on each topic. The following are highlights and recommendations from the findings of the 2017 Long Term Care Staffing Survey.

2017 LTCNSS: 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.¹

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

Vacancy Rates

- Position vacancy rates for most nurse types in long term care facilities were higher than vacancy rates for these positions within Texas hospitals in 2017.

RN Position Vacancy Rate

- Direct resident care RNs had the highest position vacancy rates in the state (18.9%), which was an increase from 2016 (15.7%).

LVN Position Vacancy Rate

- The statewide position vacancy rate for direct resident care LVNs was 9.6% which was similar to 2016 (9.7%).

Nurse Aide Position Vacancy Rate

- The statewide position vacancy rate for CNAs and CMAs decreased from 11.7% and 9.5% in 2016 to 10.4% and 9.0% in 2017, respectively.

Turnover Rates

RN Median Facility Turnover Rate

- Median turnover rates among direct resident care RNs in Texas long term care facilities was 50.0% which was the same in 2016 (50.0%).
- Administrative RNs had lower turnover rates than their direct resident care counterparts.

LVN Median Facility Turnover Rate

- The median facility turnover rate for direct resident care LVNs decreased from 52.6% in 2016 to 44.4% in 2017.

Nurse Aide Turnover Rate

- The highest overall median facility turnover rate was among CNAs (65.5%).
- The median facility turnover rate for CMAs was 22.2%, which was a decrease from 2016 (33.3%).

2017 LCTNSS: Staffing

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 (59.4%) of the direct resident care staff within long term care facilities.
- Direct resident care RNs and LVNs were more numerous than their administrative counterparts.
- More than half of responding facilities reported they would need more RNs and CNAs over the next two years, 58.7% and 66.4% respectively.
- Voluntary overtime was the most frequently used interim staffing method, with 64.8% of facilities reporting the use of this strategy.
- A total of 424,216 hours of interim staffing coverage at a cost of almost \$8 million, which were both decreases from the 2016 LCTNSS (455,388 hours and \$9,975,433.47).
- More than half of the respondents reported increased workloads, increase in voluntary overtime, low staffing morale, and using administrative staff to cover nurse duties as consequences of inadequate staffing.

2017 LCTNSS: Recruitment

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.
- 73.4% of 312 facilities said past relevant nursing experience was the most important characteristic when hiring an RN.

2017 LCTNSS: Transition to Practice

89 of 439 (20.3%) survey respondents reported using at least one of type of transition to practice program for all nursing staff.

- 48.3% of long term care facilities used student nurse internship/externship as a method. For a point of comparison, 68.5% of hospitals in Texas utilized mentorship/preceptorship as a transition to practice program.

2017 LCTNSS: Directors of Nursing

437 of the 439 responding facilities reported having a Director of Nursing (DON) at the time of data submission.

- 67.1% of 433 DONs had 6 or more years of experience in a long term care setting.
- 40.8% of 433 DONs held their current position for less than 1 year.
- 413 of 429 DONs had a nursing degree.
- The median DON salary range was between \$90,000 and \$99,999 in 2016.

TCNWS Advisory Committee Recommendations

Recruitment and Retention

According to respondents of the study, long term care nursing facilities have difficulty in recruiting nursing staff. Similar studies (2017 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 long term care, and to ensure funding for long term care nursing positions: Stakeholders should develop and implement solutions to address these issues, specifically:

- 78% of 381 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 80% 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 69.7% 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.
- Over 70% of facilities use employee recognition programs as a strategy to recruit and retain staff, and 37.3% 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.
- Minimum reported entry level and experienced wages for CNAs and CMAs were below the national median of \$12,786. Increase in wages for aide staff will help in recruitment and retention efforts.

Directors of Nursing (DON)

65.8% 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. Facilities should assign experienced long-term care DON mentors, offer leadership training, send DONs to the DON Academy, or identify other opportunities to support DONs.

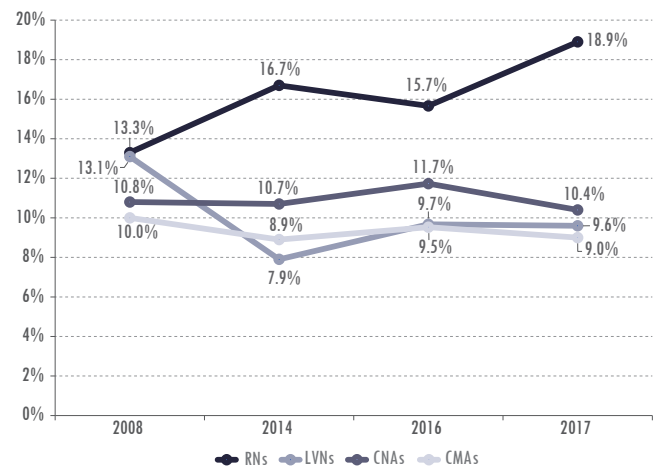
Staffing

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:

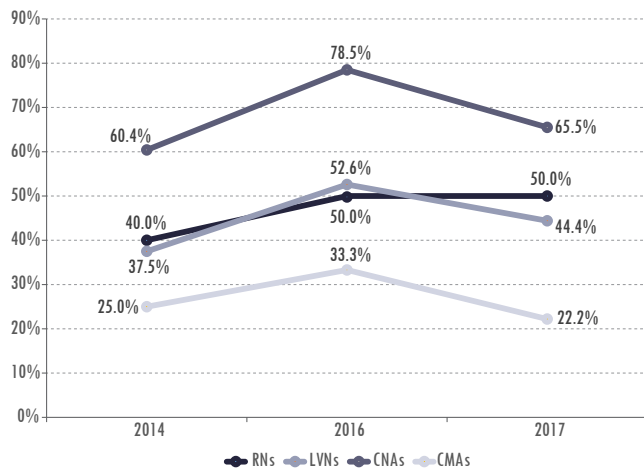
- Evaluate requirements for nurse aide training instructors. Consider decreasing requirement that instructors have 3 years of long term care experience to 1 year.
 - CNAs are the most numerous staff type in long term care facilities, comprising 59.4% of staff providing direct resident care. Facilities 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

Direct resident care staff position vacancy rates, by staff type, 2008 - 2017



Median facility turnover rates for direct resident care staff, 2014 - 2017



Respondents also reported vacancy rates for all nurse types in long-term care facilities 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.
- Provide competitive wages and benefits to long-term care nurses.

Transition to Practice¹

54.1% 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 20.3% 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.
- Facilities should encourage nurses to participate in the Transition to Practice Academy where they will gain valuable resources and takeaways that support their transition to and prepare nurses to offer the highest possible level of care to nursing facility residents.
- Vocational educators and DONs are encouraged to use the LVN Tool Kit to help new LVNs transition into long term care facilities.

¹Transition-to-practice: These programs may include nurse residency, nurse fellowship, student nurse internship/externship, preceptorship/mentorship programs.

