

The Hospital Nurse Staffing Survey (HNSS) assesses the size and effects of the nursing shortage in hospitals, Texas' largest employer of nurses. During the spring and summer of 2022, the Texas Center for Nursing Workforce Studies (TCNWS) administered the HNSS to the Chief Nursing Officers/Directors of Nursing of 657 Texas hospitals. These included for-profit, nonprofit, public, and Texas Health and Human Services Commission-operated hospitals, as well as hospitals linked to academic institutions; military hospitals were not surveyed. The facilities surveyed were general acute care, psychiatric, special, and rehabilitation hospitals; outpatient or community-based clinics were not included. Respondents provided data for 333 hospitals for a response rate of 50.7%. It is important to note that between the 2019 and 2022 HNSS, the COVID-19 pandemic occurred.

This report addresses attributes hospitals consider when hiring RNs and recruitment and retention strategies used by hospitals. Additionally, this report provides important data on the length (in days) that hospitals' RN positions remained unfilled.

## 2022 HNSS: 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.<sup>1</sup>

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

### Vacancy Rates

#### RN Position Vacancy Rate (285 of 333 hospitals responded):

- The RN position vacancy rate increased from 5.9% in 2019 to 17.6% in 2022.
- Of 84,817 RN FTE positions reported statewide, 14,910 were vacant.

#### Advanced Practice Registered Nurses Position Vacancy Rate (130 of 333 hospitals responded):

- Responding hospitals reported 400 vacant FTEs out of 3,188 total APRN FTEs across the state.
- The statewide position vacancy rate for NPs increased from 8.3% in 2019 to 11.9% in 2022.
- For CNSs, the statewide position vacancy rate decreased, from 6.7% in 2019 to 7.1% in 2022.

- The statewide CRNA position vacancy rate was 16.7%, over 10 percentage points higher than the vacancy rate for this position in 2019 (5.2%).
- The statewide position vacancy rate for CNMs was 4.6%, an increase from 0% in 2019.

#### LVN Position Vacancy Rate (233 of 333 hospitals responded):

- The position vacancy rate for LVNs increased from 5.5% in 2019 to 23.1% in 2022.
- Of a total 4,606 budgeted LVN FTE positions, 1,063 were vacant.

#### Nurse Aide Position Vacancy Rate (258 of 333 hospitals responded):

- The statewide position vacancy rate for NAs increased from 10.3% in 2019 to 17.0% in 2022.
- Of the 17,946 NA FTE positions reported statewide, 3,043 were vacant.

### Turnover Rates

#### RN Median Facility Turnover Rate (285 of 333 hospitals responded):

- The median facility turnover rate among RNs in Texas hospitals was 28.3%. RN turnover rates in Texas hospitals ranged from 0% (10 hospitals) to 263% (1 hospital) in 2022.

### Advanced Practice Registered Nurse Median Turnover Rate (121 of 333 hospitals responded):

- The statewide median turnover rate was 0% for all APRN types except CRNAs.
- Facility turnover rates for APRNs ranged from 0% (71 hospitals) to 200% (1 hospital).

### LVN Turnover Rate (233 of 333 hospitals responded):

- The median facility turnover rate for LVNs

decreased from 19.7% in 2019 to 18.9% in 2022.

- Facility turnover rates for LVNs ranged from 0% (69 hospitals) to 400% (1 hospital).

### Nurse Aide Turnover Rate (258 of 333 hospitals responded):

- The statewide median facility turnover rate for NAs increased from 31.3% in 2017 to 35.0% in 2022.
- Facility turnover rates for NAs ranged from 0% (27 hospitals) to 350% (1 hospital).

<sup>1</sup>American Association of Colleges of Nursing, "Nursing Shortage Fact Sheet", 2012, <http://www.aacn.nche.edu/media-relations/NrsgShortageFS.pdf>

## 2022 HNSS: Staffing

### Nurse Staffing

- As a means of gauging trends in employment, hospitals were asked if there had been changes in the number of RN positions at their facility over the past year. 52.0% of respondents reported an increase in RNs positions, while 9.3% reported a decrease.
- When asked how many additional FTEs expected to be added in the coming fiscal year, 228 responding hospitals reported plans to hire an additional 3,956 new FTE positions among all nursing staff types, mostly RNs.

### Where Hospitals Recruit (333 of 333 hospitals responded):

- 97.9% of hospitals reported recruiting in Texas, while 54.7% recruited in other states and 25.8% recruited internationally.

### Filling Positions (324 of 333 hospitals responded):

- The majority of nursing position types are filled in 61 or more days.

## 2022 HNSS: COVID-19

### Consequences of COVID-19 (328 of 333 hospitals responded):

- The top 3 consequences were nurses leaving for travel jobs (91.5%), insufficient staffing (74.7%), and nurses retiring early (67.7%).
- 45.3% of hospitals used APRN or ancillary staff (physical therapists, certified registered nurse anesthetists, respiratory technicians, etc.) in nontraditional roles to support RN staff.

### Changes to Staffing Model Due to COVID-19 (269 of 333 hospitals responded):

- Over one-third of hospitals (35.7%) made changes to nurse-to-patient ratios. Less than one-quarter of these hospital planned to keep these changes.
- Nearly one-quarter of hospitals started using a team nursing model (24.9%) and added additional LVN positions (24.5%). The majority of these hospitals planned to continue these changes.



### Staffing

Texas is projected to face a shortage of nurses from 2018 through 2032.<sup>1</sup> By 2032, the supply of RN FTEs is expected to grow by 30.5% to 291,872, while demand will grow by 38.8% to 348,883, leaving a deficit of 57,012 RN FTEs. Based on these projections, 16% of the projected demand for RNs in 2032 will not be met. Between 2018 and 2032, the demand for RNs in inpatient hospital settings is projected to grow by 40%. This will account for more than half of the growth in demand for RNs across all settings. In order to meet the growing demand for RNs, employers should consider the following strategies:

- Provide safe working conditions for nurses by maintaining appropriate staffing levels and implementing work schedules that minimize fatigue.
- Based on the findings of the 2022 Workplace Violence Against Nurses Employer Survey, hospitals should create a culture of safety for all nurses, encourage reporting of violent and aggressive events, encourage nurse staffing committees to consider incidents of workplace violence in their work, and establish and maintain ongoing surveillance.<sup>2</sup>
- Encourage nurses to extend their work-life careers. 67.7% of responding hospitals reported nurses retiring early as a consequence of COVID-19. Research suggests that retirement of RNs is one of the biggest challenges facing the nursing workforce, and that facilities should work with RNs to delay their retirement by offering shortened work days/shifts, modifying work duties, and making ergonomic accommodations.<sup>3</sup>
- Continue to support endeavors to increase funding levels as well as provide resources such as mentors/preceptors and clinical space to nursing programs in order to increase capacity to admit and graduate nursing students. 74.7% of hospitals reported insufficient staffing as a consequence of COVID-19.
- Continue the work that the Texas Team has begun on increasing nursing education capacity in Texas, including regional partnerships with health care providers and participants (e.g. hospitals, health plans, and businesses) working with academic institutions to support development of the nursing workforce in Texas.<sup>4</sup> A total of 27,282,054 contract RN and LVN FTEs were used by 56 responding

facilities at a cost of over \$279 million in 2021. In 2018, 64.5% percent of hospitals reported an increase in voluntary overtime as a consequence of inadequate nurse staffing.

- Take actions taken to address mental health issues in the healthcare workforce, increase nurse resilience and well-being, and decrease burnout.

### Recruitment and Retention

Employers of nurses should invite practicing nurses' input to promote recruitment and retention of nurses in the workplace. Some of these strategies could include the following:

- Continue to investigate mechanisms for recognition for the work and contributions that nurses provide. Employee recognition programs were the fifth most popular recruitment and retention strategy for employees, used by 84.7% of hospitals.
- Utilize recruitment and retention strategies outlined in the Magnet Recognition and Pathways to Excellence programs from the American Nurses Credentialing Center.<sup>6</sup>
- Utilize resources provided by the National Academy of Medicine's Action Collaborative on Clinician Well-Being and Resilience.<sup>7</sup>
- Support investigation and research in the retention of new graduates and experienced nurses in the work setting.
- Establish a forum for hospitals to share recruitment and retention best practices. Nursing stakeholder organizations should establish forums through which hospitals can share best practices for recruitment and retention of nurses, in order to more fully implement the strategies identified through recommendation two. Several nursing organizations in Texas have regional workgroups:
  - Texas Nurses Association (TNA) Districts
  - Texas Organization for Nursing Leadership (TONL) Regional Chapters
  - Texas Team Regional Teams
  - Texas Hospital Association (THA) Workforce Task Force

## Vacancy and Turnover

Texas continues to have higher vacancy and turnover rates than other states with comparable populations. High vacancy and turnover rates can lead to negative outcomes that affect quality of care, such as losing experienced staff and increasing the workload and stress levels of existing staff.<sup>5</sup> High vacancy and turnover is also costly to hospitals due to the high cost associated with overtime and recruiting qualified nurses. In order to decrease vacancy and turnover hospitals need to identify factors influencing recruitment and retention of nurses. Employers of nurses should invite practicing nurses' input to decrease vacancy and turnover rates for nurses in the workplace. Some of these strategies could include the following:

- Continue to improve work environment, including:
  - Care delivery models, including professional practice models
  - Institute flexible work schedules and part-time or per diem work. 95.2% of responding hospitals used shift differentials and 66.4% used flexible scheduling and job sharing as retention strategies for full-time employees. Other creative work schedules could include seasonal employment (e.g., working winters with summers off), overlapping shifts, and self-scheduling.
- Continue to support endeavors to increase funding levels as well as provide resources such as mentors/preceptors and clinical space to nursing programs in order to increase capacity to admit and graduate nursing students.
- Explore a wide range of compensation models that align experience, workload, and positive patient outcomes.
- Develop and support health promotion and return-to-work programs (after an employee injury or illness).
- Promote nursing apprenticeship and residency programs that encourage continuing education and career pathways for military medics, LVNs, and RNs.
- Develop and support programs for new and novice nurses beyond transition to practice.
- For nurses throughout their careers, offer more career development experiences such as tuition assistance and financial assistance for certifications.
- Consider using a team nursing model (using a mix of RNs, LVNs, and NAs to provide comprehensive care to patients) to mitigate the RN shortage.

<sup>1</sup> Texas Center for Nursing Workforce Studies. (2020). Updated nurse supply and demand projections, 2018-2032. <https://dshs.texas.gov/chs/cnws/Supply-and-Demand-Projections.aspx>

<sup>2</sup> Texas Center for Nursing Workforce Studies. (2019). Workplace violence against nurses survey. [https://www.dshs.texas.gov/chs/cnws/WorkforceReports/2018\\_WPVAN.pdf](https://www.dshs.texas.gov/chs/cnws/WorkforceReports/2018_WPVAN.pdf)

<sup>3</sup> Buerhaus, P.I., Skinner, L.E., Auerbach, D.I., and Staiger, D.O. (2017). Four challenges facing the nursing workforce in the United States. *Journal of Nursing Regulation*, 8(2). 40-46.

<sup>4</sup> Green, A., Mancini, M.E., Flemming, S., Bingle, C., Jordan, C., Kishi, A., Fowler, C., Thomas, K., Sjoberg, E., and Walker, S. (2011). Building academic capacity through statewide partnerships, 27(6). 51-57.

<sup>5</sup> American Association of Colleges of Nursing. (2019). Nursing shortage fact sheet. <https://www.aacnnursing.org/Portals/42/News/Factsheets/Nursing-Shortage-Factsheet.pdf>

<sup>6</sup> American Nurses Credentialing Center: <http://www.nursecredentialing.org/Magnet/ProgramOverview.aspx>.

<sup>7</sup> National Academy of Medicine: <https://nam.edu/initiatives/clinician-resilience-and-well-being/>.

<sup>8</sup> Spector, N. Transition to practice: Promoting quality and safety. Texas Board of Nursing: Nursing Education and Transition into Practice Conference. Austin, TX. 10 February 2010.

