

The Home Health and Hospice Care Nurse Staffing Study (HHHCNSS) assesses nurse staffing and related issues in home health and hospice agencies. In 2022, the Texas Center for Nursing Workforce Studies (TCNWS) administered the HHHCNSS to 303 Texas home health and hospice agencies with a patient census of at least 250. Respondents provided data for 85 agencies for a response rate of 28.1%. These agencies were representative of Texas home health and hospice agencies by geographic designation and agency type. Data is compared to 2017 numbers as the 2019 survey had too low of a response rate to report on. It is important to note that between the 2017 and 2022 HHHCNSS, the COVID-19 pandemic occurred.

This report presents highlights and recommendations from the findings of the 2022 HHHCNSS. The full set of HHHCNSS reports contain more detail on each topic.

2022 HHHCNSS: 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 agencies in an area. The median facility turnover rate describes the mid-point of responses for each agency.

Vacancy Rates

- The median facility vacancy rate for registered nurses (RNs) was 16.7%, for licensed vocational nurses (LVNs) it was 20.0%, and for home health and nurse aides (HHAs/NAs/CNAs) it was 41.7%. All of the median facility vacancy rates for all nursing types was 0.0% in 2017.

RN Position Vacancy Rate

- The statewide position vacancy rate was 16.3% for RN positions, up from 12.4% in 2017.

LVN Position Vacancy Rate

- The position vacancy rate for LVN positions increased from 8.9% in 2017 to 19.9% in 2022.
- LVNs had the highest position vacancy rate of the nursing staff types.

HHA/NA/CNA Position Vacancy Rate

- The statewide position vacancy rate increased from 10.5% in 2017 to 12.6% in 2022 for HHA/NA/CNA positions.
- HHAs/NAs/CNAs had the lowest position vacancy rate of the nursing staff types.

Turnover Rates

RN Median Facility Turnover Rate

- The median facility turnover rate for RNs decreased from 28.6% in 2017 to 26.7% in 2022.
- Respondents that experienced no RN turnover were more likely to be smaller agencies (250 to 1,000 unique clients per year) and more likely to be home health agencies, same as 2017.

LVN Median Facility Turnover Rate

- The median facility turnover rate for LVNs increased from 21.7% in 2017 to 30.0% in 2022.

HHA/NA/CNA Median Facility Turnover Rate

- For HHAs/NAs/CNAs, the median facility turnover rate remained at 0.0% from 2017 to 2022, and was the lowest among nursing staff types.

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

2022 HHCNSS: Staffing

Respondents reported employing RNs, LVNs, and HHAs/NAs/CNAs with a total of 1,794 FTEs reported.

- RNs made up the largest proportion (43.7%) of the nursing staff mix within Texas home health and hospice agencies.
- 30.9% of nursing staff were LVNs and 25.4% were HHAs/NAs/CNAs.
- Respondents would reportedly add 528 nursing staff FTEs in the next fiscal year to meet patient demand if they were able.
- 45 of 69 responding agencies (65.2%) reported they would need more RNs with no home health or hospice experience.
- 69 out of 82 responding agencies (84.1%) reported they would need more RNs with more than 1 year of home health and/or hospice experience.
- 63 out of 78 responding agencies (80.8%) reported they would need more LVNs.
- 41 of 71 responding agencies (57.7%) reported they would need more HHAs/HAs/CNAs.

2022 HHCNSS: Recruitment and Retention

- RNs with at least a year of home health and/or hospice experience were the most difficult positions to fill with 88.2% of agencies indicating it was difficult.
- HHAs/NAs/CNAs were found to be the least difficult positions to fill (comparatively) and 42.4% of responding agencies said the positions were filled in 1-30 days.
- 41 out of the 85 responding agencies (48.2%) declined patients during 2021 for a total of 4,874 declined patients due to not having available staff to provide the necessary care.
- 4 agencies indicated that they do not engage in any recruitment or retention strategies. Of the provided list, health insurance was the most common strategy, with 85.9% agencies saying they provided it.
- Of the 12 agencies that selected “other” for the recruitment/retention strategies, 6 mentioned some sort of car or mileage program incentive. 1 agency offered phone and internet reimbursement. Other strategies included higher salaries, paid holidays, retention bonuses, quarterly bonuses, and birthday bonuses.
- 36 agencies said a pay increase would have the greatest impact on nurse retention. 15 agencies indicated that effective management/leadership is the intervention to have the greatest impact on retention of nurses and other direct patient care staff.

TCNWS Advisory Committee Recommendations

Recommendation 1

Home health and hospice care need 528 more nursing staff in the next year to meet patient demand. Covid-19 contributed to insufficient staffing, with 67.9% of agencies responding that this has been a consequence throughout the pandemic. Further, 53.8% of responding agencies said that an increased number of declined patients was a consequence of covid. As it stands, a total of 4,874 patients were declined across 80 Texas agencies due to lack of staff in 2021. Without enough nursing staff, patients must wait longer for care or stay in inpatient units until care becomes available. The median facility turnover rate for LVNs and RNs were 30.0% and 26.7%, respectively, and staffing turnover was the second most selected reason

that agencies would need more nursing staff over the next 2 years.

According to the 2022 Employer Surveys administered by the Texas Center for Nursing Workforce Studies, 36 agencies indicated that a pay increase is the most effective strategy for recruitment and retention of nursing staff. Nine agencies indicated they increased pay and/or bonuses for their staff due to covid-19 to retain their staff. However, agency reimbursement is regulated by the inpatient hospital market pay and then lowered based on a factor mandated by the Affordable Care Act meaning hospice agencies will always be reimbursed at a lower rate than hospitals and therefore will not be able to pay their



nursing staff as much.² This drives competition in the nursing workforce with more nurses choosing to make more money through inpatient care.

- The reimbursement rate for home health and hospice care should be reevaluated so these agencies can offer their nursing staff a more competitive wage.

Recommendation 2

Throughout the pandemic, nurses have been leaving their positions to accept jobs with staffing agencies. According to the Texas Nurses Association, in 2020 pay for nurses generally ranged from \$40-\$75 an hour. During the pandemic, staffing agencies were increasing those salaries to \$90-\$150 an hour.³

Of the responding agencies, 56.4% said that nurses leaving for travel nurse jobs was a consequence of the pandemic. Further, 34.6% of responding agencies said that financial instability was a consequence of the pandemic, indicating that increasing pay to compete with these staffing agencies is impossible. Senate Bill 49 in the 87th legislative session, prohibiting the use of government funds to pay for travel nurses by hospitals, was filed and reviewed on October 5, 2021. However, this bill was never approved.

- Home health and hospice agencies should support legislation limiting payment for traveling nurses in future legislative sessions in order to avoid nurses leaving for inflated pay.

Recommendation 3

According to the Nursing Practice Act (NPA), LVNs are required to have supervision by a more advanced degree.⁴ This makes it difficult for LVNs to work in home health and hospice settings as they don't have complete independence for practice. That, combined with the decline of LVN programs in Texas (97 programs in 2011, 90 programs in 2017, and 85 programs in 2021), the LVN vacancy rates have been increasing in home health and hospice care settings.⁵ In 2011, the vacancy rate was 8.7%, in 2017 the vacancy rate was 8.9%, and in 2022 the vacancy rate was 19.9%. Turnover rates have also been increasing among LVNs. In 2011 the turnover rate was 22.2%, in 2017 it was 21.7%, and in 2022 it was 30.0%.

- To decrease the vacancy and turnover rates among LVNs, home health and hospice agencies should be encouraged to form affiliations with LVN programs to promote the setting among LVN graduates.

- Home health and hospice care organizations, stakeholders, and other interested parties should also consider developing more in-depth studies on LVNs across Texas to understand what factors contribute to their decision on their decided nursing setting. This knowledge would benefit these organizations in the upcoming session.

Recommendation 4

Effective management/leadership was chosen as the most important intervention for recruitment/retention of nursing staff by 19.2% of responding agencies. Recruitment and retention strategies are an important focus as 24.4% of responding agencies said that nurses leaving the profession was a consequence of covid.

- In order to help recruit and retain nursing staff, and to create a more positive work environment, home health and hospice agencies should encourage management/leadership training for their managers. This will help managers learn to navigate their roles in administration and working in the field. This can include trainings in customer service and organizational empathy.
- Home health and hospice agencies, and nursing programs, should encourage trainings for nursing staff and students to help reduce burnout, cope with stress in the workplace, and develop strategies for work-life balance.

Discussion

Staffing difficulties were the greatest barrier for home health and hospice agencies in Texas. An increase in pay, limiting pay for traveling nurse positions, partnerships and understanding of LVN programs and nurses, as well as an increased emphasis on effective management could benefit home health and hospice agencies by allowing them to recruit and retain more staff.

² MLN Matters. (2021). Update to Hospice Payment Rates, Hospice Cap, Hospice Wage Index and Hospice Pricer for FY 2022. <https://www.cms.gov/files/document/mm12354.pdf>

³ Texas Nurses Association. 2021. Practice tip of the week; Staffing provisions explained. <https://www.texasnurses.org/news/577810/Practice-Tip-of-the-Week--Staffing-Provisions-Explained.htm#:~:text=Of%20those%2023%2C000%20individuals%2C%206%2C000,per%20hour%20depending%20on%20specialty>

⁴ Texas Board of Nursing. 2021. Nursing Practice Act. https://www.bon.texas.gov/faq_nursing_practice.asp.html#Regarding%20Position%20Statements

⁵ Texas Center for Nursing Workforce Studies. 2021. Characteristics of Professional Nursing Programs. https://dshs.texas.gov/chs/cnws/NEPIS/2021/2021_VN_ProgramCharacteristics.pdf

