

# Vermont Health Workforce Assessment Survey

## Home Health Nursing Study 2005

Prepared by: OFFICE OF NURSING WORKFORCE RESEARCH, PLANNING, AND DEVELOPMENT

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### Why was this survey done?

One factor in assuring access to quality health care for all Vermonters is an ongoing understanding of the state's health workforce resources. To this end, the Office of Nursing Workforce Research, Planning and Development conducted the Health Workforce Assessment Survey in February, 2005. The following is a report of the 2005 survey of 10 of 12 home health agencies (83% response rate).

### Who was surveyed?

In February, 2005 The Vermont Health Workforce Survey was sent to home health agency executive directors. This contact person was asked to participate in the data collection with assistance from human resources and other department heads. Follow-up postcards, letters, telephone calls, and replacement surveys were used to assure a high response rate.

### What was learned?

No agency reported that there was a greater need than had been budget for nursing positions with the exception of one agency that perceived a greater need for licensed nursing assistants. Vacancy rates vary according to nursing position in the home health setting:

Statewide Vacancy Rate	(Range)
Clinical Nurse Specialist . . . . .	13% (0-31%)*
LPN . . . . .	9% (0-18%)*
RN . . . . .	5% (0-8%)
LNA . . . . .	5% (0-10%)
Clinical Managers . . . . .	6% (0-10%)

\* Only four agencies reported employing CNSs and six reported employing LPNs.

### Statewide Turnover Rate (Range)

LNA . . . . .	29% (0-67%)
RN . . . . .	24% (0-44%)
LPN . . . . .	23% (0-133%)
Clinical Managers . . . . .	8% (0-25%)
Clinical Nurse Specialist . . . . .	0% (0%)

### Recruitment incentives:

- 80% of Vermont home health agencies report an adequate impact from starting salaries on recruitment.
- 70% of Vermont home health agencies report a pay differential for RN educational preparation.
- 40% of Vermont home health agencies report a pay differential for credentialed RNs.

### NUMBER OF WEEKS TO FILL NURSING POSITIONS:

- The RN position was reported to be filled in an average of six weeks, with 70% of the agencies reporting RN vacancies during the past year.
- The LPN position was reported to be filled in an average of 13 weeks, with 20% of the agencies reporting LPN vacancies during the past year.
- The CNS position was reported to be filled in an average of 14 weeks with 20% of the agencies reporting CNS vacancies in the past year.
- The LNA position was reported to be filled in an average of four weeks with 70% of the agencies reporting LNA vacancies in the past year.

## IMPACT OF SHORTAGES:

	Never	Several times a year	Monthly	Weekly	Daily	Missing or n/a
Curtailed plans for acquiring new technology	90%	10%				
Delayed or diverted admissions	90%	10%				
Reduced service hours	80%	10%				10%
Mandatory staff overtime	80%		10%			10%
Decreased patient satisfaction	70%	20%				10%
Increased patient complaints	60%	30%				10%
Decreased staff satisfaction	30%	50%	10%			10%
Curtailed plans for facility expansion	No	100%				
Discontinued clinical programs	No	100%				

### MOST NEEDED UNAVAILABLE SPECIALISTS\*

- Psychiatric nurse per diem
  - Case managers
  - Maternal child nurse
  - Certified Wound, Ostomy and Continence Specialist
  - Clinical Managers
- (\*in 40% of agencies who reported needing nurses with specialized skills)

### Recruiting and Retaining an Aging Nurse Workforce

Research suggests that older nurses are more likely to work in areas of less acuity. Therefore, home health agencies might expect some increased movement of RNs from hospital positions to home health positions as the workforce ages. The following were reported as methods used to recruit older nurses:

- Direct call to invite an application
- Flyers sent to all licensed nurses in the area
- Classified advertising focusing on seasoned, experienced nurses
- Flexibility in hours, retirement benefits and inservice education to update skills

The following steps were reported as being taken to assure that nurse age 50 years and older can be retained in the home health workforce:

- increased focus on retirement benefits
- more flexible scheduling
- express desire to continue to employ veteran RNs

- offering administrative positions or opportunities in other programs areas

### Conclusions

Improvements are noted in many areas compared to the 2003 Health Workforce Assessment Survey. Vacancy rates are lower and turnover rates have improved in three out of five categories. Correspondingly, the impact of workforce shortages is reported to have lessened. Home health agencies may be well suited to take advantage of the supply of veteran nurses that well exceeds the numbers of nurses under 30 years old. Continued awareness of the unique needs of the older nurse in this particular setting may be helpful to assure an adequate supply of nurses in the next 5 to 10 years. The quality of Vermont healthcare is directly related to the availability of an adequately prepared nursing workforce. Current shortfalls will only increase over the next several decades.

#### Notes

#### <sup>1</sup>Vacancy rates were calculated as follows:

$$\frac{\# \text{ FTE vacant}}{\text{Total FTEs employed} + \# \text{ vacant}} \times 100$$

from all responding institutions

#### <sup>2</sup>Turnover rates were calculated as follows:

$$\frac{\text{Total \# workers leaving institution between 2/15/04 - 2/15/05}}{\text{Total \# part-time + full-time workers employed as of 2/15/05}} \times 100$$