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, 2009. The following is a report of the results from 13 of 16 hospitals (81% response rate).

Who was surveyed?
In February 2009, the Vermont Health Workforce Survey was sent to hospital nurse executives. This executive was asked to participate in the data collection with assistance from human resources and other department heads.

What was learned?
Average Vacancy Rate (Range)
- Nurse Anesthetist: 10% (0-50%)
- Registered Nurse: 5% (0-21%)
- Nurse Managers: 6% (0-25%)
- Licensed Practical Nurse: 2% (0-14%)
- Licensed Nursing Assistant: 1% (0-8%)
- Nurse Practitioner/Physician Assistant: 0%
- Clinical Nurse Specialist: 0%
- Certified Nurse Midwife: 0%

Recruitment incentives:
- 77% of hospitals reported a adequate impact of salaries on recruitment.
- 31% of hospitals reported a pay differential for RN educational preparation (ADN vs. BSN).
- 8% of hospitals reported a pay differential for credentialed RNs (e.g. RNC).

Traveling nurses were used by nine hospitals for an average cost of $1.04 million. This is half the 2005 average.

Most Needed RN Specialties and # Weeks Needed to Fill Position*
*Mean weeks needed to fill position by hospitals recruiting these positions.

1. NICU or PICU: (41 weeks)
2. Operating room: (21 weeks)
3. Critical/intensive care: (16 weeks)
4. Psychiatric: (10 weeks)
5. Medical/surgical: (9 weeks)
6. Emergency room: (9 weeks)
7. Pediatric: (5 weeks)
8. Obstetrics: (6 weeks)

A need for RNs with specialized skills was identified by 54% of the hospitals.
Retaining an Aging Nurse Workforce

The following steps were reportedly taken to assure that nurses age 50 years and older can be retained in the workforce:

- Teams provided with self-scheduling options
- Job sharing to reduce hours
- Modifications to work duties such as telephoning “patient call-backs”
- Being careful with patient assignment (i.e. physical location of patient assignment on the floor, and “heavy” care required)
- Use of lifting equipment

Conclusions

As predicted by Buerhaus, Auerbach and Staiger (2007) hospital RN vacancy rates have declined along with economic conditions. These authors caution that “changes in unemployment rates affecting RN spouses (which hospitals cannot control) and changes in the earnings of RNs (which hospital can control) are likely to play an important role in determining overall employment levels in the nurse labor market”. Older nurses are particularly more likely to stay in their current positions in this economy (Thrall, 2009).

Other regions of the country (West and Midwest) are reporting similarly low vacancy rates for RNs and lack of positions for new graduates (Darce, 2009; Schertz, 2009). However, on March 6, 2009 the US Bureau of Labor Statistics found that the healthcare sector is continuing to grow despite the poor economy (AACN, 2009).

The results of the 2009 RN Board of Nursing Relicensure Survey should be referenced along with this report to get a comprehensive look at supply and demand for nurses in the State of Vermont in the year 2009.

Impact of Shortages

<table>
<thead>
<tr>
<th>Impact of Shortages</th>
<th>Never</th>
<th>Several times a year</th>
<th>Monthly</th>
<th>Weekly</th>
<th>Daily</th>
<th>Missing or n/a</th>
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<tbody>
<tr>
<td>Curtailed plans for acquiring new technology</td>
<td>85%</td>
<td>8%</td>
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<td>8%</td>
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<tr>
<td>Reduced number of staffed beds</td>
<td>69%</td>
<td>8%</td>
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<tr>
<td>Emergency department overcrowding</td>
<td>62%</td>
<td>8%</td>
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<td>8%</td>
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<tr>
<td>Diverted emergency department patients</td>
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<td>Delayed or diverted admissions</td>
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<td>62%</td>
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<td>Reduced service hours</td>
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<td>Increased wait times to surgery</td>
<td>85%</td>
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<td>Cancelled surgeries</td>
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<td>Delayed hospital discharges</td>
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<td>Shortened lengths of stay</td>
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<td>Mandatory staff overtime</td>
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<td>Decreased patient satisfaction</td>
<td>46%</td>
<td>31%</td>
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<td>Increased patient complaints</td>
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<td>Decreased staff satisfaction</td>
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<td>Discontinued clinical programs</td>
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