Licensed Practical Nurses in Vermont



2014 BOARD OF NURSING RE-LICENSURE SURVEY

Summary prepared by: University of Vermont AHEC Nursing Workforce, Research, and Development

Background

Amidst health care reform efforts on a state and national level, it is a critical time to monitor Vermont's nursing workforce at all levels. One way this can be done is to regularly assess the supply of nurses who are currently working in Vermont at the time of their re-licensure. The collection of workforce survey data within the re-licensure process is authorized (2013 Act 79, Sections 43, 44) for all health professions in Vermont; this new legislation's objective is to ensure a more comprehensive picture of the state's health-care workforce. Licensed Practical Nurses (LPNs) are a vital part of the healthcare workforce and this summary provides information on Vermont's supply of LPNs in 2014.

Methods

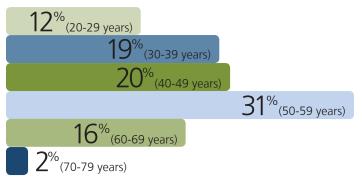
Online re-licensing was available to LPNs from January to March 2014. Nursing workforce "minimum data set" questions (recommended by Health Resources and Services Administration (HRSA) and the Forum of Nursing Workforce Centers) were included in the re-licensure application. Paper surveys were also available but due to the low number used, they were not included in this analysis. The entire sample did not respond to all questions; therefore, response rates are noted and percentages based on the response to each question.

Results

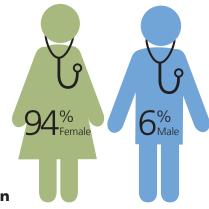
There were 1,801 LPNs licensed in Vermont as of Feb 1, 2014, and 1,782 LPNs completed the survey (99% response). For this analysis, only nurses who reported a primary employer with a Vermont zip code were used (n=1,178).

Demographics

Average Age: 49 years old



Gender



Education (n=1.168)

(), ()	
LPN certificate	83%
Associate degree non-nursing	9%
Baccalaureate degree non-nursing	7%
Master's degree non-nursing	0.7%
Doctoral degree non-nursing	0.08%

Country in Which Entry-Level Education

Received (*n*=1,122)

Less than 1% reported being originally educated in India, Philippines, Ghana,

Canada, Thailand, or Cameroon.

98_{USA}

Enrolled in a formal nursing education program:

Associate degree program	9%
Baccalaureate program	2%

Licensure (n=1,089)

Employment Status

Current Employment (n=1,176)

Full-time in nursing	69%
Part-time in nursing	18%
Per diem in nursing	9%
Full-time in a field other than nursing	
Part-time in a field other than nursing	0.76%
Per diem in a field other than nursing	0.25%
Only as a volunteer	0.3%
Unemployed seeking work as a nurse	0.6%
Retired	0.3%

Reason for Unemployment (n=103 – from entire sample of 1,782)

Taking care of home and family	.27%
School	.23%
Other	.29%
Inadequate salary	1%
Difficulty finding a nursing position	16%
Disabled	3%



Primary Employment Setting (n=1,164)

Nursing home/extended care/assisted living facilit	v 41%
Hospital	,
Ambulatory care	
Other settings	
Community health	
Home health	5%
Correctional facility	4%
School health service	3%
Public health	2%
Academic setting	0.4%
Insurance claims/benefits	0.2%
Occupational health	0.2%

Specialty of primary nursing practice position	(n=1,143)
Geriatric/Gerontology	38%
Adult Health/Family Health	
Other	10%
Pediatrics/Neonatal	
Medical Surgical	
Psychiatric/Mental Health/Substance Abuse	
Home Health	4%
Rehabilitation	3%
School Health	3%
Acute Care/Critical Care	3%
Community	3%
Women's Health	2%
Maternal-Child Health	1%
Oncology	0.6%
Public Health	
Trauma	0.2%
Occupational Health	0.2%
Palliative Care	



Primary Employment Description (n=1,145)	
Staff nurse (patient care)	85%
Other (health-related)	8%
Manager	6%
Educator	1%
Executive	.0.3%
Consultant	.0.3%
Other (non health-related)	.0.5%

Number of currently	held positions (n=1,149)
One	90%
Two	9%
Three or more	1%

Conclusions

The profile of the VT LPN has changed slightly over the last decade. The average age is 3 years older than in 2004; however, the percent over 40 years has decline to 69% from 74%. There has been an increased number of LPNs in the younger age groups entering the workforce over the last 10 years. The gender and ethnicity composition of this LPN workforce is unchanged over the past decade. Exactly the same number of LPNs (11%), report that they are continuing their nursing education. The fact that the LPN is frequently not a career ladder to other nursing positions for the majority, appears to be a consistent finding. Employment in the long term care/assisted living facilities has increased from 38% (2004) to 41% (2014), whereas, hospital employment has declined from 20% to 14% over the same time period. The job description of patient care has increased to 85% from 71% in 2004, conversely management responsibilities have decline from 15% in 2004 to 6% in 2014. This may reflect implementation of nursing workforce research findings which has found better patient outcomes with a more educated nursing workforce in the hospital setting¹ and subsequently the Future of Nursing recommendations².

Recommendations

With 38% of the LPN workforce specializing in geriatrics, and a growing elderly population in Vermont, long-term care settings appear to be able to sustain and possibly grow employment for the LPN. Curriculum rich in geriatric content is very important to prepare LPN students for the roles available to them. Because the long term care setting is extremely dependent on the LPN, the upcoming retirement of 18% of LPNs (who are over age 60) may hit this sector particularly hard in the upcoming years. It is therefore important to keep a steady flow of newlyeducated LPNs available to care for Vermont elders.



For more details, contact: Mary Val Palumbo DNP, APRN (802) 656-0023

email: mpalumbo@uvm.edu

Visit www.vtahec.org to download workforce reports.

1. Aiken, L., Clarke, S., Cheung, R., Sloan, D. M., & Silber, J. H. (2003). Educational levels of hospital nurses and surgical patient mortality. JAMA, 290(12), 1617 -1623.
2. Institute of Medicine. (2011). The Future of Nursing: Leading Change, Advancing Health. Washington DC: National Academy of Sciences.