

Home Health Nursing Study 2007

Vermont Health Workforce Assessment Survey

Prepared by:

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Why was this survey done?

One factor in ensuring 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/March, 2007. The following is a report of the survey of 7 of 11 home health agencies (64% response rate).

Who was surveyed?

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 ensure a high response rate.

Weeks to fill nursing positions:

- The RN position was reported to be filled in an average of eight weeks, with 71% of the agencies reporting RN vacancies during the past year.
- The LNA position was reported to be filled in an average of four weeks with 57% of the agencies reporting LNA vacancies in the past year.

WHAT WAS LEARNED

Statewide Vacancy Rate (Range)

Clinical Managers	12% (0-38%)
Clinical Nurse Specialist.	10% (0-13%)
RN	8% (0-16%)
LNA	6% (0-12%)
LPN	0% (0-6%)

**The need for RNs (assessed by executive director) was no greater than the budgeted FTEs in all agencies participating. No traveling nurses were used.*

Statewide Turnover Rate (Range)

RN23% (0-50%)
LNA22% (0-43%)
Clinical Nurse Specialist.20% (0-50%)
Clinical Managers11% (0-200%)
LPN8% (0-25%)

Recruitment incentives:

- 57% of Vermont home health agencies report an adequate impact from starting salaries on recruitment.
- 57% of Vermont home health agencies report a pay differential for RN educational preparation.
- 71% of Vermont home health agencies report a pay differential for credentialed RNs.

Impact of Shortages

	Never	Several times a year	Monthly	Weekly	Daily	Missing or n/a
Curtailed plans for acquiring new technology	57%	14%				19%
Delayed or diverted admissions	43%	43%				14%
Reduced service hours	43%	14%	14%			14%
Mandatory staff overtime	71%	14%				14%
Decreased patient satisfaction	14%	29%	14%			43%
Increased patient complaints	43%	29%				29%
Decreased staff satisfaction	29%	29%	14%			29%
Curtailed plans for facility expansion	Yes 0%	No 71%				29%
Discontinued clinical programs	Yes 0%	No 86%				14%

Recruiting and Retaining an Aging Nurse Workforce

As the workforce ages, home health agencies might expect some increased movement of RNs from hospital positions to home health positions as previous research has suggested. The following were reported as methods used to recruit older nurses:

- Targeting that age group in newspapers advertising
- Attractive benefit plan
- Offer alternative schedules
- Radio ads with more mature-sounding voice.

In order to retain nurses age 50 and older in the home health workforce, the following were reported:

- per diem opportunities
- modified work assignment
- flexible benefits – cafeteria plan
- survey to identify needs and concerns
- addressed “heavy bags”

Conclusions

Home health agencies in 2007 have experienced a lowering of RN vacancy rates since 2003 (8% compared with 12%), yet turnover has remained constant since 2003. Impacts of the nursing shortage are most common in the areas of staff and patient satisfaction. A “long view” approach to the nursing shortage is needed to attract nurses to the specialization of home care, as well as retaining the most experienced staff until an adequately prepared nurse workforce is available to replace them.

Most Needed Specialists*

- Hospice nurse
- Diabetic Educator
- Cardiovascular CNS
- Certified Wound, Ostomy and Continence Specialist
- Educator

*(*in 33% of agencies that reported needing nurses with specialized skills)*