

# Outpatient Provider Office 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.

### Who was surveyed?

The Vermont Health Workforce Survey was sent to the office manager in a convenience sample of 220 outpatient provider offices. The response rate was 51% (n=113).

### What was learned?

#### Statewide Vacancy Rate (Range)

Licensed Practical Nurse . . . . .	.8% (0-53%)
Nurse Practitioner/Physician Assistant. . . . .	.6% (0-100%)
Registered Nurse. . . . .	.6% (0-67%)
Medical Assistant . . . . .	.6% (0-100%)
Scheduler . . . . .	.1% (0-57%)

#### Statewide Turnover Rate (Range)

Licensed Practical Nurse . . . . .	.11% (0-100%)
Medical Assistant . . . . .	.8% (0-100%)
Nurse Practitioner/ Physician Assistant . . . . .	.8% (0-200%)
Scheduler . . . . .	.7% (0-100%)
Registered Nurse. . . . .	.6% (0-100%)

#### Recruitment and Retention Initiatives:

- 19% of respondents reported a pay differential for RN educational preparation (Associates vs. Bachelors degree).
- 24% of respondents reported a pay differential for credentialed RNs (e.g. RNC).
- 37% of respondents felt that starting salaries were too low to have an impact on recruitment.
- 14% of respondents reported efforts to recruit nurses age 50+ and 29% reported efforts to retain nurses 50+.

#### Average time to fill position for offices reporting difficulty

Medical Assistant . . . . .	18 weeks (median 8 weeks)
Nurse Practitioner . . . . .	11 weeks (median 5 weeks)
RN. . . . .	10 weeks
LPN . . . . .	6 weeks

## Impact of Shortages

	Never	Several times a year	Monthly	Weekly	Daily	Missing or n/a
Curtailed plans for acquiring new technology	50%	9%				41%
Reduced service hours	58%	8%	3%		1%	30%
Increased wait times to surgery	32%				1%	67%
Cancelled surgeries	31%					69%
Mandatory staff overtime	46%	11%	4%	3%	1%	36%
Decreased patient satisfaction	42%	19%	6%	4%	2%	28%
Increased patient complaints	43%	21%	6%	2%		27%
Decreased staff satisfaction	35%	21%	12%	4%	4%	23%
Curtailed plans for facility expansion	Yes 7% No 78%					15%
Discontinued clinical programs	Yes 5% No 79%					16%

### Types of healthcare professionals reported as needed but not available (frequency reported):

Nurse Practitioner . . . . .	(4)
Nurse Practitioner – psychiatric . . . . .	(3)
Medical Assistant . . . . .	(3)
Licensed Practical Nurse . . . . .	(2)
RNs . . . . .	(2)
<b>RN specialties:</b>	
Cardiac . . . . .	(1)
Orthopedic . . . . .	(1)
IV . . . . .	(1)
Respiratory . . . . .	(1)
Billing coder . . . . .	(1)
Dentist . . . . .	(1)
Dental Hygienist . . . . .	(1)

### Conclusions

In this sample of Vermont outpatient offices, vacancy and turnover rates continue to be the lowest in outpatient provider offices when compared to the hospital, home health, and long term care settings. The small use of recruitment incentives combined with low vacancy and turnover indicate that this setting is an attractive place to work for the current nurse workforce.

A variety of skills are needed to provide outpatient services, but only 17% of respondents indicated that they need health care professionals with specialized skills that they are unable to find. Many offices do not employ RNs, which are in the shortest supply. The biggest impact of health care worker shortages has been experienced in the areas of decreased staff satisfaction.

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

$$(\#FTEs \text{ vacant} / (\text{total } \# \text{ FTEs employed} + \# \text{ FTEs vacant})) \times 100 \text{ from all responding institutions.}$$

<sup>2</sup>Turnover rates were calculated as follows: (Total # workers leaving institution between 2/15/06 and 2/15/07 /

$$(\text{Total } \# \text{ part-time} + \text{full-time workers})) \times 100 \text{ employed as of 2/15/07.}$$