

Texas Center for Nursing Workforce Studies

Department of State Health Services



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Welcome to the 2017 Texas Governmental Public Health Nurse Staffing Survey (TGPHNSS)

Purpose: The primary purpose of this survey is to assess nurse staffing and related issues in Texas governmental public health agencies. The information in this survey will serve as a guide for the development of policy recommendations by the Texas Center for Nursing Workforce Studies Advisory Committee. The data you provide will also be instrumental in developing projections for the number of nurses needed in Texas. Your participation in this study is completely voluntary but highly encouraged.

Due Date: Your completed survey is due by **Friday, July 21st, 2017**.

Confidentiality Agreement: Your responses are completely confidential. We will report aggregate findings (statewide and regional results) only.

If you have questions at any time about the survey or the procedures, you may contact Timothy Hawkins by phone at [512-776-6561](tel:512-776-6561) or by email at TCNWS@dshs.texas.gov.

1. Please provide the following information about your division/section/agency.

Official agency name:

Main office city:

Main office zip code:

Name of person submitting survey:

Title of person submitting survey:

Email of person submitting survey:

Phone # of person submitting survey (xxx-xxx-xxxx):

2. Which of the following best characterizes your division/section/agency? Select all that apply.

- Local health department - city
- Local health department - county
- Local health department - health district
- DSHS - health service region
- DSHS - central office in Austin
- Texas Health and Human Services
- Other, please specify:

3. Please list the counties served by your division/section/agency. If you provide service statewide, please list "Texas."

4. Does your division/section/agency have a position designated with overall administrative responsibility for nursing services?

- Yes
- No

5. Is the person with overall administrative responsibility for nursing services a registered nurse?

- Yes
- No

6. The Institute of Medicine’s (IOM) report, *The Future of Nursing: Leading Change, Advancing Health*, recommends preparing and enabling nurses to lead change to advance health, including representation on boards and other key leadership positions. In order to track this indicator for our state, please answer the following question.

Does your organization’s board have any RN members?

- No
- Yes, and they have voting privileges
- Yes, but they do not have voting privileges
- Not applicable or unknown

7. For each of the following categories, how many people are currently employed by your division/section/agency? Please do NOT include contract or temporary staff. Please report this as a headcount by full- and part-time employees.

	Full-time headcount	Part-time headcount
Total number of employees		
Number of licensed vocational nurses (LVNs)		
Number of registered nurses (RNs)		
Number of advanced practice registered nurses (APRNs)		
Number of positions that <u>require</u> an LVN, RN, or APRN license		

8. How many nurses currently employed by your division/section/agency have a public health nurse (PHN) certification? Please report this as a headcount.

	Number of nurses with a PHN certification
RN	
APRN	

9. Please select the type of nurses that are currently used to staff the following program areas within your division/section/agency. See 2017 TGPNSS Operational Definitions for program area definitions.

Strategy	Staffed by LVNs	Staffed by RNs	Staffed by APRNs	Have program area but not staffed with nurses	Agency does not have this program area
Access to Care/Health Systems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ambulatory Services (Primary Care)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Case Management/Care Coordination (including home visits)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chronic Disease Services/Prevention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Correctional Health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency Preparedness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Environmental Health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Epidemiology	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family Planning Services (Clinical)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General Administration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Human Immunodeficiency Virus (HIV)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Home Health Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Immunization Programs/Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspections (Daycares, Nursing homes, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maternal/Child Health Programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Men’s Health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Refugee Health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Strategy	Staffed by LVNs	Staffed by RNs	Staffed by APRNs	Have program area but not staffed with nurses	Agency does not have this program area
School Health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sexually Transmitted Disease (STD)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Substance Abuse/Tobacco Prevention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tuberculosis Control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Women, Infant, Children Supplemental Nutrition Program (WIC)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other, please specify:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. For each of the following functions or activities, please select the types of nurses who do them as part of their primary role or function.

	LVNs	RNs	APRNs
Administration/Staff Supervision	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community Engagement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clinic-based Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Population-level Prevention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality Improvement Activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Workforce Development/ Training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Regulatory/Compliance Monitoring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Policy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outreach Activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other, please specify:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. Please provide the total number of full-time equivalent (FTE) positions in your division/section/agency as of January 27, 2017 for each type of nurse as indicated in the table below. Please enter "0" if your division/section/agency does not employ a particular type of nurse.

	Total number of FTE positions occupied on 01/27/2017	Total number of vacant FTEs being recruited on 01/27/2017	Total number of vacant FTEs on hold/frozen on 01/27/2017
LVNs			
RNs			
APRNs			

12. Please provide the total number of temporary nurse full-time equivalents (FTEs) for each type of nurses used by your division/section/agency on January 27, 2017. Please enter "0" if your agency does not employ a particular type of nurse.

	Number of temporary nurse FTEs such as contract or staffing agency nurses employed on 01/27/2017
LVNs	
RNs	
APRNs	

13. Please provide the total number of nurses employed by your division/section/agency on 1/1/2016 and 12/31/2016 for each type of nurse as indicated in the table below. Do not include contract or staffing agency nurses in this section. Please enter "0" if your division/section/agency does not employ a particular type of nurse. Please note that you are to report a head count in this question.

	Headcount of full-time nurses on 1/1/16	Headcount of full-time nurses on 12/31/16	Headcount of part-time nurses on 1/1/16	Headcount of part-time nurses on 12/31/16
LVNs				
All RNs				
Newly Licensed RNs				
APRNs				

14. Please provide the total number of separations during January 1, 2016 - December 31, 2016 for each type of nurse as indicated in the table below. Do not include contract or staffing agency nurses in this section. Please enter "0" if your division/section/agency does not employ a particular type of nurse. Please note that you are to report a headcount in this question.

	Total headcount of <u>separations</u> during January 1, 2016 - December 31, 2016
LVNs	
All RNs	
Newly Licensed RNs	
APRNs	

15. Once a vacant nursing position is posted, how many days does it typically take to fill that position?

	1-30 days	31-60 days	61-90 days	91 days or more	N/A
LVN positions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
RN positions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
APRN positions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

16. Please describe the issues your division/section/agency faces in filling vacant nursing positions.

17. Please describe any issues resulting from vacant nursing positions in your division/section/agency.

18. Please indicate the methods of interim staffing used by your division/section/agency to fill in for vacant or absent nurse staff positions. Select all that apply.

- We do not use these methods of interim staffing
- Voluntary overtime
- Increased workload (but not work hours) of existing staff
- Identified other providers of services in the community for client referrals
- In-house staffing pool/per diem
- Temporary nurses such as contract or staffing agency nurses
- Other interim staffing methods (please specify):

19. Please provide the number of additional full-time equivalent (FTE) positions by type of nurses your division/section/agency expects to budget for the next fiscal year.

	<u>Additional</u> number of FTE positions you expect to budget next fiscal year
LVNs	
RNs	
APRNs	

20. Please indicate the type of change, if any, in the number of budgeted nurse FTEs on staff in the past two years, for each type of nurse.

	Increased	Decreased	No change
LVN	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
RN	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
APRN	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

21. Please indicate the reasons your division/section/agency has increased budgeted positions for each type of nurse during the past two years. Select all that apply.

	Opening of new programs or departments	Increase in funding	Changes in policy	Other
LVN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
APRN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

22. If "Other", please specify the reasons your division/section/agency has increased budgeted nurse positions.

23. Please indicate the reasons your division/section/agency has decreased budgeted positions for each type of nurse during the past two years. Select all that apply.

	Closing of programs or departments	Reduced funding	Changes in policy	Inability to fill existing nurse positions	Other
LVN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
APRN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

24. If "Other", please specify the reasons your division/section/agency has decreased budgeted nurse positions.

25. Has your division/section/agency replaced budgeted positions for RNs with budgeted positions for LVNs in the last fiscal year?

- Yes
- No

26. How many budgeted positions for RNs were replaced with budgeted positions for LVNs in the last fiscal year?

27. Please explain why your division/section/agency replaced budgeted positions for RNs with budgeted positions for LVNs in the last fiscal year.

28. Please provide the following information regarding nurse informaticists (registered nurses whose main job function is to process and manage data and information to support nursing practice, administration, education, research, and the expansion of nursing knowledge) within your division/section/agency on January 27, 2017. Enter "0" where applicable.

Number of nurse informaticists employed on January 27, 2017	
Number of vacant nurse informaticist positions on January 27, 2017	

29. Which of these nursing staff recruitment and retention strategies are used by your division/section/agency? Select all that apply.

Strategy	Full-time employees	Part-time employees
NONE	<input type="checkbox"/>	<input type="checkbox"/>
Health insurance	<input type="checkbox"/>	<input type="checkbox"/>
Retirement plan	<input type="checkbox"/>	<input type="checkbox"/>
Paid vacation days	<input type="checkbox"/>	<input type="checkbox"/>
Employee recognition programs (employee of the month, staff dinners/luncheons, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
Reimbursement for workshops/conferences	<input type="checkbox"/>	<input type="checkbox"/>
Sign-on bonus	<input type="checkbox"/>	<input type="checkbox"/>
Bonus for recruiting nursing staff to the organization	<input type="checkbox"/>	<input type="checkbox"/>
Flexible scheduling or job sharing	<input type="checkbox"/>	<input type="checkbox"/>
Merit bonus	<input type="checkbox"/>	<input type="checkbox"/>
Tuition (reimbursement or direct payment for employees/new hires)	<input type="checkbox"/>	<input type="checkbox"/>
Financial assistance in receiving certifications or further education	<input type="checkbox"/>	<input type="checkbox"/>
Payback for unused sick/vacation time	<input type="checkbox"/>	<input type="checkbox"/>
Other, please specify:	<input type="checkbox"/>	<input type="checkbox"/>

30. Where do you currently focus your RN recruitment efforts? Select all that apply.

- We don't actively recruit employees
- Within Texas
- In states outside of Texas
- Internationally

31. If you focus your RN recruitment efforts outside of Texas, please describe why.

32. In your opinion, what interventions would have the greatest impact on retention of nurses in your organization? Select all that apply.

- Pay increase
- Employee recognition
- Adequate staffing
- Other (Please specify):

33. What consequences has your organization experienced in the past year as a result of an inadequate supply of nursing personnel? Select all that apply.

- NONE - We had an adequate supply of nursing personnel.
- Increased workloads
- Low nursing staff morale
- Inability to expand services
- Increase in voluntary overtime
- Wage increases
- Increased nursing staff turnover
- Increased use of temporary/agency nurses
- Increased patient/family complaints
- Increased absenteeism
- Increased number of incident reports
- Difficulty completing required documentation on time
- Other (Please specify):

34. Please indicate the number of newly licensed RNs, by degree, that were hired by your organization during your organization's last fiscal year, and the total number of RNs, by degree, employed by your organization during the last fiscal year. Newly licensed RNs are those who have been licensed for less than 1 year.

	Number of newly licensed RN applicants hired	Number of all RNs employed
Diploma		
ADN		
BSN		
MSN Alternate Entry		

Transition to Practice

The Institute of Medicine's Future of Nursing: Leading Change, Advancing Health report made 8 recommendations for the field of nursing. Recommendation 3 from this report is "Implement nurse residency programs." In response to this recommendation, the Texas Center for Nursing Workforce Studies and its Advisory Committee are gathering information on transition to practice programs in nurse employment settings. For the purpose of this survey, transition to practice programs are defined as formal programs of active learning for:

- newly licensed registered nurses (RNs) and licensed vocational nurses (VNs) designed to support their progression from education to practice
- experienced nurses who transition to a new practice setting or specialty
- newly licensed advanced practice registered nurses (APRNs) transitioning to a new practice setting, specialty, or role.

Nurse residency – a series of learning sessions and work experiences that occurs continuously over a predetermined period of time and is designed to assist new employees as they transition to their first professional nursing role. For the purpose of this survey, nurse residency programs are geared toward newly licensed nurses, or nurses licensed for less than one year.

Nurse fellowship – a series of learning sessions and work experiences that occurs continuously over a predetermined period of time and is designed to assist experienced nurses to master new clinical settings or newly certified or licensed advanced practice nurses to master new settings, specialties, or roles.

Student Nurse internship/externship – a training program designed for upper-level nursing students to further develop nursing skills and assist in the successful transfer from educational to clinical settings.

Preceptorship/Mentorship – a formal, one-on-one teaching-learning relationship of predetermined length between a competent preceptor or mentor and a newly licensed nurse that facilitates transition to practice.

Please tell us about your transition to practice program by answering the following questions.

35. Does your division/section/agency have a transition to practice program for nurses? Please note that we are not asking about new job orientation programs that all staff must complete.

- Yes
- No

36. If your division/section/agency has a transition to practice program for nurses, please describe it below.

Additional Comments and Suggestions

Please use this space to make any comments or suggestions regarding this survey.

You have reached the end of the 2017 Texas Governmental Public Health Nurse Staffing Survey! Thank you for your participation. If you have any questions or concerns, please contact Timothy Hawkins at (512) 776-6561 or by email at TCNWS@dshs.texas.gov.