

## CAH/FLEX

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## FINDINGS FROM THE FIELD

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# Health Workforce Recruitment and Retention in Critical Access Hospitals

## Background

The University of Washington surveyed Critical Access Hospital (CAH) administrators in 2003 about health workforce staffing. A survey was mailed to 605 eligible hospitals (all those that had converted to CAH status as of June 30, 2002). A total of 329 hospitals responded from 43 states. Most CAHs, and hence most of the responding hospitals in our survey, were located in the central U.S.

## Role of the Rural Hospital Flexibility Program

We asked hospital administrators to indicate whether they thought the Flex Program had made a difference in workforce issues at their facilities. A large majority (84.3%) agreed that “cash flow improvements have allowed us to implement programs that help with retention,” with 36.2% of these saying they strongly agreed. Half agreed (50.3%), though not many agreed strongly (11%) that their (Flex Program) network hospital had helped with recruitment or other workforce problems. Fewer than half (44.2%) reported that workforce recruitment was easier after participating in the Flex Program, but more than half (56.8%) reported retention was easier. Those hospitals that converted prior to 2001 were slightly more likely to say that conversion had helped with recruitment and retention, but not significantly more so than more recently converted hospitals.

## Nursing

Hospitals had an average of 13.2 registered nurses (RNs) on staff currently, with a median of 10.5 (see Table 1). On average, hospitals were recruiting for 1.3 experienced RNs. Fewer hospitals were interested in recruiting newly trained RNs. For those 64.7% of hospitals that reported recruiting any experienced RNs, the average number of vacancies was 2.0. For those 17% recruiting any newly trained RNs, the average number of vacancies was 1.3 full-time equivalent (FTE) employees.

When asked how difficult it was to fill a vacancy for an experienced nurse, 58.7% of respondents said it was very difficult on a 3-point scale of (1) not difficult, (2) somewhat difficult, and (3) very difficult—a higher rating than for any other professional group. Three in four (73.1%) of those actually now recruiting an experienced nurse said it was very difficult. To recruit an inexperienced nurse was somewhat easier.

The average hospital employed 4.7 FTE licensed practical nurses (LPNs) or licensed vocational nurses (LVNs), and had openings for less than half a position (.42). Most hospitals (39.2%) reported that recruiting this level of nurse was somewhat difficult. For the hospitals actually recruiting LPNs or LVNs, however, the average difficulty was rated higher—47.1% said it was very difficult.

Certified nursing assistants (CNAs) totaled 7.3 FTEs in the average facility. The average facility was searching for about half a position (.45 FTE), with a vacancy rate of 5.6%. Vacancy rates are calculated by dividing total vacancies by total budgeted FTEs. The one-third (32.1%) of facilities with vacancies were looking to hire 1.4 FTEs. Recruiting CNAs was somewhat difficult for 41.6% of all reporting hospitals, or 54% of those hospitals actually trying to recruit in this position.

A small portion of hospitals (13.0%) reported having nurses who graduated from nursing school outside the U.S. or Canada. A similar portion (12.0%) had nursing unions.

### **Ancillary Personnel**

CAHs employed, on average, 2.5 general radiology technicians and 1.2 specialized radiology technicians. Those 58.9% of hospitals that employed any specialized radiology techs had 2 FTEs each. "Specialized technicians" would include those specially trained for particular pieces of equipment such as ultrasound.

The average hospital was recruiting for about one-third (.285 FTE) of a radiology technician FTE. About 64 CAHs (or 28.6% of hospitals reporting) were recruiting for this position, typically with one opening. More than half of hospitals (53.2%) reported that recruiting for general radiology techs was generally very difficult (49.2% said very difficult on the 3-point scale, but it was higher (87.9%) for those actually recruiting). The picture for specialized radiology technicians was very similar. The vacancy rate for radiology techs (10.5%) was similar to that for nurses, and for specialized techs it was even higher (18.0%).

In an open-ended question asking about the most difficult health professionals to recruit, administrators said radiology personnel were the second most difficult, right after nurses (see Figure 1). Laboratory personnel fell fourth on that list, right after physicians.

An average of 3.9 laboratory technicians worked in the CAHs surveyed, with a median of 3.4. The average hospital was recruiting for .26 laboratory techs, with about one-fourth of hospitals reporting they were recruiting (24.2%). Half of the hospitals (49.8%) currently recruiting for laboratory technicians reported it was very difficult. The lab vacancy rate was 5.9% of FTEs.

CAHs had an average of .67 FTE pharmacists on staff, with a median of .50. They employed even more pharmacy technicians, however, with an average of .82 and a median of 1.0. For those 61.7% of hospitals that employed any pharmacists, the average FTE was 1.1, and for those employing any pharmacy technicians, the average was 1.25. We speculate that the one-third (38.3%) of hospitals that do not employ pharmacists contract for services with a consultant or retail pharmacist, and therefore do not employ their own professional in this area.

While not many hospitals were currently recruiting for pharmacists or pharmacy techs, the median hospital reported it was very difficult to recruit a pharmacist and somewhat difficult to recruit a pharmacy tech.

### **Conclusions**

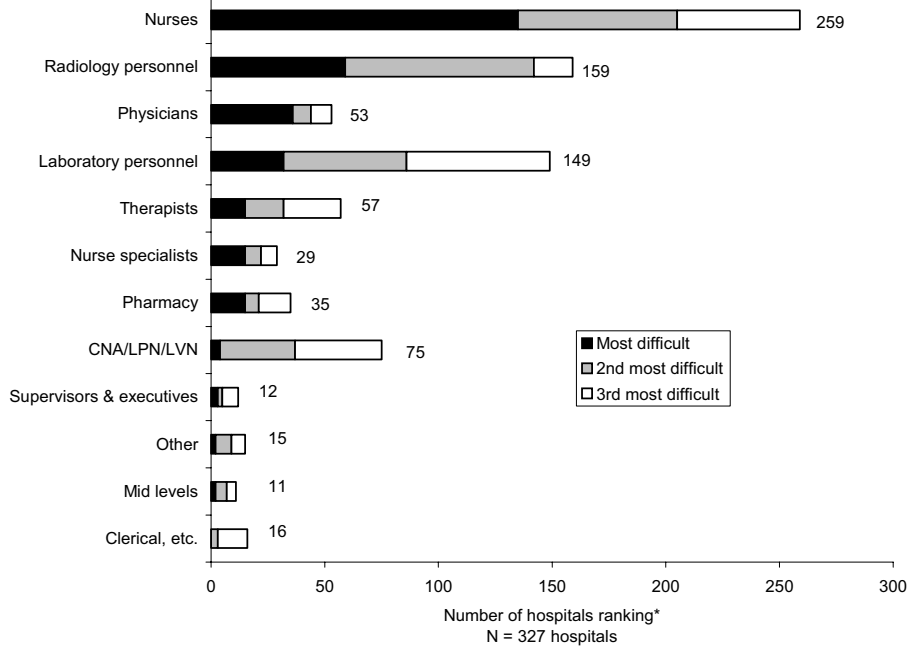
Registered nurses, radiology, physician, and laboratory personnel are the most difficult staff to hire in small, rural CAHs. The rural health services literature has focused extensively on the shortage of physicians in rural areas, and to some extent on nursing staff shortages, but little has been said about ancillary staff. Registered nurses and radiology personnel were described as even more difficult to recruit than physicians by the hospital administrators in our survey.

The strategies found to be most successful for recruiting nurses by hospital administrators may also work well for recruiting radiology and laboratory personnel: personal networking by word-of-mouth, and educational scholarship "grow your own" programs (see Figure 2). Local community colleges will likely be important partners with hospitals in creating and sustaining these training programs.

The importance of a positive working environment, with attention to employee participation in decision making and scheduling options, was cited by administrators as the most important factor in nurse retention (see Figure 3). These strategies could extend to the retention of ancillary personnel as well.

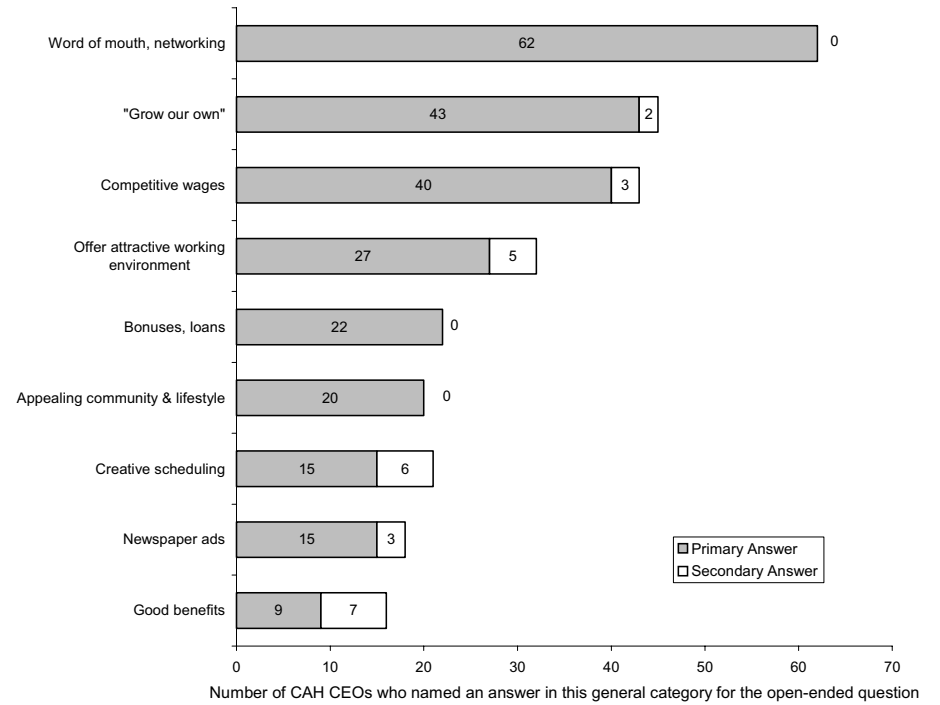
The Flex Program has helped participating rural hospitals with recruitment and retention, according to hospital administrators. The improved reimbursement has assisted hospitals with retention, probably by allowing them to pay better wages and offer improved benefits, and partnerships with network hospitals (as encouraged in the Flex Program) have also reportedly helped with workforce issues.

**Figure 1** Rank order of the most difficult health professionals to recruit

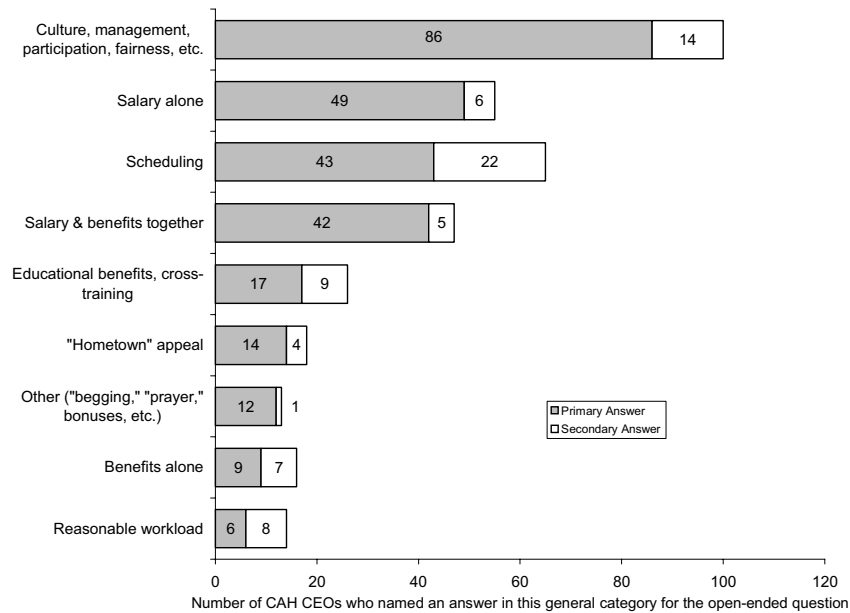


\*Hospitals were asked in an open-ended question to list job titles of health professional categories for which they had the most difficulty recruiting; we aggregated these.

**Figure 2** What strategy have you found most useful in recruiting nurses?



**Figure 3** What strategy have you found most useful in retaining nurses?



**Table 1. Workforce in CAHs**

	Mean FTE	Median FTE	Mean Number of Vacancies	Vacancy Rate*
Experienced RNs	13.2	10.5	1.3	10.5%
LPNs, LVNs	4.7	4.0	.4	8.0%
Nurse assistants	7.3	5.0	.4	5.6%
General & specialized radiology techs	3.7	3.0	.5	11.1%
Lab techs	3.9	3.4	.3	5.9%
Pharmacists	.67	.5	.01	8.9%
Pharmacy techs	.82	1.0	.03	2.5%
Business office staff	6.9	6.0	.17	2.0%

\*Vacancy rates are calculated by dividing total vacancies by total budgeted FTEs.

**Where can I get more information?**

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**About this project:** Check our website: <http://www.rupri.org/rhfp-track/>

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