



The Long Term Care Nurse Staffing Study (LTCNSS) assesses nurse staffing and related issues in the long term care setting. In 2013, approximately 26% of licensed vocational nurses (LVNs) and 3% of registered nurses (RNs) in Texas worked in the Nursing Home/Extended Care setting. Long term care facilities may also employ certified nurse aides (CNAs), certified medication aides (CMAs), and advanced practice registered nurses (APRNs). During the spring of 2014, the TCNWS administered the LTCNSS to 1,191 Texas nursing facilities. A total of 443 facilities participated, for a final response rate of 37.2%.

This report provides information on staffing in Texas long term care nursing facilities, including staff mix, future staffing needs, staff characteristics, and temporary staff.

Staff Mix

Table 1 presents the number of occupied and vacant FTE positions in Texas by staff type.

- CNAs were the most numerous staff type in Texas long term care facilities.
- 93.2% of facilities reported zero vacancies for administrative LVNs, compared to 29.7% of facilities that reported zero vacancies for CNAs.
- Direct resident care RNs and LVNs were more numerous than their administrative counterparts; however, the ratio of direct resident care RNs to administrative RNs is smaller than the ratio of direct resident care LVNs to administrative LVNs

Figure 1. Direct resident care staff mix

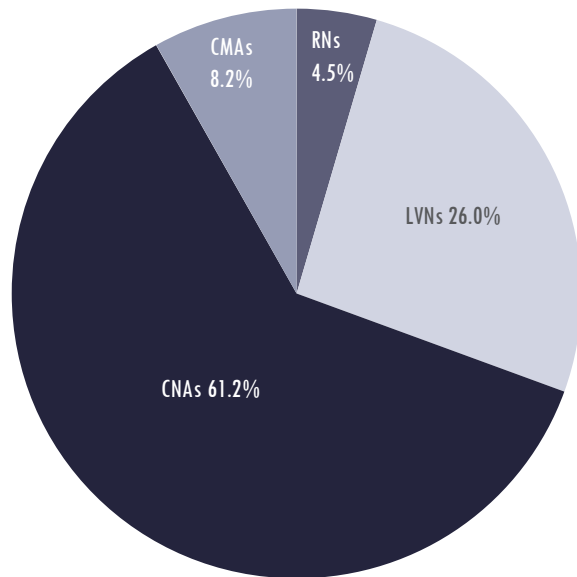


Table 1. Number of occupied and vacant FTE positions in Texas by staff type*

	n	Occupied FTE positions	Total Vacant FTE Positions	Statewide Position Vacancy Rate	Number of Facilities that Reported Zero Vacancies
Direct resident care RNs	313	654.8	131.0	16.7%	239
Administrative RNs	325	585.9	73.0	11.1%	277
Direct resident care LVNs	325	3749.2	320.5	7.9%	188
Administrative LVNs	322	765.0	29.0	3.7%	300
CNAs	330	8810.9	1063.5	10.7%	98
CMAs	288	1179.4	115.0	8.9%	218

*Due to the low numbers of APRNs reported, APRNs are excluded from all analyses in this and all other 2014 LTCNSS reports.

Direct resident care staff

Figure 1 shows only the composition of staff providing direct resident care in Texas long term care facilities and is derived from the total number of FTE positions occupied.

- LVNs accounted for a quarter of direct care staff (See Figure 1).
- 18% of facilities did not employ any RNs in a direct care capacity.

Administrative staff

- LVNs comprised the majority of administrative staff, at 56.6%. The remaining 43.4% were RNs.
- The proportions of administrative staff comprised by LVNs and RNs remains unchanged from the 2008 findings.

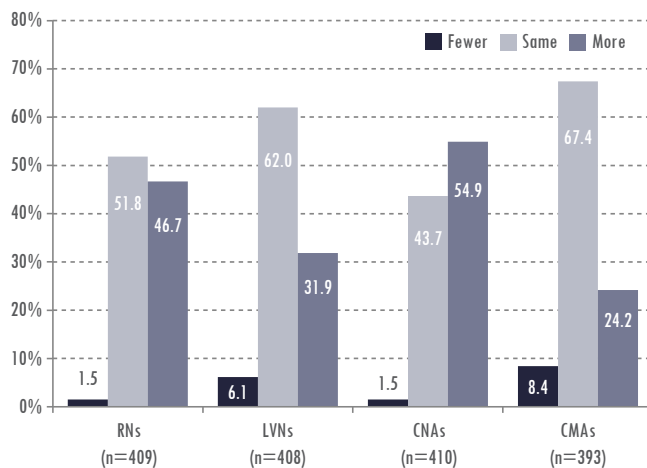
Respondents were asked to indicate whether their facility

Additional Staff Needed

would need more, fewer, or the same number of staff in the next two years (see Figure 2). Additionally, qualitative analysis was performed on responses to the open-ended question, “explain why your facility will need more, fewer, or the same number of [personnel] over the next two years.” The following presents the results for these questions by staff type.

RNs

Figure 2. Expectations of staffing needs by staff type



- 51.8% and 46.7% of facilities (n=409) reported they would need the same amount or more RNs over the next two years, respectively (see Figure 2).
- 52.4% of 176 responses for needing the same number of RNs indicated that current staffing levels were meeting patient needs adequately.
- Rising patient acuity was the most frequent response justifying the need for more RNs (45.1% of 182 responses).

LVNs

- 62% of 408 respondents indicated they would need about the same number of LVNs.
- The top reason cited for needing fewer LVNs was

that these personnel were slowly being replaced by other disciplines (namely, RNs), at 73.9% of 23 responses.

- 42.5% of 207 responses for needing the same number of LVNs indicated that staffing levels were contingent on the census and/or budget and no changes were anticipated.
- More than half (52.5%) of 120 responses indicated that growing patient census/expanding business was the reason for needing more LVNs over the next two years.

CNAs

- More than half of 410 respondents reported that their facility would need more CNAs in the next two years (see Figure 2).
- 47.2% of 144 responses for needing the same number of CNAs indicated that staffing levels were contingent on the census and/or budget.
- 27.4% and 43.4% of 212 responses for needing more CNAs mentioned rising patient acuity and a growing census, respectively.

CMAs

- 67.4% of 393 facilities indicated they would need the same number of CMAs over the next two years (see Figure 2).
- 29.7% of 219 responses for needing the same number of CMAs indicated that current staffing levels were meeting patient needs adequately.
- 40.7% of 27 responses for needing fewer CMAs said that these personnel were slowly being replaced by other disciplines.
- Another 40.7% of respondents who would need fewer CMAs indicated that they do not or no longer use CMAs in their facility.

Staff Characteristics

Nursing Informaticists

94 of 443 respondents answered both questions regarding how many nursing informaticists were employed by their facility and how many nursing informaticist positions were vacant in their facility.

- 83% of these 94 respondents indicated there were currently no nursing informaticists employed at their facility, and 92.6% of 94 indicated there were currently no vacant nursing informaticist positions.

- The 94 facilities reported a total of 67 employed nursing informaticists and 26 vacant positions.

Disciplines

The most common disciplines not required by law in Texas long term care facilities are listed by frequency in Table 3.

RNs with specialty certifications

- 30.5% of 443 facilities reported having at least one RN with a specialty certification on staff, with a range of 1 to 18 and a median of 0.
- The number of RNs with a specialty certification is 17.6% lower than the number reported in the 2008

Table 3. Prevalence of disciplines in responding long term care facilities (n=443)

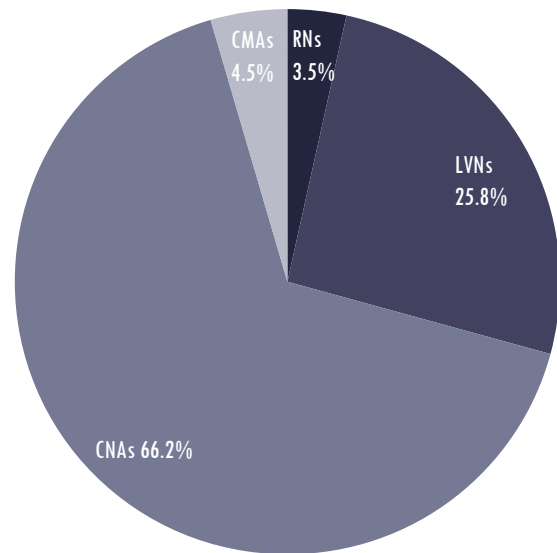
Disciplines	% of facilities with listed discipline
Nurse Practitioners	77.9%
Clinical Nurse Specialists	8.6%
Physician Assistants	50.1%
Other Physicians (excluding medical director)	72.7%
Geriatricians	36.6%

LTCNSS.

Contract, Agency, and Traveling Staff

Respondents were asked to provide the number of contract, agency, and traveling staff FTEs used by their facility. Figure 3 displays only the direct resident care temporary staff. Responding facilities reported a total of 394.5 FTEs being utilized in this capacity.

Figure 3. Contract, agency, and traveling direct resident care staff by staff type



Direct resident care staff

- CNAs comprise 66.2% of the 374.4 FTE direct resident care temporary staff used (see Figure 3).
- LVNs and RNs, combined, account for less than one-third of the 374.4 FTE direct care staff in responding facilities.

Administrative staff

- Of the 394.5 FTEs reported, 5.1% are comprised of administrative RNs and LVNs.
- Administrative RNs account for 55% of the 20 administrative temporary FTEs reported.