

The Hospital Nurse Staffing Survey (HNSS) assesses the size and effects of the nursing shortage in hospitals, Texas' largest employer of nurses. During the spring of 2024, the Texas Center for Nursing Workforce Studies (TCNWS) administered the HNSS to the Chief Nursing Officers/Directors of Nursing of 739 Texas hospitals. These included for-profit, nonprofit, public, and Texas Health and Human Services Commission-operated hospitals, as well as hospitals linked to academic institutions; military hospitals were not surveyed. The facilities surveyed were general acute care, psychiatric, special, behavioral,* and rehabilitation hospitals; outpatient or community-based clinics were not included. Respondents provided data for 297 hospitals for a response rate of 40.2%.

This report presents the highlights of findings from the hospital nurse staffing studies factsheets on staffing and vacancy and turnover.

The following report presents data pertaining to Registered Nurses (RNs), Licensed Vocational Nurses (LVNs), Advanced Practice Registered Nurses (APRNs) and Nurse Aides (NAs).

2024 HNSS: Vacancy and Turnover

The position vacancy rate describes the proportion of all full-time equivalent (FTE) positions vacant across all responding hospitals in an area. The median facility turnover rate describes the mid-point of responses for each hospital.

Vacancy Rates

RN Position Vacancy Rate (217 of 297 hospitals responded):

- The RN position vacancy rate decreased from 17.6% in 2022 to 16.4% in 2024.
- Of 52,369.8 RN FTE positions reported statewide, 8,575.0 were vacant.

Advanced Practice Registered Nurse (APRN) Position Vacancy Rate (226 of 297 hospitals responded):

- Responding hospitals reported 606.6 vacant FTEs out of 2,779.2 total APRN FTEs across the state.
- The statewide position vacancy rate for nurse practitioners (NPs) increased from 11.9% in 2022 to 23.8% in 2024.

- For clinical nurse specialist (CNSs), the statewide position vacancy rate decreased, from 7.1% in 2022 to 6.2% in 2024.
- The statewide certified registered nurse anesthetist (CRNA) position vacancy rate increased from 16.7% in 2022 to 18.8% in 2024.
- The statewide position vacancy rate for CNMs increased from 4.6% in 2022 to 15.6% in 2024.

LVN Position Vacancy Rate (223 of 297 hospitals responded):

- The position vacancy rate for LVNs decreased from 23.1% in 2022 to 21.5% in 2022.
- Of a total 3,469.4 budgeted LVN FTE positions, 746.6 were vacant.

Nurse Aide (NA) Position Vacancy Rate (231 of 297 hospitals responded):

- The statewide position vacancy rate for NAs decreased from 17.0% in 2022 to 14.3% in 2024.
- Of the 10,388.8 NA FTE positions reported statewide, 1,480.7 were vacant.

Turnover Rates

RN Median Facility Turnover Rate (269 of 297 hospitals responded):

- The median facility turnover rate among RNs in Texas hospitals was 23.2%, a decrease from 28.3% in 2022.

Advanced Practice Registered Nurse Median Turnover Rate (109 of 297 hospitals responded):

- The statewide median turnover rate was 0% for all APRN types.

LVN Turnover Rate (213 of 297 hospitals responded):

- The median facility turnover rate for LVNs increased from 18.9% in 2022 to 21.1% in 2024.

Nurse Aide Turnover Rate (185 of 297 hospitals responded):

- The statewide median facility turnover rate for NAs decreased from 35.0% in 2022 to 29.9% in 2024.

2024 HNSS: Staffing

Nurse Staffing

- As a means of gauging trends in employment, hospitals were asked if there had been changes in the number of RN positions at their facility over the past year. 48.8% of respondents reported an increase in RNs positions, while 6.7% reported a decrease.
- When asked how many additional FTEs they expected to add in the coming fiscal year, 233 responding hospitals reported plans to hire an additional 10,808.6 new FTE positions among all nursing staff types, mostly RNs.

Where Hospitals Recruit (297 of 297 hospitals responded):

- 98.0% of hospitals reported recruiting in Texas, while 36.7% recruited in other states and 17.2% recruited internationally.

Filling Positions (284 of 297 hospitals responded):

- For all position types, hospitals most commonly filled positions between 31 and 60 days.

TCNWS Advisory Committee Recommendations

Staffing

Texas is projected to face a shortage of nurses from 2022 through 2036.¹ By 2036, there is projected to be a deficit of 56,370 RN FTEs. Based on these projections, 15.6% of the projected demand for RNs in 2036 will not be met. In the 2024 Hospital Nurse Staffing Study, hospitals reported planning for an additional 10,808.6 additional nurse FTEs, including an additional 9,345 RN FTEs. In order to meet the growing demand for RNs, employers should consider the following strategies:

- Continue to support endeavors to increase funding levels as well as provide resources such as mentors/preceptors and clinical space to nursing programs in order to increase capacity to admit and graduate nursing students.

In 2024, Governor Abbott formed the Texas Healthcare Workforce Task Force that put forth recommendations for the healthcare workforce. In conjunction with the data presented above, the task force comments on the growing issue of staffing among nurses working in healthcare facilities. As hospitals plan to add 10,808.6 additional nurse FTEs in the next fiscal year, facilities should:

- Ensure compliance with Health and Safety Code Chapter 257 on the nursing staffing statute.

Hospitals reported the gaps in curriculum and educational preparedness of their newly licensed nurses. Almost a third (27.4%) identified a lack of clinical experience or skills, including a lack of critical thinking skills (29.2%), a lack of communication skills (19.3%), and basic nursing skills (17.4%). 16 hospitals reported partnering with

education programs to provide clinical sites, mentors, or preceptors that allowed students to train in their facility. Once graduated, these new nurses were recruited and onboarded to the same hospital, creating a more seamless onboarding process.

- Consider partnering with education programs to provide clinical training in your hospital.
- More funding should be made available to support academic-practice partnerships, similar to the grant recently released by the Texas Higher Education Coordinating Board.²

Hospitals reported adding virtual components (13.05%), working with educational programs (8.6%), creating tools for the onboarding process (7.6%), and creating a designated recruitment/onboarding position (4.9%) as onboarding strategies for their new nurses.

- Develop and support programs for new and novice nurses beyond transition to practice, including residency programs.

Recruitment and Retention

Employers of nurses should invite practicing nurses' input to promote recruitment and retention of nurses in the workplace. Some of these strategies could include the following:

- Support investigation and research in the retention of new graduates and experienced nurses in the work setting to ensure current methods of recruitment and retention are effective.
- Support programs to address nurse burnout.
- Continue to investigate mechanisms for recognition for the work and contributions that nurses provide. Employee recognition programs were used by 83.8% of hospitals to retain their nurses.
- Further research the characteristics of hospitals that have zero vacancies among their nursing staff.
- Establish a forum for hospitals to share recruitment and retention best practices. Nursing stakeholder organizations should establish forums through which hospitals can share best practices for recruitment and retention of nurses, in order to more fully implement the strategies identified through recommendation two. Several nursing organizations in Texas have regional workgroups:
 - Texas Nurses Association (TNA) Districts
 - Texas Organization for Nursing Leadership (TONL) Regional Chapters
 - Texas Hospital Association (THA) Workforce Task Force

- Texas Organization of Rural and Community Hospitals (TORCH)
- Strategize on disseminating recommendations and best practices to all Chief Nursing Officers and Chief Nursing Executives at hospitals across Texas. Attend sharing sessions and webinars produced by hospitals and nursing organizations about best practices in regards to newly licensed nurses, onboarding processes, and career development.
- Encourage hospital administration and CNOs to look at the recommendations from Governor Abbott's healthcare taskforce, as well as the recommendations produced at the Texas Nurses Association-Texas Organization for Nursing Leadership-Texas Board of Nursing Summit.

Vacancy and Turnover

Texas continues to have higher vacancy and turnover rates than other states with comparable populations.³ High vacancy and turnover rates can lead to negative outcomes that affect quality of care, such as losing experienced staff and increasing the workload and stress levels of existing staff.⁴ High vacancy and turnover is also costly to hospitals due to the high cost associated with overtime and recruiting qualified nurses. In order to decrease vacancy and turnover hospitals need to identify factors influencing recruitment and retention of nurses. Employers of nurses should invite practicing nurses' input to decrease vacancy and turnover rates for nurses in the workplace. Some of these strategies could include the following:

- Continue to improve work environment, including:
 - Care delivery models, including professional practice models
 - Institute flexible work schedules and part-time or per diem work. 95.6% of responding hospitals used shift differentials and 59.6% used flexible scheduling and job sharing as retention strategies for full-time employees. Other creative work schedules could include seasonal employment (e.g., working winters with summers off), overlapping shifts, and self-scheduling.
- Explore a wide range of compensation models that align experience, workload, and positive patient outcomes.
- Develop and support health promotion and return-to-work programs (after an employee injury or illness).



- Promote nursing apprenticeship and residency programs that encourage continuing education and career pathways for military medics, LVNs, and RNs.
- For nurses throughout their careers, offer more career development experiences such as tuition assistance and financial assistance for certifications.
- Consider using a team nursing model (using a mix of RNs, LVNs, and NAs to provide comprehensive care to patients) to mitigate the RN shortage.
- Support mental health, including resiliency in practice, programming for nurses.

¹ Texas Center for Nursing Workforce Studies. (2024). Updated nurse supply and demand projections, 2022-2036. <https://www.dshs.texas.gov/center-health-statistics/texas-center-nursing-workforce-studies/nursing-supply-demand-projections>

²<https://www.highered.texas.gov/grants/minority-health-research-and-education-grant-program-mhgp/#:~:text=The%20Academic%2DClinical%20Partnerships%20grant,period%20ends%20December%2031%2C%202023.>

³ https://www.nsinursingsolutions.com/Documents/Library/NSI_National_Health_Care_Retention_Report.pdf

⁴ American Association of Colleges of Nursing. (2019). Nursing shortage fact sheet. <https://www.aacnnursing.org/Portals/42/News/Factsheets/Nursing-Shortage-Factsheet.pdf>

