How Are Washington State’s Hospitals Affected by the Nursing Shortage? Results of a 2001 Survey

Background: The registered nurse (RN) workforce in the U.S. and the national population are both aging. Nursing shortages are being reported around the U.S., and are expected to increase as the demand for medical care rises with the aging of the population. The Center for Health Workforce Studies and the Washington State Hospital Association teamed up to investigate how acute care hospitals in the state are affected by the nurse shortage.

Methods: An eight-page questionnaire was mailed to the 83 non-federal acute care hospitals in Washington in early 2001. After in-person and telephone follow-up to encourage response, 68 hospitals (82%) responded. Rural-Urban Commuting Area (RUCA) codes were used to distinguish rural from urban sites.

Major Findings:

✖ An estimated 1,987 hospital RN staff nurses are needed to fill the 1,401 vacant FTEs in Washington. Washington’s nursing schools graduate approximately 1,200 RNs per year.

✖ Hospital RN vacancy rates are 9.2% of budgeted FTEs, with rural sites reporting slightly lower vacancy rates (8.9%) than urban sites (9.6%). The American Hospital Association reports 12% vacancy rates for urban hospitals nationally and 10% for rural hospitals in 2001.

✖ Urban hospitals find it easier to recruit newly trained RNs than do rural hospitals. However, all hospitals reported that it is difficult to hire experienced nurses.

✖ Sixty-six percent of urban hospitals and 46% of rural hospitals reported they diverted patients to other hospitals last year because of a shortage of nurses.

✖ Overall, most hospital respondents indicated that the main reason for nurse vacancies was a lack of qualified applicants. Very few identified pay or benefits issues as the cause of the vacancies.

Policy Implications: Washington’s hospitals face the challenge of a nursing shortage similar to that of the rest of the country. Among the short-term effects of the shortage are closing of hospital beds and diverting more of management’s resources to nurse recruitment. A long-term effect is likely to be greater stress on the work environment, which may contribute to nurse dissatisfaction, retention problems, and increase the risks to the quality of patient care. Solutions include increasing the supply of nurses and encouraging them to remain in the workforce longer.