

Licensed Practical Nurses in Vermont

2016 BOARD OF NURSING RE-LICENSURE SURVEY

Summary prepared by: University of Vermont AHEC Nursing Workforce, Research, and Development

Background

By order of Vermont Act 79 (2013), the Secretary of Administration directed the Office of Professional Regulation to collect workforce supply data from each licensee. Licensed Practical Nurses (LPNs) are a vital part of the healthcare workforce and this summary provides information on the supply of LPNs in Vermont in 2016.

Methods

Online re-licensing was available to LPNs from January to March 2016. Nursing workforce "minimum data set" questions (recommended by Health Resources and Services Administration (HRSA) and the Forum of Nursing Workforce Centers) were included in re-licensure application. Paper surveys were also available but due to the low number used, they were not included in this analysis. The entire sample did not respond to all questions; therefore, response rates are noted and percentages based on the responses to each question.

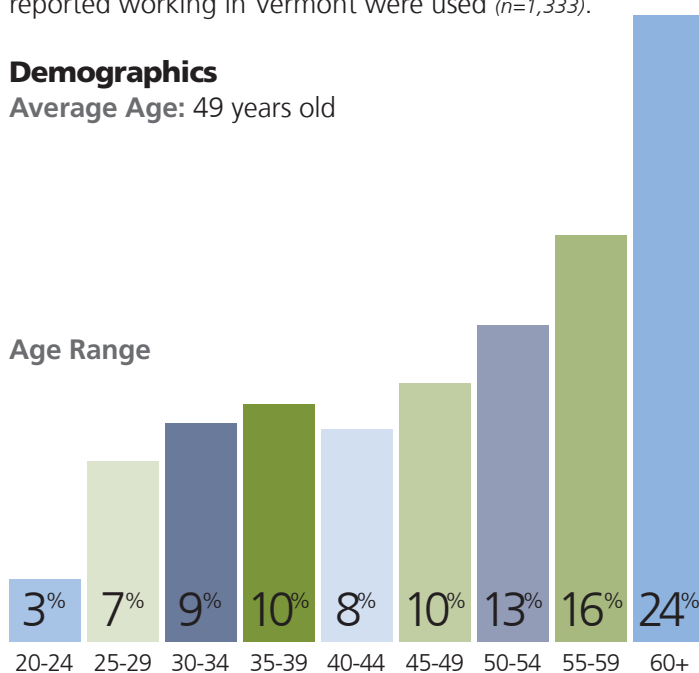
Results

There were 1,706 LPNs licensed in Vermont as of March 30, 2016 and 1,553 LPNs completed the survey (91% response). For this analysis, only nurses who reported working in Vermont were used ($n=1,333$).

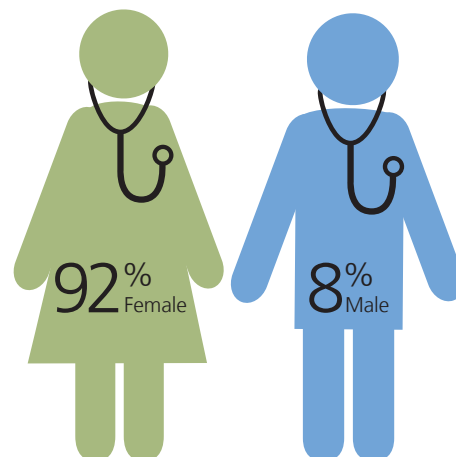
Demographics

Average Age: 49 years old

Age Range



Gender



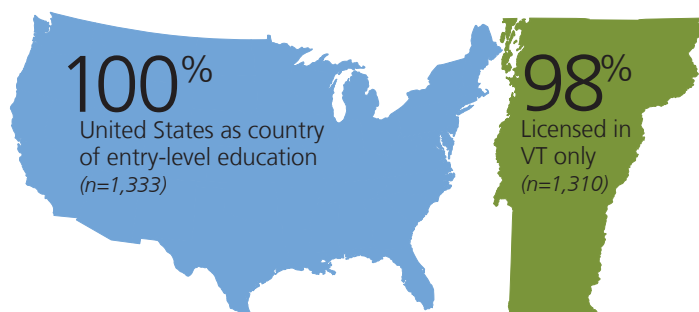
Education

($n=1,326$)

LPN certificate.....	68%
Nursing diploma	12%
Associate degree non-nursing.....	6%
Baccalaureate degree non-nursing	7%
Other.....	3%
49 individuals reported their highest degree as Associate degree in nursing ($n=46$, 3.5%) and Bachelor's degree in nursing ($n=3$, 0.2%).	

Enrolled in a Formal Nursing Education Program:

Associate degree program.....	9%
Baccalaureate program	1%



Employment Status

Current Employment ($n=1,330$)

Full-time in nursing.....	70%
Part-time in nursing	30%
Per diem ($n=199$).....	15%
Traveler ($n=199$)	3%

Reason for Unemployment (n=130 – from entire sample of 1,553)

Other	33%
School	31%
Taking care of home and family	19%
Difficulty finding a nursing position	9%
Disabled	5%
Inadequate salary	3%



Primary Employment Setting (n=1,332)

Nursing home/extended care/assisted living facility	40%
Other settings	17%
Hospital	11%
Ambulatory care	10%
Community health	8%
Home health	7%
Correctional facility	3%
School health service	2%
Public health	2%
Occupational health	<1%

Specialty of Primary Nursing Practice Position (n=1,333)

Geriatric/Gerontology	36%
Adult Health/Family Health	16%
Other	13%
Pediatrics/Neonatal	5%
Home Health	5%
Psychiatric/Mental Health/Substance Abuse	5%
Rehabilitation	4%
Community	3%
Medical Surgical	3%
Acute Care/Critical Care	2%
School Health	2%
Women's Health	2%
Public Health	1%
Maternal-Child Health	0.8%
Oncology	0.4%
Palliative Care	0.4%
Occupational Health	0.3%



Primary Employment Description (n=1,307)

Staff nurse (patient care)	82%
Other (health-related)	7%
Nurse Manager	7%
Educator	1%
Consultant/Nurse Researcher	0.3%
Nurse Executive	0.2%
Missing	2%

Six percent (6%, n =83) reported a secondary position; of that number the most common specialty was geriatrics/gerontology (n=39); position was staff nurse (n=71) and the setting was nursing home/extended care/assisted living (n=43).

Number of currently held positions (n=1,149)

One	94%
Two	6%
Three or more	<1%

Information on Demand for LPNs

1.6% growth per year is expected with a median wage \$20.74.¹

HRSA's Baseline and Projected Supply of and Demand for the Licensed Practical Nurse Workforce 2012-2025 indicate a projected surplus of LPNs (+540) by 2025.²

Conclusions

There has been an increase in the number of male LPNs over the last decade (47 in 2004 and 106 in 2016). The LPN workforce is slightly more ethnically diverse (93% reporting to be white/Caucasian) which is lower than in the 2015 Vermont census (94.8%). Nearly one-fourth of all working LPNs are over 60 years, so a retirement trend can be expected over the next decade. The number of LPNs employed in the hospital setting has continued to decline (by 3% in the last two years) but employment in "other" settings has increased by 5%. There has not been much change in the specialty that LPNs work in, with more than a third (36%) continuing to work in geriatrics. This compares to 28% of LPNs working in geriatrics in a national survey³. Those individuals who reported that they were not currently working as an LPN in Vermont were less likely to report the reason being "difficulty finding a position" compared to two years ago.

Recommendations

It is important to keep a steady flow of newly-licensed LPNs (with appropriate educational experiences in geriatrics) available to care for Vermont elders in the future. Although HRSA predicts a surplus of LPNs in Vermont by 2025, such projections should be considered with caution in light of the large retirement expected in the upcoming decade.



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Visit www.vtahec.org to download workforce reports.

¹ Vermont Department of Labor

² HRSA National Center for Health Workforce Analysis (2014), *The Future of the Nursing Workforce: National- and State-Level Projections, 2012-2025*.

³ Budden, J.S., Moulton, P., Harper, K., Brunell, M.L., and Smiley, R. (2016) *The 2015 National Nursing Workforce Survey*. Journal of Nursing Regulation. 7 (1), pp s53-s73.