

North Dakota Hospital Survey: 2014

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Introduction

Health workforce shortages have been identified as a challenge for both rural and urban health care facilities in North Dakota. Previous works have addressed all physicians to provide an overview of physician distribution and ratios of physicians to people.

This work was conducted to assess workforce shortages for hospitals in North Dakota. The complex nature of hospitals is a result of the range of services provided, and because of this, a diverse workforce is necessary. Workforce shortages can create a challenge in day to day hospital operations.

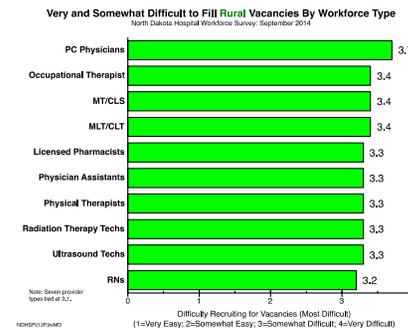
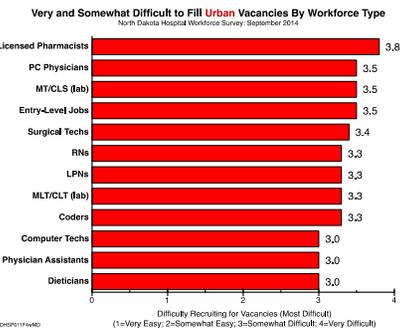
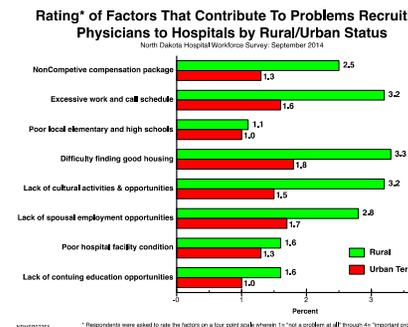
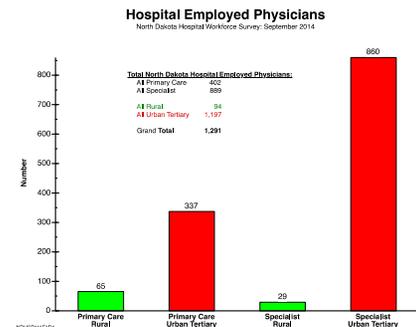
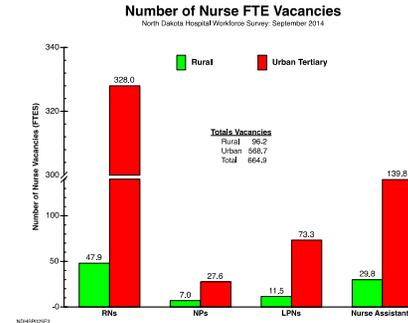
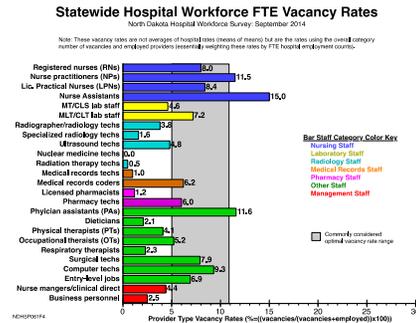
One way to assess shortages is to analyze full-time equivalent (FTE) employees, vacant FTEs, vacancy length, and recruitment difficulty. Further geographic stratification can provide additional regional level analysis to identify shortages not only related to by type and location of hospitals.

Methods

A survey instrument was developed in July, 2014 to identify health workforce shortages for North Dakota Critical Access Hospitals (CAHs) and short-term general hospitals (PPS).

The survey was distributed to all hospital CEOs using Qualtrics online survey software. Non-respondents were followed-up with via telephone and email to improve response rate.

The main feature of the questionnaire was a matrix of 25 hospital workforce types with additional questions related to health workforce-related issues. The data were stratified by CAH and PPS; CAHs were also stratified by region of the state.



Findings

Of the 42 hospitals surveyed, all 42 responded for a 100% response rate.

- The highest vacancy rate overall was nurse assistants (11.5)
- The second and third highest vacancy rates overall were physician assistants (11.6) and nurse practitioners (11.5)
- The total nursing FTE vacancies was 664.9 with more than half of rural and urban vacant FTEs being registered nurses
- Rural areas have a higher percent of vacant nurse FTEs attributed to nurse assistants
- Approximately 70% of rural hospital doctors practiced in primary care while nearly 70% of urban hospital doctors practiced as specialists.
- Housing, excessive work schedule, and lack of spousal opportunities were the top three barriers to recruiting both rural and urban physicians
- Primary care physicians were the first and second most difficult to fill vacancies for both rural and urban hospitals, respectively

Conclusions

Rural and urban hospitals share similarities in workforce type vacancies with variation of specialized workforce types. Rural and urban hospitals also share similarities in recruiting barriers with rural areas identifying as having twice the burden of barriers than their urban counterparts. One deviation found was the difference in primary care and specialist physician staffing between rural and urban areas.