



2007 FISCAL YEAR INDEPENDENT BUDGET

Attracting and Retaining a Quality VHA Nursing Workforce: Caring for our Nation's Veterans

OVERVIEW

The Department of Veterans Affairs (VA) *Veterans Health Administration's (VHA) Succession Strategic Plan FY 2006-2010 (Strategic Plan)* provides an in-depth analysis of the VHA workforce. It states:

VHA faces significant challenges in ensuring it has the appropriate workforce to meet current and future needs. These challenges include continuing to compete for talent as the national economy changes over time and recruiting and retaining health care workers in the face of significant anticipated workforce supply and demand gaps in the health care sector in the near future. These challenges are further exacerbated by an aging federal workforce and an increasing percentage of VHA employees who reach retirement eligibility each year. With health care being primarily a people-based process, it is essential to ensure the continuous presence of an effective workforce to achieve VHA mission to provide exceptional health care to America's veterans. VHA's overall goal for its workforce succession programs is to, 'Recruit, develop and retain a competent, committed, and diverse workforce that provides high quality service to veterans and their families.'

The VA is the third largest civilian employer in the federal government and one of the largest health care providers in the world.

NURSING WORKFORCE

The VHA has the largest nursing workforce in the country with nearly 59,000 registered nurses (RNs), licensed practical nurses (LPNs), and other nursing personnel. The VA and the country at large are experiencing a shortage of nursing personnel. VA staffing levels are frequently so marginal that any loss of staff can result in a critical staffing shortage and present significant clinical challenges. Staffing shortages can result in the cancellation or delay of surgical procedures and closure of intensive care beds. It also

causes diversions of veterans to private sector facilities at great cost. This situation is complicated by the fact that VA has downsized inpatient capacity in an effort to provide more services on an outpatient/ambulatory basis. The remaining inpatient population is generally sicker, has lengthier stays, and requires more skilled nursing care.

The shortage of nursing personnel to meet the demand for health care is an underlying symptom of the veterans health care budget crisis. Since the VA health care budget has not kept up with rising health care costs, the situation grows more critical each fiscal year. Inadequate funding has resulted in nationwide hiring freezes. These hiring freezes have had a negative impact on the VA nursing workforce as nurses have been forced to assume non-nursing duties due to shortages of ward secretaries, building management, and other support personnel. These staffing deficiencies impact both patient programs and VA's ability to retain an adequate nursing workforce.

The *Strategic Plan* identified 10 occupations as national priorities for recruitment and retention and rated these occupations. RNs, LPNs and Nursing Assistants were rated as one, four and nine, respectively, on this priority list.

NATIONAL COMMISSION ON VA NURSING

Like other health care employers, VHA must actively address those factors known to affect retention of nursing staff: leadership, professional development, work environment, respect and recognition, and fair compensation. In addition, it is essential adequate funds are appropriated for recruitment and retention programs for the nursing workforce.

In 2002, the National Commission on VA Nursing was established through Public Law 107-135 and charged to consider and recommend legislative and organizational policy changes that would enhance the recruitment and retention of nurses and other nursing personnel and address the future of the nursing profession within the Department. The Commission developed the desired future state for VHA nursing and recommendations to achieve that vision.

The Executive Summary of the Commission Report states:

Providing high quality nursing care to the nation's veterans is integral to the mission of the Department of Veterans Affairs. The current and emerging gap between the supply of and the demand for nurses may adversely affect the VA's ability to meet the healthcare needs of those who have served our nation. The men and women of the uniformed services who have defended our nation's freedoms in global conflicts deserve the best treatment our nation can provide. Nurses comprise the largest proportion of healthcare providers in the Department of Veterans Affairs. Action is required now to address underlying issues of nursing shortage and retention while simultaneously implementing strategies that assure the availability of a qualified nursing workforce to deliver care and promote the health of America's veterans in the future.

Simultaneously, the Office of Nursing Service developed a strategic plan to guide national efforts to advance nursing practice within VHA and engage nurses across the system to participate in shaping the future of VA nursing practice. This strategic plan embraces six patient-centered goals. These goals encompass and address many of the recommendations of the VA Nursing Commission, as well as the findings in current literature.

- ***Leadership Development:*** This goal focuses on supporting and developing new nurse leaders and creating a pipeline to continuously “grow” nursing leaders throughout the organization. The objective is to operationalize the High Performance Development Model for all levels of nursing personnel. This goal also addresses issues related to the nursing Professional Qualification Standards and the Nurse Professional Standards Board as discussed in the Commission report.
- ***Technology and System Design:*** This goal focuses on creating mechanisms to obtain and manage clinical and administrative data to empower decision making. The objective is to develop and enhance systems and technology to support nursing roles. The Commission report highlighted the importance of nursing input in the development stage of new technologies for patient care.
- ***Care Coordination and Patient Self-Management:*** This strategic goal focuses on promoting and recognizing innovations in care delivery and facilitating care coordination and patient self-management. The objectives are to strengthen nursing practice for the provision of high-quality, reliable, timely, and efficient care in all settings and to enhance the use of evidence-based nursing practice. This goal also encompasses recommendations from the Commission related to the work environment of VA nurses.
- ***Workforce Development:*** This goal focuses on improving the recognition of and opportunities for the VA nursing workforce. Areas of emphasis are (1) *utilization:* to maximize the effective use of the available workforce; (2) *retention:* to retain a qualified and highly skilled nursing workforce; (3) *recruitment:* to recruit a highly qualified and diverse nursing staff into VHA; and (4) *outreach:* to improve the image of nursing and promote nursing as a career choice through increased collaboration with external partners. This goal also includes an emphasis on the importance of striving for the values exhibited by the philosophy of the Magnet Recognition Program of the American Nurses Credentialing Center. The Commission report addresses all of these areas as critical to the future of VA nursing.
- ***Collaboration:*** This goal focuses on forging relationships with professional partners within VA, across the Federal community, and in public and private sectors. The objective is to strengthen collaborations in order to leverage

resources, contribute to the knowledge base, offer consultation, and lead the advancement of the profession of nursing for the broader community. The priorities of this goal align with VHA's Vision 2020 and the Commission recommendations related to collaboration and professional development.

- ***Evidence-Based Nursing Practice:*** This goal focuses on identifying and measuring key indicators to support evidence-based nursing practice. The objective is to develop a standardized methodology to collect data related to nursing sensitive indicators of quality, workload, and performance within VHA facilities, which will be integrated into a standardized national database. The Commission report applauded VA's progress to date related to this goal.

As noted earlier, the VHA in its assessment of current and future workforce needs identifies RNs as the number one priority in recruitment with LPNs and nursing assistants also among the top ten occupations with critical recruitment needs. Recommendations from this workforce assessment include implementing the Commission's recommendations, enhanced new employee induction programs, and supervisory training. Additionally, the plan recommends continuing support of employee education programs, implementation of new initiatives for student (including high school outreach) recruitment, and improving the retention of trainees as permanent employees. Finally, VHA recommends the continuing need to maintain a national recruitment program with innovative approaches and effective outcomes.

The value and import of the *Independent Budget* supports the Commission's recommendations, the VA's Office of Nursing Service's strategic plan, and VHA's workforce succession plan. We strongly urge Congress to develop a budget for VA health care that will allow VHA to invest resources -- human, fiscal, and technological -- for recruiting and retaining nurses and proactively testing new and emerging nursing roles. The Commission's legislative and organizational recommendations are a blueprint for the reinvention of VA nursing. The VA model will serve as a foundation for the creation of a care delivery system that meets the needs of our nation's sick and disabled veterans and those providing their care.

At the end of the 108th Congress, two measures were enacted that signal a beginning to address medical personnel recruitment and retention issues in general and the nursing shortage, in particular. The first measure attempts to simplify and improve pay provisions for physicians and dentists and authorizes alternative work schedules and executive pay for nurses. The second measure establishes a pilot program to study the use of outside recruitment, advertising and communications agencies and interactive and online technologies to improve VA's program for recruiting nursing personnel.

Nurses are concerned with the Information Technology (IT) Management Improvement Act of 2005, which will make the VA Chief Information Officer (CIO) accountable for the VA's entire IT infrastructure. The CIO will have authority over its budget, as well as control over IT policies, procedures, personnel and assets. As a result of this bill, VHA will no longer have control of the budget to acquire needed information technology

resources and staff. The VHA will be in competition with Veterans Benefit Administration and the VA Cemetery Administration. This could result in decreased spending and delayed acquisition of IT equipment needed to provide care for VA patients. Individual VA facilities will no longer have the ability to determine what and when IT equipment will be purchased. This new policy could potentially have a detrimental effect on nursing throughout the VISN structure.

OPERATION IRAQI FREEDOM/OPERATION ENDURING FREEDOM (OIF/OEF VETERANS)

Congress has committed the VA to caring for service members for two years after they leave military service. Because nurses provide the bulk of care to these new members of the VA family, it is critical the VA have the correct mix as well as an adequate number of nursing personnel.

There are currently 433,398 OIF/OEF veterans who are eligible for VA health care, and 28 percent of these individuals have sought some level of care.

- There is a 0.7 percent (3,087) rate of hospitalization among all 433,398 eligible veterans.
- OIF/OEF veterans or three percent (3,087) of 119,247 enrolled VA patients have been hospitalized at least once in a VA health care facility.
- Approximately 119,247 of these veterans evaluated by the VA in FY 2002-2005 represents approximately two percent of the 4.9 million individual veterans who received VA health care in 2004.
- Fifty-two percent of these patients are between the ages of 20 and 29, 23 percent are between the ages of 30 and 39, and 23 percent are over the age of 40.
- Eighty-seven percent are male, and 13 percent are female.
- The three most common health problems of these war veterans have been musculoskeletal ailments (primarily joint and back disorders), mental disorders, and dental problems.
- Almost 16,000 of these veterans have the diagnosis of PTSD, but this diagnosis will increase every year. PTSD is a hidden disease and is frequently manifested through substance abuse, depression, interpersonal or work difficulties. There needs to be an adequate number of mental health care providers to treat these veterans for years to come.

In July 2004, the New England Journal of Medicine published their findings:

- Examined mental health problems among 3,671 soldiers and marines three-four months after their return from Afghanistan or Iraq.
- Up to 17.1 percent screened positive for major depression, generalized anxiety and/or PTSD.
- Of those who screened positive for a mental disorder, as few as 23 percent sought treatment.

- Those with a mental disorder were twice as likely to report concern about stigmatization should they report their problems.
- Combat veterans are at high risk for PTSD and other mental health problems but unlikely to report them.

The VA must be prepared for these veterans whose numbers are increasing monthly. They are not just dealing with post deployment mental health issues, but: depression; alcohol abuse (often beginning as an effort to sleep); narcotic addiction (often beginning with pain medication for injuries); suicide; job loss; military sexual trauma, family dissolution; homelessness; violence toward self and others; and incarceration.

These newly-returning veterans have special health care needs which will fall to the nursing workforce to handle on a 24 hours-a-day/seven days-a-week basis for decades in the future.

NOVA MEMBERS SPEAK

The Nurses Organization of Veterans Affairs (NOVA) is the professional organization of the over 35,000 RNs employed by the VA. Biennially, NOVA seeks input from the membership on issues impacting registered nurses in the workplace.

Nearly all members identify caring for their veteran patient as the most rewarding aspect of their job. Because these issues impact the care our members provide their patients, the Organization is dedicated to these surveys, believing membership input is critical.

The 2005 membership survey identified adequate budget for VHA as the legislative issue most important to NOVA members. Additionally, NOVA members are concerned that a reduction in nursing staff can lead to a compromise in patient safety.

Members identified their greatest challenges being computerized charting and adequate computers. Problems with bar code medication administration (BCMA) equipment can lead to frustration with this technology, although it has reduced medication errors. NOVA nurses find VA benefits, state-of-the-art informatics and providing education to patients and families as highly rewarding. They identified salaries competitive with the private sector as having the highest impact on recruitment, followed by flexible work schedules and adequate staffing. It was interesting to note that when asked how many days per month the respondents had to stay at work to cover patient care needs, 32.6 percent indicated that they stayed one to four days per month, and another 27.8 percent indicated they stayed more than four days per month.

Because many VA nurses are eligible to retire now, or will become eligible in the next five years, the top enticement to stay in VHA nursing was flexible working hours. With a nationwide nursing shortage, there was concern how these retirements will impact adequate staffing and patient care. Only 37.5 percent of NOVA members felt VHA nursing salaries were competitive with the private sector, and even fewer, 20.4 percent, indicated their facility would meet the criteria for Magnet Hospital designation.

Lastly, the survey included several questions about the legislative process since Congress, during each legislative session, initiates and passes legislation that affects the nursing workforce. Educating legislators was identified as important for improving the image of VA nursing. Additionally, a majority of nurses (63.9 percent) believe they have the ability to make a difference in legislative areas.

CONCLUSION

NOVA recommends the VA establish recruitment programs that enable VHA to remain competitive with private-sector marketing strategies, and Congress must provide sufficient funding to support programs to recruit and retain critical nursing staff. Lastly, NOVA supports the *VHA Workforce Succession Strategic Plan FY 2006-2010 (October 2005)*.

(see side bar below)

Veterans Affairs Learning Opportunities Residency (VALOR)

One very successful program which requires annual funding is the VALOR program. This program is designed as a recruitment tool for new graduates of baccalaureate nursing programs. VALOR recruits outstanding students who have completed the final semester or quarter of their junior year and enables them to develop competencies in clinical nursing while working at an approved VA health care facility. VA medical Centers provide both didactic and experiential learning and exposure to the VA health care environment. Based on this positive student experience, the program promotes VA employment as registered nurses upon graduation.

The VA Palo Alto Health Care System has been very successful in retaining VALOR students as VA employees. They recently received a poignant letter from an active duty polytrauma patient, Major Edward. T. Card, JR, USMC. In his letter, the Major compliments VALOR student Melissa Van Natta. He states: "I had the opportunity to observe Melissa in the performance of her duties while an in-patient in Ward 7-D at the Palo Alto branch. In conversation, I would often inquire as to her future plans in the medical profession. She would consistently state that, when she graduates from school, she wants to work in the ICU or ER as an RN. I admired her tenacity and consistency regarding her determination to perform in one of the most challenging fields in the nursing profession.

I am not qualified to speak intelligently regarding her nursing qualifications as I am not a medical professional. However, I can discuss her exceptional character and work ethic. Over the three months that I observed Melissa perform various duties on the ward, I assessed her as one of the most competent and cognizant members of the staff. I have heard many stories about the diligence, aptitude, and forthrightness of the nurses in ICU. I believe Melissa has that same degree of character within her. My only interest (in writing this letter) is seeing someone of Melissa's character be hired on at the ICU in case I am ever a patient there again."

Major Card will be happy to learn that Melissa and three other VALOR students plan to apply for a permanent position at the Palo Alto Medical Center. In the current nursing "market" wherein new graduates are offered anything from \$10,000 sign-on bonuses, trips to Hawaii, new cars, etc., it is wonderful to have VALOR students choose the VA as a career because they like the veterans and they like the VA staff. The funding for the VALOR program must continue if we are going to attract bright, ambitious students such as Melissa.