

2025 NSI National Health Care Retention & RN Staffing Report

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Preface

We are proud to present the annual NSI National Health Care Retention and RN Staffing Report. In January 2025, **NSI Nursing Solutions, Inc.** invited acute care hospitals from across the country to participate in the nation's most comprehensive survey on healthcare turnover, retention initiatives, vacancy rates, recruitment metrics and staffing strategies.

The healthcare labor market continues to be strong with demand continuing to outpace supply. According to the US Bureau of Labor Statistics, employment in healthcare is projected to grow much faster than the average for all occupations through 2033. During this period, about 1.9 million openings are projected each year due to employment growth and the need to replace workers who permanently leave their position. Both of which are driven by the fact that people are living longer and that all Baby Boomers will have reached retirement by 2030. While supply varies geographically, on a national level, a major crisis is evident and deteriorating. The remaining questions are: how do we protect our human capital investment and how do we staff while controlling labor costs?

NSI Nursing Solutions provides industry insight to help hospitals benchmark performance, identify best practices, and understand emerging trends. We sincerely extend our appreciation to all 450 participating facilities for making this report possible. Your feedback and suggestions were encouraging and valuable. As promised, all information is provided in the aggregate to maintain the confidential and sensitive nature of the data provided.

Should you have any questions or recommendations on expanding the scope or depth of this survey, please feel free to contact me at bcolosi@nsinursingsolutions.com. I welcome your participation in future studies conducted by NSI Nursing Solutions, Inc.

Brian Colosi, BA, MBA, SPHR

NSI Nursing Solutions, Inc.

President

March 2025

About NSI Nursing Solutions, Inc.

NSI Nursing Solutions, Inc. is a national high-volume nurse recruitment and retention firm. Since 2000, we have successfully recruited U.S. experienced RNs (averaging ~15 years) as your employees, who fit your culture, and do so in an average time-to-fill of ~32 days. At NSI, we provide an industry leading one (1) year guarantee and the best part is that our services are risk-free...since you must hire the nurses before we are paid.

We have helped many clients and can help you! I encourage you to call Michael Colosi, EVP, Business Development, at (717) 575-7817 or macolosi@nsinursingsolutions.com to learn how NSI can satisfy your staffing needs.

Partial Listing of Survey Participants

NSI Nursing Solutions, Inc. appreciates and thanks all participating hospitals and health systems for their energies in completing the survey. Their support and dedication make this annual report possible. We encourage all hospitals to participate in future studies.





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Executive Summary

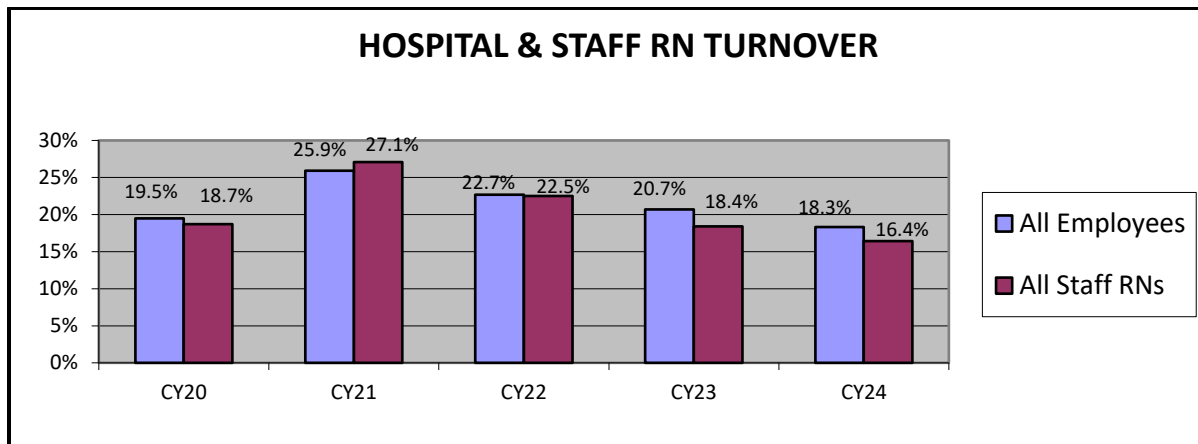
With people living longer, the subsequent rise in chronic conditions and the fact that all Baby Boomers will reach retirement age by 2030, recruiting and retaining quality staff will continue to be a top healthcare issue for years to come. Last year, hospitals increased staff by adding ~304,000 employees, a 5.4% add rate. Of this, ~98,000 RNs were hired which represents a 5.6% RN add rate.

Hospital and RN turnover continue to fall but both remain slightly elevated. Nationally, the hospital turnover rate stands at 18.3%, a 2.4% decrease from CY23, and RN turnover is recorded at 16.4%, a 2.0% decrease. Registered Nurses working in pediatrics, women's health, and surgical services reported the lowest turnover rate, while nurses working in behavior health, step down and emergency services experienced the highest.

The cost of turnover can have a profound impact on diminishing hospital margins and needs to be managed. According to the survey, the average cost of turnover for a bedside RN is \$61,110, an 8.6% increase, resulting in the average hospital losing between \$3.9m – \$5.7m. Each percent change in RN turnover will cost/save the average hospital an additional \$289,000/yr.

The RN vacancy rate also remains elevated at 9.6% nationally. While 0.3% lower than last year, over forty percent (41.8%) reported a vacancy rate of ten percent or more. The RN Recruitment Difficulty Index decreased three (3) days to an average of 83 days. In essence, it takes approximately 3 months to recruit an experienced RN, with step down and med/surg presenting the greatest challenges.

Feeling financial stress, hospitals will continue to focus on controlling the high cost of labor with contract labor being a top strategy to navigate a staffing shortage. The greatest potential to offset margin compression is in the top budget line item (labor expense). Every RN hired saves \$79,100. An NSI contract to replace 20 travel nurses could save your institution \$1,582,000. Contact Michael Colosi at (717) 575-7817 to learn how NSI can improve your bottom line.



Methodology

In January, hospitals were invited to participate in the “NSI National Health Care Retention & RN Staffing Survey”. To maintain consistency and integrity, all facilities were asked to report data from January through December 2024. I am pleased to announce that 450 hospitals from 37 states responded. In total, this survey covers 844,205 healthcare workers, and 218,626 Registered Nurses.

All findings are reported in the aggregate. Since organizations track and report turnover differently, it is important to establish a consistent methodology. To this end, raw data was collected on all employee terminations, whether voluntary or involuntary. Temporary, agency and travel staff were specifically excluded. Also, this survey does not measure transfers or “internal terminations.”

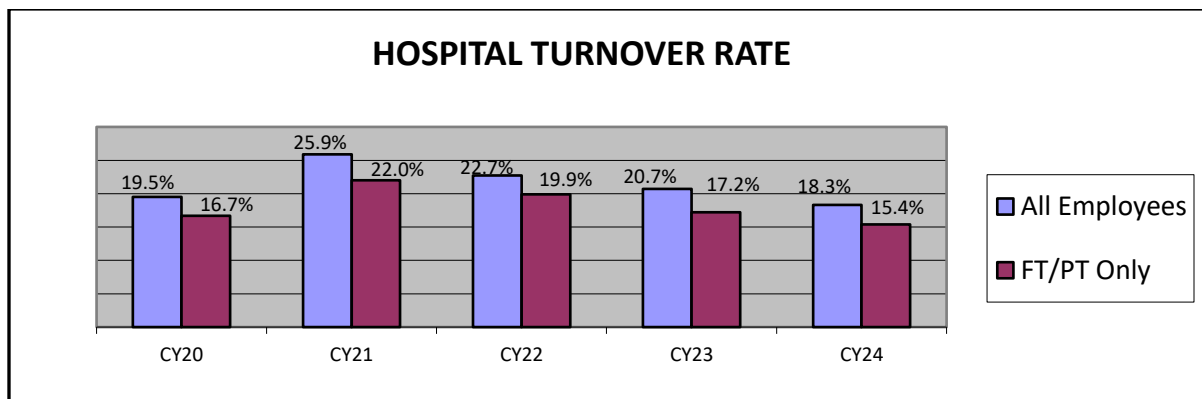
According to the findings, hospitals continue to be split on which employment classifications to include when calculating turnover. A majority (59.8%) include all employment classifications, such as full time, part time, per diem, prn, casual, occasional, etc. when reporting turnover. The remaining hospitals only include full-time and part-time employment classifications. Given this split, respondents provided data on all employees and for full/part-time staff only. For comparative purposes, we will adjust for this distinction and report for both methodologies. **Hospitals who only include FULL and PART-TIME classifications and exclude all other employment classifications in their metrics are directed to utilize the “Full/Part-Time” statistics for benchmarking purposes.**

Hospital Staffing & Turnover

According to NSI's Hospital Executive Level Priorities (H.E.L.P.) survey, recruiting and retaining quality staff remains a top healthcare issue. It is what keeps CEOs, CNOs and CHROs up at night. Since turnover has a direct correlation to staffing and is a leading indicator of future financial pressure, and patient & employee satisfaction, it is easy to understand why healthcare executives are concerned. Compounding this is the growth in nursing care needs as people live longer and the fact that Baby Boomers are retiring at a higher rate; all of which will reach retirement age by 2030.

Last year, 1.03m hospital employees exited their position. During this same period, hospitals were able to hire 1.34m employees. This resulted in 303,750 employees being added to the rolls, a 5.4% add rate. As of December 2024, total hospital employment rose to 5.64m employees (USBLS).

Nationally, the acute care hospital turnover rate decreased 2.4% and currently stands at 18.3%, with the median and mode recorded at 19.6% and 19.2%, respectively. Given varying bed size, hospital turnover ranged from 8.1% to 32.8%. The following graph illustrates annual hospital turnover rates since 2020. Reflecting on the past 5 years, the average hospital turned over 107.1% of its workforce. Hospitals that only measure "Full/Part-Time" separations reported an average turnover rate of 15.4%, with a median of 16.3%.



To further benchmark hospital performance, the following table provides the percentiles for hospital turnover. The top tier hospitals or those in the 90th percentile have a turnover rate of 14.4% and below; 12.0% for those measuring Full/Part-Time only. Conversely, hospitals with a turnover rate of 25.9% and higher are in the bottom decile; 25.4% for those measuring Full/Part-Time only.

METRIC	HOSPITAL TURNOVER	HOSPITAL FULL/PART TIME TURNOVER
90 th Percentile	14.4%	12.0%
75 TH Percentile	16.7%	14.5%
Median	19.6%	16.3%
25 th Percentile	22.9%	19.3%
10 th Percentile	25.9%	25.4%
NATIONAL AVERAGE	18.3%	15.4%

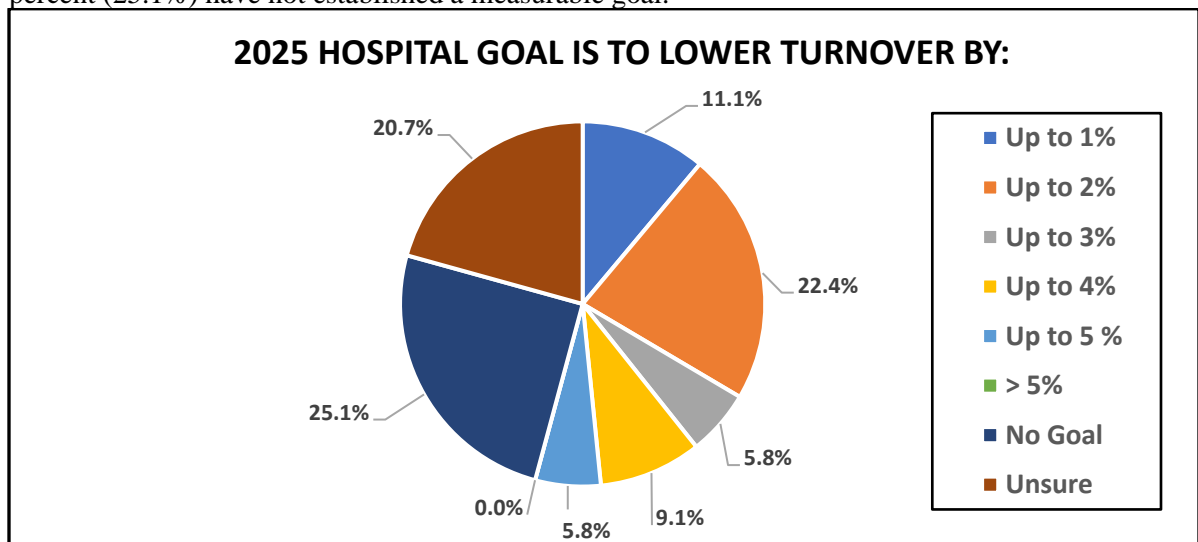
Voluntary terminations accounted for 94.0% of all hospital separations. To further understand turnover, respondents were asked to identify the top five (5) reasons why employees resigned. Participants were asked to select from a list of twenty (20) common reasons. Personal reasons, relocation, career advancement, retirement and education are the primary drivers of turnover. Finishing the list of top ten reasons why employees left include: scheduling conflicts, salary, commute, working conditions, and workload/staffing ratios.

The following table records the average hospital turnover rate by region. Hospitals who only include Full/Part-Time employment classifications in their metrics are directed to the column on the right. The number in parenthesis reflects the year-over-year change.

All regions, with the exception of North-Central, reported a decrease in turnover from the prior year, ranging from +0.4% to -4.3%. While the West experienced the lowest turnover rate, the South-East recorded the greatest decrease. Hospitals in the South-Central and North-Central regions trended higher than the national average. North-East and South-East hospitals were close to the national average.

REGION	HOSPITAL TURNOVER	FULL/PART TIME TURNOVER
North-East – (CT, DC, DE, MA, MD, ME, NH, NJ, NY, PA, RI & VT)	17.8% (-2.6%)	15.4% (-1.8%)
North-Central – (IA, IL, IN, KS, MI, MN, MO, ND, NE, OH, SD, & WI)	19.4% (+0.4%)	15.9% (-0.6%)
South-East – (AL, FL, GA, KY, MS, NC, SC, TN, VA & WV)	17.9% (-4.3%)	15.0% (-3.8%)
South-Central – (AR, LA, OK, & TX)	20.0% (-0.2%)	16.6% (-0.6%)
West – (AK, AZ, CA, CO, HI, ID, MT, NM, NV, OR, UT, WA & WY)	17.1% (-3.0%)	13.9% (-2.9%)
NATIONAL AVERAGE	18.3% (-2.4%)	15.4% (-1.8%)

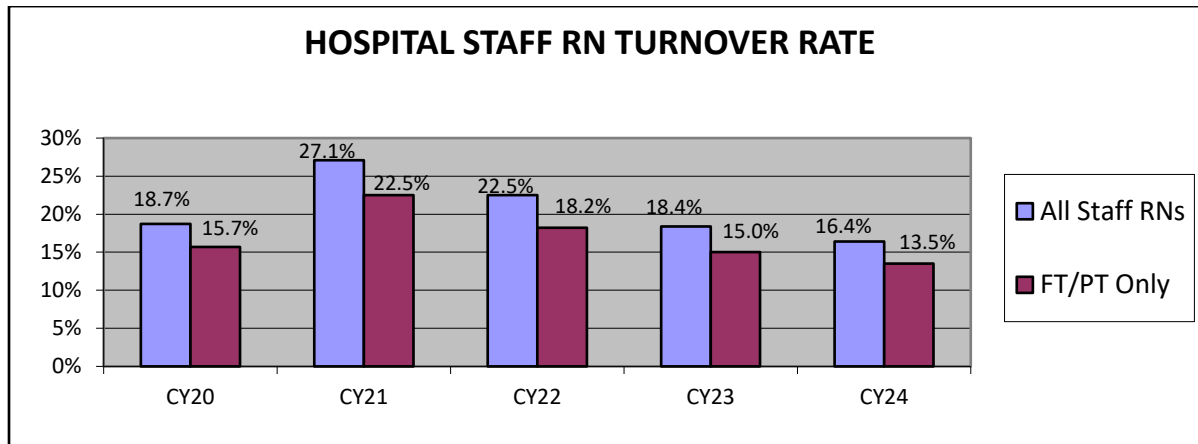
In 2024, hospitals were able to decrease turnover by 2.4%. However, this fell short of the goal which was to reduce turnover by 3.0%. For 2025, hospitals are looking to lower turnover by 2.6%. Establishing a measurable goal needs to be a core component of any retention strategy. At present, twenty-five percent (25.1%) have not established a measurable goal.



Registered Nurse Staffing and Turnover

In 2024, 287,300 staff RNs terminated their position. Acute care hospitals responded by hiring 385,200 RNs, resulting in 97,850 additional RNs added to the rolls. This is a 5.6% add rate and reflects the positive changes to RN salary. Currently, 1.75m RNs are employed in a hospital setting.

During the pandemic, RN turnover jumped to 27.1%. Since then, it continues to subside with 2024 experiencing a 2.0% drop. Currently, the national RN turnover rate is 16.4% with a median of 16.4%. Given varying bed size, RN turnover ranged from 5.2% to 36.4%. Hospitals that only measure “Full/Part-Time” separations reported an average RN turnover rate of 13.5%, a 1.5% decrease, with a median of 14.0%. In the past five years, the average hospital turned over 103.1% of its RN workforce.



To further benchmark performance, the following table provides the percentiles for Staff RN turnover in hospitals. The top tier hospitals or those in the 90th percentile have a turnover rate of 11.5% and below; 8.8% for those measuring Full/Part-Time only. Conversely, hospitals with a turnover rate of 24.3% and higher are in the bottom decile; 21.4% for those measuring Full/Part-Time only.

METRIC	STAFF RN TURNOVER	STAFF RN FULL/PART TIME TURNOVER
90 th Percentile	11.5%	8.8%
75 TH Percentile	13.4%	11.3%
Median	16.4%	14.0%
25 th Percentile	21.1%	17.0%
10 th Percentile	24.3%	21.4%
NATIONAL AVERAGE	16.4%	13.5%

The cost of turnover can have a profound impact on the hospital margin. Although retention is viewed as a key strategic imperative, today, less than half (42.9%) of the hospitals track this cost. The average cost of turnover for a staff RN is \$61,110 with the range averaging \$49,500 to \$72,700. This is an 8.6% annual increase and is reflected in the labor expense budget line to include overtime, increases to salary, critical staffing pay and travel/agency fees. Given turnover, the average acute care hospital lost \$4.75m in 2024, ranging from \$3.85m to \$5.65m. Breaking this down further, each percent change in RN turnover will cost/save the average hospital \$289,000 per year.

The following table records the average staff RN turnover rate by region. Again, hospitals who only include Full/Part-Time employment classifications in their metrics are directed to the column on the right. The number in parenthesis reflects the annual change.

All regions, with the exception of North-Central, reported a decrease in turnover from the prior year, ranging from +0.2% to -3.2%. The North-East region recorded the lowest turnover rate and experienced the greatest year-over-year decrease. The South-Central and South-East regions remained above the national average, while the North-Central and West were below.

REGION	STAFF RN TURNOVER	FULL/PART TIME RN TURNOVER
North-East – (CT, DC, DE, MA, MD, ME, NH, NJ, NY, PA, RI)	14.6% (-3.2%)	11.9% (-2.3%)
North-Central – (IA, IL, IN, KS, MI, MN, MO, ND, NE, OH, SD, & WI)	15.8% (-1.0%)	13.3% (+0.2%)
South-East – (AL, FL, GA, KY, MS, NC, SC, TN, VA & WV)	17.3% (-1.7%)	14.6% (-1.7%)
South-Central – (AR, LA, OK, & TX)	18.0% (-1.5%)	13.7% (-1.5%)
West – (AK, AZ, CA, CO, HI, ID, MT, NM, NV, OR, UT, WA & WY)	16.1% (-1.5%)	13.4% (-0.9%)
NATIONAL AVERAGE	16.4% (-2.0%)	13.5% (-1.5%)

Respondents were also asked to identify the top five (5) reasons why staff RNs voluntarily resigned. Participants were asked to select from a list of twenty (20) common reasons. Personal reasons, career advancement, relocation, retirement and scheduling conflict are at the top of the list. Rounding out the top 10 reasons why RNs voluntarily resigned are: education, commute, salary, workload/staffing ratios, and working conditions.

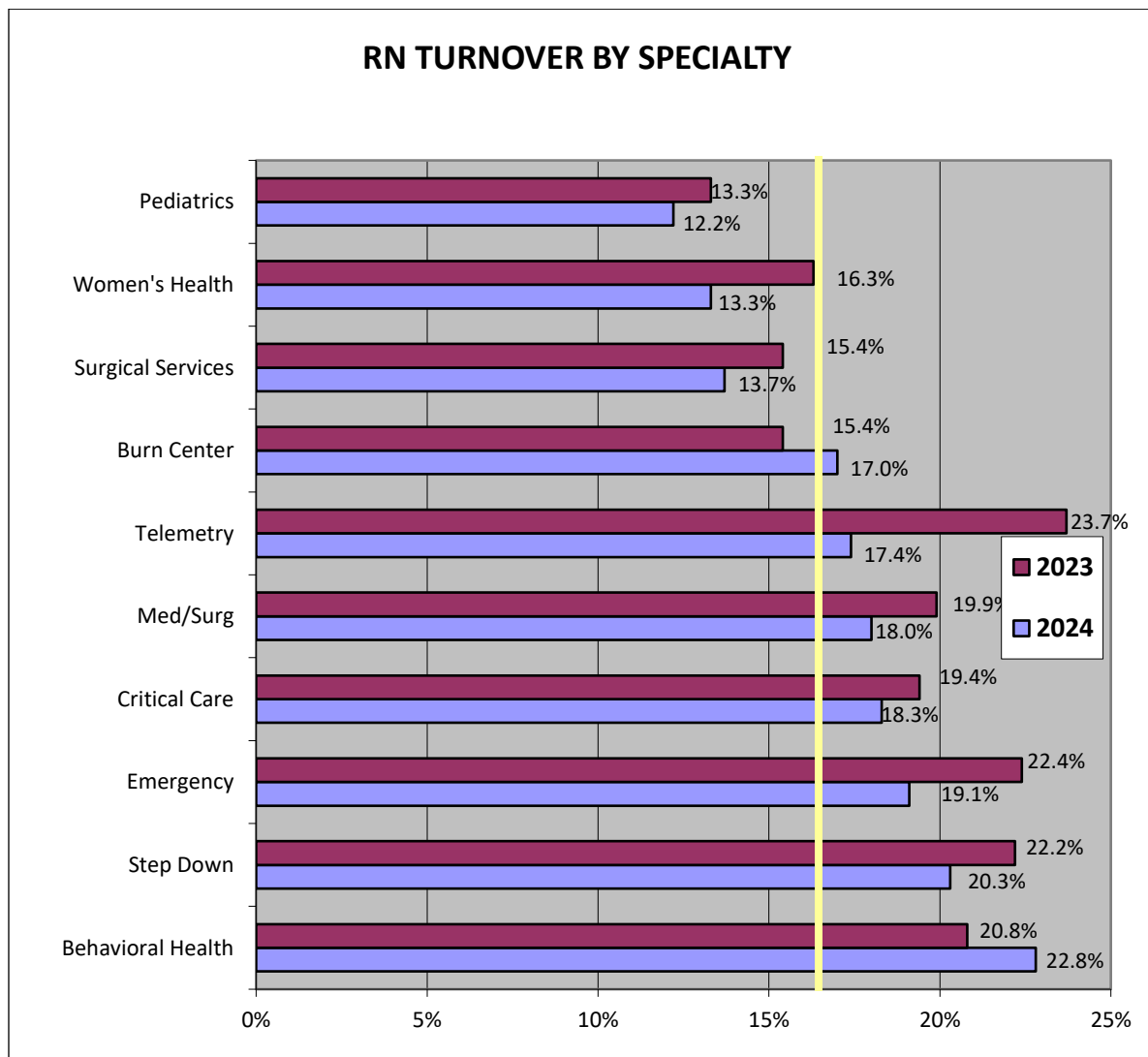
To better understand how hospitals met their RN staffing needs, respondents were asked to identify strategies utilized when faced with a nursing shortage. The top five most common strategies to staff the bedside include: asking RNs to volunteer for overtime, authorizing critical staffing pay, flexing part-time or per diem employees, relying on travel/agency nurses and utilizing the internal staffing pool. Other strategies include enhancing recruitment incentives, hiring more ancillary staff, modifying the nursing care model, mandating overtime, and mandating staff to float.

Hospitals are becoming more strategic when it comes to retention with 59.3% having a formal retention strategy. This is a 2.1% increase from the prior year. The vast majority of hospitals (80.9%) have a strategy to protect newly hired RNs, many of which include a Nurse Residency Program. Using a 5-point Likert scale, hospitals have rated the effectiveness of this program at 3.8. When it comes to the more tenured staff, fifty-four percent (54.2%) of hospitals have developed a strategy to retain this group. According to the NCHWA Nursing Workforce dashboard, approximately thirty-four (34%) of RNs are Baby Boomers. All of whom will reach retirement age by 2030. Hospitals are encouraged to consider a strategy that will protect this knowledge loss.

Registered Nurse Turnover by Specialty

Registered Nurse turnover varies by discipline. The following graph compares the average RN turnover rate by specialty for the past two years. The solid yellow line represents the national turnover rate for RNs (16.4%). Turnover for RNs in behavior health, step down, emergency services, critical care, medical/surgical, telemetry and burn center all exceeded the national average. Looking back over the past five years, RNs in step down, telemetry, and emergency services were the most mobile with a cumulative turnover rate of 120.8%, 117.6% and 112.9%, respectively. Essentially, these departments will turn over their entire RN staff in less than four and a half years. During this same period, RNs in pediatrics and surgical services exited at a much slower rate of 77.2% and 77.1%, respectively.

When we consider the average age of nurses and the anticipated wave of retirements about to break, we need to keep in mind that some specialties will be impacted at a quicker pace. This is particularly true for surgical services, behavioral health and women's health. Managing retention should be a strategic imperative, particularly given the high cost of turnover and the ongoing RN staffing crisis.



Hospital RN Vacancy Rate

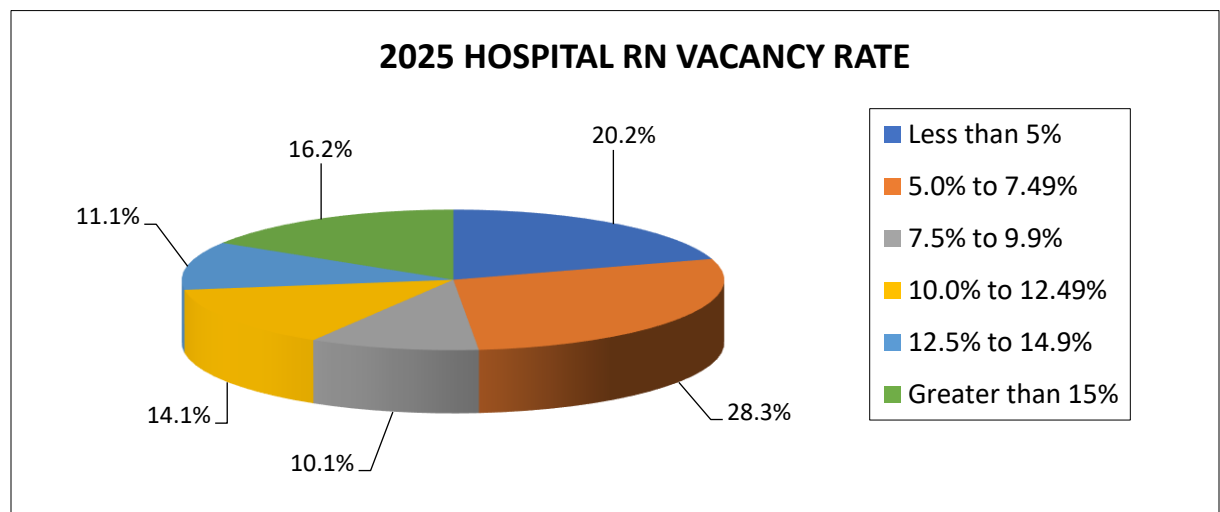
In 2024, hospitals were successful in lowering the RN vacancy rate by 0.3%. Although progress, a significant labor shortage remains. The RN vacancy rate continues to be elevated and currently stands at 9.6%, which equates to hospitals having forty-seven (47) RN vacancies on average. This has a direct impact on quality outcomes, the patient experience and leads to excess labor costs such as overtime, critical staffing pay, salary increases, and travel/agency usage.

A high vacancy rate coupled with a high RN Recruitment Difficulty Index (*see page 11*) is a clear indication that the labor shortage will continue to challenge hospitals. To further illustrate the magnitude of the staffing crisis, over forty percent (41.4%) reported a vacancy rate greater than ten percent. As RN demand increases, as nurses move away from the bedside, and as Baby Boomers reach retirement, expect the vacancy rate to remain critical.

When the labor market tightens, hospitals bridge the gap by authorizing overtime and crisis pay, by increasing travel staff usage, and by flexing their internal staffing pool. All of which are costly strategies, especially when nurse travel rates average \$94/hr and range to \$160/hr. Last year, eighty percent (80%) of hospitals anticipated decreasing RN travelers, yet it remained the most common strategy mentioned when faced with a staffing shortage and meeting patient needs. This disconnect is important in understanding ways to improve the hospital margin.

At NSI Nursing Solutions, Inc., we encourage our clients to minimize excess labor utilization and focus on a strategy that embraces full staffing and builds retention while enhancing ROI. I encourage you to contact Michael Colosi, at (717) 575-7817 or macolosi@nsinursingsolutions.com to learn how NSI can improve your bottom line.

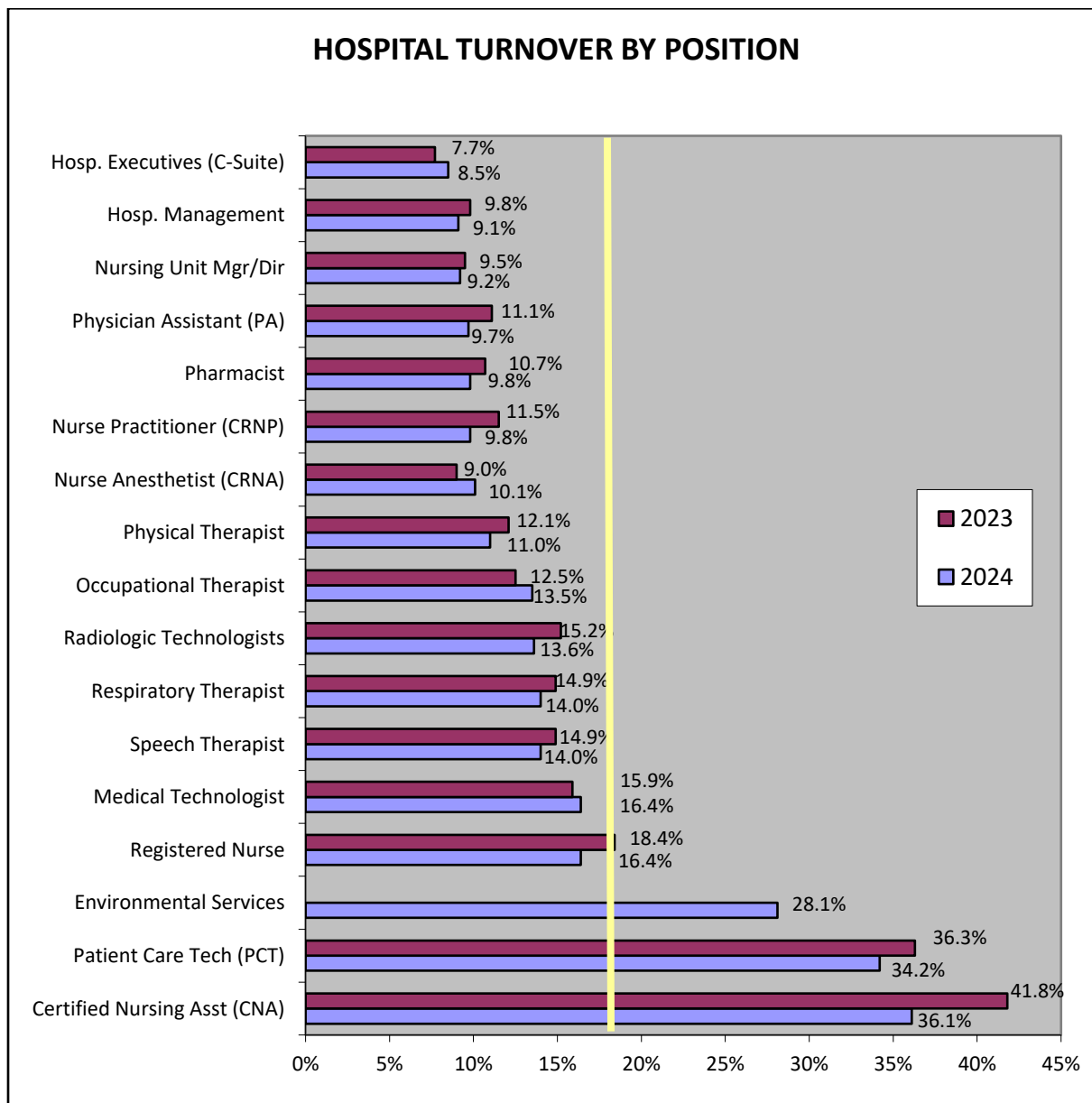
RN VACANCY RATE	2021	2022	2023	2024	2025
Less than 5%	23.9%	6.5%	5.0%	32.1%	20.2%
5.0% to 7.49%	13.8%	3.6%	7.3%	7.8%	28.3%
7.5% to 9.9%	26.6%	8.6%	12.3%	12.3%	10.1%
10.0% to 12.49%	22.9%	12.2%	13.4%	15.1%	14.1%
12.5% to 14.9%	3.7%	7.9%	10.6%	13.4%	11.1%
Greater than 15.0%	9.2%	61.2%	51.4%	19.3%	16.2%
Average	9.0%	17.0%	15.7%	9.9%	9.6%



Hospital Turnover by Position

For the past seven years, all advanced practice and allied health professionals recorded turnover rates below the hospital average. This holds true for 2024. The following chart compares the average turnover rate for various occupations in the acute care setting for the past two years. Environmental Services/Housekeeping was recently added to the survey. The solid yellow line represents the current hospital turnover rate (18.3%).

In 2024, most positions experienced a decrease in turnover. Certified Nursing Assistants and Patient Care Techs recorded the greatest decrease in turnover of -5.7% and -2.1%, respectively. Medical Technologists, Occupational Therapists, Nurse Anesthetists, and the C-Suite experienced an increase in turnover ranging to +1.1%. CNAs and PCTs continue to outpace all other job titles when it comes to turnover and will virtually turn over their entire staff every 3 years. Pharmacy has been the most stable with a five-year cumulative turnover rate under fifty percent (49.5%).



Hospital Turnover by Tenure

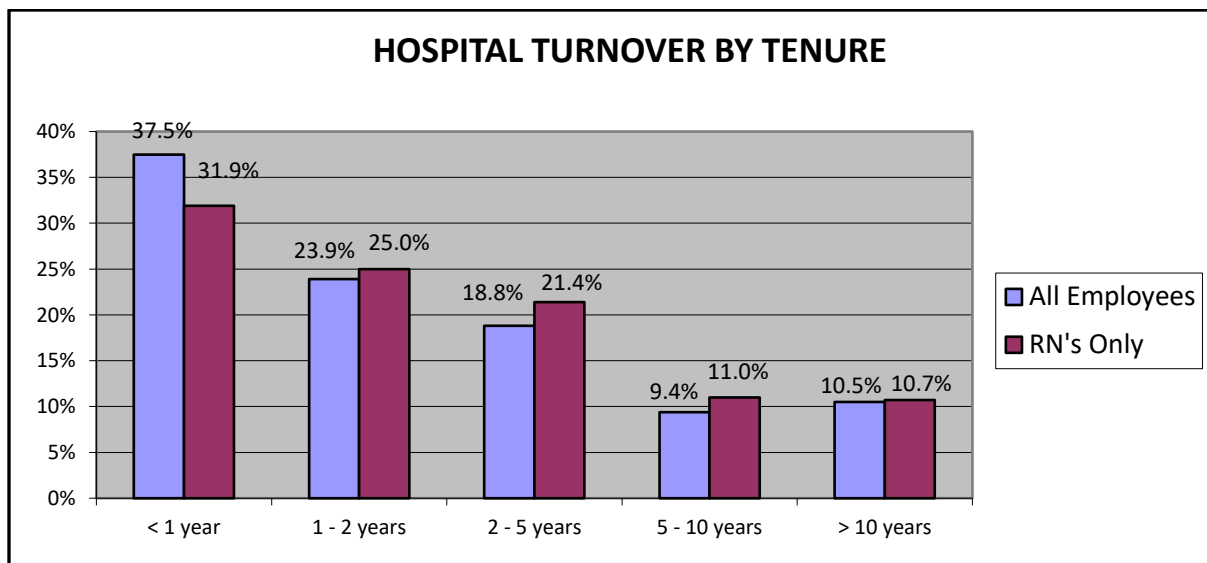
New for this year, participants were asked to report the average years of service (tenure) for all current and active hospital employees. The average tenure of a hospital employee is 5.95 years, ranging to 15.4 years of service. Registered Nurses recorded a similar tenure at 5.95 years and ranging to 16.7 years. These lower than anticipated figures are indicative of the high turnover rates experienced through COVID and the subsequent increases in the hospital workforce.

While the tenure of active hospital employees is reflected above, the following graph illustrates the years of service for all employees and RNs who left during the survey period. As consistent with prior surveys, close to thirty percent (29.9%) of all new hires left within a year. This same group accounted for over a third (37.5%) of all turnovers. As consistent with previous surveys, a majority (61.4%) of the exited employees had less than two years of service, while employees with more than 5 years of tenure experienced a greater level of organizational commitment.

First year turnover continues to outpace all other tenure categories. When looking at the range of those employees who terminated with “less than one year of service”, this group can make up 55.4% of a hospital’s total turnover. When expanding this to include all employees with less than two (2) years of service, the range jumped to 82.3%. Obviously, this is not the typical or average facility. However, a large portion of all separations are caused by employees with less than two years of tenure.

Although not as dramatic, when viewing RNs, a similar trend is noted. Over twenty-two percent (22.3%) of all newly hired RNs left within a year, with first year turnover accounting for a third (31.9%) of all RN separations. The median and mode were recorded at 31.1% and 33.3%, respectively.

A significant opportunity to protect a hospital’s investment in Human Capital and to recapture revenue exists. Operational considerations must address how employment decisions are made and include programs that build relationships, commitment, and confidence early in the employment cycle. When it comes to retaining staff, hospitals focus more strategies on protecting new hires (80.9%) than on more tenured RNs (54.2%).

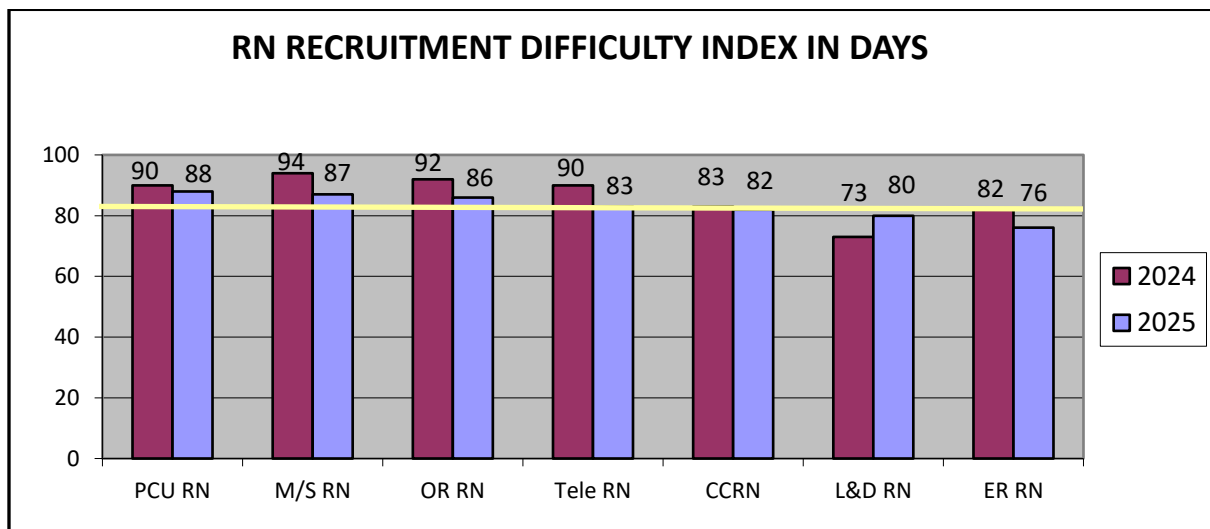


RN Recruitment Difficulty Index

The RN Recruitment Difficulty Index (RDI-RN) gauges the average number of days it takes a hospital to recruit an experienced RN. Participants were asked to identify the range which best describes the time to fill a RN vacancy, given specialty. Although time-to-fill decreased for almost all specialties, it still takes close to three months to hire an experienced RN. The average time to recruit an experienced RN ranged from 62 to 103 days, pending specialty.

The following chart illustrates the average number of days it takes to recruit by specialty. The yellow line is the current RN Recruitment Difficulty Index and represents the average time to fill a vacancy regardless of specialty. Currently, this stands at 83 days, which is three (3) days quicker than the prior year. Hospitals continue to be challenged, which begs the question; is this acceptable or should we think differently? Contracting with a staffing provider can help Talent Acquisition expand the recruitment pipeline and improve time-to-fill. With an average time-to-fill of ~30 days, NSI has the national reach and proven track record to quickly hire experienced Registered Nurses. Contact Michael Colosi at (717) 575-7817 or macolosi@nsinursingsolutions.com to learn how NSI can help.

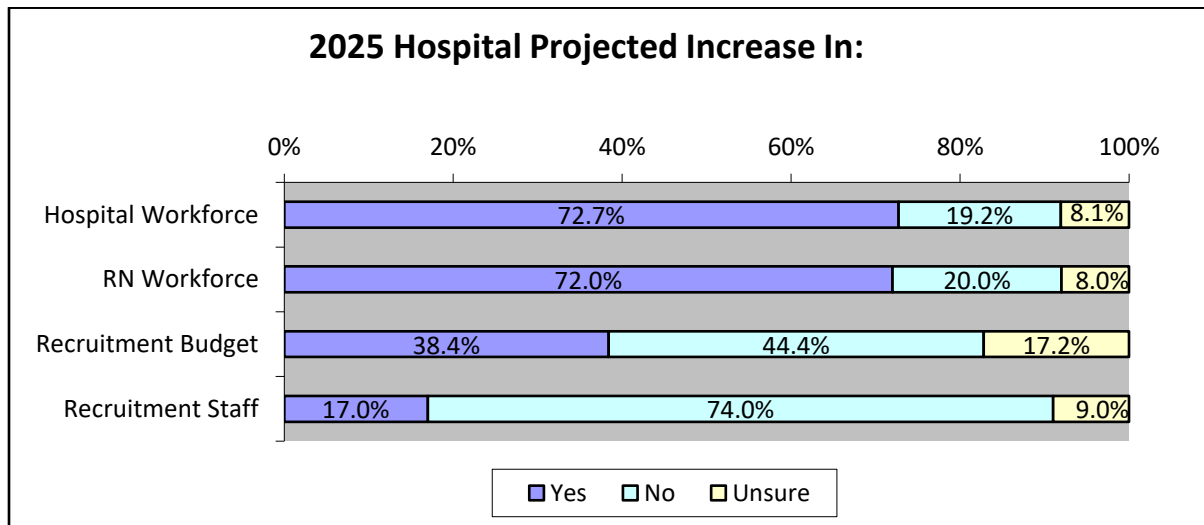
Progressive Care/Step Down RNs are the most difficult to hire. On average, it takes 74 to 103 days to fill an experienced PCU/Step Down RN, with the average being 88 days. Med/Surg and Operating Room nurses also posted above the average. L&D nurses were the only group that experienced an increase in time-to-fill (7 days). ER RNs reported the quickest time-to-fill, but the position was still vacant for two and a half months (76 days).



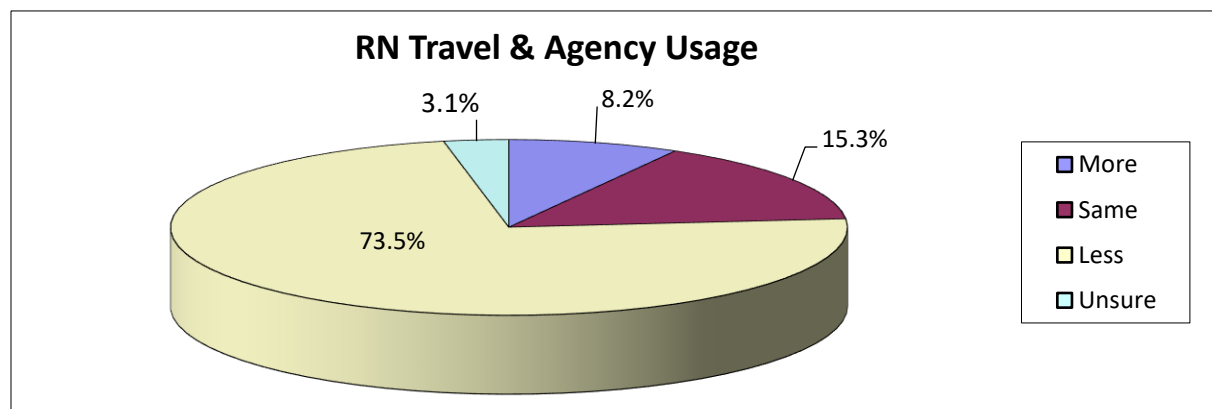
When it comes to recruiting RNs, not all regions perform the same. The South-East outperformed all other regions with an average time-to-fill of 74 days. The North-Central region found it more difficult to recruit with an average RDI-RN above the national average (93 days). The South-Central, North-East and West all took approximately 84 days to hire an experienced RN.

Workforce Projections

Labor demands are forcing hospitals to use costly approaches to staff beds. These include travel nursing, overtime, crisis pay, closing beds, etc... While hospitals expect to grow their workforce, only 38% anticipate increasing the recruitment budget and 17% plan to increase their recruitment staff. Currently, the Human Resources FTE to employee ratio, in an acute care setting, is .79 per 100 employees. The average recruitment staff FTE per 100 employees is .25. These HR metrics decreased by .08 and .03 per 100 employees, respectively. Given the chart below, it is anticipated that both of these metrics will further deteriorate in 2025.



To improve hospital margins, better control of labor costs is needed. Hospitals feel this pressure with 74% indicating a desire to decrease reliance on travel/agency staff. While wanting to decrease this reliance, travel/agency staffing is still a top management choice when faced with a nursing shortage. This dependency is a further drain on financial resources. When comparing the cost difference between employed RNs vs travel RNs, the amount is staggering. To help wean hospitals, NSI is ready to assist. For every 20 travel RNs eliminated, a hospital can save, on average, \$1,580,000. Contact Michael Colosi at (717) 575-7817 or macolosi@nsinursingsolutions.com to learn how NSI Nursing Solutions, Inc can improve your bottom line.



Conclusion

The health care industry continues to show positive signs of recovery with an average hospital margin of 4.9% and an employment growth rate exceeding the average of all other industries. Inflation & rising costs, the aging population, the mandate on quality & safety, the squeeze in reimbursements, the competition for patient volume, the shift in the delivery of care, the shortage of physicians, nurses & allied professionals, and the uncertainty of governmental interference have all stressed the industry.

As a leading indicator of future organizational pressure, hospitals must understand and trend turnover. The value hospitals place in their people will have a direct correlation to their commitment, confidence and engagement. Enhancing culture and building programs to reinforce these values is critical to driving retention. Focus on strategies that enhance culture and eliminate those that do not.

In addition to the nursing care needs of people living longer and the subsequent rise in chronic conditions, there is a need to replace workers, particularly RNs, who retire. By the year 2030, all Baby Boomers will have reached retirement age. Maintaining adequate levels of nursing staff is critical to reducing burnout, patient errors and mortality rates, and is linked to higher job satisfaction.

A quantifiable measure of the severity of a hospital's vacancy rate is contract labor and overtime usage. Management must identify contract labor costs and not view it as an "operating expense", but rather as aggregated within the position control system. Inclusion within the payroll cost-line, will provide greater insight into the actual direct cost of labor.

To strengthen the bottom line, hospitals need to build retention capacity, manage vacancy rates, expand the recruitment pipeline and control labor expenses. Building and retaining a quality workforce is paramount to navigating the staffing paradigm. Let NSI Nursing Solutions Inc. help!

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2025 NSI Quick Reference Guide

Hospital Turnover Statistics	
Hospital Turnover Range	8.1% to 32.8%
Average Hospital Turnover Rate*	18.3%
Average Hospital Turnover Rate (<i>Full and Part Time employees only</i>)*	15.4%
Staff RN Turnover Range	5.2% to 36.4%
Average Staff RN Turnover Rate*	16.4%
Average Staff RN Turnover Rate (<i>Full and Part Time staff RNs only</i>)*	13.5%
1 st Year Employee Turnover Rate	29.9%
1 st Year RN Turnover Rate	22.3%
Cost of Each RN Turnover	\$61,110
Annual Average Hospital Cost of RN Turnover**	\$4.75m
Average Annual Cost/Savings per 1% Change in RN Turnover	\$289,029
Percent of Involuntary Turnover	6.0%
2025 Hospital Retention Goal (<i>To lower turnover by...</i>)	2.6%

*All turnover formulas = ((# of separations/average # of employees)*100)

**Based on the average of the selected range.

Hospital Staffing & Recruitment Metrics	
Average Hospital RN Vacancy Rate**	9.6%
Average RN Time-to-Fill**	83 days
Percent Anticipating to Increase Workforce	72.7%
Percent Anticipating to Increase RN Workforce	72.0%
Percent Anticipating to Increase Recruitment Budget	38.4%
Percent Anticipating to Increase Recruitment Staff	17.0%
HR to Employee Ratio (<i>per 100 employees</i>)***	.79
Recruitment to Employee Ratio (<i>per 100 employees</i>)***	.25
Percent Anticipating to Decrease Travel/Agency Usage	73.5%

***HR ratios = ((# of HR or Recruitment FTEs/Total # of employees)*100)

Staff Nurse vs. Travel Nurse Cost Savings	Hourly / Annually
Average Travel Nurse Fee	\$93.81 / \$195,125
Average RN Pay (<i>includes 26.7% for benefits</i>)	\$55.79 / \$116,035
Cost Difference: Staff Nurse vs. Travel Nurse	\$38.20 / \$79,090
For every 20 Travel RNs eliminated, the average hospital can save	\$1,581,800