Washington's Health Workforce SENTINEL NETWORK

Findings Brief: *Nursing Occupations*

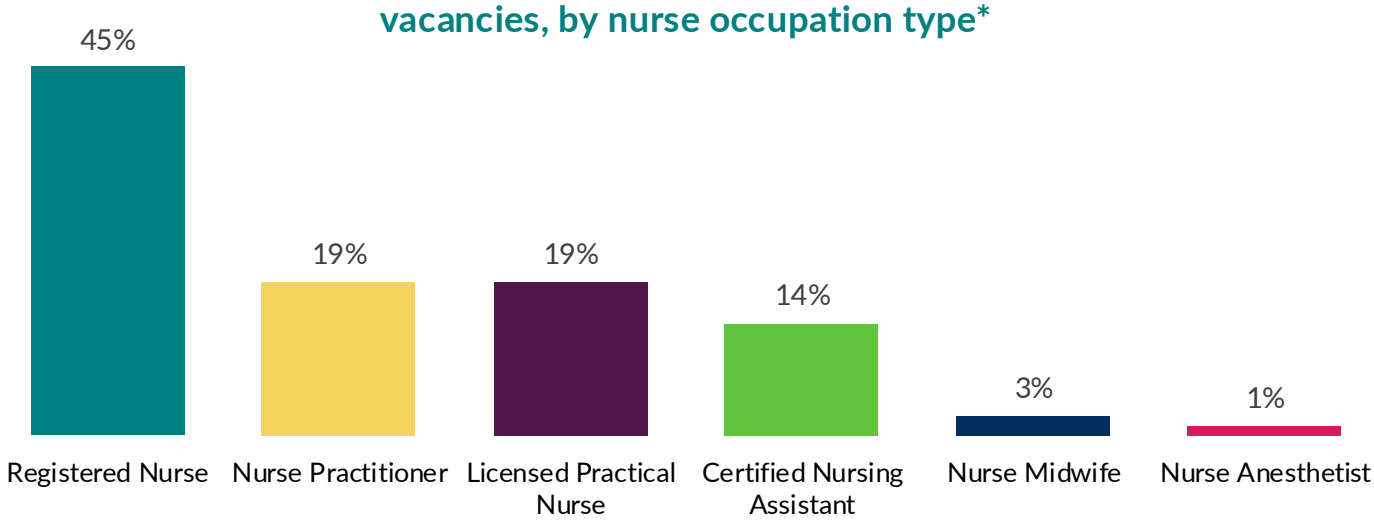
Spring 2026

This brief highlights findings regarding employer demand for **nursing occupations (advanced registered nurse practitioners, registered nurses, licensed practical nurses, and nursing assistants-certified)** reported to the Health Workforce Sentinel Network during **April/May 2026**. More findings are available at wa.sentinelnetwork.org/findings.

Employer Perspectives: Statewide Nursing Workforce Demand

As a total of all occupations reported as having **exceptionally long vacancies**, roughly 19% of all occupations cited were nursing occupations. Of these, 45% were registered nurses (RNs), 19% nurse practitioners (ARNPs) and licensed practical nurses (LPNs), followed by and nursing assistants (CNAs) at 14%.

Percent of responding facilities reporting exceptionally long vacancies, by nurse occupation type*



**Among all respondents reporting at least one nursing occupation vacancy. Percentages represent the share of respondents identifying each occupation as having an exceptionally long vacancy. Respondents could select more than one occupation.*

In **Spring 2026**, nursing occupations were among the **top three** occupations with exceptionally long vacancies as reported by each of the facility types listed below.

- Acute care hospitals (≤ 25 beds)
- Acute care hospitals (> 25 beds)
- Behavioral health agency – WA DOH certified
- Federally qualified health center (FQHC) or community clinic providing care free or on sliding fee scale
- Home health agency
- K-12 schools
- Assisted living facilities
- Nursing homes/skilled nursing facilities
- Public health organizations
- Rural health clinics

Examples from two of these facility types are shown on pages 3 and 4.

Key themes from employers and facilities relating to exceptionally long vacancies for nursing occupations in Spring 2026:

Comments from employers suggest that exceptionally long vacancies among nursing occupations may be attributed to workforce shortages, challenges competing on compensation, and difficulties recruiting to rural locations or less-preferred care settings.

1. **Limited supply of qualified candidates. Examples of responses include:**
   - *[K-12 School, LPN] Lack of applicants. Low annual salary, especially compared to neighboring school districts.*
   - *[Nursing home/skilled nursing facility, LPN] LPNs are the most challenging clinical position for our agency to fill given the limited number of active, licensed LPN candidates in the workforce.*
   - *[Behavioral health agency, ARNP] Psychiatric Nurse Practitioner positions experienced exceptionally long vacancies over the past year. The primary driver is a persistently low supply of qualified candidates combined with very high statewide and national demand for psychiatric providers.*
2. **Compensation and competition from other employers. Examples of responses include:**
   - *[Behavioral health - Other outpatient behavioral health organization, RN] [Our] pay scale cannot compete with hospital settings.*
   - *[Home health agency, RN] Expected salary vs salary available has a large deficit... Our salaries cannot compete due to reimbursement rates we have to balance.*
3. **Rural and practice-setting recruitment challenges. Examples of responses include:**
   - *[Small hospital, RN] We are rural with the nearest cities 40 minutes or 1 hour 15 minutes away. This makes attracting talent difficult.*
   - *[Rural health clinic, ARNP] Cannot find qualified individuals that want to relocate to the area.*
   - *[Assisted living facility, RN] Most RN candidates that we see want to be in either the ED, Acute, or Wound Care. This makes it exceptionally difficult to staff the support we need.*

Key themes from employers and facilities relating to retention and turnover issues for nursing occupations in Spring 2026:

Several themes related to retention and turnover emerged across facilities employing nursing occupations. Employers described challenges retaining and recruiting staff due to competition from other employers offering higher wages or more desirable schedules, shortages of qualified workers in certain roles and geographic areas, and workplace factors such as heavy workloads, inadequate staffing, and burnout.

1. **Compensation and competition from other employers. Examples of responses include:**
   - *[Community health center, RN] Salary limitations - Larger hospitals nearby with higher pay scales. If we could afford to increase pay it would likely help with recruitment and retention.*
   - *[Assisted living facility, Nursing assistant] Pay is the biggest issue, and cost of living in Seattle. Many of our staff move out of the area due to cost of living. Can't offer more money because the company won't let us. We offer free meals while they work, and low staff to resident ratio to entice them to stay.*
2. **Burnout, workload, and challenging working conditions. Examples of responses include:**
   - *[Community health center, ARNP] Staffing challenges and increased administrative burdens required by insurance plans and other regulatory authorities are also common contributing factors.*
   - *[K-12 School, Licensed practical nurse] Low pay. No defined staffing ratios, so high caseload. Little support. Lack of understanding in the system of the work.*
3. **Supply and recruitment challenges. Examples of responses include:**
   - *[Nursing home/skilled nursing facility, LPN] Many LPNs perform the same scope and duties as RNs however are paid significantly less. Additionally, the limited number of available LPN training programs across the state pose a significant threat to the overall sustainability of the LPN workforce. The lack of programs drives the lack of new LPN candidates in the workforce.*
   - *[Rural health clinic, Nurse practitioner] NPs are not as experienced as their resume indicates. Experienced individuals do not want to live in rural areas.*

Example 1 : Community Health Centers (Spring 2026)

Community health centers, including Federally Qualified Health Centers (FQHCs) and free or sliding-fee clinics, employ registered nurses and other nursing staff in primary care settings. The matrices below show the occupations that employers reported as having exceptionally long vacancies and how those rankings changed over time. In community health centers, registered nurses and nurse practitioners were frequently cited as one of the one of the hardest positions to fill. The following comments highlight factors affecting nursing recruitment and retention in these facilities.

Top occupations with exceptionally long vacancies*

Rank	Fall 2021	Spring 2022	Fall 2023	Spring 2024	Spring 2025	Spring 2026
1	Registered nurse	Registered nurse	Registered nurse	Medical assistant	Registered nurse	Physician/ Surgeon
	Medical assistant	Medical assistant		Registered nurse		
				Physician/ Surgeon		
2	Physician/ Surgeon	Physician/ Surgeon	Physician/ Surgeon	Dental assistant	Medical assistant	Medical assistant
	Mental health counselor			Dental hygienist	Physician/Surgeon	Nurse practitioner
						Registered Nurse
3	Dental assistant	Dental assistant	Medical assistant	Multiple occupations cited at same frequency	Dental hygienist	Dental hygienist
	Dental hygienist	Office staff / front desk / scheduler				
	Nurse practitioner					
4	Substance use disorder professional	Dental hygienist	Dental assistant		Office staff / front desk / scheduler	Multiple occupations cited at same frequency
	Social worker (Healthcare)	Mental health counselor				
		Nurse practitioner			Nurse practitioner	
5	Multiple occupations cited at same frequency	Psychologist, clinical and counseling	Dentist			

← Most cited

Note: Includes Federally Qualified Health Centers and Community Clinics providing care free or on a sliding fee scale. Occupations cited by the same number of responses share the same rank number. Findings prior to Fall 2021 not shown due to space. Findings from Fall 2022 and Spring 2023 not shown due to low response numbers.

Examples of reasons for vacancies and turnover for nursing positions at Community Health Centers:

- *[Nurse practitioner] Federal and state loan repayment programs are a beneficial recruiting tool for new graduates but we churn through providers following loan repayment because we cannot compete with salary and benefits and it seems the challenges of our patient population leads to burnout.*
- *[Registered nurse] Salary limitations - Larger hospitals nearby with higher pay scales. If we could afford to increase pay it would likely help with recruitment and retention.*
- *[Nurse practitioner] NPs and PA-C recruiting has been challenging, we've historically hired students out of training programs but they require a relatively long lead time to ramp into providing enough volume of visits to be margin accretive. This is exacerbated by our relatively low HPSA score even though we experience a lack of community access for primary care providers.*

Example 2: Nursing Homes/Skilled Nursing Facilities (Spring 2026)

Nursing homes and skilled nursing facilities are major employers of registered nurses, licensed practical nurses, and nursing assistants. The matrices below show the occupations that employers reported as having exceptionally long vacancies and how those rankings changed over time. In nursing homes/skilled nursing facilities, registered nurses, licensed practical nurses, and nursing assistants were frequently cited as some of the hardest positions to fill. The responses below highlight factors contributing to vacancies and turnover in these settings.

Top occupations with exceptionally long vacancies*

Rank	Spring 2022	Fall 2022	Spring 2023	Fall 2023	Spring 2024	Spring 2025	Spring 2026
1	Registered nurse	Nursing assistant	Registered nurse	Registered nurse	Registered nurse	Registered nurse	Licensed practical nurse
2	Licensed practical nurse	Licensed practical nurse Registered nurse	Licensed practical nurse Nursing assistant	Licensed practical nurse	Licensed practical nurse Nursing assistant	Nursing Assistant	Social worker
3	Nursing assistant	Cook / Food services	Cook / Food services	Nursing assistant	Cook / Food services Environmental services Speech-language therapist	Licensed practical nurse	Cook / Food services Environmental services Registered nurse

← Most cited

Findings prior to Spring 2022 not shown due to space constraints. Occupations cited by the same number of responses share the same rank number.

Examples of reasons for vacancies and turnover for nursing positions at Nursing Homes/Skilled Nursing Facilities:

- *[Nursing assistant] The NAC classification is typically seen as "entry level" however most often has the most physical work within the healthcare setting. They often are paid the lowest, significantly limiting the time candidates occupy the role before either seeking career growth into nursing or leaving the healthcare industry altogether to pursue other industries with higher entry level wages.*
- *[Licensed practical nurse] LPNs are the most challenging clinical position for our agency to fill given the limited number of active, licensed LPN candidates in the workforce. Many LPNs perform the same scope and duties as RNs however are paid significantly less. Additionally, the limited number of available LPN training programs across the state pose a significant threat to the overall sustainability of the LPN workforce. The lack of programs drives the lack of new LPN candidates in the workforce.*

Example 3: Assisted living facilities, K-12 Schools, and Rural Health Clinics (Spring 2026)

Assisted living facilities, K-12 schools, and rural health clinics also employ nurses and reported a range of recruitment and retention challenges. The following examples highlight factors contributing to nursing vacancies and turnover in these settings.

Examples of reasons for vacancies and turnover for nursing positions at these Assisted living facilities, K-12 Schools, and Rural Health Clinics:

- *[K-12 School, RN and LPN] RN & LPN positions are hard to recruit for due to low wages in school setting.*
- *[Assisted living facility, LPN] CNA staffing can at times, seem like a revolving door. Part of this can be the design of our ALF facility which is 4 separate buildings that makes supervision difficulty. But even prior when we had our LTC facility, CNAs were always difficult to retain, however not difficult to find.*
- *[Rural health clinic, Nursing assistant] We opened up a MA-R program to allow CNAs to work in our Clinics because of difficulties finding MAs. This has been somewhat successful, but makes it hard to keep experience and skill level up for the team.*
- *[Rural health clinic, Nursing assistant] CNAs are difficult to retain due to closer workplaces if they live in [our rural area].*

Overarching Questions: Nursing-related Responses

The following questions were posed to all respondents to answer across their organization and facility needs. Here are the responses as they relate to hiring and retaining their nursing workforce.

In the past year, how has your organization's ability to staff your facility/facilities changed?

Respondents reported difficulty finding and retaining RNs, especially in long-term care and rural settings. Other organizations reported improved staffing compared to previous years, but challenges remain.

- *[Nursing home/skilled nursing facility] We still continue to struggle with hiring RN staff as our regulations state that we have to have 16/24 hours of RN coverage. We have more LPN applicants than RN.*
- *[K-12 School] Nursing positions are filled. The challenge we have is finding qualified nursing substitutes to cover absences.*

Has your organization recently taken steps or made plans to take steps to navigate uncertainty or prepare for potential changes in any of the following areas? (Check all that apply)

Respondents described investing in nursing workforce pathways and staffing flexibility, specifically: creating CNA training programs, expanding float/substitute pools, hiring more nurses, and using flexible staffing models to maintain coverage. Respondents also noted that financial pressures limited their ability to recruit and retain nursing staff.

- *[Assisted living facility] [We] started our own CNA programs which has been extremely expensive and time consuming.*
- *[Rural health clinic] We have worked to provide more resources and attract more nurses to help in this development so that the staffing levels rise…*
- *[Nursing home/skilled nursing facility] Our agency is consistently monitoring resident acuity to ensure current staffing levels and overall staffing plans can continue to support the level of acuity needed from the aging resident population. While we can anticipate an increased need, staffing remains a challenge due to state budget reductions, constricted wage ranges, and the reduced growth in the caregiver candidate population.*

Overarching Questions: Nursing-related Responses (*continued*)

Which of the following workforce outreach, career pathway development, or early-career development strategies does your organization support? (Check all that apply)

Respondents described partnerships with nursing programs, clinical placements, apprenticeships, tuition assistance, and internal career ladders from CNA to LPN to RN. Respondents also noted using nursing student clinical rotations, preceptorships, internships, and job shadowing to recruit future nursing employees.

- *[Nursing home/skilled nursing facility] Training Certified Nursing Assistants. Supporting growth from NAC to LPN to RN.*
- *[Assisted living facility] Job shadowing has occurred across all departments but mostly nursing and the therapy department. We partner with [local colleges] to host clinicals every quarter for the RN programs and CNA programs. We also partner with [a university] for their internship program. Our company offers partial tuition reimbursement if you go into a field in healthcare.*
- *[Nursing home/skilled nursing facility] LPN, RN, and nursing prerequisites. Tuition reimbursement and sponsorship programs have graduated nurses that stay with the agency.*

About the Washington Health Workforce Sentinel Network

The Sentinel Network links the healthcare sector with policymakers, workforce planners and educators to identify and respond to changing demand for healthcare workers, with a focus is on identifying newly emerging skills and roles required by employers. The Sentinel Network is an initiative of Washington's Health Workforce Council, conducted collaboratively by Washington's Workforce Board and the University of Washington's Center for Health Workforce Studies. Funding to initiate the Sentinel Network came from the Healthier Washington initiative, with ongoing support from the Washington State Legislature.

Why become a Sentinel? *As a Sentinel, you can*:
--Communicate your organization's workforce needs to inform policy and planning responses.
--Have access to current and actionable information about emerging healthcare workforce needs.
--Compare your organization's experience and emerging workforce demand trends with similar employer groups.

To view an interactive summary of findings and to provide information from your organization:
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