The Effects of Medication Aides/Assistants on Job Losses in Long-term Care Settings: A Non-Experimental Investigation

In July 2009, NCSBN conducted a non-experimental survey to investigate the effects of medication aides/assistants (med aides) on job losses in long-term care settings. Specifically, the purpose of the survey was to determine if nurse aides or licensed practical/vocational nurses (LPN/VNs) were experiencing job losses as a result of med aides being introduced into long-term care facilities. A summary of the results are as follows:

- Of the 43 states that were sent the survey, 30 responded (response rate = 69 percent).
- Of the 30 states that responded, two did not have med aides (i.e., Nevada and Wyoming), and two were waiting for final steps on program approval (i.e., Idaho was deciding on a certification exam and Tennessee was waiting for the Governor’s signature on a bill).
- Of the 26 states currently using med aides:
  - There were 17 states that reported no job losses as a result of med aides being introduced into long-term care settings where either nurse aides or LPN/LVN was working;
  - There were six states that either did not have med aides or did not have them in long-term care settings; and
  - There were three states that did not know if there were job losses as a result of med aides being introduced into long-term care settings because this information was not maintained by the board of nursing.

Download the complete survey results, which include responses by state/jurisdiction and additional comments by state.

It should be noted that no causal conclusions can be drawn from this study. Additionally, it is not known how the 17 states that reported no job losses as a result of med aides being introduced into long-term care settings verified this information. Future studies should more fully investigate the relationship between the utilization of med aides and nurse aide/LPN/VN job losses in long-term care settings. For example, an investigation of staffing levels pre- versus post-med aide introduction could be conducted or an investigation of staffing levels of facilities with versus without med aides could be tracked and compared.

More information regarding med aides will be published as it becomes available. Please send any inquiries regarding this study to nnaap_maceinfo@ncsbn.org.