

# Recruiting and Retention

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# ABOUT DPBH

## MISSION

To protect, promote, and improve the physical and behavioral health and safety of all people in Nevada, equitably and regardless of circumstances, so they can live their safest, longest, healthiest, and happiest life.

## VISION

A Nevada where preventable health and safety issues no longer impact the opportunity for all people to live life in the best possible health.

## PURPOSE

To make everyone's life healthier, happier, longer, and safer.



ALL IN GOOD HEALTH.



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# AGENDA

1. Assembly Bill 269
2. Local Health Authority and County Needs
3. State Human Resources Data
4. Questions



# Assembly Bill 269



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# Assembly Bill 269



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Section 1. Chapter 226 of NRS is hereby amended by adding thereto a new section to read as follows:

“Public health professional” means:

1. A person who is employed full-time or part-time as:
  - (a) The Chief Medical Officer appointed pursuant to NRS 439.085;
  - (b) A county health officer appointed pursuant to NRS 439.290; or
  - (c) A district health officer appointed pursuant to NRS 439.368 or 439.400; or
2. A person who is employed by the Division of Public and Behavioral Health of the Department of Health and Human Services or a local board of health in a position designated by the regulations adopted pursuant to paragraph (e) of subsection 2 of NRS 226.462

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# Assembly Bill 269 continued



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AB269 adds to NRS 226.462: 2. The State Treasurer:

Shall, based on the recommendations made by the State Board of Health pursuant to subsection 5 of NRS 439.200, designate positions for which the Division of Public and Behavioral Health of the Department of Health and Human Services or a local board of health experiences substantial difficulty in recruitment and retention.



# Assembly Bill 269 continued

Amends NRS 439.200

**The State Board of Health shall make recommendations to the State**

**Treasurer** regarding the designation of positions for the regulations required to be adopted pursuant to paragraph (e) of subsection 2 of NRS 226.462. In determining whether to designate a position, the Board shall make findings regarding:

- (a) The history of the rate of turnover or length of vacancy for the position;
- (b) The difficulty in filling the position due to special circumstances, including, without limitation, special educational or experience requirements for the position; and
- (c) The history and success of the efforts to recruit for the position, including, without limitation, advertising, recruitment outside of this State and all other efforts made.



# Local Health Authority and County Needs



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## Difficult Positions to Recruit and Retain

Top three positions listed:

1. Environmental Health Positions
2. Data Analysts, Statisticians, Informaticians
3. RN/APRN\*

Other positions

1. Laboratory Scientists (Various Positions)
2. Public Health Preparedness Planners
3. Public Health Communications
4. Administration/Health Program

\*Currently included in NRS 226.460

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# Notable LHA Comments



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## NNPH:

Specific public health roles that are consistently hard to fill - Nursing positions (APRN and PHN) have been consistently hard to fill. This is largely due to compensation. Korn Ferry has been of marginal benefit as salaries for nursing remain well below what hospital/health care systems are offering in the community. Statisticians and Informaticians are harder to fill as well. Barriers include pay scales as private industry has more opportunities that can pay higher.

Strategies you've tried—successful or not—that may inform statewide efforts - In the past, we had several nursing staff inquire about loan repayment and were told they did not qualify because we are not "serving certain underserved communities". Essentially, we were not an FQHC so nursing staff did not qualify. Would nursing now be eligible since these are consistently hard to fill positions?

## SNHD:

### Consistently Hard-to-Fill Positions:

Public Health Informatics Scientist; Health Managers; Bioinformatics; Senior Scientist; Epidemiologists; Chief Medical Officer; Staff Physicians; Nurses; Directors; Laboratory Director, Microbiologists, Laboratory Scientists and other lab positions; Biostatisticians/Data Analysts; Health Educators; Disease Intervention and Investigation Specialist; Community Health Workers; Environmental Health Specialists; Public Health Accreditation Coordinator, Public Health Communications Specialist.



# Notable County / City Comments

Lincoln County after polling the CEO of their local hospital:

Specific public health roles that are consistently hard to fill: Laboratory, nursing, physical therapy, social workers.

Retention challenges, including compensation, workload, or geographic barriers. Loan repayment has allowed our facility to retain key personnel. We currently have 5 key employees receiving this benefit and all are committed to stay because of this. It is essential to retention and consistency.

Whether any of the newly eligible provider types under AB269 (public health professionals) are relevant to your district's needs: The only provider type listed that would benefit us on the new list is social work. The consideration of physical and occupational therapists should be strongly considered.

Strategies you've tried—successful or not—that may inform statewide efforts. Providing a partial down payment for a home, providing a rental until they can buy or build. Incentives for continuing education.

NACO:

We also don't have many epidemiologists in the rural communities. This is a barrier to decentralization.



# State Human Resources Data



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# UNR Data

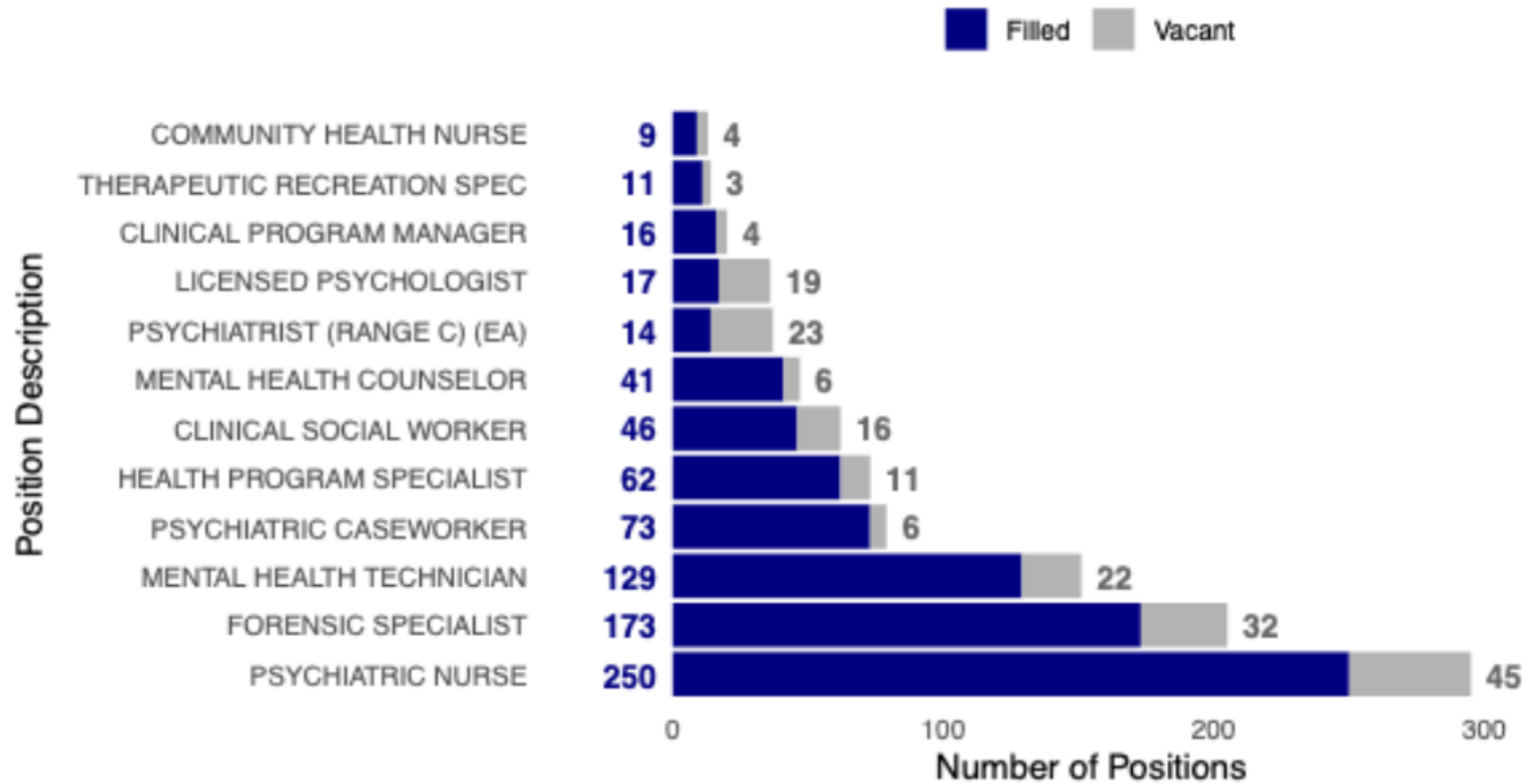


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The University of Nevada, Reno analyzed DPBH Human Resources Data Warehouse deidentified data from October 2, 2025, as part of a DPBH and UNR Practicum Collaboration. Their analysis included:

- Filled vs Vacant Positions by Count
- Filled vs Vacant Positions by Percentage
- Reasons for Leaving Grouping Key
- Reasons for Leaving Position

## Filled vs Vacant Positions by Count



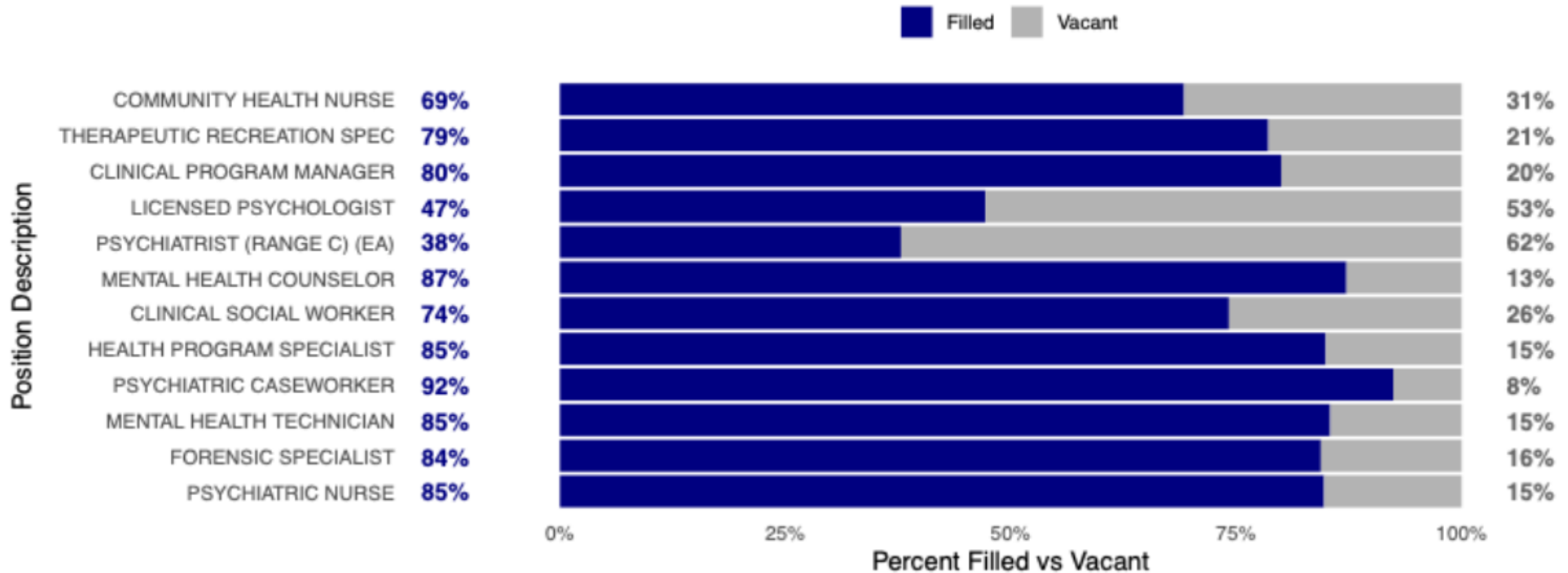
**Figure 1**

Filled and vacant positions for health specific jobs by count.





## Filled vs Vacant Positions by Percentage



**Figure 2**

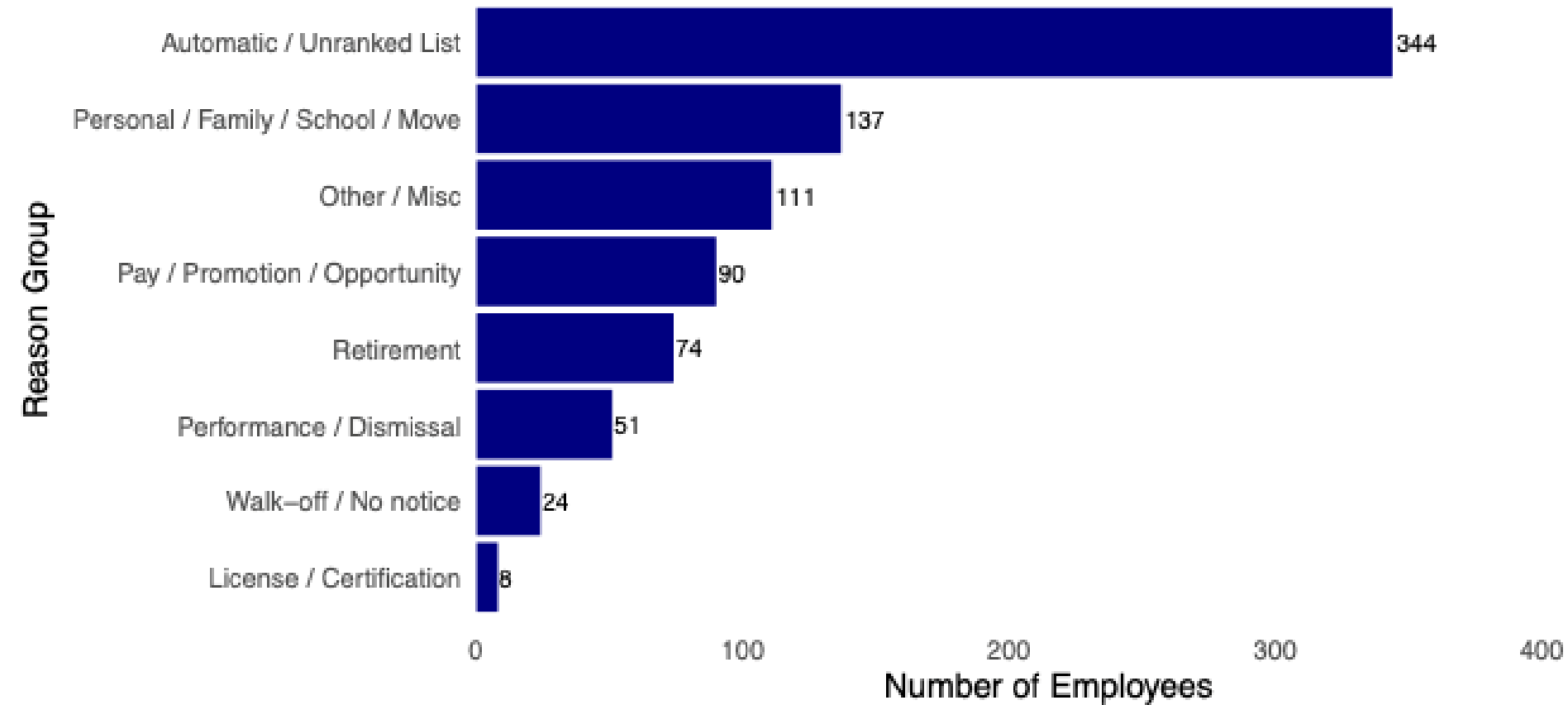
Filled and vacant positions for health specific jobs by percentage.



## Reason for Leaving Groupings Key

<u>REASON GROUP</u>	<u>PART REASON</u>
Retirement	Retirement, Automatic Retirement, Early Retirement
Pay / Promotion / Opportunity	Left for Better Paying Job, Comparable Reassignment, Promotion
Personal / Family / School / Move	Personal Reasons, Moving, Family Obligation, Return to School
Performance / Dismissal	Dismissed During Probation, Unsatisfactory Work, Performance Issues
Walk-off / No notice	Walk-off, No Reason Given, Less Than Two Week Notice
License / Certification	License / Certification Required
Automatic / Unranked List	Automatic / Unranked List
Other / Miscellaneous / NA	Unmatched / Miscellaneous reasons

## Reason for Leaving Position



**Figure 4**

Grouped reason for leaving employment by count (lateral moves excluded).







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# Turnover Reasons

- Dismissed during probation
- Dismissed after probation
- Enter private business venture
- Family obligation
- Lack of advancement opportunities
- Left for better paying job – private
- Less than 2 weeks given
- Moving for personal reasons
- NAC 284.611 Separation/Retire
- Personal reason/no move
- Retirement
- Unsatisfactory work conditions
- Left for better paying job – public
- Walk-off job, no reason

# Turnover



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Overall	Average Time in Position of Staff that have left (years)*	Filled Positions (out of positions authorized)	Percentage of positions filled
Senior Psychiatrist	.35	14/37	38%
Licensed Psychologist	7.2	16/31	52%
Clinical Social Worker	3.1	Level 2: 37/50 Level 3: 9/11	74% 82%
Clinical Program Manager	16.1	12/16	75%
Community Health Nurse	2.7	7/9	78%
Health Program Specialist	4.6	44/55	80%
Psychiatric Nurse	7.5	203/243	84%
Mental Health Counselor	5.5	Level 2: 33/39 Level 3: 7/8	85% 88%
Mental Health Technician	3.3	117/136	86%

\*Average Time in Position of Staff that have left is per series

Data pulled from DPBH Human Resources  
Data Warehouse 11.14.2025

Questions

QUESTIONS?



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# CONTACT INFORMATION

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# ACRONYMS

AB: Assembly Bill

APRN: Advanced Practice Registered Nurse

CEO: Chief Executive Officer

FQHC: Federally Qualified Health Center

HR: Human Resources

LHA: Local Health Authority

NACO: Nevada Association of Counties

NNPH: Northern Nevada Public Health

NRS: Nevada Revised Statutes

PHN: Public Health Nurse

RN: Registered Nurse

SNHD: Southern Nevada Health District





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