Feasibility Research Study: Retention of Nurses in the U.S. Virgin Islands

Introduction

This feasibility research study explores the ongoing challenges and potential strategies for improving the retention of nurses in the U.S. Virgin Islands (USVI). It highlights current system constraints, policy barriers, and professional dissatisfaction among the nursing workforce that contribute to high turnover and low retention rates. The goal is to provide evidence-based recommendations to strengthen long-term nurse retention and workforce stability across the territory.

Legal and Regulatory Background

The practice of nursing in the USVI is regulated by the Virgin Islands Board of Nurse Licensure (VIBNL) under Title 27, Chapter 1 of the Virgin Islands Code. Although the USVI is a member of the Nurse Licensure Compact (NLC), the implementation of the Compact has been delayed due to unresolved legislative and technological barriers, which limits the mobility of nurses and discourages temporary or traveling nurses from practicing in the territory.

Complications and Longstanding Issues

- Limited housing, cost of living, and relocation support remain barriers for incoming nurses.
- The absence of fully functional Compact License participation hampers recruitment from other jurisdictions.
- Nurses report burnout due to understaffing, lack of administrative support, and high patient loads.
- Delayed salary increases, lack of career development, and inconsistent scheduling affect job satisfaction.
- Prolonged vacancies in specialty areas (e.g., ER, ICU, psych, maternal health) weaken overall healthcare delivery.

Retention Data and Trends

According to the U.S. Bureau of Labor Statistics (2024), the average turnover rate for registered nurses in the United States is approximately 18.2%. In contrast, anecdotal reports from local facilities in the USVI indicate rates exceeding 25–30%, particularly among travel nurses who do not transition to permanent roles. The lack of structured orientation and professional support contributes to early exits.

Compact Licensure Delays

Although the USVI has legally joined the NLC, nurses licensed in other Compact states are not currently able to practice in the territory using their multi-state license. This is due to incomplete integration of Nursys systems and Board technology platforms, as well as pending final regulatory implementation. As a result, the USVI loses competitive advantage to mainland states actively recruiting with seamless multi-state mobility.

Improving Nurse Retention: Detailed Strategies

• Finalize implementation of Compact Licensure and ensure full Nursys integration:

By finalizing the implementation of the NLC and integrating the Nursys verification system, the USVI can enable multi-state practice for nurses, reduce bureaucratic delays, and attract more professionals from other jurisdictions. Compact status improves recruitment, enhances continuity of care, and reduces staffing shortages during public health emergencies.

• Increase retention incentives, such as housing stipends, relocation bonuses, and loan forgiveness:

Providing competitive financial incentives is essential for retaining skilled nurses. The high cost of living in the USVI, combined with limited housing availability, makes it difficult to attract and keep nurses. Targeted support through housing stipends, relocation packages, and student loan forgiveness can enhance retention, especially among early-career and mid-career professionals.

• Develop clear professional development pathways and continuing education reimbursement:

Nurses value growth opportunities and continuing education. Offering structured advancement paths (e.g., certifications, degree progression) and covering education costs incentivizes retention. This investment not only promotes career longevity but also ensures a higher quality of care through ongoing professional development.

• Establish a structured mentorship and onboarding program for new hires:

New nurses often leave their roles within the first year due to poor orientation and lack of support. Implementing a formal mentorship program with seasoned professionals can bridge this gap, build confidence, and improve nurse satisfaction and retention rates.

• Strengthen local nursing education pipelines and fast-track transitions from LPN to RN roles:

A sustainable workforce requires investment in local talent. By supporting LPN-to-RN bridge programs and working with local educational institutions, the USVI can build a

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homegrown nursing workforce less likely to leave the territory. Local nurses are more likely to remain committed to the community and contribute to long-term system stability.

Conclusion

Improving nurse retention in the U.S. Virgin Islands requires a multipronged approach that addresses compensation, licensing mobility, workload, and career growth. Without urgent action, ongoing workforce shortages will continue to compromise healthcare delivery in both acute and long-term care settings.

References

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