



# Nursing Pool Survey

## Section 1: Nursing Pool Information

- Nursing Pool Name
- Nursing Pool Registration Number

## Section 2: Corporate Structure

- Please select the Corporate Structure:
  - Federal Government Company
  - Limited Liability Company
  - Limited Liability Partnership
  - Limited Partnership
  - Municipality (City)
  - Municipality (County)
  - N/A
- Please select the Non-Profit Corporate Structure:
  - Partnership
  - Sole Proprietor
  - State Government Agency
  - Tribal Government Agency
  - N/A

## Section 3: Owner Name and Screening Questions

- Owner Name
- Did the nursing pool provide, procure, or refer any health care or long-term care personnel listed below for temporary employment in the state of Washington during the period July 1, 2024-June 30, 2025?
  - Yes
  - No
- Did the nursing pool provide, procure, or refer any of the above personnel in Washington facilities listed below during the period July 1, 2024-June 30, 2025? (hospitals, nursing homes, assisted living facilities, enhanced services facilities or adult family homes)

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- Yes
- No
- If you **only** referred personnel, did you also procure or provide healthcare personnel?
  - Yes
  - No

## Section 4: County Information

The purpose of this section is to determine the average **hourly** charge and wage per profession in each county. Only select counties in which you have placed required health care or long-term care personnel in the required facility types. (18.52C RCW)

To complete this section:

- Select county(s), at the bottom of the page select the link for the county(s) for which you are inputting data.
- The county link will bring up a new tab in your browser, complete the county survey within that tab and submit.
- Once you submit you will need to return to the original survey browser where the counties are listed and repeat the process for additional counties if necessary.
- Once all counties are completed select submit on this page.
- Please remember to submit all county surveys and this survey.

Please select the county(s) in which you have placed required health care or long-term care personnel in the required facility types. Please select all that apply.

### Placement Distance

What is the total number of placements in Washington, including all required temporary health care and long-term care personnel? This includes health care and long-term care personnel in required facilities.

How many personnel placements were made within 50 miles of the personnel's residence as identified in tax documents on file? Include any personnel who live within 50 miles of the facility worked in.

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How many personnel placements were made within 25 miles of the personnel's residence as identified in tax documents on file? This includes the personnel reported within 50 miles in the previous question.

**Professions Charges, Wages, and Labor Related Costs**

- Which professions did you place in? (Select all that apply)
  - Certified cardiovascular invasive specialist
  - Long-term Care Personnel
  - Nursing Assistant Certified
  - Registered Diagnostic Radiologic Technologist
  - Registered Nurse or Licensed Practical Nurse
  - Respiratory Care Practitioner
  - Surgical Technologist
- Which facilities did you place practitioners in?
  - Adult Family Homes
  - Assisted Living Facilities
  - Enhanced Services Facilities
  - Hospitals
  - Nursing Homes

Question 1 of 3: What is the average hourly amount charged for this profession in this facility in this county?

Question 2 of 3: What is the average hourly amount paid to this profession for this facility type in this county?

Question 3 of 3: What is the average hourly amount of labor-related costs for this profession paid by the nursing pool such as payroll taxes, workers compensation insurance, professional liability coverage, credentialing, and other employee-related costs that are paid for this profession in this county?

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