

# Getting and Keeping a Strong and Resilient Health Workforce

## “It Takes a Village”

---

**April 25, 2024**

**WWAMI GME Summit**

**Anchorage, Alaska**

Sue Skillman, Senior Deputy Director

Center for Health Workforce Studies

University of Washington



# University of Washington Center for Health Workforce Studies

Dept. of Family Medicine, School of Medicine



## OUR MISSION

The UW CHWS elevates the importance of the workers who comprise the health workforce in policy discussions and decisions. To accomplish its mission, the UW CHWS:

- conducts research to inform health workforce planning and policy;
- provides consultation to local, state, regional and national policy makers on health workforce issues;
- and develops and refines analytical methods to support health workforce planning.

Bianca Frogner, PhD, Professor, Director

Susan Skillman, MS, Research Scientist, Senior Deputy Director - CHWS, Deputy Director, HWRC Allied Health

Davis Patterson, PhD, Research Associate Professor, Director, WWAMI Rural Health Research Center, Deputy Director, HWRC Health Equity

Research Scientist Team:

Paula Kett, PhD, MPH, RN

Ben Stubbs, MPH

Samantha Pollack, MHS

Grace Guenther, MPA

Holly Andrilla, MS

Ben Dunlap, MPH

Arati Dahal, PhD

Natalia Oster, PhD, MPH

Shahida Shahrir, PhD, MPH

# Not New News – Healthcare Workforce Demand is High

---

## The US is suffering a healthcare worker shortage. Experts fear it will only get worse.

An aging population and healthcare workforce are contributing to the shortage.

*By Alejandra O'Connell-Domenech | Sep. 28, 2023*

From: *The Hill* 9/28/23

### Story at a glance

---

- The United States is currently in the midst of a healthcare worker shortage which experts project will only get worse.
- 
- By the 2030s, the country could be faced with a shortage of nearly 200,000 nurses and 124,000 physicians.
- 
- Experts say that an aging population, an aging healthcare workforce and workers leaving due to burnout are driving the shortage.
-

# The Healthcare Workforce is Stressed

CDC Quality of Worklife Survey:

*Health Workers Face a Mental Health Crisis: Workers Report Harassment, Burnout, and Poor Mental Health; Supportive Workplaces Can Help*

2x

More than double the number of health workers reported harassment at work in 2022 than in 2018.

46%

Nearly half of health workers reported often feeling burned out in 2022, up from 32% in 2018.

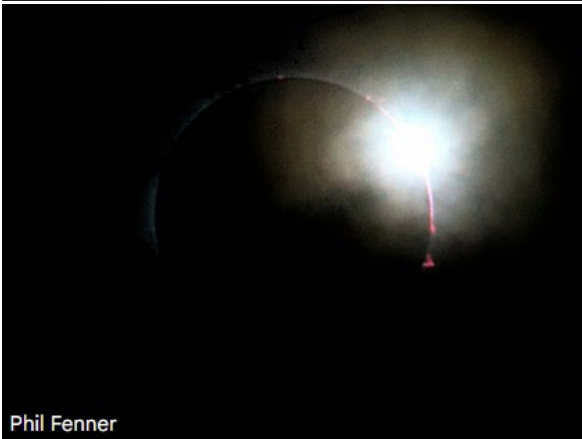
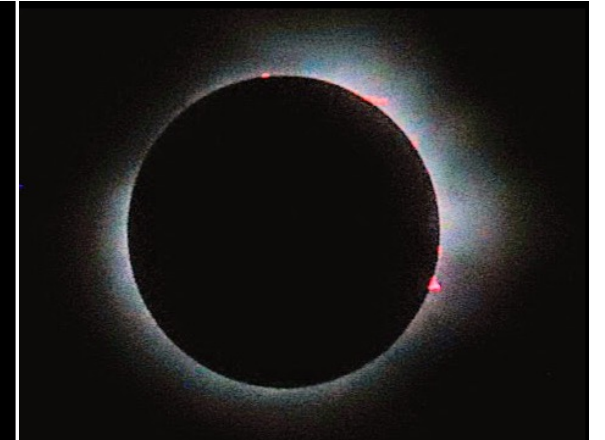
44%

Nearly half of health workers intended to look for a new job in 2022, up from 33% in 2018.

Nigam JA, Barker RM, Cunningham TR, Swanson NG, Chosewood LC. ***Vital Signs: Health Worker-Perceived Working Conditions and Symptoms of Poor Mental Health — Quality of Worklife Survey, United States, 2018–2022.*** MMWR Morb Mortal Wkly Rep 2023;72:1197–1205. DOI: <http://dx.doi.org/10.15585/mmwr.mm7244e1>

# We have control over some things, but not others

---



Mazatlan, MX April 8, 2024

# Solving workforce demand challenges

*Having a stable workforce team improves a practice's ability to:*

- **Participate in clinical training**
  - *GME, internships, clinical rotations, residencies across occupations*
  - *Promote culture of learning, in turn improving workforce satisfaction*
  - *Recruit new workers*
- **Adopt innovations**
  - *that may improve efficiency and satisfaction*
- **Respond to disruptions/emergencies**



# Solving workforce demand challenges

*Requires a combination of approaches such as:*

- **Increasing “production”**

*More education and training*

- **Improving recruitment and reducing turnover**

*Keep experienced workers in jobs longer*

- **Addressing community/environmental barriers**

- **Reducing administrative/paperwork burdens**

- **Maintaining financial stability**

*e.g., Increase reimbursement, reduce costs*

# Solving workforce demand challenges

*Requires a combination of approaches such as:*

- Increasing “production”

*More education and training*

- Improving recruitment and reducing turnover

*Keep experienced workers in jobs longer*

- Addressing community/environmental barriers

- Reducing administrative/paperwork burdens

- Maintaining financial stability

*e.g., Increase reimbursement, reduce costs*



# Research findings: from various sources including the WA Health Workforce Sentinel Network

Washington's Health Workforce  
**SENTINEL NETWORK**

[wa.sentinelnetwork.org](http://wa.sentinelnetwork.org)

## Objectives:

- identify emerging signals of changes in health workforce demand
- rapidly disseminate findings to education, training and policy partners who can take action based on findings

## Process:

- employers provide data about health workforce demand changes twice yearly
- findings are disseminated on a Web dashboard and findings briefs, all publicly available

## The Health Workforce Sentinel Network is:

- an initiative of the WA Health Workforce Council
- a collaboration: UW CHWS and WA Workforce Board
- funded by the Washington Legislature



# SN Findings Examples: Occupations with Exceptionally Long Vacancies

Small Hospitals  
(<25 beds)

Rural  
Health  
Clinics

Top occupations with exceptionally long vacancies*							
Rank	Fall 2020	Spring 2021	Fall 2021	Spring 2022	Fall 2022	Spring 2023	Fall 2023
1	Registered nurse	Registered nurse	Registered nurse	Registered nurse	Registered nurse	Registered nurse	Registered nurse
2	Medical assistant	Nursing assistant	Medical assistant	Nursing assistant	Cook / Food services	Medical / Clinical lab technologist	Environmental Services
	Nursing assistant		Nursing assistant				
3	Multiple occupations cited at same frequency	Medical assistant Medical / Clinical lab technologist	Physician / Surgeon	Cook / Food services	Nursing assistant	Medical / Clinical lab technician Nursing assistant	Multiple occupations cited at same frequency**

Findings prior to Fall 2019 not shown due to space constraints. Spring 2020 not shown due to low response numbers. Occupations cited by the same number of responses share the same rank number.

\*\*Medical assistant, medical/clinical laboratory technologist, nursing assistant, physical therapist, physician/surgeon

↑ Most cited

## Community Health Centers/FQHCs

Top occupations with exceptionally long vacancies*									
Rank	Spring 2019	Fall 2019	*	Fall 2020	Spring 2021	Fall 2021	Spring 2022	*	Fall 2023
1	Medical assistant	Physician/ Surgeon		Registered nurse	Medical assistant	Registered nurse Medical assistant	Registered nurse Medical assistant		Registered nurse
2	Physician/ Surgeon Dental assistant Registered nurse	Dental assistant Medical assistant Nurse practitioner		Mental health counselor	Registered nurse Physician/ Surgeon	Physician/ Surgeon Mental health counselor	Physician/ Surgeon		Physician/ Surgeon
3	Mental health counselor	Mental health counselor Physician Assistant		Physician/ Surgeon	Multiple occupations cited at same frequency	Dental assistant Dental hygienist Nurse practitioner	Dental assistant Office staff / front desk / scheduler		Medical assistant
4	Substance use disorder professional Nurse practitioner Dental hygienist	Dentist Dental hygienist		Multiple occupations cited at same frequency		Substance use disorder professional Social worker (health care)	Dental hygienist Mental health counselor Nurse practitioner		Dental assistant
5	Multiple occupations cited at same frequency	Multiple occupations cited at same frequency					Multiple occupations cited at same frequency	Psychologist, clinical and counseling	

↑ 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 2017 not shown due to space constraints and may be seen at [wa.sentinelnetwork.org](http://wa.sentinelnetwork.org). Spring 2020, Fall 2022 and Spring 2023 findings not shown due to low response.

\*Rural health clinics were added as a standalone reporting category in Spring 2022. Before that, RHCs were included with primary care clinics. Occupations cited by the same number of responses share the same rank number.



# SN Findings Examples: Exceptionally Long Vacancies Fall 2023

## Reasons for prolonged vacancies reported by rural health clinics

The most cited reason for exceptionally long vacancies as reported by rural health clinics was salary/wage/benefits issues, emphasizing wage competition with other healthcare facilities and geographical constraints.

- *[Physician/Surgeon] We are a small rural community and competing across the country.*
- *[Medical assistant] We cannot compete with hospitals who are offering higher wages, bonuses, and benefits. We have already raised salaries to a rate that we can barely support as it is. We are looking for MAs who instead value our culture and align with our Mission more than they want the higher pay.*
- *[Registered nurse] We have been recruiting for a Clinic Care Coordinator, RN for the past several months. We have decided to hold on filling the position and fill the duties with other staff.*
- *[Office staff] We have lost several staff to higher-paying jobs. We have raised our salaries as high as we can financially sustain right now and are offering other non-tangible benefits such as improved work climate and flexible hours.*
- *[Social worker] We are looking for a specially trained LICSW to work specifically with pediatric patients. We do not have many trained LICSW in our area.*

# SN Findings Examples: Exceptionally Long Vacancies Fall 2023

## Reasons for exceptionally long vacancies reported by Small Hospitals

Themes: Most reported few qualified applicants, wage competition and difficulties recruiting to rural areas.

- *[Multiple occupations] Lack of educational opportunities for community members to train in this field*
- *Although we are competitive with wages, it is difficult to provide the comprehensive medical benefits packages of other health systems. We are also a small community that would require some commuting for some of our licensed and clinical positions.*
- *[Registered nurse] Housing and childcare are big issues for recruiting and retaining RNs.*
- *Rural area is not of interest to applicants...[S]hortfall of graduating nurses. Housing shortages impact ability to recruit.*
- *[Environmental services] High turnover - not a career position. Lack of interest, retention, and applicants*
- *[Pharmacy technician] Many training programs closed over the past few years. We compete with retail positions which usually pay higher. We established a Pharmacy Technician - In-Training program.*



# SN Findings Examples: Community Health Centers/FQHCs Fall 2023

How has staffing affected your facility’s ability to respond to patient demand during the past year?

	%	Comment examples
Delay in care for current patients/clients	45%	<ul style="list-style-type: none"><li>• Provider vacancies lead to decreased number of appointments available.</li><li>• We have waits of 2-6 weeks for routine visits in medical</li><li>• We are often the only practice in the [area] accepting new adults (Medicaid and uninsured), [causing] access issues for our established patients.</li></ul>
Inability to take new patients/clients	20%	<ul style="list-style-type: none"><li>• Long wait lists due to staffing shortages.</li></ul>
Reduction in the number of patients/clients you are able to care for	10%	<ul style="list-style-type: none"><li>• Our workforce shortage has affected the time it takes to coordinate care for pt.'s, the rate at which we accept new referrals / tasks and the pace at which we could normally assist them.</li></ul>
No effect, operations continue as usual	25%	<ul style="list-style-type: none"><li>• We are a brand new primary care clinic. Currently we have enough staff to provide care for all the patients we have. In fact, we are actively seeking new patients and are wanting to expand our patient population.</li></ul>

# RNs - HRSA's 2022 National Sample Survey of RNs

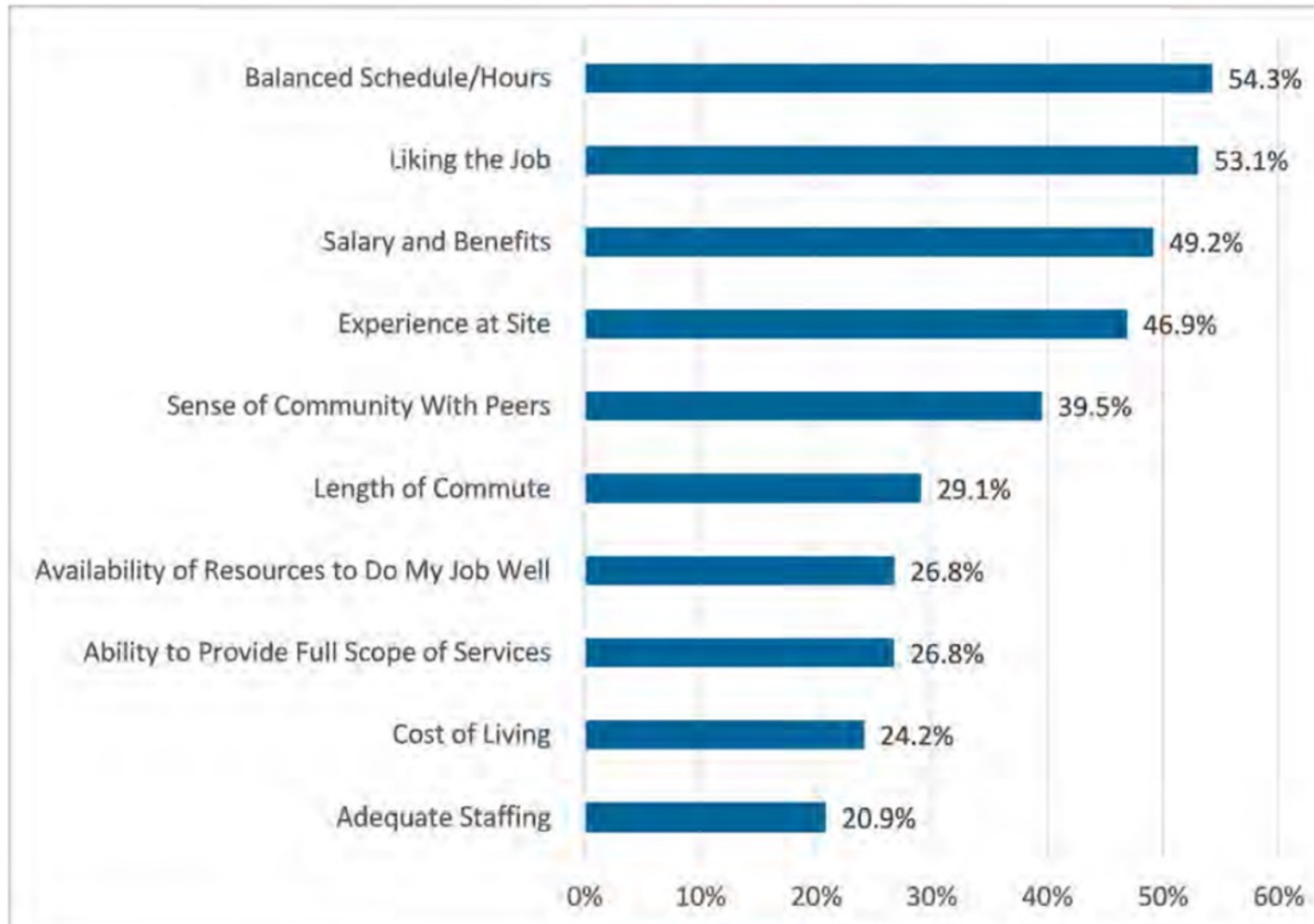
**Figure 4a. Most Commonly Cited Reasons for Leaving Primary Nursing Position  
After December 31, 2021: RNs Still Employed in Nursing**



Source: [2022 National Sample of Registered Nurses](#).

# RNs - HRSA's 2022 National Sample Survey of RNs

Figure 6. Most Common Reasons Given for Remaining in Primary Nursing Position



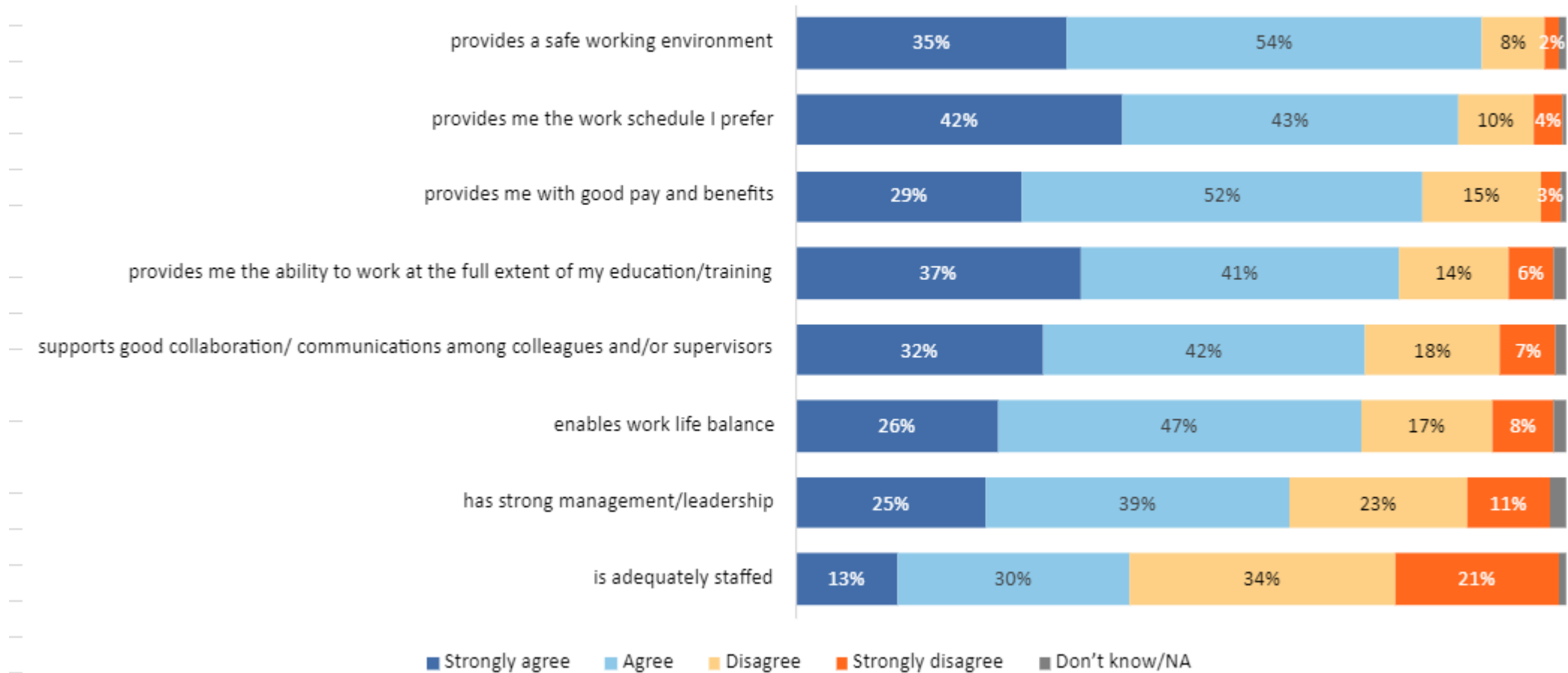
Source: [2022 National Sample of Registered Nurses](#).



# Medical Laboratory Scientists in US - 2023 UW CHWS Survey

## Current job environment, culture, and benefits

*My current job...*



Preliminary findings (2024): Center for Health Workforce Studies, University of Washington,

# WA Health Workforce Sentinel Network - Fall 2023

## Community Issues Affecting Staffing

### Additional questions about your organization's workforce needs.

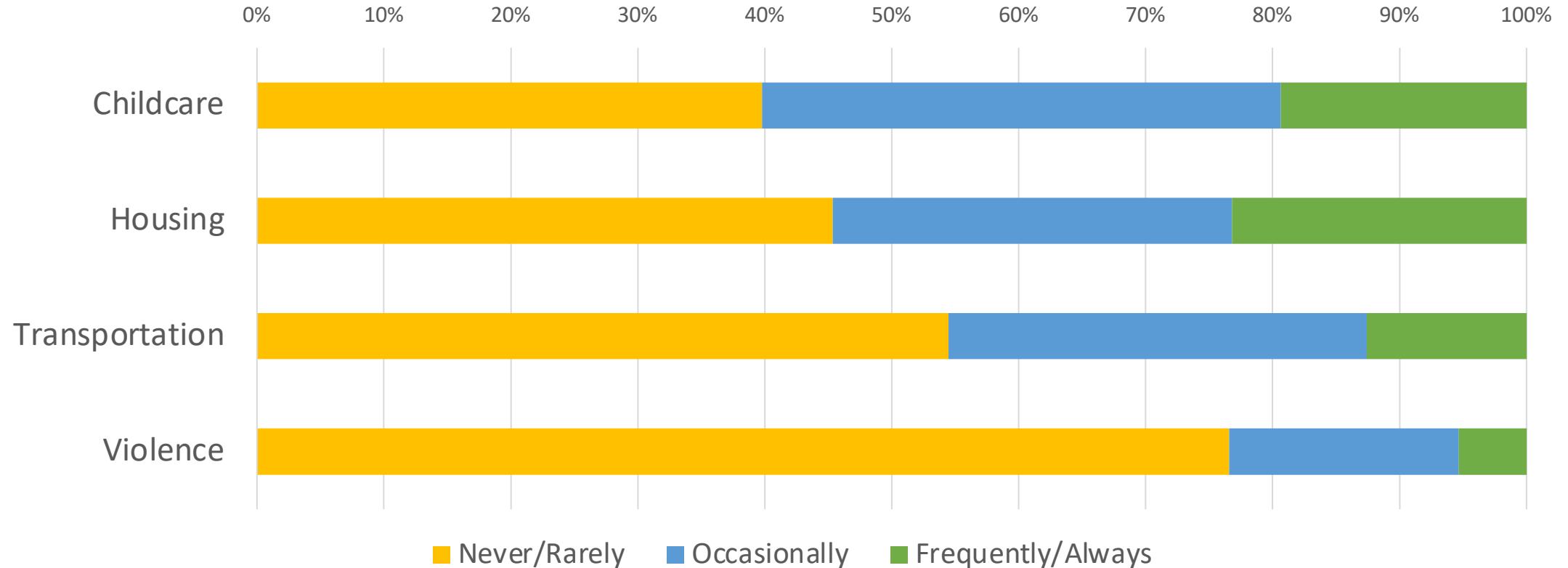
Q14 To what extent have the following affected your ability to recruit and retain staff in the past year?

	Never/Rarely	Occasionally	Frequently/Always
Childcare availability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Housing availability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transportation options	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Violence or aggression in the workplace	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q14a What strategies has your organization used to address these challenges?

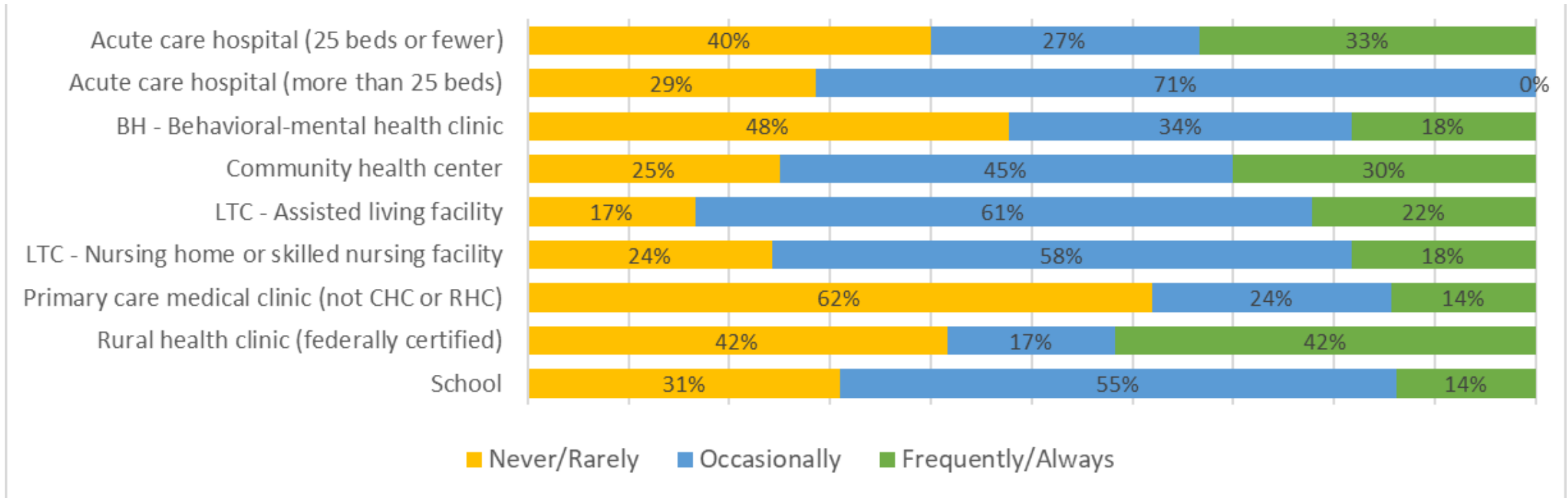
# Across All Facility Types

To what extent have the following affected your ability to recruit and retain staff in the past year?



# Childcare – Reported Effect on Ability to Recruit and Retain Staff

To what extent has childcare availability affected your ability to recruit and retain staff in the past year?



# Childcare – Employers' Strategies

---

“We have partnered with a provider to have **childcare on campus.**”

[Small Hospital]

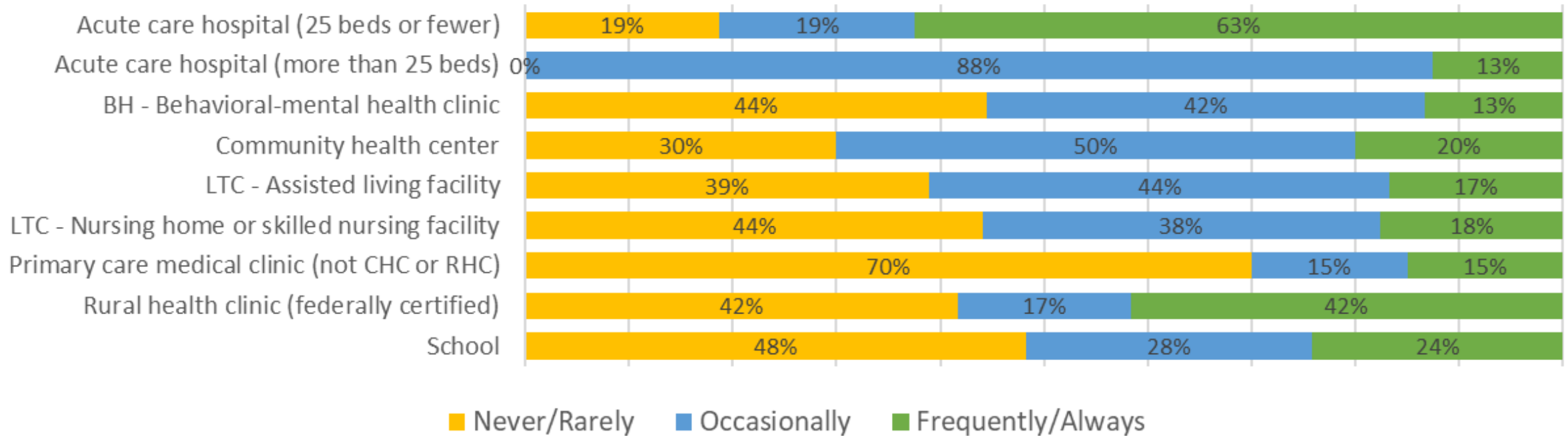
“We offer a contribution to a **dependent care flexible spending account** for those who have dependents who utilize childcare facilities. We are also looking at different options we can help support to **increase childcare workforce** and/or facilities within our service area.”

[Community health center/FQHC]

“...flexible schedules.” [Community health center/FQHC]

# Housing – Reported Effect on Ability to Recruit and Retain Staff

To what extent has housing availability affected your ability to recruit and retain staff in the past year?



# Housing – Employers' Strategies

---

“The hospital has **purchased an apartment complex** as well as a few other **rentals** to help with housing.” [Small Hospital]

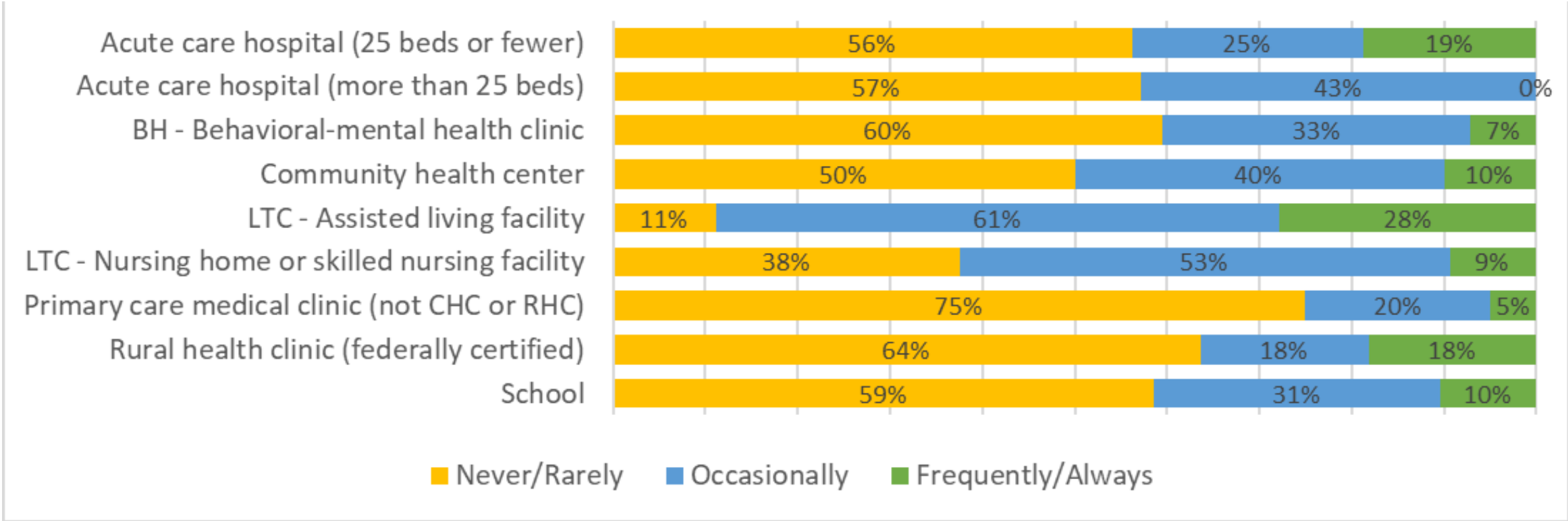
“We offer to **assist in finding housing** and sometimes will transport the person to/from work until better arrangements can be made.” [SNF]

“Unfortunately, we have **no influence over the availability of affordable housing**... new construction focuses on AirBNB's and very high end vacation homes.” [School]



# Transportation – Reported Effect on Ability to Recruit and Retain Staff

To what extent has transportation availability affected your ability to recruit and retain staff in the past year?



# Transportation – Employers' Strategies

---

“We have staff who come from outlying communities, so I have often **paid mileage** for them... Sadly many of these staff drive an hour to get here, passing by hospitals or other nursing homes, and ...eventually [they] give up and take a job closer to home..” [Nursing home]

“**We offer [transportation passes] as a benefit...** Transportation services for the out-lying areas is very limited or non-existent.” [Assisted living facility]

“We have provided **passes for free public transit** and provided significant **pay increases** to offset the costs of housing and childcare.” [Large hospital]

# Workplace Violence – Employers' Strategies

---

“[We offer] **workplace violence classes** (online and in person). Trying to strengthen the ability to respond earlier to patients who are aggressive - **behavior agreement**- and stick to it, enforce the outcomes listed if patient does not follow agreement.” [Large hospital]

“We have provided **training**, created **systems**, hired more **staff**, gone through the **[assessment and intervention] process**, tried to leverage **partnerships** with local behavioral health agencies, and more.” [School]

Ongoing staff training in **de-escalation, trauma, harm reduction**.  
[Community health center]

# Solving workforce demand challenges

**“It Takes a Village”**

## ***Address and Involve the Entire Healthcare Team***

*- Physicians, NPs, PAs, administrators,  
supervisors, MAs, LPNs, RNs,  
pharmacists, social workers, front  
desk, coders, lab, ....*

## ***Engage Community Partners***

*- Employers, government,  
schools, other care providers,  
social service organizations...*

# Nurse Staffing Think Tank: Priority Topics and Recommendations

---

- Promote a healthy work environment
  - Elevate clinician psychological and physical safety to equal importance with patient safety.
- Diversity, Equity and Inclusion
  - Implement [protocols for] deliberate integration of DEI ideals into leadership practices, daily operations, strategic planning, decision-making, resource allocation and priorities.
- Work Schedule Flexibility
  - Build a flexible workforce with flexible scheduling, flexible shifts, and flexible roles.
- Stress Injury Continuum
  - Address burnout, moral distress, and compassion fatigue as barriers to nurse retention.
- Innovative Care Delivery Models
- Total Compensation
  - Develop an organization-wide formalized and customizable total compensation program...that is stratified based on market intelligence, generational needs and an innovative and transparent pay philosophy that is inclusive of benefits such as paid time off for self-care and wellness and wealth planning for all generations.

Partners for Nurse Staffing Think Tank. (2022). Nurse Staffing Think Tank: Priority Topics and Recommendations.  
<https://www.nursingworld.org/practice-policy/nurse-staffing/nurse-staffing-task-force/>

# Addressing Healthcare Workforce Stress

CDC Quality of Worklife Survey: *Health Workers Face a Mental Health Crisis: Workers Report Harassment, Burnout, and Poor Mental Health; Supportive Workplaces Can Help*

## Supportive workplaces can help to promote well-being

Health workers reported fewer mental health issues when they said they work in supportive environments. Factors that may make workplaces more supportive include:

- Participation in workplace decisions
- Trust between management and workers
- Proactive and helpful supervisors that promote:
  - Stress prevention,
  - Psychological health,
  - Support for productivity,
  - A harassment-free workplace, and
  - Enough time to complete tasks.

Nigam JA, Barker RM, Cunningham TR, Swanson NG, Chosewood LC. ***Vital Signs: Health Worker-Perceived Working Conditions and Symptoms of Poor Mental Health — Quality of Worklife Survey, United States, 2018–2022.*** MMWR Morb Mortal Wkly Rep 2023;72:1197–1205.

DOI: <http://dx.doi.org/10.15585/mmwr.mm7244e1>



# NEW Health Model: NE Washington State

It is the mission of NEW Health to promote health and wellness within our communities by providing integrated, open-access healthcare for all. NEW Health provides medical, dental, pharmacy, and behavioral health services for 16,000 patients annually. Our service area is very rural, averaging 10.7 people per square mile. NEW Health locally employs over 180 staff in clinical, management, IT, Finance, Billing, Marketing, Maintenance, Human Resources, and other positions.



## Goals

Grow & Diversify	Grow and diversify local health professional pathways in rural communities.
Invest	Invest in each employee's professional development.
Train	Provide regular training opportunities and dedicated time for training.
Advance	Advance staff within the organization to promote growth from within and to retain talent.
Partner	Partner with schools and academic institutions to support current employee education needs, and to support healthcare workforce pipeline development.
Analyze	Use data to inform continuous development of training content that will result in efficient operational workflows, employee satisfaction, and advance the patient experience.



# Addressing Workforce Demand Challenges: *Engage the Village to Support a Strong and Resilient Workforce*

---



## Contact Information

Sue Skillman skillman@uw.edu

UW Center for Health Workforce Studies

<https://familymedicine.uw.edu/chws/>