

# Washington's Health Workforce Sentinel Network

## Examples of Findings from Small Hospitals

Representatives from small acute care hospitals (25 beds or fewer) provided information to the Washington State Health Workforce Sentinel Network six times between Summer 2016 and Spring 2019. This summary highlights some of the information they provided, with an emphasis on the most recently submitted data. Additional findings from small hospitals can be found on the Sentinel Network dashboard ([wa.sentinelnetwork.org](http://wa.sentinelnetwork.org)) as well as for larger hospitals and other types of health care facilities.

### Small Hospitals (<25 beds) - Occupations with exceptionally long vacancies: 2016-2019

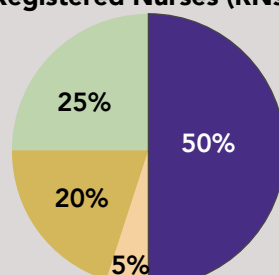
Top occupations cited as having exceptionally long vacancies by date of reporting					
Summer 2016	Winter 2016	Spring 2017	Fall 2017	Summer 2018	Spring 2019
Registered Nurse	Registered Nurse	Registered Nurse	Registered Nurse* Physical therapist*	Registered Nurse	Registered Nurse
Med/Clin lab technologist	Occ. therapist* Physical therapist* Physician/Surgeon*	Med/Clin lab tech.* Physical therapist*	Nursing assistant* Physical therapist assistant*	Physician/ Surgeon	Physician/ Surgeon
Medical assistant* Nursing assistant*	Mult. occ.s cited at same frequency	Mult. occ.s cited at same frequency	EMT	Med/Clin lab tech.* Nursing assistant*	Physical therapist
Mult. occ.s cited at same frequency			Mult. occ.s cited at same frequency	Mult. occ.s cited at same frequency	Nurse practitioner* Nursing assistant*
				Mult. occ.s cited at same frequency	Mult. occ.s cited at same frequency
# facilities reporting					
10	12	8	7	10	18

most cited ↑

\* tied in rank (# of times occupation was cited by Sentinels) in reporting period

### Reasons for exceptionally long vacancies for most frequently cited occupations (Spring 2019)

#### Registered Nurses (RNs)



- Not enough qualified applicants
- Recruitment and retention problems not related to salary/wage/benefits
- Salary/wage/benefits issues
- Other reasons

#### RNs - Examples of reasons for exceptionally long vacancies

Not enough qualified applicants

- Little to no qualified applicants, location, lack of housing, staff must wear multiple hats.

Salary/wage/benefits issues

- Some of the larger hospitals are able to pay a lot higher wages and the competition is great.
- Most of these qualified people go to Agency jobs due to getting more money in this area
- Hospital nurses are part of a union, and the contract is due to be renegotiated this year. Since the three years the contract has been in place, it has fallen behind market.

Recruitment and retention problems (not related to salary/wage/benefits)

- Lack of stability in the current rural/local job market within the medical field itself.
- Being in a rural area there is a lack of RN's in general, most applications we receive are for per diem work, only wanting to work one or two days a month, we do have full time openings and even though we try to fill with per diem we are not able to fill the positions.
- We are in an extremely rural area and our location has always been an issue with hiring and retaining staff. New RNs usually spend a year with us and then move on to work closer to home.

## Reasons for exceptionally long vacancies for most frequently cited occupations (Spring 2019) (cont.)



## Orientation and training changes in small hospitals (Spring 2019)

### Examples of changes to orientation/onboarding for new employees

RNs: We had been lacking an effective orientation program for new employees. We developed a program which brings the subject matter expert into present their information to new hires. We standardized the process so we have orientation twice a month. We give the information verbally, visually and some of it is hands on in an effort to engage the new hires and help them feel part of a team.

RNs: Longer orientation period due to the enormous amount of stuff our RN's must know.

All employees: We have implemented a new more comprehensive New Hire Orientation for all employees. This is a 3 day orientation and CPI training that all employees go through. We have seen a significant increase in our retention rates as a result.

### Examples of changes in training needs for incumbent workers

Multiple occupations: We implemented a new EHR in September 2018 which required more IT education by all relevant staff.

RNs: Requiring they are cross-trained to numerous skills/abilities/units.

RNs: More individualized focused training for staff, especially when we have to use agency.

## New roles for existing workforce (Spring 2019)

### Examples of descriptions of new workforce roles

Nursing assistant: Used as 1:1 sitters for SI [suicidal ideation]. Some are crosstrained in ward clerk duties.

Physician – psychiatrist: We have recently hired a Regional Medical Director to cover all the E&Ts in WA state. This is new. We used to have someone different assigned to each facility. This new model will provide continuity and more oversight for our programs.

Physician – emergency medicine: has more duties with admitting patients and providing transition orders or if a pt deteriorates on inpt.

Chemical dependency professional/substance abuse and behavioral disorder counselor: We have begun adding SUD Assessment Only services to our E&T license. The state has told us that we cannot use CDPs for co-occurring disorders unless we are licensed to provide SUD.

## About the Washington Health Workforce Sentinel Network

The Sentinel Network links the healthcare sector with policymakers, workforce planners and educators to identify and respond to changing demand for healthcare workers, with a focus is on identifying newly emerging skills and roles required by employers. The Sentinel Network is an initiative of Washington's Health Workforce Council, conducted collaboratively by Washington's Workforce Board and the University of Washington's Center for Health Workforce Studies. Funding to initiate the Sentinel Network came from the Healthier Washington initiative, with ongoing support from Governor Inslee's office and the Washington State Legislature.

### Why become a Sentinel? As a Sentinel, you can:

- Communicate your workforce needs and ensure that the state is prepared to respond to the transforming healthcare environment.
- Have access to current and actionable information about emerging healthcare workforce needs.
- Compare your organization's experience and emerging workforce demand trends with similar employer groups.

To view an interactive summary of findings and to provide information from your organization: [www.wasentinelnetwork.org](http://www.wasentinelnetwork.org).  
Contact: [healthworkforce@wasentinelnetwork.org](mailto:healthworkforce@wasentinelnetwork.org)