

Washington's Health Workforce Sentinel Network Examples of Findings from Community Health Centers

Representatives from federally qualified health centers (FQHCs) or community clinics providing care free or on sliding fee scale provided information to the Washington State Health Workforce Sentinel Network seven times between Summer 2016 and Fall 2019. This summary highlights some of the information they provided, with an emphasis on the most recently submitted data. Additional findings from community health centers can be found on the Sentinel Network dashboard (wa.sentinelnetwork.org) as well as for other types of health care facilities.

Community Health Centers* - 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	Fall 2019
Registered nurse	Medical assistant	Physician/ Surgeon	Medical assistant	Physician/ Surgeon	Medical assistant	Physician/ Surgeon
Physician/ Surgeon			Physician/ Surgeon			
Mental health counselor	Nurse practitioner	Social worker	Dental assistant	Registered nurse	Physician/ Surgeon	Dental assistant
			Registered nurse		Dental assistant	Medical assistant
			Registered nurse		Registered nurse	Nurse practitioner
Medical assistant	Dental assistant	Mental health counselor	Mental health counselor	Medical assistant	Mental health counselor	Mental health counselor
	Registered nurse		Nurse practitioner			Physician assistant
Nurse practitioner	Physician/ Surgeon	Multiple occupations cited at same frequency	Multiple occupations cited at same frequency	Dental assistant	Chem. dependency professional	Dentist
				Mental health counselor	Nurse practitioner	
Dental assistant	Mental health counselor	Multiple occupations cited at same frequency				
Social worker				Multiple occupations cited at same frequency		

↑ Most cited

*Federally Qualified Health Centers and Community Clinics Providing Care Free or Sliding Fee Scale

Reasons for vacancies reported by community health centers (Fall, 2019 examples)

- Not enough dental assistant programs ... We need more programs and more people going into this profession!!
- Even with a sign-on bonus [for medical assistants]...not enough qualified applicants around.
- Not enough [dental hygienist] applicants!!! Since we're community health, we cannot pay what private practice can, but benefits are great! Takes 3-4 months to fill a position.
- Difficulty recruiting, especially to our more remote locations (physicians, nurse practitioners [NPs]).
- 3+ month delays by managed care organizations to privilege/credential hired (physicians, NPs). Inability to hire locums when we have vacancies due to MCO privileging.

Community Health Centers

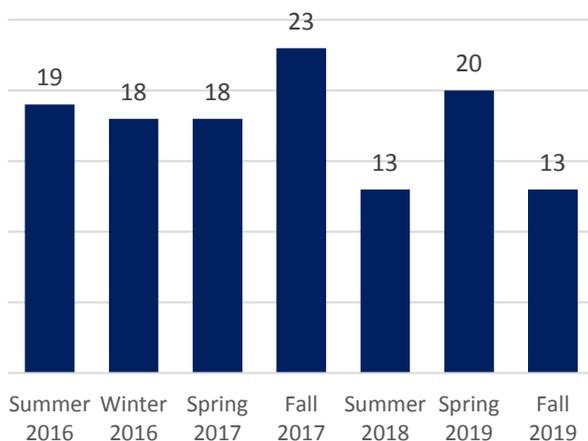
Changes in facility's priorities regarding orientation/onboarding for new employees or training for incumbent workers reported by community health centers (Fall 2019 examples)

- Onboarding has been changed to give employees more trainings up front and to assist employees to fit in with the team (multiple occupations).
- In the past six months there has been further exploration of beginning a transition to practice residency training program for new NP/PA graduates, but the organization does not have the financial capacity to initiate such a program, despite it being a resource for improving retention of new hires and new graduates.
- Provided trainings on Teamwork, and Implicit Bias to workforce (medical assistants, dental assistants).

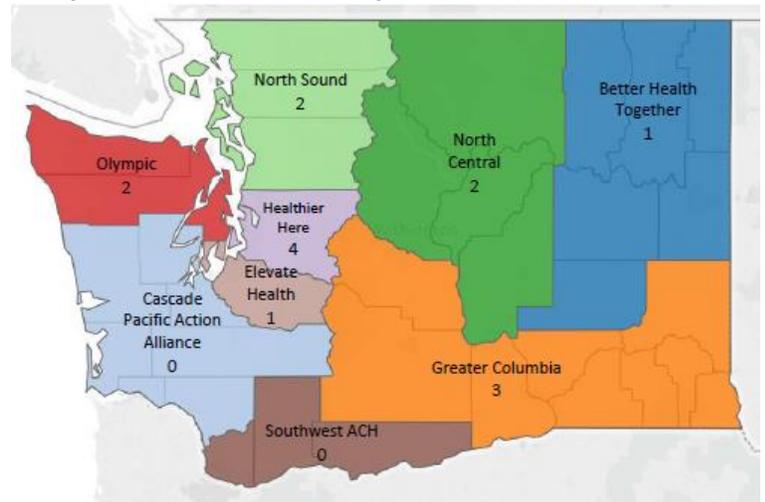
Reasons for worker retention/turnover problems reported by community health centers (Fall, 2019 examples)

- We serve a large number of people experiencing homelessness and large numbers with many social issues and complex medical issues. Those who left stated this was the reason (physicians).
- We have recently experienced retirements related to burnout. The common comment is that its not because of leadership but the lack of respect from MCO's and government and their demands which continue to rise. The red tape associated with getting patients needed healthcare services is a prime issue needing to be addressed (physicians).
- Always watch turnover, as this is a position we are always recruiting (medical assistants).
- Small labor pool and unqualified candidates (dental assistants).

Number of Sentinel Network Responses from Community Health Centers in WA by Data Collection Date



Number of Community Health Center Responses by Accountable Community of Health (ACH) (Fall, 2019)



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.wa.sentinelnetwork.org.

Contact: healthworkforce@wasentinelnetwork.org