

Washington's Health Workforce Sentinel Network *Findings Brief: Small Hospitals*

This Findings Brief highlights current workforce needs reported by acute care hospitals with 25 beds or fewer (“Small Hospitals”) during May/June 2022. More findings from 2022 and earlier may be viewed at www.wa.sentinelnetwork.org/findings/. Small hospitals’ responses to questions about current overarching and pandemic-related workforce issues are summarized below. Earlier pandemic-related findings may be viewed at www.wa.sentinelnetwork.org/findings/covid-19/.

Overarching and Pandemic-Related Workforce Issues: Themes and examples

What strategies has your organization used over the past 6 months to cover worker absences and fill vacancies caused by worker turnover? How successful have these strategies been?

Almost all report using staffing agencies to fill gaps, with mixed results.

- *Our usage of travelers has increased dramatically. It's working (for the most part) but it's stretching our budget.*
- *Used traveler agencies and increased hours of remaining staff, with monetary incentives for remaining staff. Somewhat effective.*
- *Sign on bonuses, retention bonuses, double time, travelers, limit vacations. Not successful across the board, though double time has seemed to slow the retention concerns.*
- *For nursing we implemented hiring nurses (RN/LPN) onto 13 week contracts (not through agencies but hired as employees) at higher wages (due to not having the benefits cost) and were able to increase staffing as well as convert some of these nurses to full time employees.*

What employee benefits are, or would be, the most helpful to improve your facility's ability to retain its workforce? If you have been able to implement or increase access to any of these benefits within the past 6 months what effect have they had on retention?

- *A more flexible schedule would be most helpful to our nursing staff in particular. We have not been able to attempt this due to staffing needs.*
- *More access to childcare in our area - with hours that are conducive to shift-work.*
- *Helpful would be access to more affordable family health coverage, more robust mental health resources, accessible funding for employee appreciation, self care education and training.*
- *Increased pay, to be more competitive and keep pace with inflation, would definitely help retention.*

What are your top workforce needs that could be alleviated by new or modified policies, regulations, and/or payment rules?

- *We continue to pay a very high rate for our agency nurses. When current staff know how much they make they choose to leave and go travel, really puts us all at risk.*
- *The WA State Paid Sick Leave policy has made it easier for employees to call out sick... This creates a hardship for employers [and] puts a strain on the remaining employees to work short handed or provide fewer services.*
- *Continued/expanded support for remote work, telemedicine.*
- *Easing hurdles to being licensed.*

How would you describe your facility's use of telehealth/virtual visits now compared with your use a year ago? If your organization provides telehealth/virtual visits, how would you describe the impact on recruiting and retaining your workforce?

About a third of respondents said they do not provide telehealth, another third said they provide telehealth, but less than a year ago, and another third provide telehealth at about the same level as a year ago. Most employers say telehealth has not impacted recruitment and retention of their workforce.

- *Effectiveness is mixed. Remote workers like the change. Workers unable to work remotely feel it's not fair.*
- *I don't think telehealth visits have significantly impacted recruitment or retention.*

Small Hospitals (Spring 2022)

Between 2016 and 2022, over the course of 12 reporting periods, small hospitals and other health care facilities in Washington shared information about their workforce needs to the Washington State Health Workforce Sentinel Network. Below are highlights of trends over time and recent findings. More findings from small hospitals, along with those from other health care facilities, are at wa.sentinelnetwork.org.

Top occupations cited as having exceptionally long vacancies by date of reporting								
Rank	Fall 2017	Summer 2018	Spring 2019	Fall 2019	Fall 2020*	Spring 2021	Fall 2021	Spring 2022
1	Registered nurse	Registered nurse	Registered nurse	Physician/ Surgeon	Registered nurse	Registered nurse	Registered nurse	Registered nurse
	Physical therapist							
2	Nursing assistant	Physician/ Surgeon	Physician/ Surgeon	Registered nurse	Medical assistant	Nursing assistant	Medical assistant	Nursing assistant
	Physical therapy assistant			Nursing assistant	Nursing assistant		Nursing assistant	
3	Multiple occupations cited at same frequency	Med/Clin lab technologist	Physical therapist	Multiple occupations cited at same frequency	Multiple occupations cited at same frequency	Medical assistant	Physician/ Surgeon	Cook / Food services
		Nursing assistant						
		Multiple occupations cited at same frequency	Marriage & Family Therapist					

↑ Most cited

* Findings prior to Fall 2017 not shown due to space constraints – may be seen at the Sentinel Network Dashboard: wa.sentinelnetwork.org.

Reasons for prolonged vacancies reported by Small Hospitals

Wage competition with other industries or with contract agencies was frequently mentioned as a hinderance to hiring

- [Respiratory therapy technician] Many RT qualified personnel were traveling and making more than we could pay. We have had to use travelers in this position.
- [Registered nurse] Several RN candidates are looking for salaries in the Traveler RN salary range, and have decided to take Travel RN Assignments rather than settle down in a career role.
- [Cook/Food services, Environmental services] The starting wage for [these positions] was minimum wage of \$14.49/hr which was less than other positions of the same nature in the area.
- [Physical therapist] Relocation has been an issue. We are rural and housing has been a huge roadblock for candidates who had otherwise already accepted the role.
- [Multiple occupations] No applicants applying.

Reasons for worker retention/turnover problems reported by Small Hospitals

- [Medical assistant] We have had MAs leave seeking higher wages in home health sectors that have increased their salaries in their shortage of labor.
- [Nurse practitioner] General unhappiness of providers and call schedules that are unavoidable in the rural setting.
- [Registered nurse] Traveling is appealing. Retirement looks better when you're burned out.
- [Nursing assistant] Some have been dissatisfied with increased workload (environment is more consistently "busy" as compared to prior years). Some were unhappy about vaccine mandates and need to consistently wear PPE.

Small Hospitals (Spring 2022)

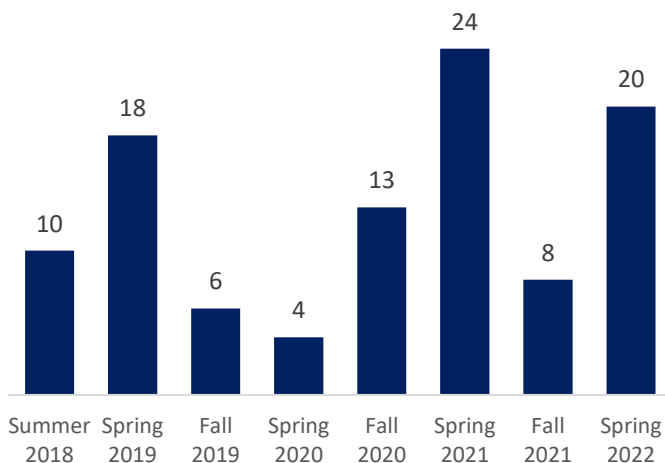
Changes in Small Hospitals' priorities regarding orientation/onboarding for new employees and training for existing/incumbent workers

- [All Occupations] We are shifting new hire orientation to be fewer hours each day over the first full week of employment to allow more job shadowing and time to complete mandated state learnings.
- [All Occupations] Orientation and onboarding for new employees has been changing to mirror any changes in regulation in regard to covid-19 procedures.
- [Medical assistant] We have started our own internal medical assistant training program.
- [All Occupations] We have shortened general onboarding to allow staff to move to position-specific onboarding faster, and refocused our general onboarding on the most mission-critical information.

Examples of new occupations that were not previously employed by Small Hospitals

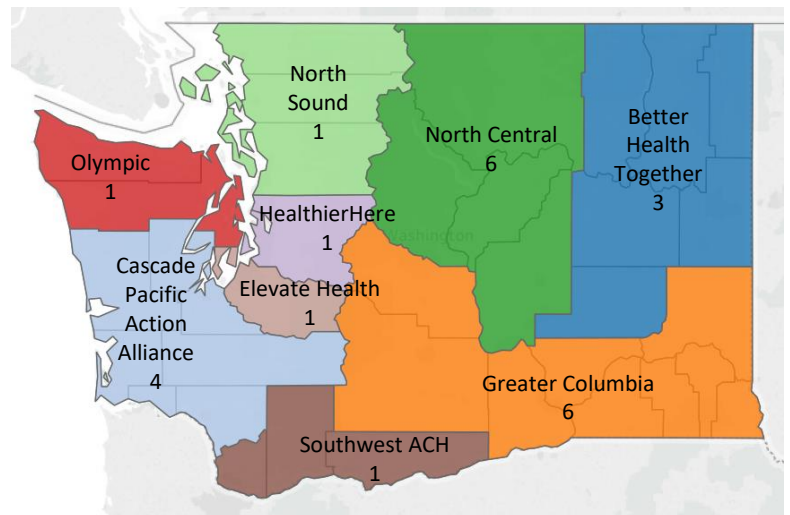
- [Operations and risk manager] Manages the areas of Safety, Security and Emergency Preparedness for the organization. Manages the operations of the Orthopedics practice at the rural health clinic.
- [Specimen collector] Swabbing nasal and throat for specimen collections. This was extremely helpful when we were operating a COVID-testing clinic.
- [Nurse staffing coordinator] Nurse Scheduling, occasional clinical C.N.A. care duties.
- [Employee health and wellness nurse] Employee Health, Work Comp, Resources, COVID exposure management.

Number of Sentinel Network Responses from Small Hospitals in WA by Data Collection Date*



*Responses prior to Summer 2018 not shown due to space constraints

Number of Small Hospital Responses by Accountable Community of Health (ACH) (Spring 2022)



About the Washington Health Workforce Sentinel Network

The Health Workforce 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 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.

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