

Washington's Health Workforce Sentinel Network

Findings Brief: Primary Care Medical Clinics (not FQHCs or Community Clinics)

This Findings Brief highlights current workforce needs reported by primary care medical clinics (not FQHCs/community clinics, which are reported in a separate Brief) in Washington State during May/June 2022. More findings from 2022 and earlier may be viewed at www.wa.sentinelnetwork.org/findings/.

Primary care medical clinics' 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?

Most organizations are adjusting staff schedules and assigning new roles. Some have reduced services.

- *Just flat out worked with less staff... We have used hiring sites to recruit more staff, but have not been successful, and leaning harder on everyone who is here has led to some burnout.*
- *Increased staff hours and used staff in different departments. When short staffed, manager[s] provides patient care.*
- *Adjusted business hours to better be able to cover schedules. Reduced population health efforts for provider coverage.*
- *Retention bonuses for our four most critical positions: bedside RN's, RT's, Phleb's and NAC's. Wage increases for RN's and RT's OUTSIDE of CBA increases. Higher utilization of travelers, overtime and redeployment where possible.*
- *We use more prn and part time staff to fill vacancies that would best be filled with full time staff.*

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?

- *Loan repayment, flexible schedules, childcare allowances and flexibility would help retain staff. Loan repayment is important to our pediatrician and nurse practitioner staff who meet eligibility requirements.*
- *Childcare, especially sick childcare, would be a real boon to keep staff at work rather than be home with sick children.*
- *We have seen an increase in abuse of sick time and unplanned call outs, making our ability to staff unpredictable. Benefits... are not the issue. Not having enough staff due to call outs etc. are contributing to burnout.*
- *We have good benefits. What we can't do... is compete with surrounding specialty [clinics] and/or large systems from a wage standpoint.*

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

- *Pay pediatricians what family docs or internal med gets paid. Do away with bundling and paying 50% for an EM with a preventative visit. Give back patient care time by stopping the ridiculous prior auths for everything.*
- *Medicaid and Medicare reimbursement for primary care and behavioral health is messy and convoluted and is very low for primary care if you are using a PA instead of an MD.*
- *Increase pay to primary care clinics so they can compete against health systems in pay.*
- *Reduce higher level education requirements and increase support for additional technical programs - NAC, Phlebotomy, Respiratory Therapists, Medical Assistants etc.*

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?

Just over half of respondents said their organization provides telehealth visits, but fewer than a year ago. Slightly less than half said they offer telehealth about as often or more frequently than a year ago.

- *[Telehealth] decreases the workload of our clinical staff which has been helpful.*
- *I don't think [telehealth] has any significant impact on recruitment or retention.*
- *No impact except sometimes needing less MA support due to physicians managing telehealth visits themselves.*

Primary Care Medical Clinics* (Spring 2022)

Between 2016 and 2022, over the course of 12 reporting periods, primary care medical clinics and other health care facilities in Washington shared information about their workforce needs with the Washington State Health Workforce Sentinel Network. Below are highlights of trends over time and recent findings for these clinics (not including FQHCs or community clinics, which are reported elsewhere). More Primary Care Clinic findings, 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	2016 - 2019	2020	Spring 2021	Fall 2021	Spring 2022
1	Medical assistant	Medical assistant	Medical assistant	Medical assistant	Medical assistant
2	Physician/surgeon	Physician/surgeon	Registered nurse	Physician/surgeon	Registered nurse
					Office Staff / Front desk staff / Scheduler
3	Registered nurse	Mental health counselor	Licensed practical nurse	Registered nurse	Physician/surgeon
4	Licensed practical nurse	Registered nurse	Multiple occupations cited at same frequency (e.g., Call center associate, central access workers, SUDP, Health information technologists and medical registrar, mental health counselor, nursing assistant, psychologist, receptionist, social worker)	Mental health counselor	Nurse practitioner
		Nurse practitioner		Nurse practitioner	Licensed practical nurse
				Healthcare social worker	
5	Nurse practitioner	Licensed practical nurse		Multiple occupations cited at same frequency	Community health worker, Mental health worker, Child family & school social worker
		Physician assistant			Multiple occupations cited at same frequency
6	Mental health counselor	Multiple occupations cited at same frequency			Multiple occupations cited at same frequency

← Most cited

*not FQHCs/community clinics

Reasons for retention/turnover problems and prolonged vacancies reported by Primary Care Medical Clinics

Many reported that concerns about COVID-19, along with other issues, are affecting retention and hiring.

- [Multiple occupations] COVID related restrictions.
- [Medical assistant] Vaccine mandate. Family needs..
- [Social worker - healthcare] Other opportunities for the social workers, closer to home, more flexibility.
- [Medical assistant] High cost of living, transportation challenges.
- [Office Staff/Front Desk Staff/Scheduler] Healthcare is hard work. Patients are ill and potentially contagious, which scares non-clinical people. The "fun" in working in healthcare is hard to find right now

Changes in Primary Care Medical Clinics' priorities regarding orientation/onboarding for new employees and training for existing/incumbent workers

Some report adjusting onboarding strategies to improve retention. Training and onboarding content covers COVID-19 requirements and other topics.

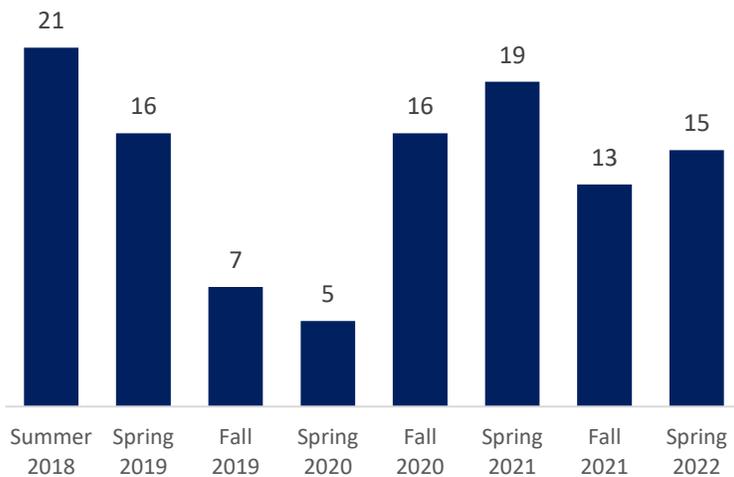
- [Medical assistant] Having to spend more time getting them comfortable dealing with children, administering vaccinations, and how to work in a medical office because they are fresh out of a program.
- [Medical assistant] Longer training and support, still being recruited away for higher wages.
- [Office staff/front desk staff/scheduler] Longer training and support, still having rapid quitting without notice.
- [All occupations] COVID vaccine requirements and new attendance requirements.
- [All occupations] Required Health Equity training.

Primary Care Medical Clinics (Spring 2022)

New healthcare occupations (that their organization did not employ previously) reported by Primary Care Medical Clinics

- *[Dermatologist] Sees patients per-diem. Our patients have seen great success with having a dermatologist on staff.*
- *[Community health worker] [Responsible for] care coordination, specifically for social needs, behavioral health needs.*
- *[BHI counselors and medical social worker] – [No comment provided]*

Number of Sentinel Network Responses from Primary Care Clinics in WA by Data Collection Date*



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

Number of Primary Care Clinics Responses by Accountable Community of Health (ACH) (Fall 2021)



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 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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