

Washington's Health Workforce Sentinel Network Findings Briefs: Rural Health Clinics

This Findings Brief highlights current workforce needs reported by rural health clinics in Washington State during September and October 2022. More findings from 2022 and earlier may be viewed at www.wa.sentinelnetwork.org/findings. Rural health 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

In the past year, has access to childcare, housing, transportation, or other factors affected staffing at your organization?
Childcare and housing were the enabling factors most frequently cited as affecting staffing at rural health clinics. Transportation and other factors were less frequently cited but did affect staffing decisions at some clinics.

	Yes	No	% Yes	Comments
Childcare	12	4	75%	<ul style="list-style-type: none"> Childcare is expensive and difficult to find. Two physician couples left to move back home to family to have them help with childcare. Most employees have tried to work within school hours due to not enough childcare around the area.
Housing	11	5	69%	<ul style="list-style-type: none"> The most common reason we lose staff is when they move out of the area for housing (which is hard to find in our area, and expensive). Lack of housing in our area for permanent staff and travelers, lack of affordable homes for sale as well as affordable rentals.
Transportation	5	11	31%	<ul style="list-style-type: none"> Because housing is expensive, we have some people commuting. Due to the increase in gas prices, this has become a larger problem. Increase in gas prices makes it difficult to recruit from outside areas
Other	1	15	6%	<ul style="list-style-type: none"> Increase in minimum wage causing increase in baseline wages that further challenge financially struggling healthcare facilities.

How have your facility's staffing arrangements affected your ability to respond to patient demand during the past year?
A majority reported that staffing issues have caused longer wait times and an inability to meet patient demand for some services. A smaller number reported that staffing issues have not affected their ability to respond to patient demand.

- Longer wait times to get in to see a provider.
- We do not have enough therapists to meet community demand for counseling.
- Staffing in the clinic has been stable.

Please describe any institutional actions your organization has taken in the past year to improve diversity in your workforce or to make your organization more representative of the population it serves. What effects have these actions had on hiring and retention of the workforce, if any?

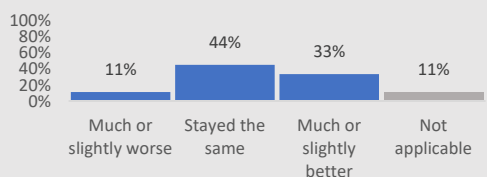
Several respondents mentioned specific strategies ranging from training of employees to specific hiring goals. An approximately equal number of respondents said that no strategies have been enacted in the last year at their organization.

- Promoting underrepresented team members from within and making an effort to recruit more bilingual employees to better serve our communities.
- Increased bilingual leadership. More intentional hiring/recruiting. But we still have not increased our % of bilingual staff.
- None, no change needed.

Over the past year, has the overall behavioral health status of the workforce at your organization changed? Please describe, including resources that have been (or would be) helpful for effectively addressing behavioral health concerns.
Overall, 8 out of 12 respondents (67%) said the behavioral health status of the workforce had changed for the worse.

- I think all employees in healthcare are experiencing some level of mental health crisis due to the pandemic.
- General symptoms of burnout and fatigue. Grieving for loss of multiple co-workers due to illness. Utilize EAP.
- We have implemented a Wellness Committee that is particularly focused on this issue. We pay for all staff to download the Headspace app. We believe that having more connections at work (and at outside of work events) will help.

In the past year, has your ability to support clinical training experience for students/learners (not newly hired or incumbent employees) at your organization become better, stayed the same or gotten worse? What strategies/policies have been – or would be – the most helpful for supporting clinical training experiences at your organization?



- [Much better] - We have implemented the MA Apprentice program beginning this calendar year.
- [Stayed the same] - Additional funding for stipends for preceptors and funding for the facility. Funding for simlab equipment.
- [Not applicable] - Reestablish NHSC self employed eligibility for loan forgiveness.

Rural Health Clinics (Fall 2022)

Between 2016 and 2022, over the course of 13 reporting periods, health care facilities in Washington shared information about their workforce needs to the Washington State Health Workforce Sentinel Network. Rural health clinics were added as standalone category in spring 2022. Below are highlights of recent findings. More findings from rural health clinics, 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	Spring 2022	Fall 2022
1	Medical assistant	Medical assistant
		Registered nurse
		Physician/Surgeon
2	Registered nurse	Mental health counselor
	Physician/Surgeon	Office staff/ Front desk staff/ Scheduler
3	Licensed practical nurse	Marriage & family therapist
		Nurse practitioner
4	Office staff/ Front desk staff/ Scheduler	Multiple occupations cited at the same frequency

↑ Most cited

*Rural health clinics were added as a standalone reporting category in spring 2022. Before that, RHCs were included with primary care clinics.

Reasons for vacancies reported by Rural Health Clinics

Many respondents report a lack of applicants for open positions. When people do apply, factors such as salary expectations, lack of housing and a need for flexible hours complicate hiring.

- *[Medical assistant] MACs can be travelers and can have higher bill rates than we can afford to pay staff.*
- *[Multiple occupations] Hard to find candidates who want to work in Rural Medicine. No available housing or childcare.*
- *[Multiple occupations] Higher wage expectations.*
- *Hard to find an orthopedic surgeon who wants to work full-time. Seems everyone wants per diem or part-time hours.*

Reasons for worker retention/turnover problems reported by Rural Health Clinics

Some respondents reported that employees left for higher pay or because of burnout.

- *[Office staff/Front desk staff/Scheduler] Current employees transferring to better paying positions.*
- *[Registered nurse] Can't compete with travel RN wages.*
- *[Multiple occupations] High level of significant life changes for staff which have resulted in them leaving the profession.*
- *[Multiple occupations] Very busy clinics - high employee burnout.*

Rural Health Clinics (Fall 2022)

New roles for existing employees and new occupations hired by Rural Health Clinics

Reports that workers at all levels are taking on additional tasks to cover for staff shortages.

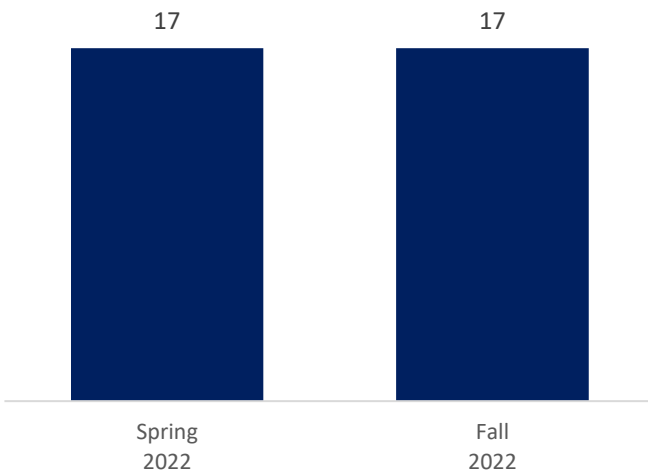
- [Office staff/Front desk staff/Scheduler] medical records; referrals.
- [LMFTA] Using a Licensed Marriage and Family Therapy Associate to meet demand for collaborative care counseling.
- [Clinical psychologist] Provide Behavioral Healthcare Manager position to continue collaborative care.

Changes in Rural Health Clinics' priorities regarding orientation/onboarding for new employees and training for existing/incumbent workers

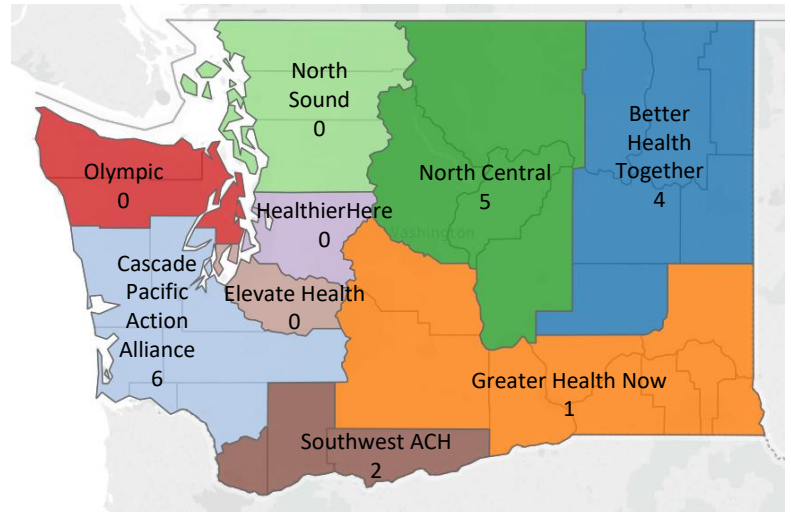
Many employers are hiring less experienced workers and/or training them in-house.

- [Medical assistant] We almost always have to train our own MAs now, and have sent several through the Apprenticeship program to get Certified.
- [Physician assistant] We have had to create our own "residency" for new PAs.
- More focused EMR training [for all existing employees].

Number of Sentinel Network Responses from Rural Health Clinics in WA by Data Collection Date*



Number of Rural Health Clinics Responses by Accountable Community of Health (ACH) (Fall 2022)



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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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