

# Washington's Health Workforce Sentinel Network

## Findings Brief: Small Hospitals

This Findings Brief highlights current workforce needs reported to the state's Health Workforce Sentinel Network by Washington's acute care hospitals with 25 beds or fewer ("Small Hospitals") during October/November 2023. Between 2016 and 2023, over the course of 15 reporting periods, Small Hospitals and other health care facilities in Washington provided key, on-the-ground information to the Washington State Health Workforce Sentinel Network. Below are highlights of trends over time and recent findings. More findings from 2023 and earlier, as well as for other health care facilities, may be viewed at <https://www.wa.sentinelnetwork.org/findings>

| Top occupations with exceptionally long vacancies* |  |                                     |                     |                      |                      |                                     |  |
|--|--|-------------------------------------|---------------------|----------------------|----------------------|-------------------------------------|--|
| Rank   | Fall 2020                                    | Spring 2021                         | Fall 2021           | Spring 2022          | Fall 2022            | Spring 2023                         | Fall 2023                                      |
| 1  | Registered nurse                             | Registered nurse                    | Registered nurse    | Registered nurse     | Registered nurse     | Registered nurse                    | Registered nurse                               |
| 2  | Medical assistant                            | Nursing assistant                   | Medical assistant   | Nursing assistant    | Cook / Food services | Medical / Clinical lab technologist | Environmental Services                         |
|  | Nursing assistant                            |                                     | Nursing assistant   |                      |                      |                                     |  |
| 3  | Multiple occupations cited at same frequency | Medical assistant                   | Physician / Surgeon | Cook / Food services | Nursing assistant    | Medical / Clinical lab technician   | Multiple occupations cited at same frequency** |
|  |  | Medical / Clinical lab technologist |                     |                      |                      | Nursing assistant                   |  |

↑ Most cited

Findings prior to Fall 2019 not shown due to space constraints. Spring 2020 not shown due to low response numbers. Occupations cited by the same number of responses share the same rank number.

\*\*Medical assistant, medical/clinical laboratory technologist, nursing assistant, physical therapist, physician/surgeon

### Reasons for exceptionally long vacancies reported by Small Hospitals

Themes: Most reported few qualified applicants, wage competition and difficulties recruiting to rural areas.

- [Multiple occupations] Lack of educational opportunities for community members to train in this field
- Although we are competitive with wages, it is difficult to provide the comprehensive medical benefits packages of other health systems. We are also a small community that would require some commuting for some of our licensed and clinical positions.
- [Registered nurse] Housing and childcare are big issues for recruiting and retaining RNs.
- Rural area is not of interest to applicants...[S]hortfall of graduating nurses. Housing shortages impact ability to recruit.
- [Environmental services] High turnover - not a career position. Lack of interest, retention, and applicants
- [Pharmacy technician] Many training programs closed over the past few years. We compete with retail positions which usually pay higher. We established a Pharmacy Technician - In-Training program.

## Small Hospitals, 25 beds or fewer (Fall 2023)

### Reasons for worker retention/turnover problems reported by Small Hospitals

Respondents indicated that retention and turnover problems are driven by too few applicants, inability to compete with other employers for wages, and worker “burnout”.

- *[Registered nurse] Burnout / high traveler wages. We implemented tuition assistance to help with RN/BSN/MSN degrees.*
- *[Nursing assistant] Several NAC's have moved to the MA Apprenticeship program*
- *[Medical/Clinical Laboratory Technologist and Technician] Lack of applicants, bringing on internationally trained MT's & MLT's.*

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

Respondents highlighted changing orientation and onboarding for new employees to address the needs of workers with limited prior experience and changes to scheduling or content.

- *[Registered nurse] In person training brought back to the facility post COVID.*
  - *SANE, moderate sedation, and EMTALA*
  - *focusing on restraint training and suicide training.*
- *[Nursing assistant] NAC training on site*
- *[Medical assistant] It seems like we are having an abbreviated orientation due to lack of staffing.*
  - *We recently realized the need to train our MAs for pediatric patients and are making time to do so correctly.*
- *[Environmental services] ...implemented new training including Reliable Methods of Cleaning.*
- *[Multiple occupations] Patient Safety Training (workplace violence training- in person); Health equity training*

### New roles for existing employees and new occupations hired by Small Hospitals

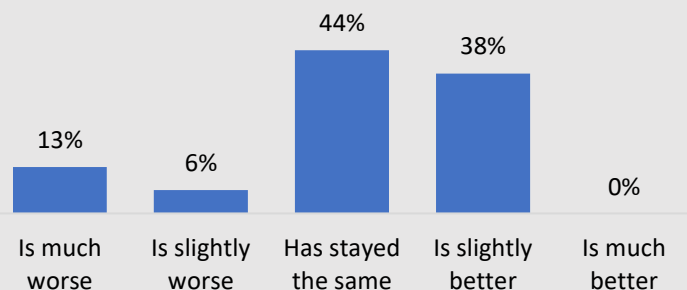
- *Registered Nurse working as a case manager*
- *Nursing assistant working as a scheduler*
- *Medical assistant helping as a Patient Services Representative*

## Overarching Workforce Issues: Themes and Examples

Responses by Small Hospitals to questions about current overarching workforce issues are summarized below. Earlier overarching and pandemic-related findings are at [www.wa.sentinelnetwork.org/findings/covid-19/](http://www.wa.sentinelnetwork.org/findings/covid-19/).

### **In the past six months, how has your organization's ability to staff your facility/facilities changed?**

Respondents commented on ongoing problems with recruitment and retention of a variety of occupation types.



- *[Much worse] We are having to utilize costly Travel nurses.*
- *[Slightly worse] We are not experiencing issues in nurse staffing, but in other support areas (radiology and rehab)*
- *[Stayed the same] Hiring RNs has been the majority of our struggle. Support positions are mostly easily filled.*
- *[Slightly better] it does vary somewhat by occupation.*

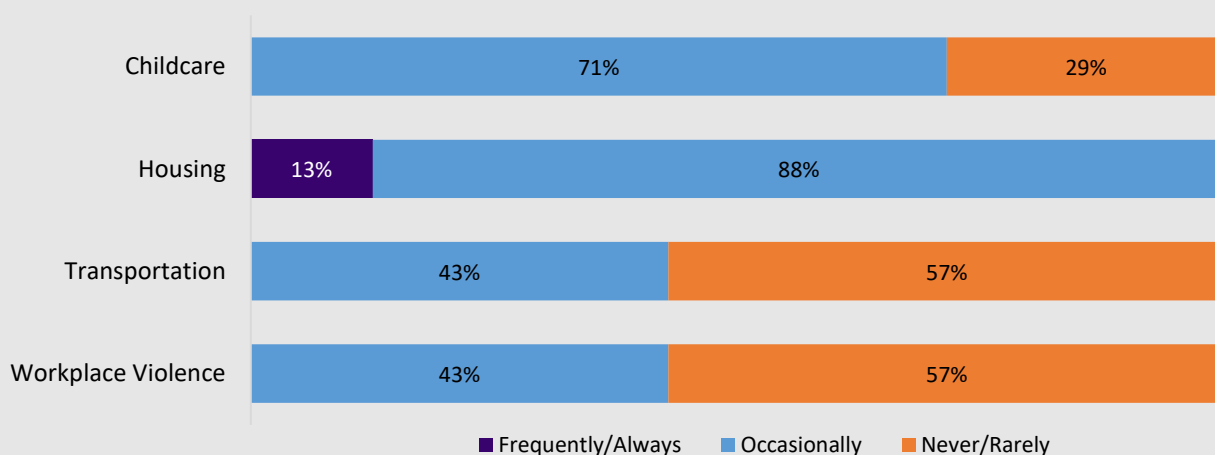
## Small Hospitals, 25 beds or fewer (Fall 2023)

### Overarching Workforce Issues: Themes and Examples (continued)

#### How has your facility's staffing affected your ability to respond to patient/client demand during the past year?

|  | %   | Comment examples   |
|--|-----|--|
| Delay in care for current patients/clients                           | 41% | <ul style="list-style-type: none"> <li>• At times we are challenged to find facilities to accept patients creating a delay in care in addition to straining our staff and ability to provide care..</li> </ul>   |
| Inability to take new patients/clients                               | 6%  | <ul style="list-style-type: none"> <li>• Wait times have increased ...to sometimes hours as we are struggling with juggling positions...</li> </ul>  |
| Reduction in the number of patients/clients you are able to care for | 12% | <ul style="list-style-type: none"> <li>• We had to close our OB services due to an OB nursing shortage.</li> </ul>   |
| No effect, operations continue as usual                              | 29% | <ul style="list-style-type: none"> <li>• The clinic has held steady with staffing over the last 6 months</li> <li>• We have had to supplement our RN shortage with agency RNs to continue to operate as usual..</li> </ul>   |
| Other  | 12% | <ul style="list-style-type: none"> <li>• In Radiology no effects to patient care,, we have been able to staff by paying double time and incentive pay. In Rehab we have had to reduce the number of our patients we can see to ensure acute care patient needs are meet while we continue to recruit.</li> </ul> |

#### To what extent have the following (childcare, housing, transportation, workplace violence) affected your ability to recruit and retain staff in the past year? What strategies has your organization used to address these challenges?



#### Comment examples

- We have partnered with a provider to have childcare on campus. We have not been able to approach housing very effectively. We promote public transportation.
- The hospital has purchased an apartment complex as well as a few other rentals to help with housing. The person in charge of housing ...is always working hard to troubleshoot any housing related issues that come about.
- We have rented several houses to help accommodate new upper management staff and agency RNs. Unfortunately, we have not been able to really address the housing issues for our staff. We have looked into building our own daycare facility several times, but have run into obstacles we have not been able to overcome. (Financing, state laws, etc.)
- Partnered with local childcare facility to provide "priority access" to [our] staff. We are researching commuting assistance options too.
- Flexible schedules.
- Workplace violence training, 24/7 security

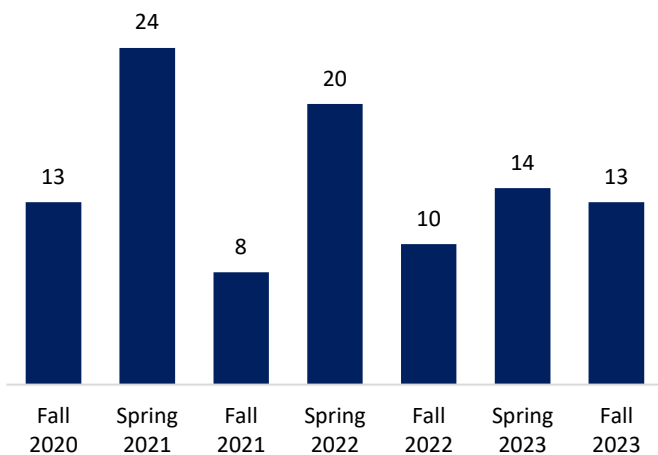
## Small Hospitals, 25 beds or fewer (Fall 2023)

### Overarching Workforce Issues: Themes and Examples (continued)

**Is your organization assisting workers who are pursuing education or training with the goal of advancing to a higher paying healthcare career? If yes, in what ways is your organization supporting these activities?**

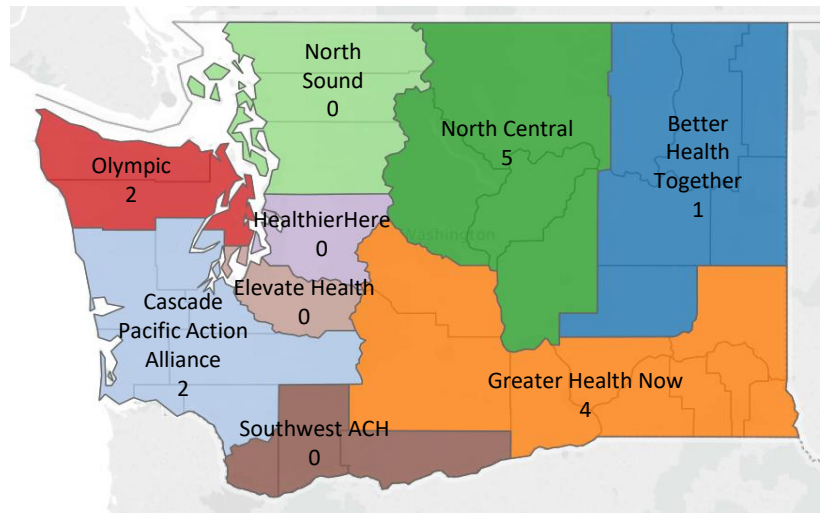
- *Tuition reimbursement/tuition assistance.*
- *Scholarships.*
- *Apprentice programs, renewed our HRSA status, our foundation in launching a scholarship program.*
- *NAC class, MA apprentice programs and tuition assistance.*
- *Provide \$3500.00 each year for education in an accredited program that aligns with current or future healthcare functions.*
- *We have program in place to pay back student loans. We also have signed up for an MA training program through the state but have not utilized it yet.*
- *We provide tuition reimbursement for staff and as an organization we qualify for [Public Service Loan Forgiveness] program*

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



\*Response counts prior to Spring 2020 are not shown due to space constraints.

**Number of Small Hospital Responses by Accountable Community of Health (ACH) (Fall 2023)**



Note: Each facility may serve clients/patients in more than one county, which is why map totals may exceed total unique responses.

### 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. The Sentinel Network is an initiative of Washington's Health Workforce Council, conducted collaboratively by Washington's Workforce Board and the University of Washington 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 organization's workforce needs to inform policy and planning responses.
- 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](http://www.wa.sentinelnetwork.org).

Contact: [healthworkforce@wasentinelnetwork.org](mailto:healthworkforce@wasentinelnetwork.org)

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