

Washington's Health Workforce Sentinel Network

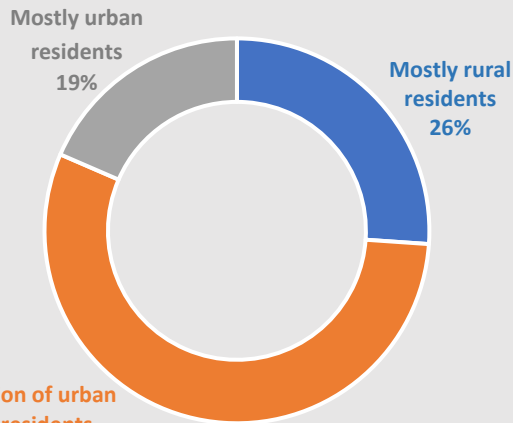
Findings Brief: Rural Health Workforce

Washington's Health Workforce Sentinel Network links the state's healthcare industry with partners in education and training, policy, and planning to identify and respond to emerging demand changes in the health workforce. Every six months, employers ("Sentinels") from across the state and from a wide range of healthcare sectors share their top workforce challenges. This report highlights findings regarding workforce challenges and successes specific to rural-serving healthcare organizations as of Fall, 2023. More in-depth findings from 2023 and prior years may be viewed at www.wa.sentinelnetwork.org/findings.

Rural Participation in the Sentinel Network – Fall 2023

The Sentinel Network questionnaire asks respondents to report the rural/urban composition of their service area. In Fall 2023, one-quarter of responding facilities indicated that they served **mostly rural residents** of Washington. Unless otherwise indicated, this report highlights responses from facilities that serve **mostly rural residents**.

"In general, does your facility provide services to:" *



A combination of urban and rural residents
55%

*Percentages are out of all Sentinel Network responses from Fall 2023

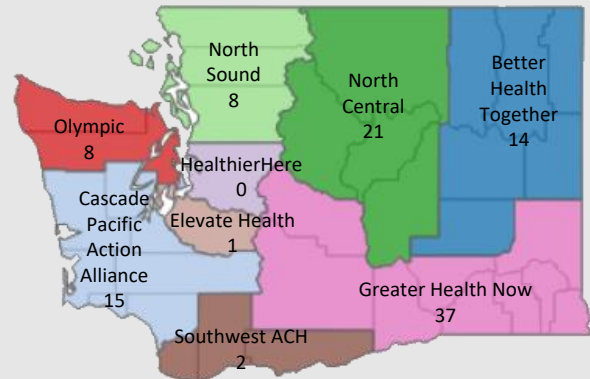
Facility types with the highest percentage of Sentinel Network respondents reporting that they serve **mostly rural residents (MRR)** in Fall 2023:

- Small hospitals (≤ 25 beds) – 92% of respondents serve MRR
- Rural health clinics – 75% of respondents serve MRR
- K – 12 schools – 43% of respondents serve MRR

See www.wa.sentinelnetwork.org/findings for findings summaries from these and other facility types

Fall 2023 rural responses came from across the state:

Number of Sentinel Network Responses From Facilities That Serve Mostly Rural Residents by Accountable Community of Health (ACH)



Workforce Themes Identified by Employers at Facilities Serving Mostly Rural Residents, Fall 2023

Employers from facilities that serve mostly rural residents identified several workforce topics that are particularly challenging in a rural setting:

- A perception that rural locations are less desirable for many healthcare workers and their families, especially for nurses and physicians.
- Many of the education and training programs for healthcare workers are not located in rural areas. This may lead to workers moving away from rural areas to pursue education and then deciding to permanently relocate. It also makes it harder to train workers with skills that are specific to rural areas.
- Employers from both urban and rural areas cite housing, childcare, and transportation as barriers to hiring and retaining workers. But rural areas are particularly likely to experience challenges related to these barriers.

Theme 1: Recognizing and addressing the desirability of working in a rural location

It can be difficult to find workers who are interested in working in a rural area:

- [Primary care medical clinic - Family Medicine Physician] *Hard to get providers to commit to rural areas, their families don't want to live in rural areas and possibly they are not paid enough money to pay expenses.*
- [Small hospital - Nurses] *It has been difficult to recruit RNs, LPNs and CNAs to our small rural community. Although we are competitive with wages, it is difficult to provide the comprehensive medical benefits packages of other health systems.*
- [Rural health clinic - Pediatrician] *It's difficult to find pediatricians who want to live in a rural community and work in a clinic with a primarily Medicaid-based population. Plus, they can get paid more if they live in a larger community, which is just 45-50 minutes away. Many pediatricians in larger cities don't have any hospital duties at all (no newborn rounding, no delivery attendance, no inpatient admissions) so we have largely eliminated those responsibilities from our pediatricians, except for newborn rounding.*
- [Behavioral-mental health clinic – Multiple occupations] *Our rural location seems to be the biggest barrier. We are located near [a larger city] which has numerous programs and open positions. Job seekers do not have to commute so far when there are vacancies in competitive areas like [the larger city].*
- [K – 12 School – Multiple occupations] *We are a small school district who can't pay as much as other districts. There seem to be a low amount of people who want to work in a small school setting.*

Some employers develop creative strategies to attract workers:

- [Small hospital - Medical/Clinical laboratory technician and technologist] *These positions have been open a very long time. The lab Director and HR Director are now working on a foreign worker avenue for these positions.*
- [Rural health clinic – Nurse practitioner] *It is harder and harder to find PNs who want to do more than simply work 9-5, take no call, and have all their nights and weekends free. We try to offer other types of benefits such as more PTO and CME than other clinics, and our culture and Mission is something unique that resonates with certain people.*

Theme 2*: Many education programs are not in rural areas. Employers report mixed results from solutions.

Many employers indicate that a lack of local training programs makes it harder to develop a pool of qualified workers:

- [Rural health clinic - Medical Assistant] *Our closest training program is 30-minutes away in a highly populated area.*
- [Small hospital – Multiple occupations] *[We are a] rural area with difficulty in recruiting [and a] lack of educational opportunities for community members to train in this field.*
- [Behavioral-mental health clinic – Bachelor's-prepared counselor] *Because we live in a rural area and don't have convenient access to higher education for bachelor level folks it is hard to find this level of counselor. We have worked with our community college to develop a program for BA level counselors with a path to a Master's program therapist.*

Some employers implement in-house programs, work with established programs or bring in trainees:

- [Small hospital – Pharmacy Technician] *Many training programs closed over the past few years... We established a Pharmacy Technician - In-Training program.*
- [Community clinic] *Always limited in number of well trained Certified MAs in area. [We] participate in WA Assn apprenticeship program... [And we] experienced a lot of turnover with minimally trained DA's from other short local programs. Currently starting the WA Assn DA program to train our own... [Also] limited candidates for rural area [dentists]. We are currently working with Ride [Regional Initiatives in Dental Education] for last 7 years but cannot fill enough positions.*
- [Behavioral-mental health clinic – Marriage & family therapist, mental health counselor] *There is a shortage of therapists in the workforce... We target the Universities for internships. We now pay for these internships in hopes of obtaining interest and possibly retaining them at the end of the internship.*

However, the success of these approaches has been mixed:

- [Community clinic – Dental Assistant] *Lack of candidates in the area, not experienced, no formal training. We have trained on the job but that takes a lot of time and resources to train.*
- [Rural health clinic – Medical Assistant] *Although we have an MA-C apprenticeship program, that has allowed us to put 4 employees through to become MA-Cs, we are still facing a shortage and aren't receiving any qualified applicants for the position.*

*Employer comments for Theme 2 come from Spring 2023 and Fall 2023.

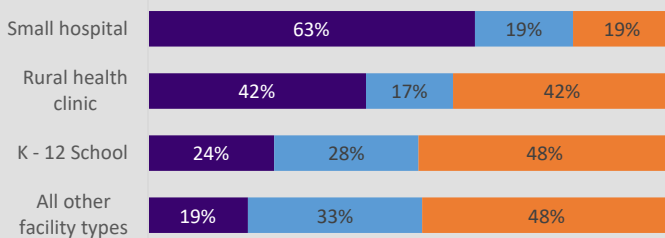
Rural Health Workforce (Fall 2023)

Theme 3: Addressing housing, childcare, and transportation as barriers to hiring and retention in rural areas

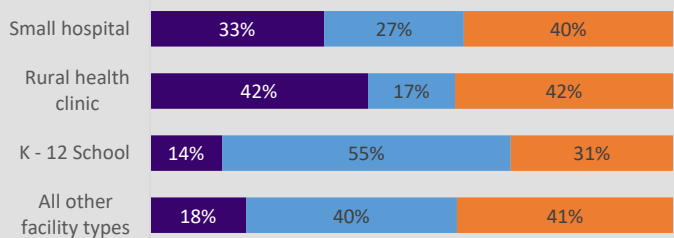
Facility types with the highest percentage of Sentinel Network respondents reporting that they served mostly rural residents were more likely to report challenges with housing, childcare, and, to a lesser extent, transportation:

To what extent have the following affected your ability to recruit and retain staff in the past year:

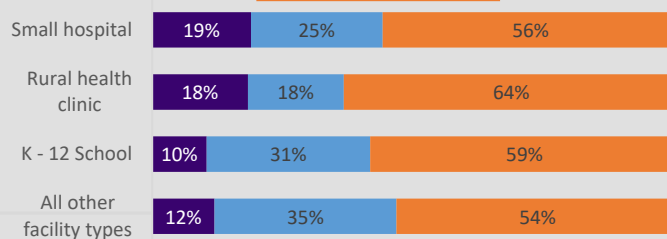
Housing availability*



Childcare availability*



Transportation options*



■ Frequently/Always
■ Occasionally
■ Never/Rarely

*Percentages are out of all Sentinel Network responses from Fall 2023

Challenges related to housing, childcare and transportation reported by employers at rural-serving organizations:

- [Rural health clinic] *Inventory of available housing, and corresponding impact on pricing [in our rural area] remains a challenging aspect of recruitment.*
- [Behavioral-mental health clinic] *Availability of housing in some of our more rural counties has made it difficult for staff willing to relocate as there isn't decent, affordable housing available in these smaller communities.*
- [K – 12 School] *We are a rural beach town and new construction focuses on AirBNB's and very high-end vacation homes.*
- [Small hospital] *Housing and childcare are big issues for recruiting and retaining RNs [and other occupations].*

Some rural-serving organizations have tried to address barriers related to housing, childcare and transportation:

- [Specialty medical clinic] *Employee Assistance Program to assist with housing and childcare and transportation. However, transportation is an issue in all our rural sites as public transportation is not regular.*
- [Rural health clinic] *We looked at commuting benefits, including ride-share and a bus [run by our organization]. We also provided funding for a local childcare facility who gave [our] employees "priority" when placing their kids.*
- [Small hospital] *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.*
- [Rural health clinic] *We have rented several houses in the community to house new providers for 6 months until they can secure permanent housing.*

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.

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