Washington's Health Workforce SENTINEL NETWORK

Findings Brief: *Community Health Centers*

Spring 2026

This brief highlights workforce needs reported by Washington's **federally qualified health center or community clinic providing care free or on sliding fee scale (community health centers)** to the Health Workforce Sentinel Network during **April/May 2026.** These facilities have contributed workforce insights since 2016, across 18 reporting periods. More findings are available at wa.sentinelnetwork.org/findings.

Community Health Centers

Top occupations with exceptionally long vacancies*

Rank	Fall 2021	Spring 2022	Fall 2023	Spring 2024	Spring 2025	Spring 2026
1	Registered nurse	Registered nurse	Registered nurse	Medical assistant	Registered nurse	Physician/Surgeon
	Medical assistant	Medical assistant		Registered nurse		
				Physician/ Surgeon		
2	Physician/ Surgeon	Physician/ Surgeon	Physician/ Surgeon	Dental assistant	Medical assistant	Medical assistant
	Mental health counselor			Dental hygienist	Physician/Surgeon	Nurse practitioner
						Registered Nurse
3	Dental assistant	Dental assistant	Medical assistant	Multiple occupations cited at same frequency	Dental hygienist	Dental hygienist
	Dental hygienist	Office staff / front desk / scheduler				
	Nurse practitioner					
4	Substance use disorder professional	Dental hygienist	Dental assistant		Office staff / front desk / scheduler	Multiple occupations cited at same frequency
	Social worker (Healthcare)	Mental health counselor				
		Nurse practitioner			Nurse practitioner	
5	Multiple occupations cited at same frequency	Psychologist, clinical and counseling	Dentist			

← Most cited

*Note: Occupations cited by the same number of responses share the same rank number. Findings prior to Fall 2021 not shown due to space constraints and may be seen at wa.sentinelnetwork.org. Findings from Fall 2022 and Spring 2023 not shown due to low response numbers.

Reasons for Exceptionally Long Vacancies

Some respondents reported that exceptionally long vacancies were driven by a shortage of qualified and interested applicants, along with competition from higher-paying employers, cost-of-living pressures, rural location challenges, and licensing delays. Examples of responses include:

- *[Physician/Surgeon] This is specifically one c-section trained high-risk OB provider, the vacancy has been unfilled for over 1 year and is being impacted by our HPSA score which is too low to qualify for NHSC.*
- *[Medical assistant] We have had challenges hiring already experience/licensed MA-Cs and have implemented our own MA-R training program in concert with our local community college.*
- *[Multiple occupations] Shortage interested in working with very complex patients in an FQHC.*
- *[Multiple occupations] We are unable to increase base salary for new graduates to match competitors. We are also unable to match wage increases for experienced candidates offered by larger competitors.*

Reasons for Retention/Turnover Problems

Some respondents highlighted workload and patient acuity issues as the top reasons for retention/turnover problems. Other reasons include relatively low pay and high cost of living, competition from higher-paying employers, and factors such as limited training support and departures after loan repayment or for better opportunities. Examples of comments include:

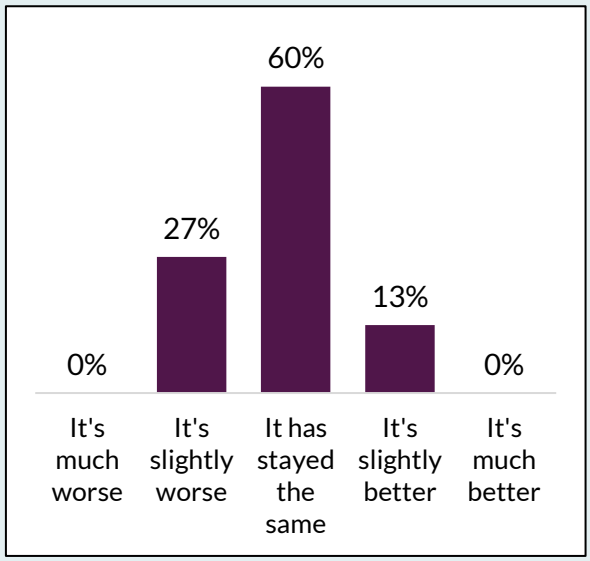
- *[Registered nurse] Salary limitations - Larger hospitals nearby with higher pay scales. If we could afford to increase pay it would likely help with recruitment and retention.*
- *[Nurse practitioner] Lack of experienced NPs (and PA-C) who want to practice as [primary care providers] for the compensation rates we're able to pay and maintain fiscal solvency. These professionals can make more elsewhere (…)*
- *[Multiple occupations] Complexity of patients and cost of living in [our area] compared to wage.*
- *[Social worker] More appealing practice style and better compensation in private practice.*

Overarching Workforce Issues: Themes and Examples

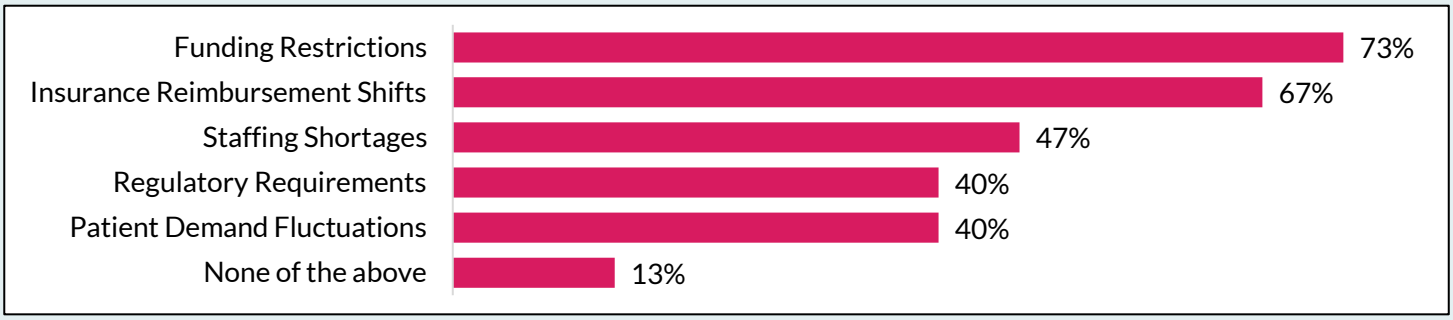
In the past year, how has your organization's ability to staff your facility/facilities changed?

Over half (60%) of respondents noted that their ability to staff their facility has "stayed the same" over the past year, with over a quarter (27%) saying that "it's slightly worse." Examples of responses include:

- [It's stayed the same] *Building stability begets more stability!*
- [It's stayed the same] *For the past year we have continued to have the same vacancies. Because we have not be able to hire, we have stretched our current staff. We continue to post open positions and to hold rounds of interviews.*
- [It's slightly worse] *Steady wage increases have outpaced payment advances. We're coming out of a pay freeze, but not because we've recovered financially, but because we've decided to dig into reserves to reduce the financial impact of turnover.*



Has your organization recently taken steps or made plans to take steps to navigate uncertainty or prepare for potential changes in any of the following areas? (select all that apply) Responses included:

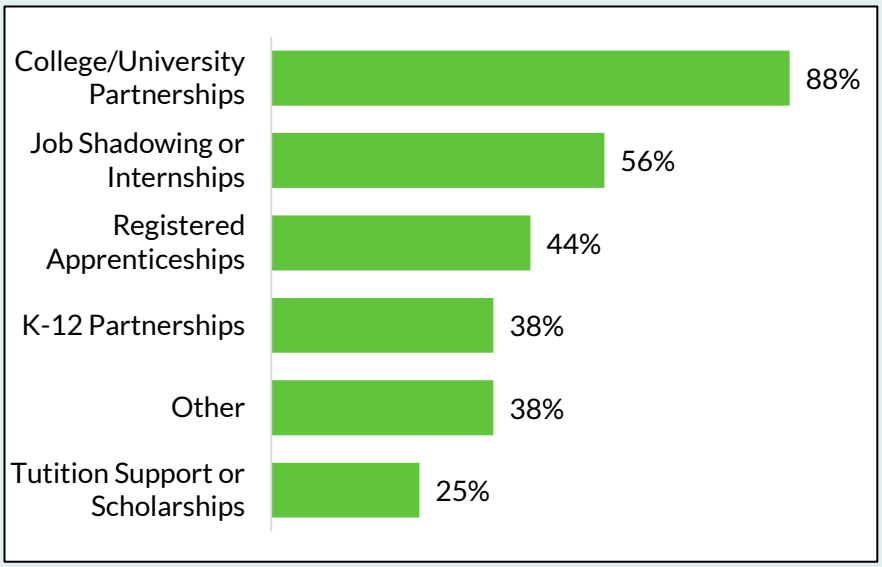


- *1) We are anticipating losses in Medicaid covered patients due to HR-1, and working to provide outreach assistance to mitigate the losses; 2) the changes to PFML are dramatically impacting our ability to cover the patient needs in our clinics - we can't afford to 'over hire' to fill the gaps so this makes service delivery a challenge.*
- *My organization shifted to a 32-hour workweek to improve work-life balance and hopefully attract qualified applicants.*

Overarching Workforce Issues: Themes and Examples (continued)

Which of the following workforce outreach, pipeline development, or early-career development strategies does your organization support? (select all that apply) Responses included:

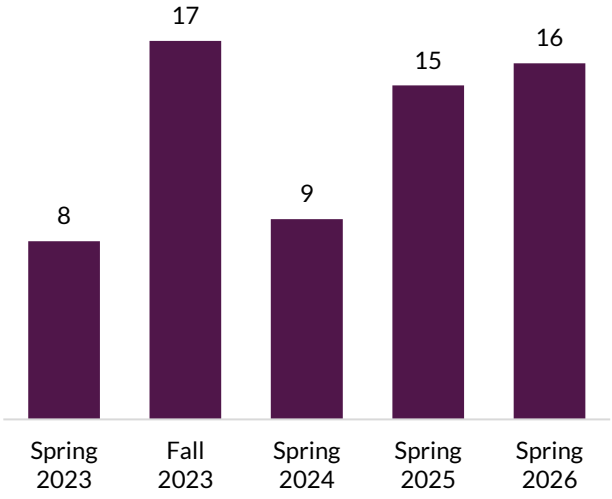
- *Rotations with physicians, APPs, nurses, MAs, MSWs. We developed an APP residency program, and they do have a commitment to stay at least one year post residency.*
- *Medical Assistant - Registered to Certified pathway in concern with local college, shadowing/training site for NP/PA-Cs and RNs.*
- *We've rolled out these programs for medical assistants, front office staff, and registered nurses. Employees in a career ladder role have experienced lower than average turnover - with most being at zero turnover.*



Has your organization adopted, or is it considering adopting, any new or existing technology?
Among respondents, some reported adopting AI tools to reduce workload, while others reported no adoption or policies against AI use.

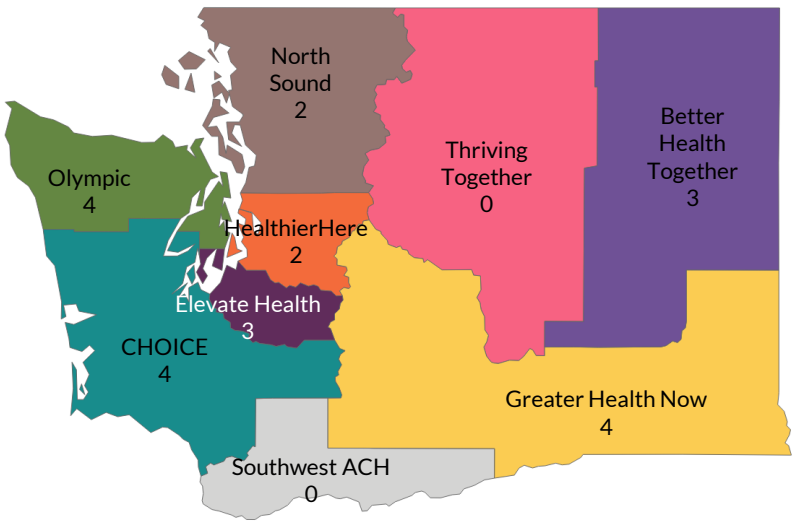
- *[Our organization] has adopted AI Ambient Voice technology to automate creation of patient notes. In addition [we have] adopted use of Microsoft Copilot to support and streamline general administrative tasks.*
- *I would like to note that [our organization] has an active policy to NOT adopt AI […] due to the environmental impact of data centers.*
- *We've implemented AI tools (Freed AI) as a HIPAA compliant AI tool which reduces provider charting burden.*

Number of Responses from Community Health Centers in WA by Data Collection Date



**Findings prior to Spring 2023 not shown due to space constraints.*

Number of Responding Community Health Centers by Accountable Community of Health (ACH), Spring 2025



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, with a focus is 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 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:
https://wa.sentinelnetwork.org/.
Contact: healthworkforce@wasentinelnetwork.org
Sentinel Network Team:
UW Center for Health Workforce Studies: Benjamin Stubbs, Grace Guenther, Nhu Nguyen, Amy Clark, Susan Skillman
WA Workforce Board: Renee Fullerton, Donald Smith