Washington's Health Workforce SENTINEL NETWORK

Findings Brief: *Rural Health Workforce*

Spring 2026

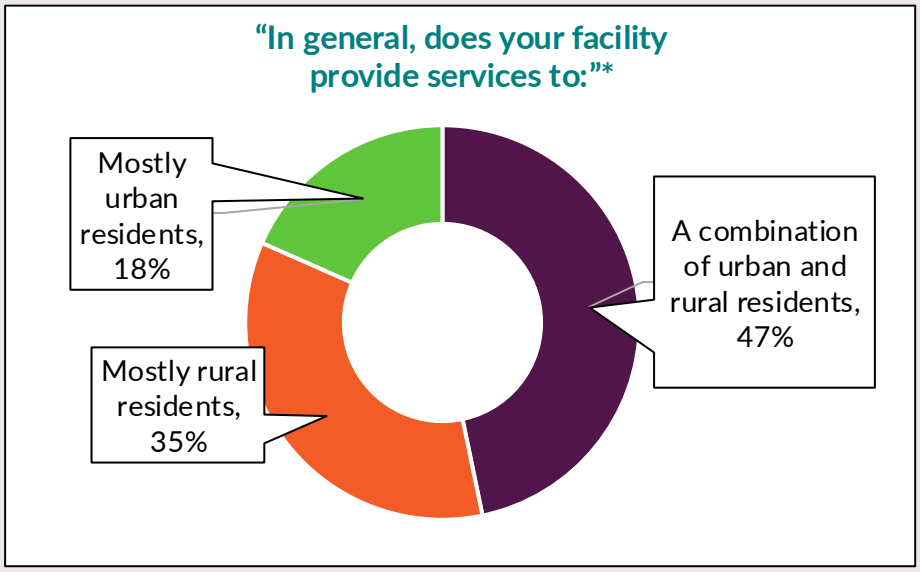
This brief highlights findings regarding workforce challenges and successes specific to **rural-serving healthcare organizations** as of Spring 2026. Washington's Health Workforce Sentinel Network links the state's healthcare industry with partners in education and training, policy, and planning to identify and respond to emerging demand changes in the health workforce. Employers ("Sentinels") from across the state and from a wide range of healthcare sectors share their top workforce challenges. More findings are available at wa.sentinelnetwork.org/findings.

Rural Participation in the Sentinel Network , Spring 2026

The Sentinel Network questionnaire asks respondents to report the rural/urban composition of their service area.

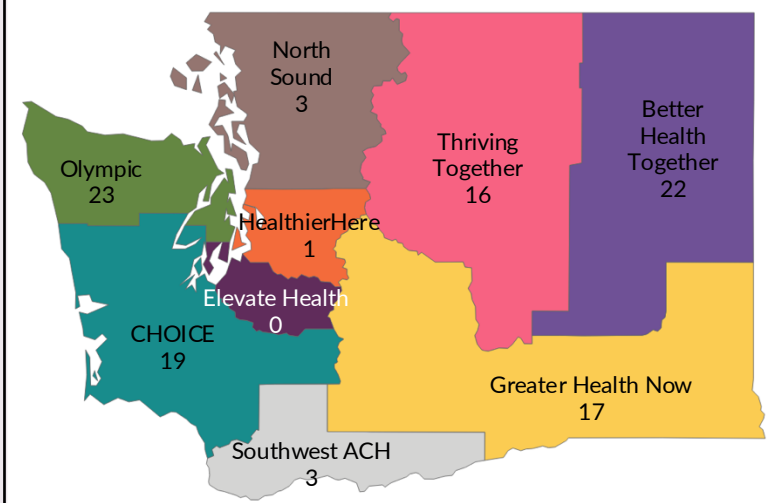
In Spring 2026, 35% of responding facilities indicated that they served mostly rural residents of Washington.

Unless otherwise indicated, this report highlights responses from facilities that serve mostly rural residents.



*Percentages are out of all Sentinel Network responses from Spring 2026

Rural Responses by Accountable Community of Health (ACH), Spring 2026



Facility types with the highest percentage of Sentinel Network respondents reporting that they serve mostly rural residents (MRR) in Spring 2026:

- Small hospitals (< 25 beds) – 100% of respondents serve MRR
- Public health organizations– 88% of respondents serve MRR
- Rural health clinics – 86% of respondents serve MRR

Workforce Themes Identified by Facilities Serving Rural Residents

Employers serving mostly rural residents reported that workforce challenges were influenced by rural recruitment barriers, competition from larger employers, and workload-related retention concerns as reasons for exceptionally long vacancies and/or retention and turnover issues. Respondents frequently cited difficulty attracting candidates to rural communities, challenges competing on compensation, and work environment factors such as workload, burnout, and limited support, particularly for nursing and other clinical occupations.

- Rural location and limited workforce supply make it difficult to attract and retain staff.
- Larger healthcare employers often offer more competitive compensation and opportunities.
- Workload, burnout, and job demands affect retention.

Rural workforce challenges contribute to vacancies and turnover

Theme 1: Limited local workforce supply and rural location can make it harder to attract qualified candidates.

Rural employers reported challenges related to a small local labor pool, difficulty recruiting people willing to relocate, commuting burdens, and limited housing availability.

- *[Small hospital] We are rural with the nearest cities 40 minutes or 1 hour 15 minutes away. This makes attracting talent difficult.*
- *[Behavioral health agency] Cannot find qualified individuals that want to relocate to the area.*
- *[Small hospital] There is no housing that the organization can provide, or that the community has available.*

Theme 2: Smaller and rural employers often face challenges in competing with larger healthcare organizations on compensation and career opportunities.

Employers reported difficulty competing with other healthcare organizations that may offer different compensation, benefits, or career advancement opportunities.

- *[Behavioral health agency] Most RNs accept positions with large hospital systems who offer higher pay.*
- *[Community health center] Salary limitations. Larger hospitals nearby with higher pay scales.*
- *[Public health organization] I lost a Public Health Nurse that could make more money being a traveling nurse.*
- *[Community health center] Federal and state loan repayment programs are a beneficial recruiting tool for new graduates but we churn through providers following loan repayment because we cannot compete with salary and benefits.*

Theme 3: Workload, burnout, and job demands affect retention.

Respondents described staffing levels, workload demands, workplace support, and job requirements as factors that may influence employee retention.

- *[Community health center, ARNP] Staffing challenges and increased administrative burdens required by insurance plans and other regulatory authorities are also common contributing factors.*
- *[K-12 School] School nursing is very isolating and challenging to retain good nurses. School nurses do not feel valued and treated as a part of the team. The pay is low due to spreading pay over summer months and holidays.*

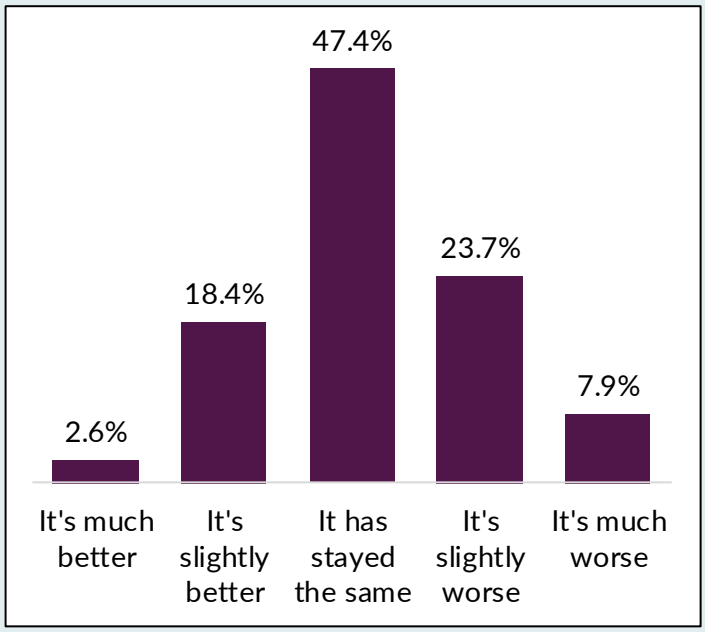
Rural Employers' Responses to Overarching Questions

The following questions were posed to all respondents to answer across their organization and facility needs. Here are responses from facilities and employers serving mostly rural residents.

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

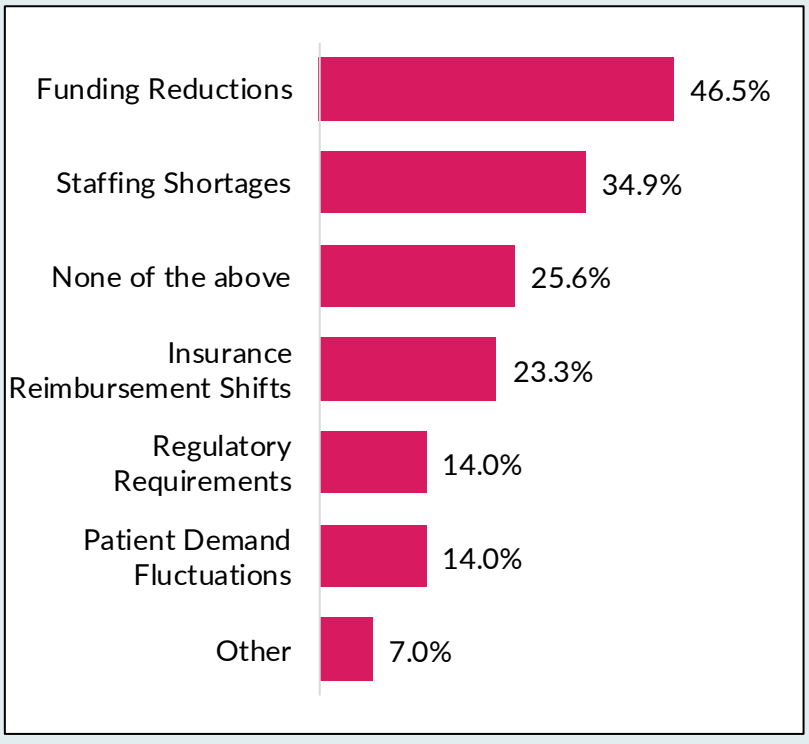
Employers serving mostly rural residents generally reported little change in their staffing, with ongoing challenges recruiting qualified candidates for certain clinical, provider, and shift-based positions. Some organizations noted improvements from recruitment and retention efforts, while others cited funding constraints and persistent vacancies.

- *[It's stayed the same, Large hospital including, behavioral health, primary care, and pharmacy services] There is always an ebb and flow, but in general the difficulties in staffing the positions listed have stayed constant in the past 5 years.*
- *[It's slightly better, Behavioral health organization] I came on as the Human Resources Director in July of 2025 and began implementing a recruiting and retention program which has had positive results in time to fill and number of vacancies.*



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? (Check all that apply)

In response to changing funding, reimbursement, and policy environments, employers described a range of strategies to maintain operations, including tighter budget management, workforce adjustments, process improvements, and exploration of alternative funding sources.

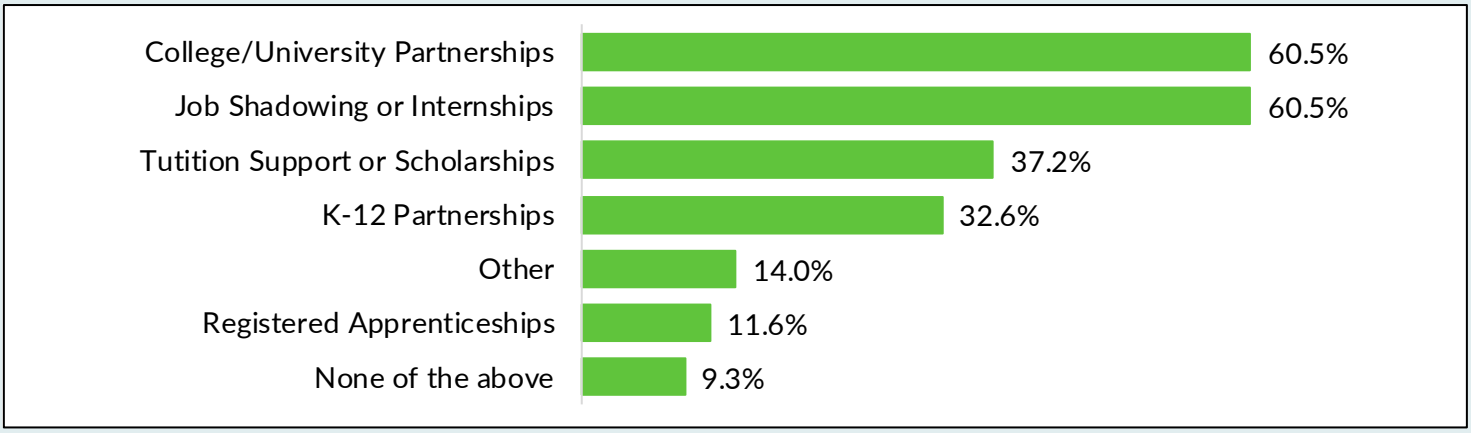


- *[Large hospital including, behavioral health, primary care, and pharmacy services] We have been in a sort of 'hiring freeze' since October 2025. We are evaluating weekly the needs of the hospital, and positions are being approved as-needed for the hospital to continue operations smoothly.*
- *[Community health center] Increased administrative burden such as medication prior authorizations, changes in referral processes, shift to digital data capture (coding) for quality measures have led to an in-depth review of processes. The intent of the review is to streamline processes to maximize the limited resources available and align tasks with the appropriate member of the care team.*
- *[Public health organization] We are not filling open positions due to Foundational Public Health Services funding shortages and have made changes to job descriptions/filled positions to account for some of the shortages.*

Rural Employers' Responses to Overarching Questions

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

Respondents serving mostly rural residents described a variety of workforce development activities, including partnerships with educational institutions, internships, externships, clinical rotations, apprenticeships, job shadowing, and tuition support programs. Several respondents indicated that these efforts helped create recruitment pathways and support workforce development across healthcare occupations.



- *[Small hospital] We have students shadow in ED, family medical and acute care. We have a MA apprentice program, we partner with local CC and [university] for students in lab, radiology, nursing and 3rd year med students.*
- *[Rural health clinic] At my location, 4 out of the 5 MA's came from the local community college MA program after doing their extern in this clinic.*
- *[Large hospital including, behavioral health, primary care, and pharmacy services] Medical Assistants, Phlebotomists, CNAs have been three of the big positions we have focused on. They have been very helpful for us, providing us with multiple candidates for each MA cohort.*
- *[Primary care clinic] We have medical students come for rotations and recently added a doctor who had rotated with us as a student.*

Has your organization adopted, or is it considering adopting, any new or existing technology?

Respondents described limited but growing use of AI and other technologies, most commonly for documentation, note-taking, transcription, administrative tasks, and scheduling. Several organizations reported exploring or piloting AI tools, while others indicated that adoption remains in early stages or is still under evaluation.

- *[Community health center] [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.*
- *[Community health center] We've implemented AI tools (Freed AI) as a HIPAA compliant AI tool which reduces provider charting burden.*
- *[Rural health clinic] We have virtual scribe for providers which has in turn increased chart closure time and work life balance for providers using this technology.*
- *[Large hospital including, behavioral health, primary care, and pharmacy services] AI. This is early and hasn't been intertwined with our workflows yet.*

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:
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WA Workforce Board: Renee Fullerton, Donald Smith