### White Paper | Nursing Shortage



Nursing Shortage - 5 strategies hospitals can use to survive the aftereffect of COVID-19



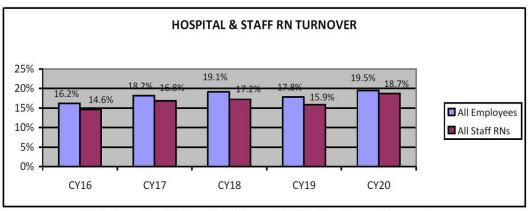
# Nursing Shortage - 5 strategies hospitals can use to survive the aftereffect of COVID-19

#### The COVID Crisis Domino Effect

The domino sequence was already set in the nursing crisis. COVID-19 was the toppler that set the fallout of events in motion. Economists and health specialists project the nursing shortage will worsen over the next decade.

The World Health Organization (WHO) estimated the nurse shortage would reach 9 million by 2030, a projection made *before* the COVID-19 crisis. Now, there are monthly reports with new predictions of labor shortages in the healthcare field.

There are 4 million RNs practicing in the United States. <sup>1</sup>According to NSI Nursing Solutions' Survey, the turnover for RNs stands at 18.7%. This means approximately *one in five* workers has resigned from their position. <sup>2</sup>A recent survey shows that three out of ten nurses want to leave their current employer.



NSI National Health Care Retention and RN Staffing Report, March 2021

The pandemic created new challenges for our healthcare system that was already overtaxed. There are tangible and intangible aspects to this problem that makes it more complex.

### Merely a Matter of Money?

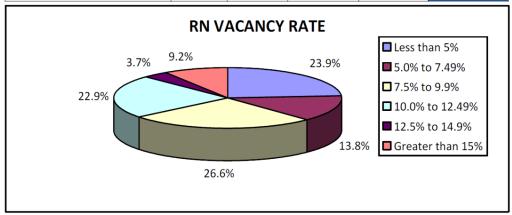
Some might think this is merely a matter of money; unfortunately, it's not that simple. The health field is one of many career paths caught in the cycle of The Great Resignation. Unreasonable demands, unanswered concerns, and clients that can be verbally (or physically) abusive all play a part in workers leaving their current position.



Isabella Romero is an RN at an acute care hospital in Loveland, CO. "Most of us have witnessed more death during this pandemic than in our entire careers. It's a neverending sea of patients lining the halls with no beds available. We are exhausted."

At the start of the pandemic, nurses were willing to make the sacrifice, but the crisis has created a vicious downward spiral. Nurses experiencing burnout are leaving; the nurses that remain must learn to do more with less. The added responsibility causes stress, and more nurses leave. Their numbers are dwindling in this unending cycle.

RN VACANCY RATE	2017	2018	2019	2020	2021
Less than 5%	18.2%	15.8%	21.9%	19.3%	23.9%
5.0% to 7.49%	31.8%	30.5%	22.8%	18.2%	13.8%
7.5% to 9.9%	27.3%	28.4%	31.6%	30.7%	26.6%
10.0% to 12.49%	9.1%	12.6%	12.3%	15.9%	22.9%
Greater than 12.5%	13.6%	12.7%	11.4%	15.9%	12.9%



NSI National Health Care Retention and RN Staffing Report, March 2021

The pandemic has been with us for 1.5 years, and as we were hopeful that it was winding down, the Delta Variant sent us back to square one. The immense stress led to burnout; nurses left the field, and unworkable demands led to nursing strikes.

### Survey: 100% of health leaders say they are struggling

<sup>3</sup>A survey of health leaders from 73 hospitals shows that 100% are struggling with staffing issues. Here are 5 strategies hospital systems can use to reduce nurse shortages.

### STRATEGY ONE: Adopt a team-based approach

### Team-based nursing – getting back to basics

The team (flat organization) nursing staff model was developed in the late 50s, consisting of a head nurse who led a team of inexperienced nurses, CNAs, and other unlicensed assistive personnel. The charge nurse was responsible for the training and scheduling of the team. As the person spending the most time with the patient, the charge nurse was directly responsible for developing patient care.



"Our traditional physician training reinforced working independently and that all decisions needed to go through us. Everyone wins when we shift to a more efficient, effective team-based approach."

Dr. Sarah Henderson (center), Interdisciplinary Medical Team, Medical Center in Sioux Falls, SD

4"To provide costefficient, effective care in today's environment, we need to utilize all members of the team to provide care. Primary care physicians often do things we don't need physicians to do. We can provide higher quality, costeffective, better care through a team approach."

This organizational structure adds speed and creativity to the problemsolving process. Bringing together a team of peers can quickly resolve problems that an individual can't.

Magnet hospitals use flat (decentralized) organization models. They have elevated RNs to primary care managers. This transformational leadership tactic leads to decrease turnover and greater nurse retention.

The team-based model is an excellent distribution of resources; this staff structure's primary purpose is to make up for staff shortages. The model worked in the 50s and still works today. Team organizations promote collaboration and a positive environment which leads to higher productivity.

### A team-based model empowers your employees

The truth is that nurses do not want to go on the picket line. Healthcare workers do not want to abandon patients, especially in a crisis taking millions of lives. Strikes are not a sign of greed; they are a sign of frustration.

Many healthcare workers feel frustrated because they believe they are powerless to change their work environment. A team dynamic can promote camaraderie, empower nurses to control their work environment, and positively influence inexperienced staff. This dynamic shows your staff that you heard their concerns, are taking action, and value their contribution in the workplace.

Some may wonder if nurses can succeed in this leadership role – they can. RNs are highly qualified to perform some tasks that physicians hold. The WHO agrees it's time to let nurses have the reigns and perform to the full extent of their competencies. Not only does it benefit nurses in the future, but it may address the physician shortage as well.

### A team-based model helps physicians and nurses

<sup>5</sup>Nurses can safely and effectively provide a large proportion of primary health care but are often prevented from working to the full extent of their education and training.

**World Health Organization** 

The spirit of cooperation is needed to allow nurses to fulfill all of the duties they are trained to perform. By fully utilizing the nursing workforce, a hospital can decrease staff shortages.

The WHO further states, "The full utilization of nurses' competencies can help decrease disparities in access to health services for vulnerable, rural, and remote populations, including in times of health emergencies and crises. Professional nurses can effectively provide a wide range of PHC services and non-communicable disease care, including prescribing medications and certain diagnostic tests."

This dynamic helps doctors and nurses. While we are losing nurses at an alarming rate, we are losing doctors as well. The Association of American Medical Colleges (AAMC) forecasts a shortage of 124,000 physicians by 2034. Using tactics that worked in the past and embracing new solutions will strengthen the healthcare industry in the future.

### STRATEGY TWO: Tackle the \$62 billion elephant in the room

### Counting the costs of forced overtime

Forced overtime is necessary but can cause more significant problems if it is unchecked and personnel works too many overtime hours. Without rest, nurses can suffer from sleep deprivation. The following are *annual* statistics on sleep deprivation in the healthcare industry:

- 6Sleep disorders cost the health care industry \$62.3 billion
- Sleep deprivation causes medical errors that lead to 50,000 100,000 patient deaths
  - Approximately 19,000 malpractice lawsuits have been filed
- In the US, medical errors are the third leading cause of death (and killed more people than COVID-19 in 2020)

Lack of sleep due to forced overtime has a measurable cost that needs to be addressed. Adding mental and emotional exhaustion, frustration from feeling powerless, and sleep deprivation, this describes burnout.

### How to manage burnout

Giving your team the tools to deal with stress can restore their mental health. There are methods to manage burnout that already exist in most hospitals. Transform empty waiting rooms into employee lounges where staff can gather for peer support. Encourage yoga, meditation, or mindfulness exercises that your team can perform on breaks.



"Nurses working in the inpatient setting were 20 percent more likely to have received mental health or well-being support and resources. This disconnect between nurses not perceiving adequate mental health support despite employers' efforts in this area parallels findings in McKinsey's recent national employer survey, where 71 percent of employers with frontline staff reported supporting mental health well or very well, compared with 27 percent of frontline employees who agreed."

> McKinsey & Company 2021 Report

#### Ensure your team has full access to Telehealth resources

Of all females in the workforce, female nurses are twice as likely to commit suicide. Colleague bullying, nurses abused by angry patients, and managers not properly addressing concerns while demanding more overtime are taking their toll on the nursing profession. Not to mention that dealing with the deaths of hundreds or thousands of patients who could not be saved and the grief of loved ones can stress a worker's mental health. Does your team suffer in silence?

Nurses must have access to therapists. Many apps allow your staff access to teletherapy 24/7. When working long hours, staff members are cut off from their usual support systems. Some employees are uncomfortable speaking in groups, and Teletherapy opens another avenue to improve their mental health.

#### Make breaks mandatory

When team members work during their breaks, their bodies and brains don't have time to recharge. Make breaks mandatory and *enforce them* with the same seriousness as forced overtime—the habit of "checking one last task while on a break" must be broken. When a staff member is on a break, someone else needs to take their duties until they return.

#### Use your staff as a valued resource

Do you know that your staff has brilliant ideas that can save the hospital time and money? Managers need to listen to and implement ideas that can be completed quickly and are low-cost. Be sure the staff member receives recognition and reward for their contribution. It will encourage more workers to share ideas.

### OSHA acknowledges the risks of excessive overtime

Although OSHA does not regulate work hours, this Federal Institution acknowledges safety risks and productivity loss linked with high overtime. The pandemic has been financially crushing to the healthcare industry. However, we can grow, be a resource, and use what we have at our disposal to care for employees. Low-cost solutions today can prevent major financial drains in the future, and creative best practices will save lives.

### STRATEGY THREE: Use the power of AI to ease healthcare burdens

### How many lives can AI save?

Al technology has been around for a while but has gained significant attention during the pandemic. Als are programmed to perform repetitive tasks so the nursing staff can concentrate on patients and more complex duties.

Al can assist in almost every facet of healthcare and save lives. What if Al can wipe out the human error that is caused by fatigue saving 100,000 lives annually? What about Alarm Fatigue? Al can alert nurses or respond to an alarm in a patient's room, and they can be an extra pair of eyes that checks for accuracy.

"An ounce of prevention is worth a pound of cure" is an adage for the health community. All can make this axiom a reality with real-time data that analyzes patients' symptoms and suggests treatments that prevent illness before it starts.



Grace, Hanson Robotics' Healthcare Assistant

**7**Grace, the AI healthcare assistant, was created to assist nurses and improve the patient experience. It can be an exciting time for nurses to train the newest team member and witness its full potential. Grace is still scheduled to be mass-produced this year.

### Al benefits the hospital and the community it serves

All can help patients get involved with their healthcare. There are digital self-care tools that allow patients to monitor their symptoms at home and report symptoms to their healthcare team.

These devices are connected to the patient's mobile phone. If an inperson visit is necessary, it's scheduled through the Al. A patient can report concerns, schedule appointments, refill prescriptions, and pay bills by mobile. These features drastically reduce the time a patient spends in a waiting room. Spending less time inside a hospital is guaranteed to increase patient satisfaction.

Artificial intelligence assists nurses with mundane administrative tasks. They offer valuable insight that helps healthcare workers make more educated decisions. In turn, it helps nurses provide better patient care. Digital technology customized for each healthcare system can resolve endless pain points nurses face every day. It can lead to greater satisfaction among nurses and increase their retention rates. Al can benefit a health care facility and its community.

### Al - the end justifies the cost

Not all Als are as complex as Grace, so any automation that will save time will save money. Most employees feel frustrated when dealing with outdated equipment; Al's ability to complete tedious tasks can boost productivity. Al may seem like a radical choice, but it may be more costefficient than it seems.

Travel nursing cost up to \$10,000 per week, and there are 300,000 vacancies across the US. Sleep disorders from forced overtime causes thousands of deaths and billions of dollars in medical errors—the Medical Industry waste \$935 billion per year on overtreatment and other unnecessary expenses.

The growing knowledge gap will widen if experienced nurses retire before passing their knowledge to the new generation. However, robotics offers Natural Language Processing that converts human language into computer language. It also possesses ML that constantly improves the learning process - a combination that makes AI the perfect teacher. With healthcare staff shortages projected to increase over the next decade, AI is a smart plan that is worth the cost.

### STRATEGY FOUR: Close the knowledge gap

### Seasoned nurses are leaving – and taking their experience with them

The healthcare industry may experience another domino effect, as overwhelmed nurses, in the early stages of their careers, are thrust into the fast-paced and brutal environment of this ongoing crisis.

An NPR report states that some new hires don't make it past the first 90 days. Others stay on long enough to fulfill the experience requirements of travel nursing agencies and then leave.

Work conditions caused by the pandemic motivated veteran nurses to retire earlier than expected. The supply of new nurses is not keeping up with the dire demand with the percentage of nurse vacancies growing every month. These nurses are taking their wisdom of operations, safety, and practical knowledge with them - even the unique history of each facility will be lost when they vacate. In reality, experienced nurses are becoming an endangered species.

Even with the mass exodus of experienced nurses, there may be a way to retain their talent. Nurses that are unwilling to stay on the frontline can still help decrease hospital shortages.

### Not all nurses of retirement age are ready to retire

The fear is that the most experienced nurses will retire before new generations fill the vacant positions. The knowledge gap will widen if there is no one to train new hires. Interestingly, a recent <sup>8</sup>McKinsey & Company report shows that not all nurses want to wind down their career; they want to move from the frontline. They are battleweary and are looking to make a horizontal career move. This is great news for hospitals.

The pandemic required nurses to float between multiple departments in the hospital. They picked up new skills, exercised and challenged their minds, and had the opportunity to shake up their mundane routines - they loved it. There are experienced nurses who have gained nearly two years' experience through hands-on training. Now is the time to harness that experience and educate a new generation.

It also shows the need for cross-training in different disciplines. It's more advantageous for nurses to have well-rounded general knowledge. Specialized disciplines are necessary, but nurses need training in digital technology, crisis response, leadership, and delivery in interdisciplinary healthcare teams.



"My intention is to stay in medicine, but I'm contemplating a different path – maybe teaching. That wouldn't have crossed my mind five years ago."

Barbara Rossi, Critical Care Nurse, Government hospital in Smyrna, DE

### Training the next generation

The American Association of Colleges of Nursing reports, "More than 80,000 qualified nursing applicants were turned away from graduating nursing programs due to inefficient clinical sites, classroom space, and budget issues." It is an opportunity to allow nurses to make a horizontal move and become teachers in the hospital.

Once again, AI is essential and can play a lead role in training new nurses. Every aspect of training that can be done online saves money. There are powerful Learning Management Systems (LMS) that have libraries of HIPPA compliant, SME-tested material that nurses-in-training can access at their convenience. They also offer real-time instructor-led integration that allows nurses "face-to-face" interaction with their instructors and peers.

Even if AI plays a role, someone has to train the AIs. When experienced nurses are involved with AI training incorporation, they can impart priceless information about your hospital to a new generation before they retire.

## STRATEGY FIVE: Use an alternative nursing source that breaks the travel nursing cycle

### Travel nursing agencies

Travel nursing agencies are poaching younger nurses (Millennials), offering dazzling salaries with less stress. 9Pre-COVID the average hourly rate for travel nursing was \$33.84/hour. Today, travel nurses make up to \$150 an hour, and many make \$10,000 per week (plus an additional housing fee). Travel nursing agencies may recruit any RN with at least a year's experience working in a hospital.

Astonishing amounts of money on demand, protected by the agency's contract, and the power to work when and where you want, is a tough act to follow. Often, travel nurses are a disruptive influence, adding tension to an already stressful environment.

For hospitals, the pay is an issue, but travel nurses also disrupt a hospital setting. The average pay (in New York) for an RN is \$3,000.

Some RNs resent travel nurses that make triple their pay while staff nurses are denied raises because of budget restraints. Also, it must be a challenge to resist staying in their current environment when something more enticing is easily accessible.

The vicious financial cycle of travel nursing is draining hospital budgets. Hospitals are experiencing a 200% increase in open nurse positions. The solution is to find an alternative to using travel nursing agencies without affecting patient care.

### Hiring nurses from other countries to decrease vacancy rates

For every 20 travel RNs eliminated, a hospital can save, on average, \$3,084,000. \*\* Henry Ford Health System (HFHS) of Michigan is taking the leap, making plans to hire 500 nurses from the Phillippines. HFHS is proud of its commitment to its teams and communities.

It's not the first time that HFHS has recruited from overseas, and this will be their third recruitment since the 80s. The previous recruitments had positive outcomes, and they look forward to successful recruitment next year.



Henry Ford Health System, Detroit, Michigan, will hire 500 nurses from the Philippines over the next two years. (James R. Martin/Shutterstock.com)

### The US has had great success in the past hiring Filipino nurses

<sup>11</sup>"Nationally, the total costs to recruit a nurse from the Philippines - including agency fees, visa applications, airfare and sometimes temporary housing - can run as high as \$12,000 to \$15,000 per nurse," said Lisa Filipowitsch, Director of Health Care Recruitment for Canadian Nurse Recruiters in Kitchener, Ontario.

The estimated cost to recruit a permanent nurse is \$15,000 instead of paying a temporary nurse \$10,000 per week. According to Health Care Recruitment, Filipino nurses starting wage is between \$25.00 - \$45.00 per hour. In the Philippines, nurses earn \$3 - \$5 per day. So, they are pleased with the offer of employment.

Hiring abroad is more cost-effective than paying the wage of a travel nurse. They meet the education requirements and speak fluent English. There are already 150,000 Filipino nurses in the US. Hiring nurses from foreign countries may be the permanent solution to the temporary challenges of travel nursing; with a nearly 10% RN vacancy rate in most hospitals, it's a solution worth considering.

### "When hospitals are understaffed, people die."

Patricia Pittman, Director of the Health Workforce Research Center at George Washington University

When nurses aren't supported, patients die. We have to find a way to support hospitals' staff nurses because patients' lives depend on it. Some of these tactics have been applied in the past and had great success. The strategies listed provide long- and short-term solutions; they are practical applications that can help your hospital survive the COVID crisis.

#### **ENDNOTES**

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