NEBRASKA HOSPITAL ASSOCIATION

NHA Nursing Shortage Work Group Report



EXECUTIVE SUMMARY

According to the Nebraska Center for Nursing, Nebraska will experience a workforce shortage of 5,435 nurses by 2025. Seventy-three of Nebraska's 93 counties have less than the national average ratio of registered nurses to patients. Sixty-six of Nebraska's counties have been deemed medically underserved. Nine counties in Nebraska have no registered nurses (RNs) and four counties have just one registered nurse.

The nursing shortage affects both Nebraska's physical health and its economic health. Lack of care impedes the ability of communities throughout the state to attract and retain residents and the businesses that employ them. The issue has only become more exacerbated during the pandemic.

The NHA Board of Directors approved the formation of a working group beginning in June of 2021. The NHA Nursing Workforce Shortage Work Group is charged to:

- Define the barriers that exist in Nebraska to attract and retain a sufficient nursing workforce supply;
- Research the specific issues and solutions;
- Research what other states are doing to address this issue; and
- Present a list of recommendations to NHA members and policymakers.

BACKGROUND

Hospital and health care workers have been on the front lines battling COVID-19 since March 2020, and the pandemic has placed a significant toll on them. A Kaiser Family Foundation/ Washington Post poll found that about 3 in 10 health care workers considered leaving their profession, and about 6 in 10 said pandemic-related stress had harmed their mental health. In addition, a survey by AHA's American Organization for Nursing Leadership found that one of the top challenges and reasons for health care staffing shortages reported by nurses was "emotional health and wellbeing of staff." This level of burnout coupled with ongoing COVID-19 surges, as well as other existing health care workforce pressures, has left hospitals across the country to contend with critical staffing shortages.

"(...) the loss of a nurse leaving their position is also associated with significant financial costs, estimated from $11,000 to $90,000 per nurse with up to $8.5 million in associated wider costs (e.g., unfilled vacancies, patient deferment, training and orientations)" (Halter et al., 2017).

According to the 2021 Nebraska RN and LPN Renewal Surveys, a total of 1,639 nurses are very likely to leave their primary employment in the next 12 months (Nebraska Center for Nursing, 2022).

A sufficient, healthy workforce is foundational to maintaining access to high quality care, especially as hospitals are strained by crises such as surges in COVID-19 hospitalizations. Consequently, staffing shortages have driven an increase in wages forcing hospitals to invest significant resources to recruit and retain staff. In the face of an ongoing pandemic, such investments in labor have only exacerbated hospitals' existing financial hardships, with over one-third of hospitals projected to be in the red by year's end and a median operating margin that's 10% to 11% below pre-pandemic levels.
Hospitals' and health systems' ability to recruit, train, retain and support health care workers in the post-COVID-19 environment will be shaped by several trends transforming health care. These range from fundamental shifts in delivery models, including widespread telemedicine adoption, to accelerated efforts to reduce health care disparities, to continued pressure on hospitals and health systems to reestablish economic sustainability.

RECRUITMENT/RETENTION

In order to grow a robust workforce of highly qualified, committed clinicians, recruitment and retention must remain top priorities for health care organizations. Here, too, the pandemic has amplified existing challenges. Shortages are intensified by increased physician workforce volatility and an upsurge in nursing vacancies, turnover and costs. Medical school applications have jumped, as has enrollment in four-year undergraduate nursing degree programs. To attract and retain the clinicians needed to meet expanding patient population requirements, hospitals and health systems must take multifaceted approaches that include listening to what clinicians want and tailoring solutions appropriately; cultivating a supportive environment for millennial and Gen Z clinicians and other vital hospital staff; and strengthening diversity recruiting.

- Encourage a work-life balance with flexible scheduling, remote work when possible and equity in workload and support.
- Provide stretch assignments, growth opportunities and promotions. Allow them to chase their passion.
- Offer a visible career plan — making them part of the decision-making in creating pathways — and a formal succession plan.
- Deliver direct and immediate feedback. Leverage technology to deliver real- time feedback and access to self-service development and answers to their questions.
- Provide both formal and informal opportunities for mentorship and work buddies.
- Financial support for rural areas for increased Wi-Fi / broadband connectivity. This would lead to (and support needs) rural areas/CAH with technology to partner with urban healthcare organizations for telenursing support, simulation training and Critical Stress Debriefing.
- Incentivize NHA hospitals with the implementation of virtual care technology to augment staffing challenges leveraging existing digital care technology investments beyond ambulatory and remote care access. Virtual technology supports the administrative RN tasks (history intake, education, care planning) to be completed by a virtual caregiver and allows the bedside nurse to focus on physical and emotional patient care needs.
- Provide financial support for simulation labs.

Salary and wage expenses have risen during the COVID-19 pandemic. Many hospitals are experiencing increased overtime costs as they experience a surge in patients or front-line workers become sick. Some hospitals have implemented bonus pay for front-line workers. Some have turned to staffing firms to address worker shortages or meet surge demand and staffing firms have dramatically raised their prices due to an increased demand for health care workers. The effect of the virus on hospital wages and labor costs is clear.

One way hospitals could help would be to offer a financial appreciation award to all active status Nebraska RN's and LPN's working in a hospital, hospital based clinic, skilled nursing facility, home care and academic setting to retain nurses and minimize those leaving to join a travel agency or leaving the profession. According to the renewal survey data, the total number of RNs working in Nebraska is 23,972 (1,965 are APRNs), and LPNs totaled 4,584, whose principal employment is in Nebraska. Those who qualify would need to be employed at the Nebraska hospital, hospital based clinic, skilled nursing facility, home care or academic settings by a date certain and remain employed through a date certain. Retention bonuses (incremental) could be awarded for Nebraska nurses who have stayed in the community to serve. Consideration of the level of award should include those working on the front line/shift workers/direct patient care providers.

Recently, Kansas announced $50 million from American Rescue Plan Act of 2021 (ARPA) funds available for hospitals to provide either premium pay or improve retention of nursing resources and support personnel. "Many of our nurses are risking their lives every day to save Kansans from COVID-19 – and the immense strain on our hospitals is causing them to be exhausted and disheartened," Governor Laura Kelly said. "They're taking on extra shifts and caring for more patients than they can handle – and it's our responsibility to give them the support they need."

It is imperative to act now to protect the health and safety of our frontline nurses. The NHA recommends that the Governor and Nebraska Legislature appropriate $40 million ARPA funds for nurse retention bonuses to ensure that Nebraska facilities are adequately equipped with experienced staff, rural hospitals can keep their doors open and nurses can appropriately be compensated for their tireless and courageous work throughout this pandemic.

BURNOUT

Fifty percent of nurses reported experiencing symptoms of depression and anxiety and one-third had symptoms of Post-Traumatic Stress Disorder (PTSD) during the COVID-19 pandemic (Armetz 2020). Fifty-four percent of nurses reported feeling burned out. (Kelly & Butler, 2021). These are among the many indicators that the pandemic added a barrage of COVID-19-related stressors to individuals' lives, while exacerbating the impact of chronic stressors that threaten clinician wellbeing over the long term.

Compassionate, holistic support and services are more vital than ever to help front-line clinicians cope and ensure they feel safe, valued and engaged. At the same time, the pandemic presented a unique opportunity to reexamine and reframe core approaches to fostering a thriving workforce. Effective strategies include normalizing help-seeking behavior, nurturing resilience, and empowering clinicians to speak up about stressors, promoting self-care, cultivating joy, and rethinking the workflows and processes that have been drivers of burnout.

Health care workers and community members have faced, and are still facing, challenges as never before due to the COVID-19 pandemic.

Initially, focus was on obtaining needed physical PPE to protect the health of clinicians and staff, but equally important then and now is psychological PPE to protect their mental health. Comprehensive resources include providing PPE for primary prevention such as strong leadership and communication as well as stress reduction strategies, secondary prevention resources such as peer support, and tertiary prevention resources including EAP resources and readily accessible therapy and/or medications.

- Create an infrastructure for well-being.
- Engage your team.
- Measure well-being.
- Design interventions.
- Implement programs and changes.
- Evaluate program impact.
- Create a sustainable culture.
- Incentivize NHA organizations to formalize programs directed at RN Wellness:
- Through the Nebraska Patient Safety Coalition or like organization support the immersion of mental health first aid for Critical Stress Debriefing/PTSD through chaplain services, an emotional health coach, or health coach and supporting a peer support program to support the "2nd victim".
- Create an online education and training portal for mental wellness and debriefing after a critical incident.

Organizations need to help caregivers accept or acknowledge their need for support – that it is fine to get help, and that they needn't fear being seen as incompetent. Leaders need education to recognize when their team members are in distress and how they can provide support. Peer-to-peer support programs are also important. Finally, organizations must not only support team members' resilience, but they must also address organizational and operational problems that may impede their work.

Make mental health services available and encourage people to take time off to have some fun. Taking time to be creative and get your mind off work rejuvenates you, so that you are your best when you are on the job.

STAFFING AND SCOPE OF PRACTICE

One of the early lessons learned from the COVID-19 pandemic was the importance of cross-training care staff and nurses to work outside of their specialties to cover care needs, regardless of the department or care setting. New models of care are emerging utilizing interprofessional teams. It is critical that we incorporate these lessons learned in nursing and medical education curricula and clinical training.

While the pandemic has spotlighted many factors that are pushing nurses away from the workforce, it also sheds light on what they value most about the work they do. The disruption and chaos have created a unique opportunity to fundamentally reevaluate how to deliver care and manage workforces, incorporate new learnings and workforce aspirations, and reframe the path forward.

Recognize that retention strategies are not one-size-fits-all. Boost retention by listening to what clinicians want and need, and tailoring solutions appropriately. Know and understand the turnover rates with each organization:

- While all nurses seek appropriate and sufficient recognition and compensation for expertise and effort, some may put a premium on other factors including flexible scheduling, strong management support, open lines of communication, input into decision-making, or help with child or eldercare.
- Time off, educational opportunities, flexible shifts can boost satisfaction as well as increased autonomy, more face time with key leaders and more formal recognition for job performance.

Lean more on advanced practice nurses.
Licensed nurse practitioners (NPs) took on greater responsibility during the pandemic when many state executive orders granted them larger roles, given the pressing need for primary care professionals. Their role will continue to grow along with value-based care models. Their ranks are also expanding, increasing 12% in the last year to a record 325,000-plus. Nationwide, more effective use of NPs and physician assistants could have the same impact as adding 44,000 new primary care physicians.

Boost flexibility with multiple staffing models:
Optimize nursing resources by using a variety of staffing models including team-based staffing, where one RN supervises a team of licensed practical nurses, aides and technicians. Also, look at tiered staffing to augment experienced intensive care unit staff by incorporating non-ICU staff of all disciplines; and functional care delivery in which a nurse manager coordinates care by delegating tasks through a hierarchical structure.

Incentivize hospitals to provide Staff Nurse Supported Experience. This would consist of a clinical experience, three days or less, where a student is assigned 1:1 to a staff nurse in a specialty setting for a hands on clinical experience at the direction of the staff nurse. Faculty would provide indirect supervision for the experience as defined in 172 NAC 99.

Diversify and strengthen diversity recruiting.
Review and expand talent sources to ensure that diverse populations are being sought after, utilize networks and events that reach diverse candidate pools:

- Leverage social media as part of recruiting channel mix.
- Market organizational diversity, equity, and inclusion (DEI) commitments by publicizing the right content to the right audiences.
- Encourage diverse leaders in organizations to share their stories.
- Shadow a diverse job seeker's journey through the organization's hiring processes and take an honest inventory of your candidate's experiences to identify any racial, gender and other conscious or unconscious biases.

Urge Congress to prioritize funding support.
At the federal level, the AHA is urging Congress to pass bills to address clinician shortages and bolster the health care workforce, including:

- Resident Physician Shortage Reduction Act of 2021 (S.834/H.R. 2256), which would add 14,000 Medicare-funded residency slots.
- Dr. Lorna Breen Health Care Provider Protection Act (S.610/H.R. 1667), which aims to prevent suicide, burnout and behavioral health disorders among health care professionals.
- Healthcare Workforce Resilience Act (S.1024/H.R. 2255), which would expedite the visa authorization process for qualified international nurses.
- Future Advancement of Academic Nursing Act (S.246/H.R 851), which would support nursing education and provide resources to boost student and faculty populations, as well as support educational programming, partnerships and research at schools of nursing.

Advocate for state legislative support.
Creative state-level strategies, often in partnership with state hospital associations, community colleges or health professional organizations, can help fill the RN pipeline.

- With state funding, the New Mexico Nursing Education Consortium expanded a common pre-licensure BSN degree curriculum. It is now offered in 16 locations throughout the state, with a BSN degree also offered in most.
- In South Carolina, legislation soon may allow students to pursue a health profession career via the technical college system at virtually no cost.
- In Tennessee, legislation may streamline onboarding by allowing nursing graduates to practice under the supervision of a licensed RN while awaiting testing and licensure.

Recruit outside the lines.
Expand recruiting efforts beyond the state lines, offer virtual options — to network, connect, and interview. Consider proactively recruiting candidates who are disillusioned with or laid off from other industries and are now seeking to make a career shift, especially to a mission-driven field like health care.

Integrate workforce planning with strategic planning.
As the health care landscape is transformed by such key forces as the societal factors that impact health, emerging technologies and consumerism, deepen the understanding of the impact on the workforce, the nature of the jobs clinicians performance and how to help clinicians prepare for and embrace change.

ACADEMICS

The success of the health care system is dependent on the availability of properly educated and trained professionals. People enter careers in health care because they want to make a difference in the lives of others. The work a health care professional does is demanding and exacting. It requires skill, focus and attention to detail. Health care careers are some of the most respected, exciting, rewarding and fulfilling careers one can have.

The pandemic disrupted the education of clinicians-in-training, creating an immediate need for health care organizations to revamp and ramp up training for new clinicians to address gaps and accelerate onboarding. For the longer term, fundamental shifts in how care is likely to be delivered affects the training, retraining and upskilling of both current and future clinicians. The growing emphasis on delivery models – from team-based care to telemedicine – demands new skill sets and enhanced resilience. The need for greater engagement, workforce agility and clinical education equity also requires health care organizations' creativity with in-person and virtual learning opportunities and greater support for diverse learning styles.

Nearly 40% of registered nurses are older than 50.
Many put off their planned retirement so they could help their communities fight COVID-19 but, as the pandemic subsides, we likely will see them start to leave. This is also true with clinician leaders. While we do not have the data yet, anecdotally, we know this trend is beginning to occur.

The good news is, according to a new survey from the American Association of Colleges of Nursing, bachelor-degree nursing enrollment increased by 6%. Graduate-level nursing programs also increased in 2020. The downside is that we do not have enough nursing faculty to meet the demand for increased capacity in our colleges. Another challenge is the difficulty in expanding clinical sites for training. Nursing programs denied enrollment to more than 80,000 qualified applicants from baccalaurete and graduate nursing programs in 2019 (AACN, 2020).

- Offer scholarships to recruit students in to RN and LPN programs at Nebraska private and public academic programs with accredited programs with a NCLEX pass rate of 90% or greater. The RN shortage is a long-term problem – expected through 2030 and different staffing models will need to be implemented. Support for RN's, LPN's and even medical assistants can help conserve the efficiency of the RN role.
- Recommend mirroring the College of St. Mary evolving BOLD program. Their plan is to put 25 qualified students with a clear financial need through the nursing program every year for 4 years – providing financial support for room/board/tuition/ spending money/ uniforms/etc. Students would commit to working at Nebraska hospitals who would provide mentoring, shadowing, volunteer opportunities, etc. while in school. The budget is $4M over 8 years.
- Recruitment and marketing campaign that enhances the image of nursing and entices students to go to nursing school.

LOAN REPAYMENT/REIMBURSEMENT PROGRAMS

The NHA surveyed members about student loan repayment and we estimate that 10,000 nurses would participate in a student loan program similar to the Nebraska Loan Repayment Program administered by the state. Due to the nursing shortages across the state, the NHA supports urban and rural health care workers having access to student loan repayments. Additional health care positions that should be considered for inclusion in a student loan repayment program include Respiratory Therapists, CNAs, RNs, LPNs, CRNAs, Coders, Ultrasound/Medical/Radiology Technicians and Medical Assistants. The NHA recommends Governor Ricketts and the Nebraska Legislature appropriate $40 million of ARPA funding to loan repayment programs for medical workers.

EARLY INTERVENTION PROGRAMS

HOSA-Future Health Professionals is a national student organization recognized by the U.S. Department of Education and the Health Science Education Division of ACTE. HOSA's two-fold mission is to promote career opportunities in the health care industry and to enhance the delivery of quality health care to all people. It is a pipeline for middle school, high school, and college students entering the health care industry. HOSA provides opportunities in personal growth, career exploration, hands on health science and leadership skill development and voluntary services.

HOSA is not a club to which a few students in school join. Rather, HOSA is a powerful instructional tool that works best when it is integrated into the Health Science Education (HSE) curriculum and classroom. HSE instructors are committed to the development of the total person. Those who join the HSE-HOSA Partnership recognize the importance of providing students with training far beyond the basic technical skills needed for entry into the health care field. The rapidly changing health care system needs dedicated workers who, in addition to their technical skills, are people-oriented and capable of playing a leadership or followership role as a member of a health care team.

HOSA-Nebraska currently has over 50 active chapters with over 800 student members. Before the pandemic, its membership was as high as 1,300 members. HOSA Nebraska has more than 50 competitive events each year ranging from dental science and forensic medicine to medical photography and job seeking skills. There is a competitive event for everyone and every medical interest.

HOSA Nebraska is the only state chapter that does not receive funding from their state government. Besides staff, the program is funded by donations and enabled by volunteers. Students pay a small membership/activity fee to participate. The working group encourages lawmakers to begin funding student pipeline programs like HOSA to ensure that students have the resources they need to become interested in health care professions at a young age.

HEALTH SCIENCE EDUCATION PROMOTION

- Support professional development to improve the quality of career education curriculum, provide training resources, and enhance the quality and availability of online courses for students.
- Financially support statewide Health Science Education and assist in creating health care industry talent pipelines by engaging students in meaningful job shadow and internship work-based learning experiences in Nebraska high schools and community organizations:
- Promote certifications such as Certified Nursing Assistant and Certified Medication Aide to promote employability of students and adults and nurse pipeline.
- Provide strategies to assist students in planning for careers in the health care industry.
- Engage health care employers and local educators in creating partnerships for health science education and implementation of needed programs.

MARKETING

Technology is always adapting, and organizations will have to do so as well. The idea of a static or fixed training or learning solution needs to be retired. Don't create educational tools around today — plan education around constant change and adaptation.

Virtual training is critical for on-demand needs. It will be important to have small bites (10 minutes or less) so that people can learn on the run without feeling bogged down. Also, simple one- or two-click access will encourage them to use the on-demand training options.

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