





Washington's Health Workforce Sentinel Network Findings Brief: Nursing Homes and Skilled Nursing Facilities

Nursing homes and skilled nursing facilities provided information about their workforce needs to the Washington State Health Workforce Sentinel Network, most recently in April/May 2021. This Findings Brief provides response themes as well as examples of specific comments, with an emphasis on the most recent findings. Responses from nursing homes and skilled nursing facilities from 2016 to the present may be viewed at www.wa.sentinelnetwork.org/findings/.

Themes from nursing homes' and skilled nursing facilities' responses to pandemic-related questions are highlighted below. More pandemic-specific findings from earlier in the pandemic are at www.wa.sentinelnetwork.org/findings/covid-19/.

Effects of the COVID-19 pandemic reported by nursing homes/skilled nursing facilities: Themes and examples

In the past 6 months, have there been overall staffing changes at your facility due to the COVID-19 pandemic? THEMES: Staff have had to fill roles normally handled by friends and family. Reduced census reported at most facilities.

- Due to restricted visitation increased workload for staff. Staff had to provide more emotional support and technical support to residents due to COVID restrictions.
- Decreased census due to less availability of staff to manage/care for previous average census level.
- We have had to increase support staff in order to provide family/friend visits for residents.

In the past 6 months, what about the staffing arrangements at your facility made it easier to respond to the pandemic? What made it harder?

- Easier to respond: Smaller numbers of dedicated SNF staff made it easier to get information to everyone regarding everchanging guidance. Harder: less staff to fill the schedule and ensure census could be maintained.
- Since we are unable to have community dining, we have had to add additional staff in order to feed residents one on one.
- Nothing made it easier. What made it harder was visitation restrictions.

Describe the workforce impact, if any, of the use of telehealth at your facility over the past 6 months. THEMES: Many did not use telehealth, but those that did reported needing to support their residents as they navigated telehealth visits.

- Telehealth has increased our staff time. A dedicated staff must assist and be involved with the Telehealth.
- Increase workload for facility staff to manage and oversee telehealth visits vs send them in a cabulance or with family.
- · No impact.

Did your organization do anything to encourage your staff to receive the COVID-19 vaccine? If so, what strategies were or were not successful?

THEMES: Education and incentives were common. Vaccination rates for staff varied.

- Yes, [we] provided education, offered free vaccine clinics at the facility over several days and times to ensure everyone could get one.
- We gave all staff a \$100 bonus for receiving the vaccine as well as drawings for \$500 and \$250 dollar gift cards.
- Had parties/drawings for prizes at all 3 clinics/promoted on Facebook.
- Offered but not mandated.

What are your top workforce needs that could be alleviated by policy, regulatory, and/or payment changes? THEMES: Low wages could be addressed by higher Medicaid reimbursement rates.

- Increases in the Medicaid rate and Medicare rate.
- Relax the RN oversight for medication delivery for Certified Medication Aides allow nurses to complete assessments and MAC to pass medications --look at Texas model.
- Reimbursement allowance for escorts to medical appointments under the pandemic.
- Training available in communities outside of metropolitan areas.

Nursing Homes/Skilled Nursing Facilities (Spring 2021)

Between 2016 and 2021, over the course of 10 reporting periods, nursing homes, skilled nursing facilities, and other health care facilities in Washington provided key, on-the-ground information to the Washington State Health Workforce Sentinel Network. Below are highlights of trends over time and recent findings. More nursing home and skilled nursing facility findings, along with those from other health care facilities, are at wa.sentinelnetwork.org.

Nursing Homes/Skilled Nursing Facilities – Types of exceptionally long vacancies since 2017

Top occupations cited as having exceptionally long vacancies by date of reporting									
Rank	Spring 2017*	Fall 2017	Summer 2018	Spring 2019	Fall 2019	Spring 2020	Fall 2020	Spring 2021	
1	Registered nurse	Nursing assistant	Nursing assistant	Registered nurse	Nursing assistant	Nursing assistant	Nursing assistant	Registered nurse	>
2	Nursing assistant	Registered nurse	Registered nurse	Nursing assistant	Registered nurse	Registered nurse	Registered nurse	Nursing assistant	
3	Licensed practical nurse	Licensed practical nurse	Licensed practical nurse	Licensed practical nurse	Licensed practical nurse	Licensed practical nurse Dentist	Licensed practical nurse	Licensed practical nurse	
4	Occupational therapy assistant	Multiple occupations cited at same frequency	Dentist	Occupational therapy assistant Physical therapist	herapy ssistant Physical nerapist sal worker Speech-language therapist	Multiple occupations cited at same frequency	Occupational therapy assistant Physical therapist	Occupational therapist Physical therapist	Most cited
	Physical therapist		Physician/ Surgeon	Social worker Psychologist			Physical Therapy Assistant	Social worker Speech-language therapist	
5	Multiple occupations cited at same frequency		Multiple occupations cited at same frequency	Multiple occupations cited at same frequency	Multiple occupations cited at same frequency		Multiple occupations cited at same frequency	n/a	

^{*} Winter and Summer 2016 findings not shown due to space constraints

<u>Demand for healthcare workforce</u> reported by nursing homes/skilled nursing facilities Regulatory changes have meant that registered nurses, LPNs and nursing assistants are in high demand

- [Nursing assistants, registered nurses, LPNs] Needed due to turnover and also changes to SNF requirements.
- [Nursing assistants, registered nurses, LPNs] Changing in standards of practice.

Reasons for vacancies reported by nursing homes/skilled nursing facilities

The COVID-19 pandemic has introduced some new challenges, but many pre-COVID challenges persist

- [Nursing assistants, registered nurses, LPNs] We have a tough time competing with the wages offered by the hospital and finding qualified candidates.
- [Nursing assistants, registered nurses, LPNs] Keeping applicants without leaving to go to an agency.
- [Registered nurses] Burnout and stress.

Reasons for worker retention/turnover problems reported by nursing homes/skilled nursing facilities

- [Registered nurses, LPNs] leaving to work at an agency for more money.
- [Registered nurses, nursing assistants] Hospitals have recruited a few of our staff away from us.
- [Nursing assistants] NAC's who previously have 2-jobs would stay only with one facility due to COVID.
- [RNs, LPNs, CNAs] We have had an increase in turnover due to "life events" (relocation, family issues, etc.)

Nursing Homes/Skilled Nursing Facilities (Spring 2021)

Changes in nursing homes'/skilled nursing facilities' priorities <u>regarding orientation/onboarding for new employees</u> and <u>training for existing/incumbent workers</u>

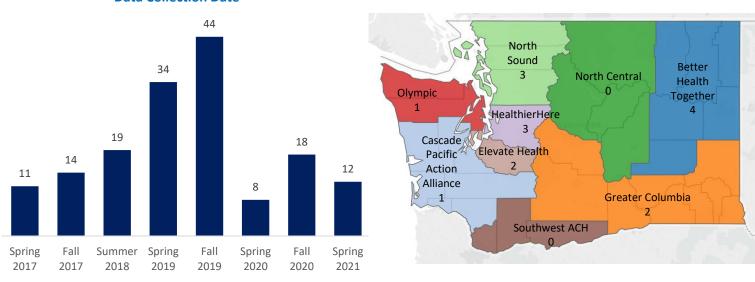
- Isolation techniques PPE.
- New infection control procedures and policies, guidelines and requirements.
- Orientation program has been overhauled and made more interactive and less sitting and listening and more
 education in a dynamic manner from a multitude of speakers.

New roles for existing employees and new occupations hired by nursing homes/skilled nursing facilities

- [Nursing assistants] Light duty NAC moved to Social Worker position.
- New roles hired: Screener, RN for COVID testing, visit supervisor.

Number of Sentinel Network Responses from Nursing Homes/Skilled Nursing Facilities in WA by Data Collection Date*

Number of Nursing Home/Skilled Nursing Facility Responses by Accountable Community of Health (ACH) (Spring 2021)



^{*} Winter and Summer 2016 findings not shown due to space constraints

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 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 Governor Inslee's office and the Washington State Legislature.

Why become a Sentinel? As a Sentinel, you can:

- --Communicate your workforce needs and ensure that the state is prepared to respond to the transforming healthcare environment.
- --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.sentineInetwork.org.

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