

Washington's Health Workforce Sentinel Network *Findings Brief: Community Health Centers*

Community Health Centers (federally qualified health centers and community clinics providing care free or on a sliding fee scale) 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 Washington's Community Health Centers from 2016 to the present may be viewed at www.wa.sentinelnetwork.org/findings/.

Themes from community health centers' responses to pandemic-related questions are highlighted below. More pandemic-related findings from earlier in the pandemic are at www.wa.sentinelnetwork.org/findings/covid-19/.

Effects of the COVID-19 pandemic reported by Community Health Centers* : Themes and examples

In the past 6 months, have there been overall staffing changes at your facility due to the COVID-19 pandemic?

- *We suspended hiring in our Dental service line until July, 2020, due to COVID.*
- *Added additional environmental services staff to provide more cleaning of high touch areas at the clinic. We also added additional front-end staff for COVID screening of patients upon arrival.*
- *We have had turnover due to personal need change - remote school, unable to work in higher risk clinic environment. We were approved to hire an additional 12 FTEs to staff clinics with Patient Service Reps to cover this shortage.*

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?

- *Staffing was difficult in clinics due to childcare needs changing. There was staff burnout due to pandemic needs. We repurposed our Dental staff into other necessary positions to respond to COVID 19.*
- *Screening of patients for COVID when arriving has made it harder.*
- *Covid has overshadowed just about everything else. For example, the 21st Century Cures Act went into effect this month and we were not prepared. We are currently recruiting for a HIMS Director - someone to stay on top of the federal compliance changes like Information Blocking, etc.*

Describe the workforce impact, if any, of the use of telehealth at your facility over the past 6 months.

- *Allowed patients to be seen that normally would have come in person to the clinic. It did cause a reduction in patients being seen.*
- *Telehealth has been a challenge. It does not work for most of our population in a Community Health Center like ours. Even though most of our patients have Smart Phones, they are not literate in how to use them for this purpose. From the provider standpoint, providers take longer during a patient telehealth visit.*
- *Providers can use telehealth visits and that has helped tremendously!*

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 onsite clinics were common strategies. Not all CHCs ran active campaigns.

- *We offered the vaccine as a healthcare organization and scheduled employee appointments at our drive thru site.*
- *Positive information, \$100 bonus.*
- *We showed on a bi-weekly basis, our vaccine rate by department. The medical providers were the first to reach 100%, which motivated the other departments. Currently we are at 77%.*
- *We did not implement any strategies to encourage staff to receive the vaccine.*
- *No other than education to make informed decision.*

What are your top workforce needs that could be alleviated by policy, regulatory, and/or payment changes?

- *Would be great if we could hire SUDPs independently just like we hire LMHCs without having to be a licensed facility.*

*Federally Qualified Health Centers and Community Clinics providing care free or on a sliding fee scale

Community Health Centers (Spring 2021)

Between 2016 and 2021, over the course of 10 reporting periods, Community Health Centers 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 Community Health Center findings, along with those from other health care facilities, are at wa.sentinelnetwork.org.

Community Health Centers* - Occupations with exceptionally long vacancies: 2016-2021

Top occupations cited as having exceptionally long vacancies by date of reporting**								
Rank	Winter 2016	Spring 2017	Fall 2017	Summer 2018	Spring 2019	Fall 2019	Fall 2020	Spring 2021
1	Medical assistant	Physician/ Surgeon	Medical assistant	Physician/ Surgeon	Medical assistant	Physician/ Surgeon	Registered nurse	Medical assistant
			Physician/ Surgeon					
2	Nurse practitioner	Social worker	Dental assistant	Registered nurse	Physician/ Surgeon	Dental assistant	Mental health counselor	Registered nurse
			Registered nurse		Dental assistant	Medical assistant		Physician/ Surgeon
					Registered nurse	Nurse practitioner		
3	Dental assistant	Mental health counselor	Mental health counselor	Medical assistant	Mental health counselor	Mental health counselor	Physician/ Surgeon	
	Registered nurse		Nurse practitioner			Physician Assistant		
4	Physician/ Surgeon	Multiple occupations cited at same frequency	Multiple occupations cited at same frequency	Dental assistant	Chem. dependency professional	Dentist	Multiple occupations cited at same frequency	Multiple occupations cited at same frequency
				Mental health counselor	Nurse practitioner			
5	Mental health counselor			Multiple occupations cited at same frequency	Multiple occupations cited at same frequency	Multiple occupations cited at same frequency		

↑ Most cited

*Federally Qualified Health Centers and Community Clinics providing care free or on a sliding fee scale

** Summer 2016 not shown due to space limitations. Spring 2020 findings not shown due to low response

Demand for healthcare workforce reported by Community Health Centers* (Spring 2021)

- [Marriage and family therapist, mental health counselor, psychologist] Medical providers are calling on the Behavioral Health staff a lot more to intervene with our primary care patients to address crisis needs.
- [Registered nurse, medical assistant] New workflows as a result of Covid have had an increased load for these positions.
- [Registered nurse] Loss of current staff and not enough qualified applicants.

Reasons for vacancies reported by Community Health Centers*

Most difficulties in filling open positions were not related to COVID-19, although the pandemic is a factor

- [Marriage and family therapist, mental health counselor] We have been advertised for a masters' level counselor (LMHC or LMFT) for over 6 months and have not had any qualified candidates apply.
- [Registered nurse, medical assistant] Have recently increased entry level to address salary requirements of candidates.
- [Medical assistant, registered nurse, family medicine physician, dental hygienist] Not enough qualified candidates.

Community Health Centers (Spring 2021)

Reasons for worker retention/turnover problems reported by Community Health Centers*

- [Medical assistant] Due to higher salary and benefits at facility near by.
- [Pharmacist] Area too rural.
- [Family medicine physician, registered nurse, dietitian/nutritionist] Turnover due to providers moving from area.

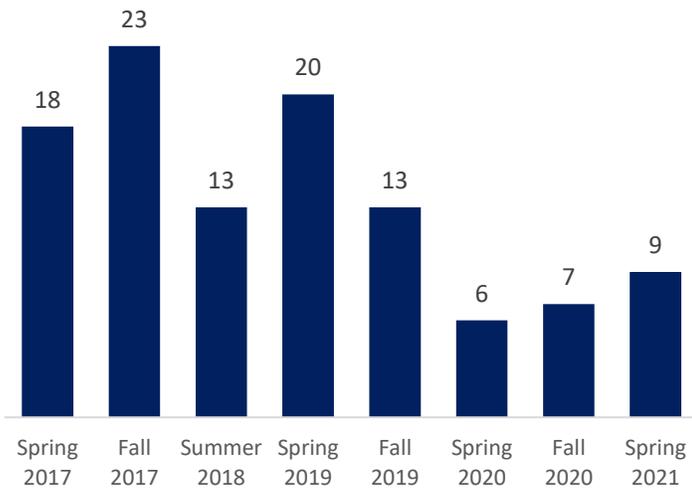
Changes in Community Health Centers' priorities* regarding orientation/onboarding for new employees and training for existing/incumbent workers

- COVID-19 guideline updates, specifically around infection control for all staff and providing telehealth visits.
- All employees were trained on usage of PPE and new policies related to Covid.
- Special training is needed in the new ways we engage clients because of the pandemic. It is much different. Documenting for the care, making sure we are reaching out to clients are some examples of new training needs.
- [We moved to] a combination of virtual and in person orientation/onboarding.

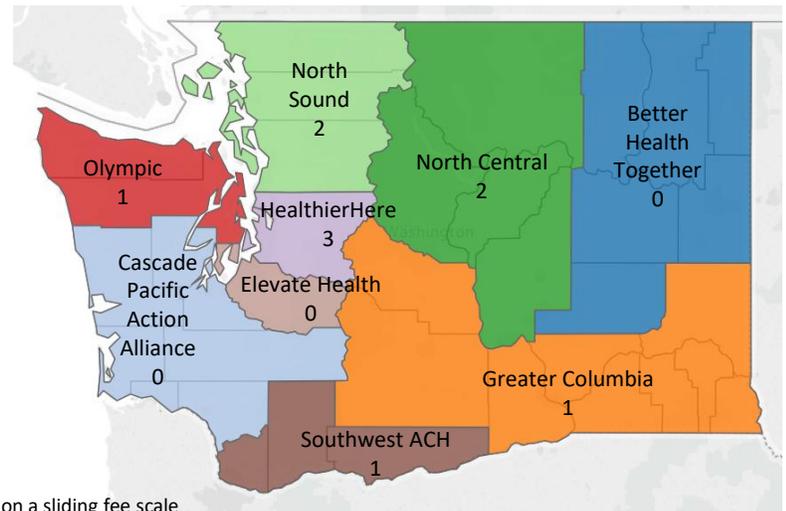
New roles for existing employees and new occupations hired by Community Health Centers*

- [Registered nurse] Nurses are deployed to patient homes to provide Covid vaccines (i.e., disabled patients who can't go out); significantly more standing orders available for nurses.
- [Medical assistant] MAs deployed at all entrances to screen patients and visitors before entry to buildings, new workflows to implement telehealth.
- New roles hired: Business intelligence director, care director, program coordinator.

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



Number of Community Health Centers* Responses by Accountable Community of Health (ACH) (Spring 2021)



*Federally Qualified Health Centers and Community Clinics providing care free or on a sliding fee scale

**Summer 2016 and Winter 2016 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.sentinelnetwork.org.

Contact: healthworkforce@wasentinelnetwork.org

Program Director: Susan Skillman, Senior Deputy Director, UW Center for Health Workforce Studies skillman@uw.edu

Operations Director: Benjamin Stubbs, Research Scientist, UW Center for Health Workforce Studies bstubbs@uw.edu