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TELEHEALTH

White Paper

Solutions for

Healthcare Workforce Shortages

From Task-Shifting to Telehealth, Take Note of the Solutions while Better Understanding Problems Causing Workforce Shortages.
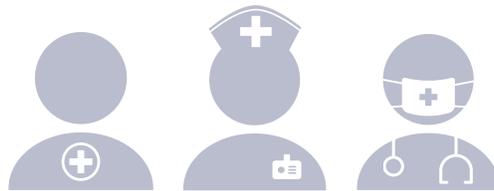
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"The Great Resignation": a term coined by industry experts to denote the phenomenon of healthcare workers rapidly withdrawing from the industry as a result of burnout and other systemic barriers to a fruitful career. As a result, **nationwide workforce shortages have arisen**, which further burdens these health systems.

There's predicted to be a shortage of between 21,000 to 55,200 primary care physicians by 2033.[4]

So what can we do about it? While the situation can't be remedied overnight, there are some steps health systems can take to slow down or prevent withdrawal from their organization.
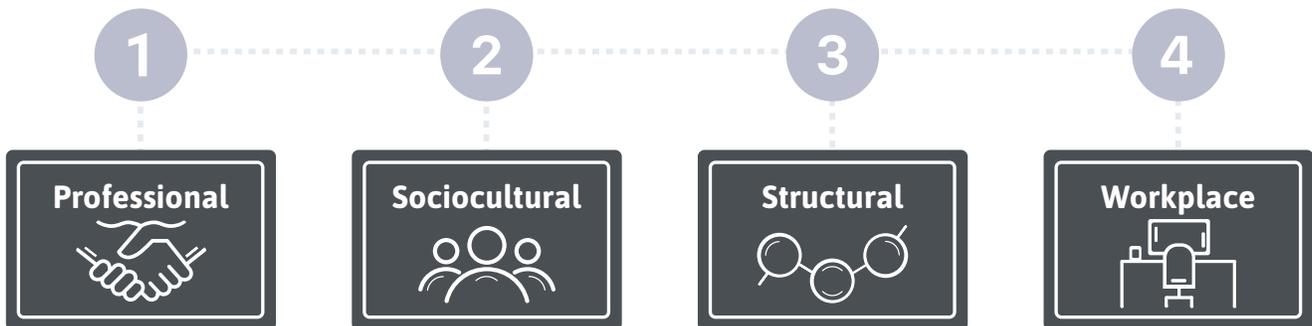
Let's take a look at possible causes behind the workforce shortage and what can be done about each specific situation.

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Reasons Why There are Shortages

The cause of workforce shortages can be broken down into four overarching categories: Professional, Sociocultural, Structural and Workplace influences.[1]

1	2	3	4
Professional	**Sociocultural**	**Structural**	**Workplace**

① Professional

This can be classified as influences that deter new prospects from entering the industry due to a scarcity of opportunities. This could include fewer clinical education and professional development interactions; lack of role models or mentors; or professional isolation.

The nursing profession is in high demand and is seeing a record number of applicants into nursing schools every year. However, the problem is that often there isn't enough staff to perform the training and there's often difficulty expanding clinic sites needed to do so.

② Sociocultural

These influences are a result of how work and life blend together and how well a clinician functions in the community they serve. Here, work-life balance comes most importantly into question. But this definition of work-life balance extends even farther than what is commonly thought of, to mean also what community expectations are required beyond the clinical role. If there are any discrepancies between culture and/or language in the workplace and/or community served, this can cause further problems.

③ Structural

The most common struggle seen in this category is resource scarcity due to the financial constraints of the patient population served. It's no secret that the more financially secure the patient population, the more plentiful the resources in the health system. More well-off health systems are therefore able to develop more rampant hiring strategies than those who lack comparable resources. This translates to a high demand in care from vulnerable patients, competing against trained nurses who are often fleeing to more profitable positions, such as with traveling agencies. Health systems that serve underserved patients could also be in rural or remote areas of the city, leading to transportation and accessibility challenges for clinicians. When discussing accessibility in health care, workers cannot be ignored as they can face many of the same hurdles that the patients face. Therefore, solutions need to be available to address all sides of the situation.
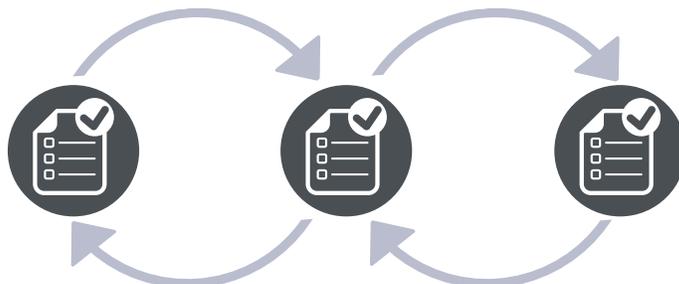
④ Workplace

This is often the most cited category of workforce shortages. These influences include heavy workloads, arduous administrative tasks, lower pay and lack of clinical infrastructure needed to provide high quality care.

What Can Be Done About Workforce Shortages?

Task-Shifting:

An OECD global survey found that 79 percent of nurses and 76 percent of doctors were performing tasks for which they were over-qualified.[2]

These numbers signal a strong need to correctly balance skill distribution in the health care industry. To do so, health organizations must adopt unique ways to reorganize their workflows, so that each team member stays as close to their job description as possible.

One practical solution is expanding the use of nurse practitioners and physician assistants. In states with full practice authority, nurses are able to evaluate, diagnose, and initiate and manage the treatment of patients, including prescribing medication, all based on patient needs.[3] This could include referring patients to other providers as well. **Nurse practitioner employment is expected to grow 52% by 2029,** in result of these shortages, signaling an opportunity to address the crisis immediately.[4] Physician assistants hold similar responsibilities that can alleviate the burden of physicians.

However, for states that don't allow full-practice authority to take place, clinicians can triage tasks in other creative ways.

Task-shifting is defined as the rational redistribution of tasks to other members of the organization with fewer qualifications that do not normally fall within their scope of practice.[5]

"This management technique has been advocated as an important strategy to optimize health system performance, especially in resource poor settings," the writers of a review of task shifting benefits say. "Studies performed to date have shown that **task shifting can address healthcare resource shortages** and allow physicians in primary care to provide more complex care and expand the healthcare capacity."[5]

When prescribing medication, pharmacists can obviously be a huge help in this domain. For patients with chronic conditions, prescribing can pose a particularly big task load. It helps that pharmacist prescribing is usually more autonomous, in comparison to nurses'. In primary care, minor patient complaints and aches can also easily exhaust bandwidth. Researchers in the study above suggest partnering with pharmacists to provide suitable alternatives to general consultations, such as diarrhea, head lice or coughs.[5]

Additional community partnerships, such as with midwives or other community health works, can shift responsibilities such as telephone consultations and health education promotion away from physicians.[5]

Leverage Telehealth to Alleviate Stress and Cost-Burden:

And if we're being honest, workforce shortages aren't always preventable. But they can be manageable. **Telehealth is a way to help fill in the care gaps in the most cost-effective way.**

Improved communication on the primary care level can reduce need for subspecialty demands.[6] When clinicians are communicating between themselves and making sure to relay all information back to the patient and/or their caregiver, this eliminates the need for superfluous exchanges due to confusion. This also gives the patient a greater sense of ownership over their health, translating to greater self-management of their conditions. Subsequently, follow-up visits are also decreased.

Recent research has also revealed that redundancies in evaluative and diagnostic studies are diminished when telehealth is used.[6] This all has a domino effect on other areas in which telehealth can improve the care environment. As noted above, high administrative burdens are directly associated with high turnover in the health care industry. Clinicians serving underserved populations often face high levels of this burden due to the additional paperwork Medicaid billing necessitates. However, when partnering with the right telehealth organization, you can alleviate some of this burden from yourself.

*Partners, such as **Certintell,** work with you to perform tasks as a Management Services Organization such as eligibility checks for care management programs, as well as handle the billing on our side, so you can focus on the most pressing priorities.*

Furthermore, transportation woes are not a problem exclusively reserved for patients. Health care workers can face the same hurdle, motivating them less to seek out positions in rural areas. In parallel, telehealth can provide the same benefit of accessibility to clinicians as it does to patients.
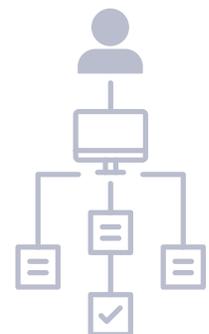
"Not only is health care a 24-7 business, it is one in which workers are required to be on time, alert and enthusiastic — qualities that are necessary for providing lifesaving services, but that are difficult to sustain when transit shortcomings take a grinding toll multiple times per day," said Jonathan Bowles, executive director of a research institute that dove into transportation barriers for health care workers in New York City.[7]

The study found that many health care workers in the city face challenges commuting to and from work, with some commute times totaling over an hour and a half.[7] The journey to work can be long and tiring before the long and tiring work even begins. Many health care workers also cannot afford to move to locations closer to their place of work. To ease this pain, consider giving your clinicians some of the same flexibility the work-from-home boom has afforded so many others. **In fact, the AMA found that increased flexibility in work schedule significantly reduced feelings of burnout among clinicians.**[8]

As for the benefits in the work environment, **telehealth naturally promotes a spirit of collaboration,** and an easy one at that. This can promote a system of cross-collaboration that leads to more educational and enriching opportunities for clinicians.

Although it's not quite telehealth, AI-automated onboarding processes can also save organizations time and stress.[9] Consider moving processes to a single platform to avoid any confusion. Additionally, an effective solution should identify the moments and items providers need most when starting a new job. For example, if a new clinician is taking on patients, a good feature would be a message system that sends the right messages at the right time.

Care coordination should be as seamless as possible. To learn more about automated onboarding processes, see this webinar hosted on the Becker's Hospital Review website.

Adapting Benefits for A New Generation

It's time to redefine the workplace. During the pandemic, clinicians faced immense pressure from multiple sources, and most were only rewarded with applause. But applause isn't enough. Higher wages might minimally stem the "Great Resignation," but not as much as if it was offered in conjunction with other solutions. There needs to be veritable change. This means granting clinicians with benefits that truly change the work culture and environment.

As it stands now, 50 percent of registered nurses are older than 50-years-old. As the pandemic subsides, the industry will likely see more of them begin to leave for retirement. **Therefore, a new generation is being ushered in, one with different values and needs that they need met.[10]**

Safety: As Maslow's hierarchy denotes, physical safety is the first and most important step to fulfillment. The COVID-19 pandemic only made more clear the necessity of having access to quality and numerous PPE.[11]

Decision Making and Flexibility: Secondly, clinicians need to know that they matter. This solution includes ensuring health care workers are able to make decisions about how they provide care, including granting flexibility in their scheduling and hours.[11] Telehealth can help grant this flexibility, as clinicians can organize days around their lifestyle, as well as eliminate the lag time associated with waiting rooms, making their workflows speedier and more efficient.

Voice: To retain clinicians, health care providers should also consider giving them a seat at the table. Many health care workers are passionate about their field and choose it because they want to make a difference. **For the passion to translate into practice, clinicians need a voice that is both heard and acted on.[11]**

For example, health organizations can introduce a variety of initiatives that provide employees with a sense of purpose, such as[11]:

1. Giving opportunities to propose solutions to organization-wide issues

2. Putting nurses in executive roles with real authority

3. Demonstratng that there's opportunities to move up rank into the C-suite

"That does a couple of things. One, you finally get their perspective when decisions are being made, a seat at the table. Two, it's also visibility for other nurses to know that they're being heard and there's a potential career path for them," <u>says David Coppins, CEO of a healthcare staffing platform.</u>[11]

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Now What?

5 Questions to Ask to Get Ready for Your Organization's Future[12]

1 **Team Satisfaction:**

Are you reimagining care models to enhance team satisfaction (e.g. expanding telehealth usage to allow nurses to work remotely more frequently?)

2 **Engagement:**

Are you encouraging engagement and retention by regularly introducing shared councils and committees to garner staff input and act on it?

3 **Eliminating Gaps:**

What gaps does your organization need to address so that in the next emergency or pandemic, staff can be easily scaled and deployed?

4 **Clinical Workflow:**

What technologies are you exploring to help optimize workflows and maintain patient access to care when staffing is limited?

5 **Next Up:**

Have you updated your succession-planning strategies for clinicians?

How Certintell Can Help:

While we can't completely eliminate your workforce worries, we can help alleviate many. **When it comes to telehealth, we're the experts, and ones that take away some of your administrative burdens.** Our comprehensive telehealth platform provides everything you need to seamlessly coordinate your care efforts, with solutions uniquely catered to your needs. Our care management programs also help keep your patients outside of the office unnecessarily.

Through our virtual health coaches, we work with patients to improve health outcomes through behavior change. This translates to less stress on your workforce. It doesn't stop there! For onboarding into remote patient monitoring and other care management programs, we conduct the eligibility checks and billing paperwork through our virtual medical practice necessary to bring a program into compliance. See how less stressed you can be when you have a partner by your side.

Get in touch with us today!

Certintell is a care management company that enables safety-net providers to make a lasting impact on the health of underserved patients through telehealth. We do this by using our in-depth expertise in health care and health information technology to anticipate — and meet — the needs of health care payers, providers and patients.

Closing the Care Gap™

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