

# Washington State's Health Workforce Sentinel Network

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## Motivation

- The health workforce is changing rapidly, and the past may not be the best predictor of the future
- Timely workforce demand information is hard to find
- Data and information need to be connected with those who can respond appropriately

# Washington State's Health Workforce Sentinel Network

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## Purpose

Support efficient and effective health workforce preparation and deployment by:

- identifying emerging demand signals and trends
- rapidly disseminating information to education, training and policy partners

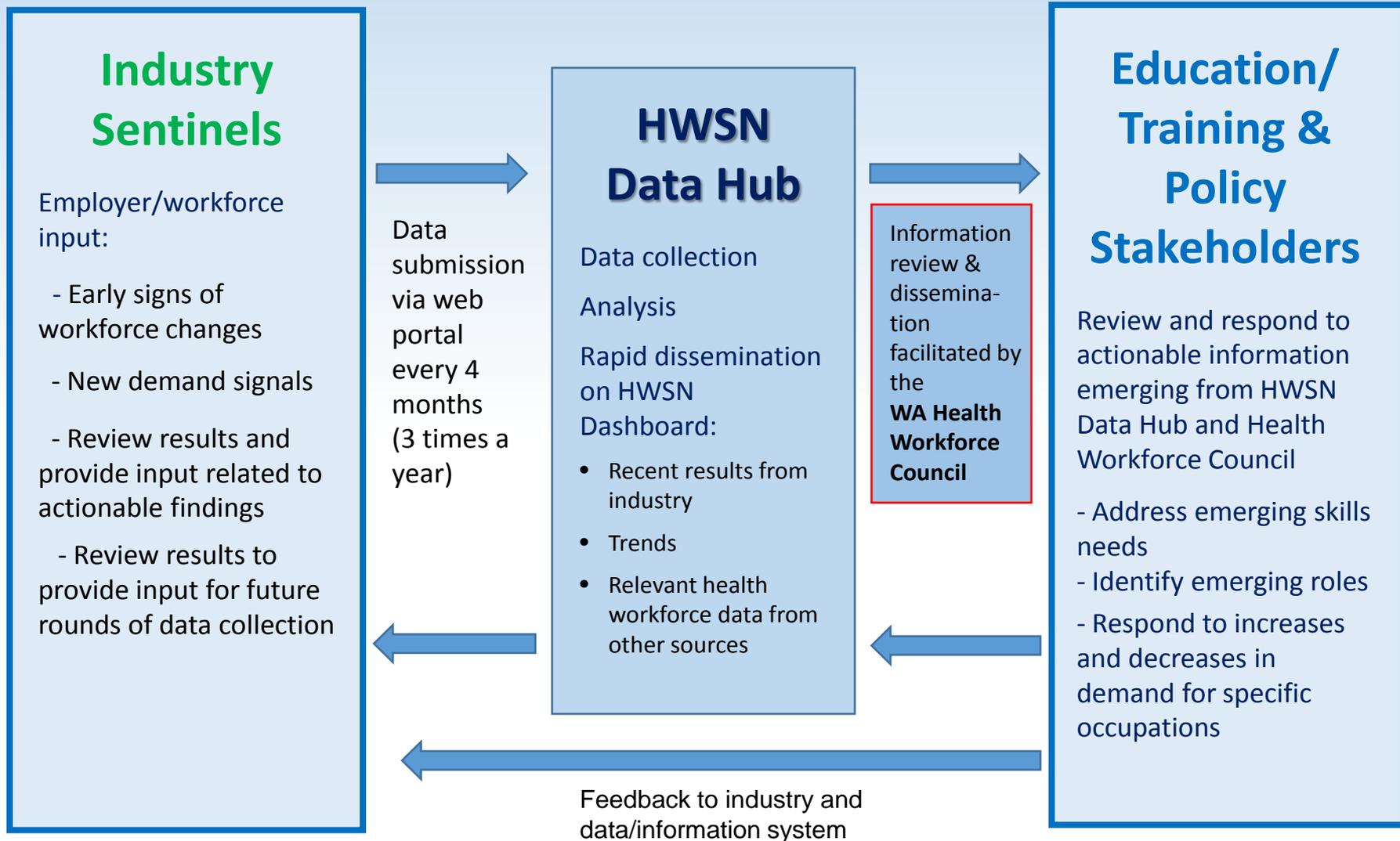
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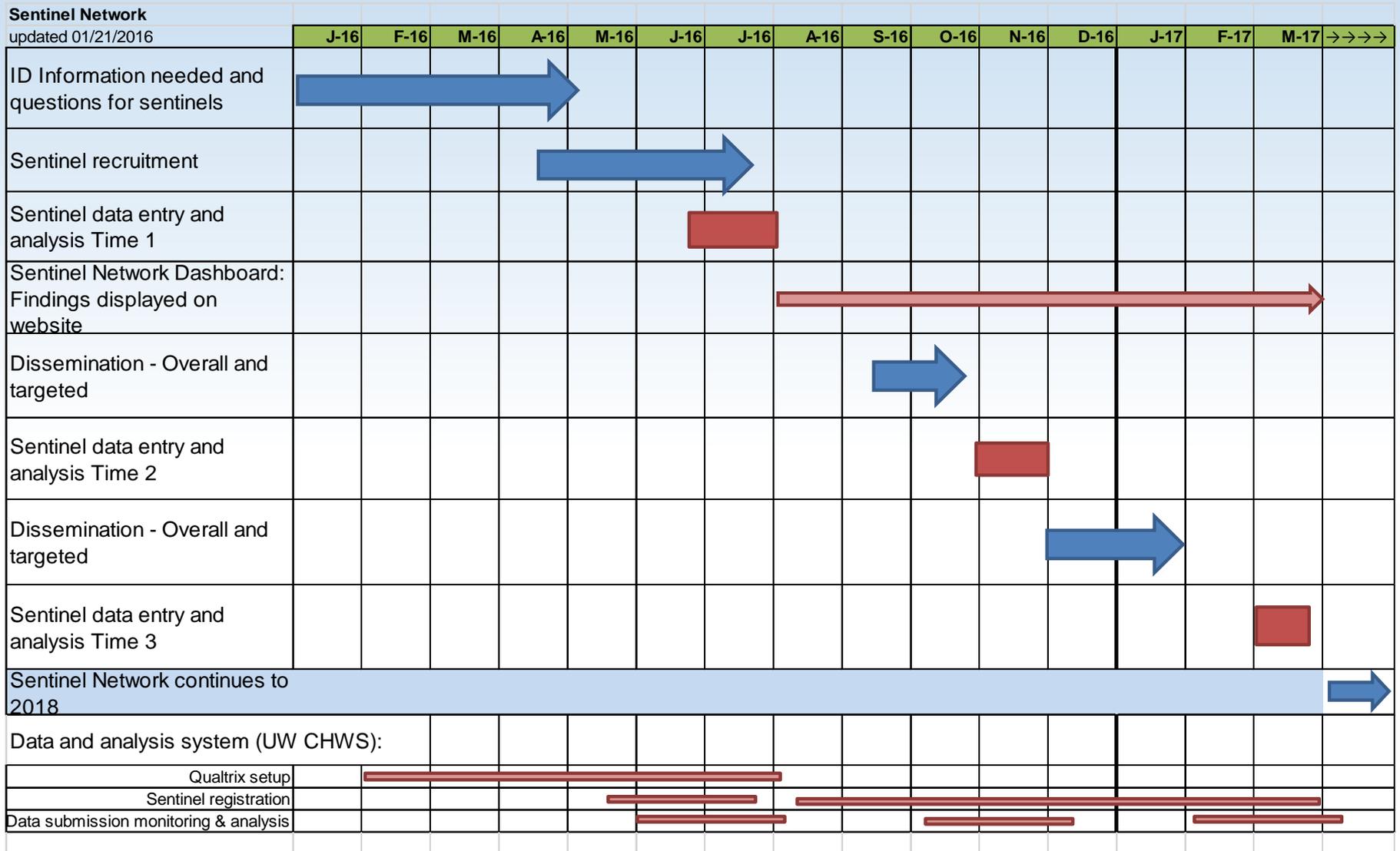
## The Plan

- Recruit “Sentinel” healthcare employers
- Sentinels complete short survey three times/year
- Rapid turnaround of results to dashboard and policy/practice review group (Health Workforce Council)
- Identify and respond to “actionable” findings

# WA State Health Workforce Sentinel Network



# Washington State Health Workforce Sentinel Network Timeline



# Core Questions

*In the past 3-4 months:*

**Has your [facility type] experienced exceptionally long vacancies for any open positions?**

If yes, for which occupation(s) and what are possible reasons why.

**Did your [facility type] experience a change in the usual demand for specific occupations (e.g., had to fill twice as many openings for med-surg RNs; or had no openings for RN care coordinators compared to usual demand for at least 1)?**

If yes – was it higher demand? Lower demand? What are possible reasons for the change?

**Did your [facility type] employ any new healthcare occupations (that you did not employ previously)?**

If yes, for which occupation(s)? In what roles are you using them?

**Did your [facility type] deploy any of your existing (incumbent) workforce in significantly different roles (e.g., use medical assistants to administer behavioral health screenings; have OT assistants conduct home visits)?**

If yes, for which occupation(s)? In what new role(s)?

**Have there been changes in your organization/facility's priorities regarding orientation/onboarding for new employees (i.e. to improve the match between new employees' skills/training and your facility's needs)?**

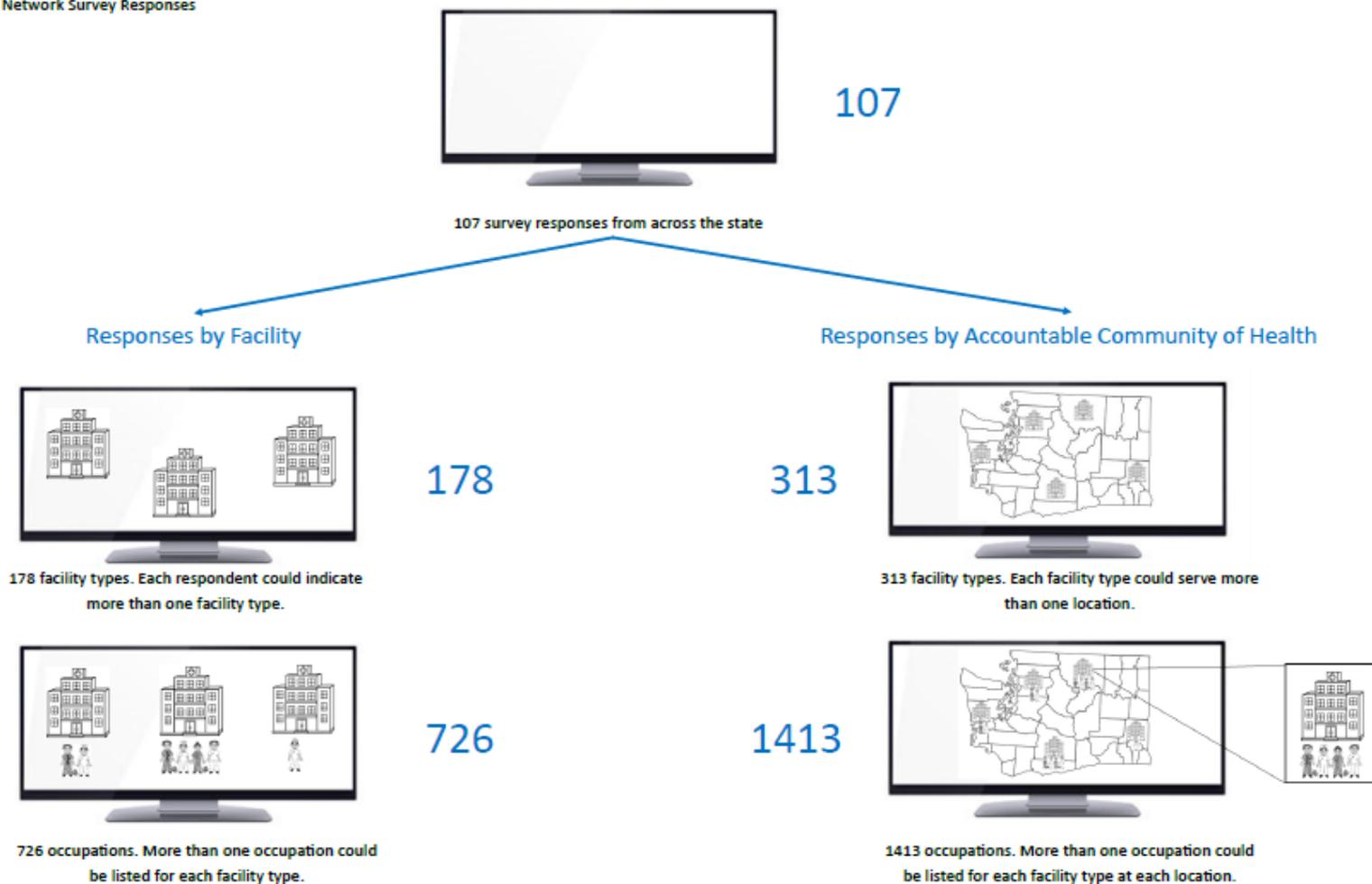
If yes, for which occupations? What types of changes?

**Have there been changes in your organization/facility's priorities regarding training required for your existing (incumbent) workforce (e.g. EHR skills, knowledge of geriatric patients' needs)?**

If yes, for which occupations? What types of changes?

# Survey Responses – The Denominator

## Sentinel Network Survey Responses



# Review of Detailed Results

<http://www.wtb.wa.gov/HealthSentinel/results.asp>

# Response summary for each survey question by facility type

Facility Type	Occupations with Exceptionally Long Vacancies <sup>a</sup> (n/N, %)	Occupations with Increased Demand <sup>b</sup> (n/N, %)	Occupations with Decreased Demand <sup>c</sup> (n/N, %)	Deployed Workforce in New Roles <sup>d</sup> (n/N, %)	Changes to Orientation/ Onboarding of New Employees <sup>e</sup> (n/N, %)	Changes to Training for Existing Employees <sup>f</sup> (n/N, %)	Total Occupations Reported (mean)
Acute care hospital (25 beds or fewer)	31/36 (86%)	25/36 (69%)	0/36 (0%)	4/36 (11%)	13/35 (37%)	11/36 (31%)	36
Acute care hospital (more than 25 beds)	59/116 (51%)	42/116 (36%)	0/116 (0%)	1/116 (1%)	7/117 (6%)	26/116 (22%)	116
Behavioral-mental health clinic/outpatient mental health and substance abuse clinic	73/96 (76%)	55/96 (57%)	3/96 (3%)	10/97 (10%)	24/98 (24%)	56/95 (59%)	96
Dentist office/dental clinic	3/6 (50%)	3/6 (50%)	0/6 (0%)	0/6 (0%)	0/6 (0%)	2/6 (33%)	6
Education	8/15 (53%)	10/15 (67%)	0/15 (0%)	4/16 (25%)	2/15 (13%)	2/16 (12%)	15
Federally qualified health center (FQHC) or community clinic providing care free or on sliding fee scale	87/169 (52%)	86/171 (50%)	1/171 (1%)	5/172 (3%)	7/175 (4%)	36/172 (21%)	172
Home health care service	19/21 (90%)	10/21 (48%)	0/21 (0%)	1/22 (4%)	10/22 (46%)	5/22 (23%)	22
Intermediate care facility	2/2 (100%)	1/2 (50%)	1/2 (50%)	1/2 (50%)	2/2 (100%)	2/2 (100%)	2
Medical/diagnostic laboratory	0/5 (0%)	0/5 (0%)	0/5 (0%)	0/5 (0%)	0/5 (0%)	0/5 (0%)	5
Nursing & personal care facility (not a Skilled Nursing or Intermediate Care Facility)	9/14 (64%)	4/13 (31%)	3/13 (23%)	1/13 (8%)	2/13 (15%)	2/13 (15%)	13
Other	1/1 (100%)	0/1 (0%)	0/1 (0%)	0/1 (0%)	0/1 (0%)	1/1 (100%)	1
Primary care medical clinic (not FQHC or community clinic)	34/69 (49%)	36/68 (53%)	0/68 (0%)	4/68 (6%)	10/68 (15%)	12/69 (17%)	68
Psychiatric/substance abuse hospital	5/9 (56%)	2/10 (20%)	0/10 (0%)	0/11 (0%)	2/11 (18%)	1/11 (9%)	10
Public health	4/6 (67%)	2/6 (33%)	0/6 (0%)	0/6 (0%)	1/6 (17%)	2/5 (40%)	6
Skilled nursing facility	36/79 (46%)	37/78 (47%)	2/78 (3%)	2/78 (3%)	24/81 (30%)	36/79 (46%)	79
Specialty (except psychiatric/substance abuse) hospital	7/8 (88%)	5/8 (63%)	0/8 (0%)	1/8 (12%)	3/8 (38%)	8/8 (100%)	8
Specialty medical clinic	37/70 (53%)	29/71 (41%)	0/71 (0%)	4/72 (6%)	26/70 (37%)	26/72 (36%)	71
<b>Total</b>	<b>415/722 (57%)</b>	<b>347/723 (48%)</b>	<b>10/723 (1%)</b>	<b>38/729 (5%)</b>	<b>133/733 (18%)</b>	<b>228/728 (31%)</b>	<b>726</b>

## Behavioral-mental health clinic/outpatient mental health and substance abuse clinic

Has your facility experienced exceptionally long vacancies for any open positions?

Occupation	Yes	No or Blank	Total
Mental Health Counselor	13	3	16
Social Worker, Clinical	10	1	11
Substance Abuse And Behavioral Disorder Counselor	10	2	12
Nurse Practitioner	5	0	5
Nurse, Registered	5	1	6
Psychiatrist	4	0	4
Marriage And Family Counselor	3	1	4
Psychologist - Clinical, Counseling	3	1	4
ARNP-Psych Specialty	2	0	2
Designated Mental Health Professional	2	1	3
Nurse, Licensed Practical	2	1	3
ABA Therapist	1	0	1
ARNP-Psych Specialty, Peer Counselor	1	0	1
Case Manager	1	0	1
Chemical Dependency Professional	1	0	1
Clinical Supervisor	1	0	1
Co-Occurring	1	0	1
Community Health Worker	1	0	1
Crisis-DMHP Counselor; Counseling Case Manager	1	0	1
Health Officer	1	0	1
Physician Assistant	1	0	1
Physician/Surgeon	1	1	2
Psychiatric Aide	1	1	2
Psychiatric Technician	1	0	1
Psychiatrists & Master'S Level Therapist	1	0	1
Medical Assistant	0	3	3
Medical Records/Health Information Technician	0	1	1
No Workforce Demand Changes For Any Occupations At This Facility	0	3	3
Peer Counselor	0	1	1
Blank	0	2	2
<b>Total</b>	<b>73</b>	<b>23</b>	<b>96</b>

# Findings Summary

## Initial/Baseline Data Collection

### Employers will participate!

- Respondents come from across a wide array of facility types
- Behavioral health, FQHCs, hospitals among those most represented

# Findings Summary

## Initial/Baseline Data Collection

### Recent experience with exceptionally long vacancies:

- Most large hospital responses indicated vacancy issues across multiple occupations – including:
  - Medical/clinical laboratory technologists, RNs, MAs
  - Half of the responses were related to not having enough qualified applicants
- Most BH-related clinics responses also indicated vacancy issues as well
  - MH counselors, clinical social workers, SA/BH counselors led
  - Reasons split equally between not enough qualified applicants AND recruitment/retention issues
- FQHCs and other community clinics
  - Multiple occupations at issue, at similar levels: RNs, physicians, MH counselors, dental assistants, etc.
  - Lack of qualified applicants is leading reason.
- Home health too:
  - Nursing assistants, home health aides, home care aides, RNs, PTs lead
  - Reasons: not enough qualified applicants & salary/wage/benefits issues

# Findings Summary

## Initial/Baseline Data Collection

### **Recent experience with exceptionally long vacancies:**

Responses by Geographic Areas (Accountable Communities of Health)

Mentioned among the top 5 occupations with long vacancies

- In all 9 ACHs: RNs, mental health counselors and clinical social workers
- Medical assistants in 7
- NPs in 6
- LPNs in 3

# Findings Summary

## Initial/Baseline Data Collection

### **Increased demand:**

- Occupations named were similar to “exceptionally long vacancies” question
- Reasons include facility expansion, among others

### **Decreased demand:**

- Very few mentions

### **Recent changes in training priorities:**

- For a wide range of occupations
- Reasons: Many cite EHR/HIT needs.
- Also – meeting needs of structural/policy changes
- Addressing needs of workers with little prior experience – specific to facility types, such as home health and LTC

# Findings Summary

## Initial/Baseline Data Collection

### **Existing workforce in new roles**

- Not a large number of responses, most pretty specific.

### **New occupations employed, and in what roles?**

- Quite a few very specific mentions.
- Care coordination: mixed use of term as “occupation” and as “role”
- NPs: different roles, incl. several mentions of psych NPs in BH and community clinics

# Next Steps

- **Finalize dashboard (UW)**
- **Further analysis and dissemination (HWC)**
  - Review/update HWC subcommittee composition
  - Meet to further discuss baseline findings
  - Develop dissemination and stakeholder engagement plans
- **Determine if any modifications needed for second data collection point (T-2) in November (HWC and UW)**
- **Recruitment for T-2 (HWC and UW)**

## Contact Information

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**To be a sentinel:**

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