

State Responses to Address Health Workforce Needs in the Pandemic

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Health Workforce Technical Assistance Center (HWTAC)

- HWTAC is based at the Center for Health Workforce Studies (CHWS) at the School of Public Health, University at Albany, State University of New York
- Provides technical assistance to states and organizations that engage in health workforce planning
- Conducts a number of projects each year designed to provide expert assistance with health workforce data collection, analysis, and dissemination
- HWTAC's website has an extensive resource library of videos, webinars, reports, resource briefs, FAQs, and state health workforce data collection strategies
- Visit us at healthworkforceTA.org

Today's Presentation

- Today's presentation focuses on states' responses to the COVID-19 pandemic and the impact of COVID-19 on nursing education programs
 - Key Informant Interviews
 - New York Registered Nurse Education Program Survey

Key Informant Interviews

Background and Methods

- The primary objective of this research is to better understand how states responded to health workforce needs during the early stages of the COVID-19 pandemic
- Conducted 32 key informant interviews in 23 states between July and September 2020
- Key informants included state primary care officers, hospital administrators, association directors, long-term care employees, and fellow researchers, among others

Interview Questions

- Each interview was approximately an hour in length
- Interviews were loosely structured and focused on the following questions:
 - How did COVID-19 impact your state?
 - How were health care workers in your state affected by the pandemic?
 - What health workforce policies were implemented in response to the pandemic?
 - How effective were these policies?

How Did States Respond to the Pandemic?

- States used executive orders to respond to the pandemic
 - Executive orders are temporary, but they can be implemented quickly
- Regulatory Flexibility
 - Scope of Practice
 - Facilitating the licensing of out-of-state health care professionals
 - Enabling the greater use of telehealth services

Building Surge Capacity for Acute Care Services

- Recruitment of additional health workers from within- and out-of-state
- Shifting existing staff within health systems to areas of greater need
- Utilizing existing staff in new roles

Demand for Health Care Professionals

- The most sought-after health professionals were those with respiratory care and intensive care experience, including:
 - Nurses
 - Physicians
 - Respiratory therapists
- Staffing agencies were overwhelmed during the initial stages of the pandemic

Impacts on Ambulatory Care Services

- Ambulatory care services and elective procedures were “paused” in many parts of the country
 - Limited in-person services
 - Some individuals were furloughed, others were redeployed
- Lack of access to personal protective equipment (PPE) contributed to the pause
- Telehealth services increased dramatically
 - Behavioral health providers indicated that patients were more likely to show up for telebehavioral health visits

The Health Professions Education Pipeline Was Also Disrupted

- Education pipeline disruption
 - Clinical rotations were not completed
 - Some professions had difficulty meeting clinical requirements due to the “pause”
 - Nurses couldn’t access testing sites for the National Council Licensure Examination (NCLEX)
- Strategies to ensure on-time graduation
 - Providing alternatives to clinical rotations (eg, simulation, off-shift rotations)
 - Allowing trainees to volunteer at health care facilities for education credit
 - Extending the time new nurses could work on a limited permit while waiting to take their exams

Vulnerable Populations

- American Indians living on tribal lands
- Minorities
- Immigrants and refugees
- Meatpacking-plant workers
- Residents in nursing homes and assisted living communities
- Rural areas also faced unique challenges since they often lack resources needed to manage acutely ill patients

New York Registered Nurse Education Program Survey

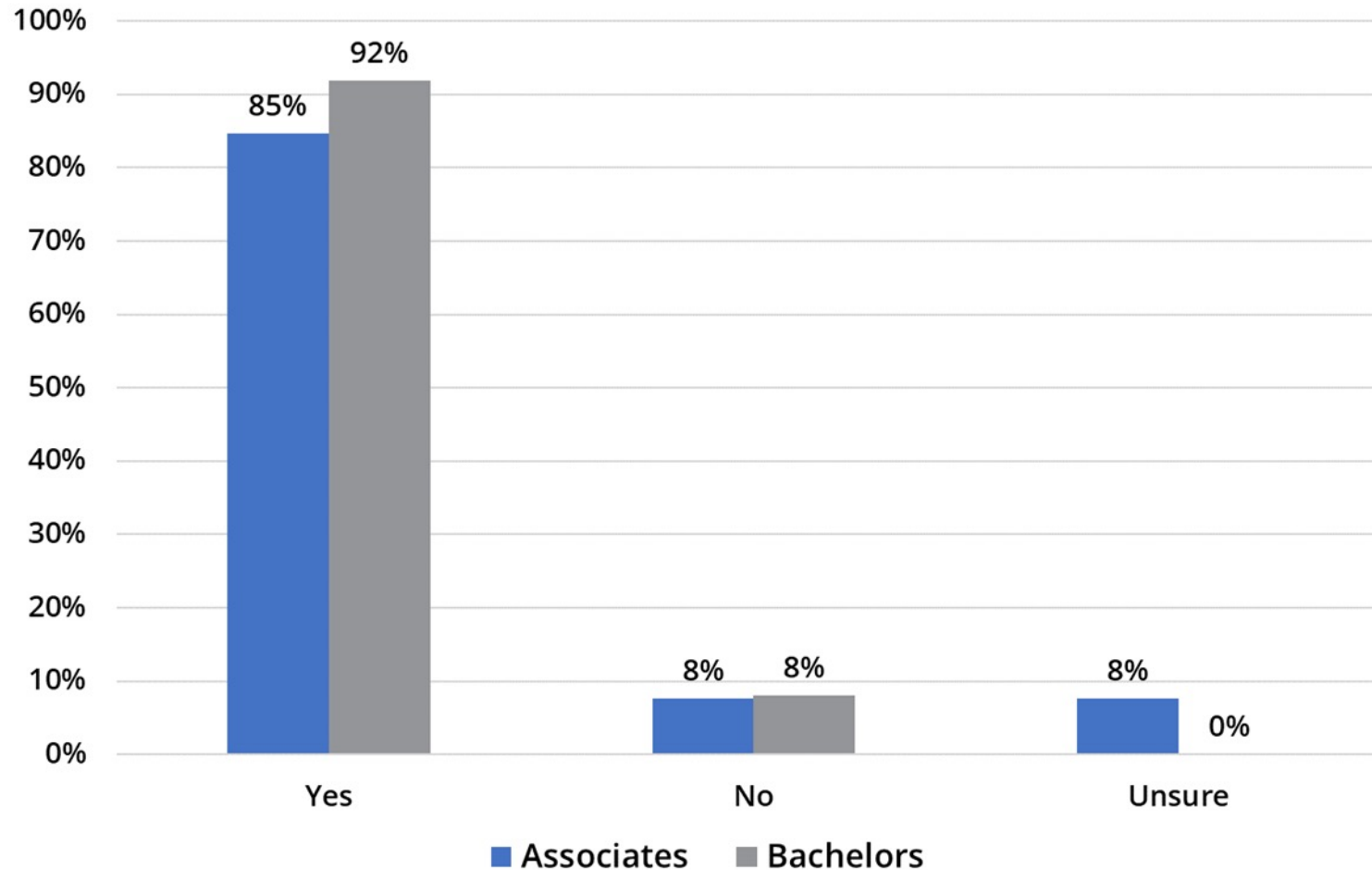
Preliminary Findings

Background and Methods

- CHWS has been conducting the NY RN Education Program Survey since 2002
 - Number of applicants, acceptances, and graduates
 - Perceptions of the regional job market
- A series of COVID-19 related questions were added in 2020
- Reached out to other states about adding COVID-19 related questions and eventually comparing outcomes
 - Utah and California

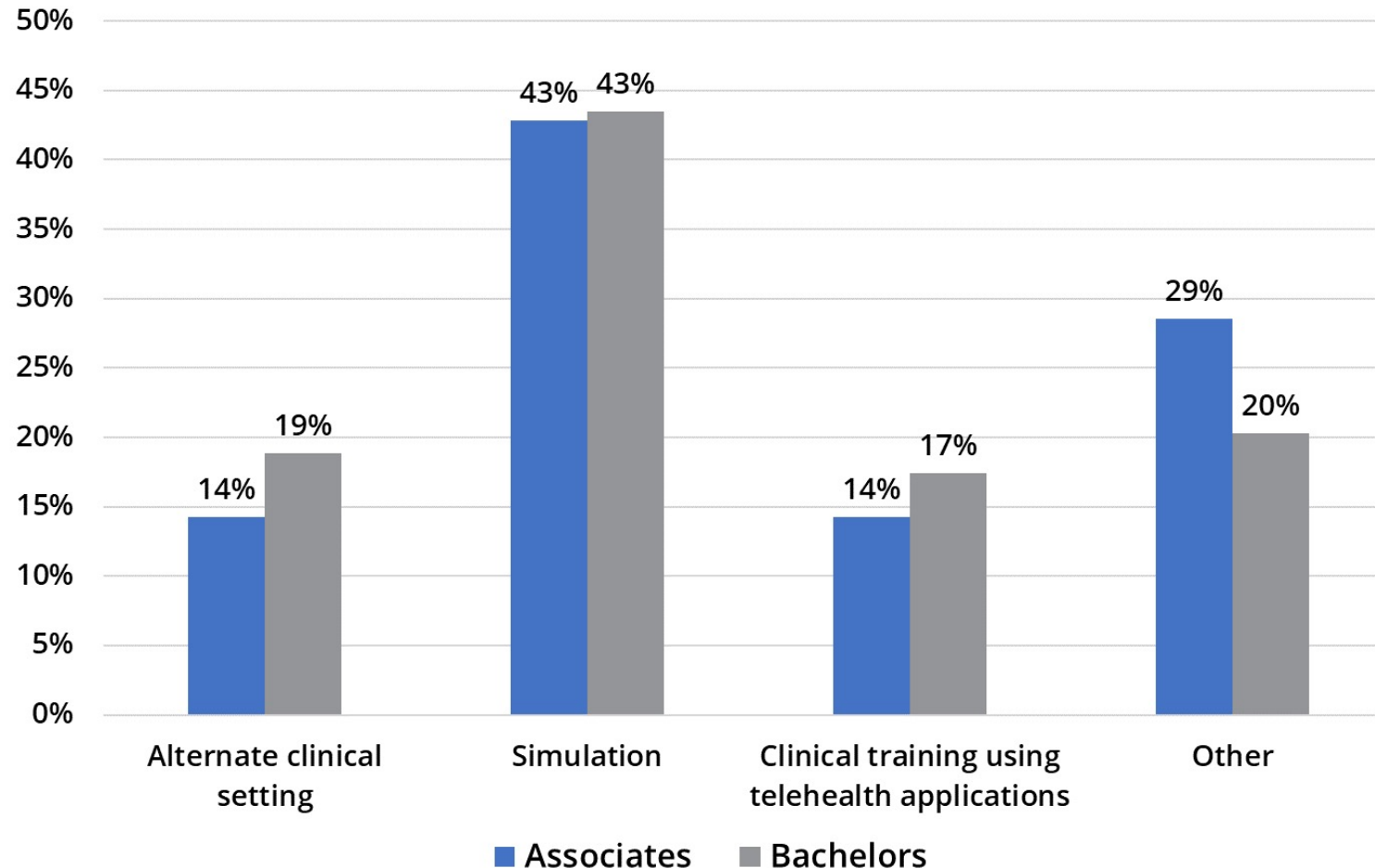
The Vast Majority of RN Programs Reported Disruptions to Clinical Training

Did the pandemic disrupt clinical training for students in the spring of 2020?



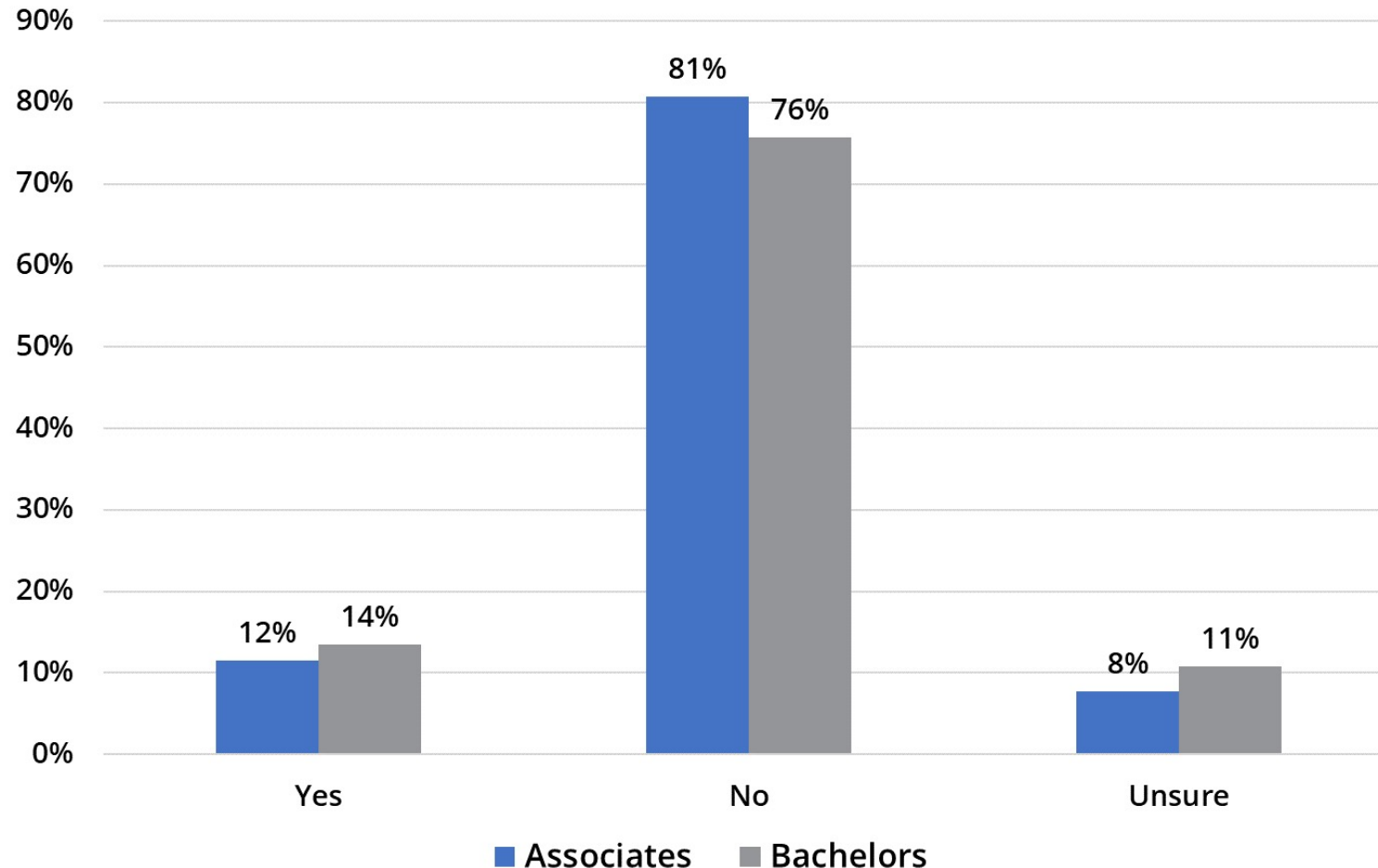
43% of RN Programs Used Simulation to Ensure Completion of Training

What strategies were used to ensure students completed clinical training?



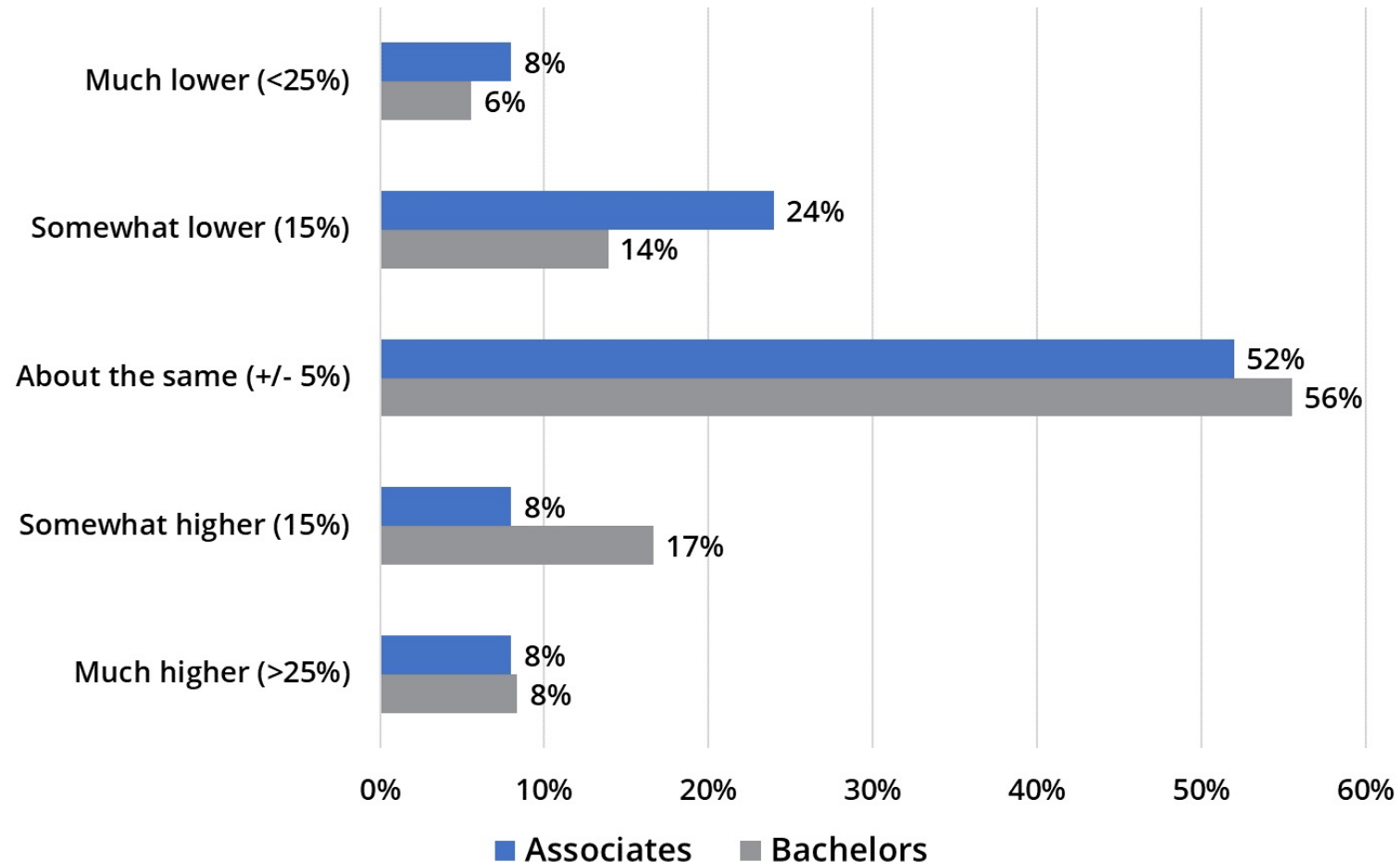
Less Than 15% of RN Programs Indicated That the Pandemic Resulted in Fewer Graduations

Did the COVID-19 pandemic result in fewer graduations than anticipated in the spring of 2020?



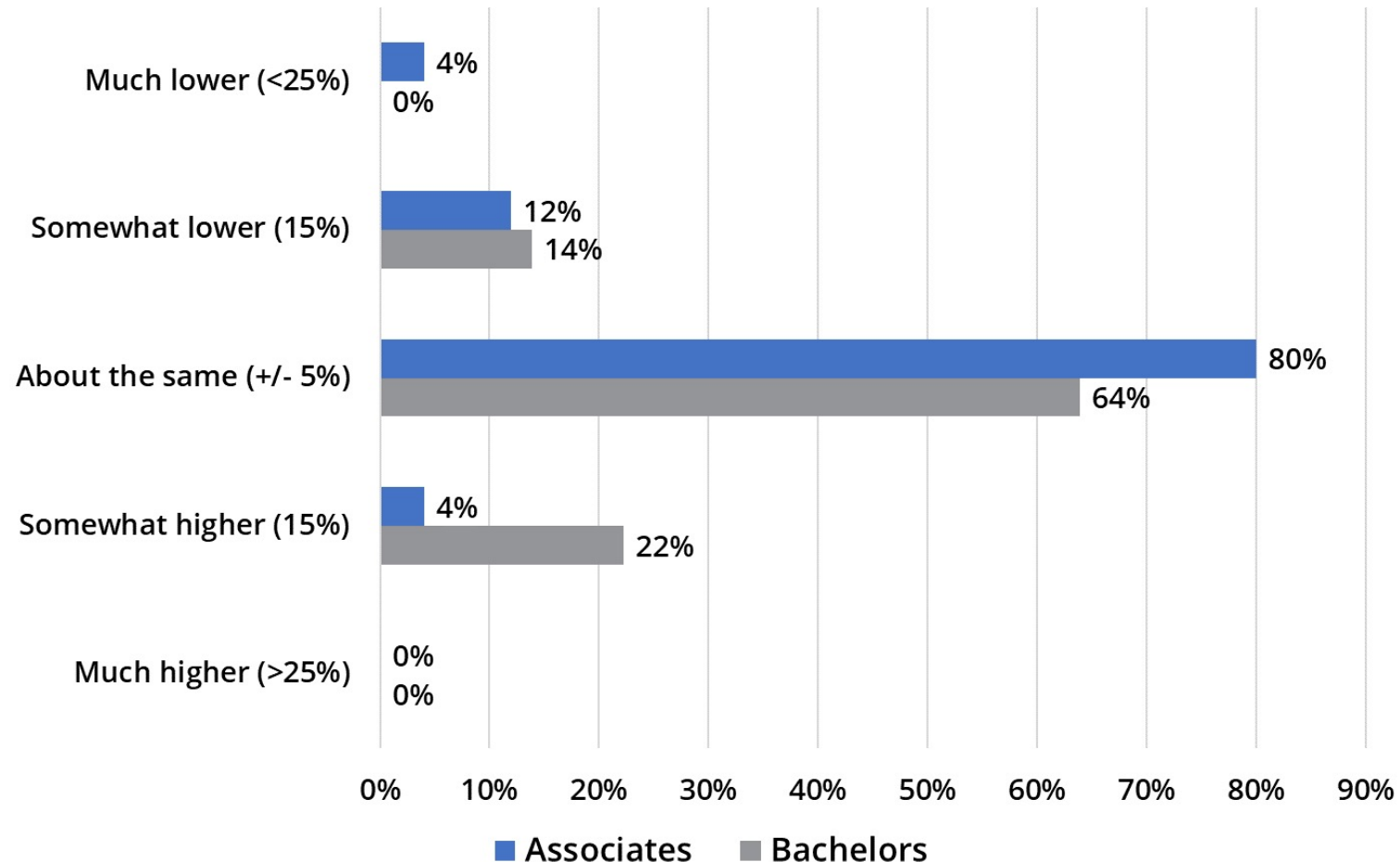
More Than Half of RN Programs Indicate That the Number of Applications Hasn't Changed

What is your estimate of the number of applications this year compared to the previous year?



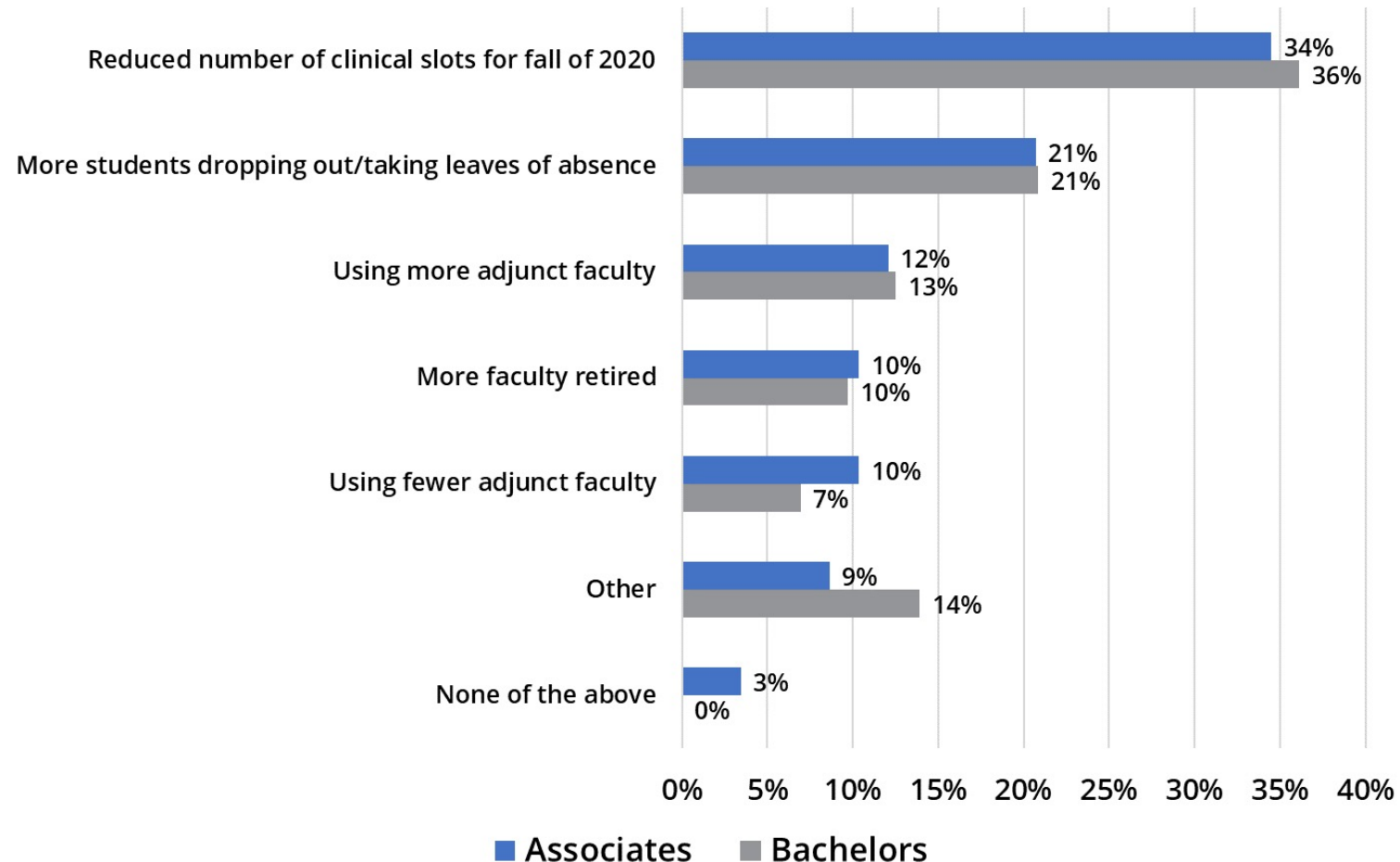
The Number of Acceptances Did Not Change at the Majority of Programs

What is your estimate of the number of acceptances this year compared to the previous year?



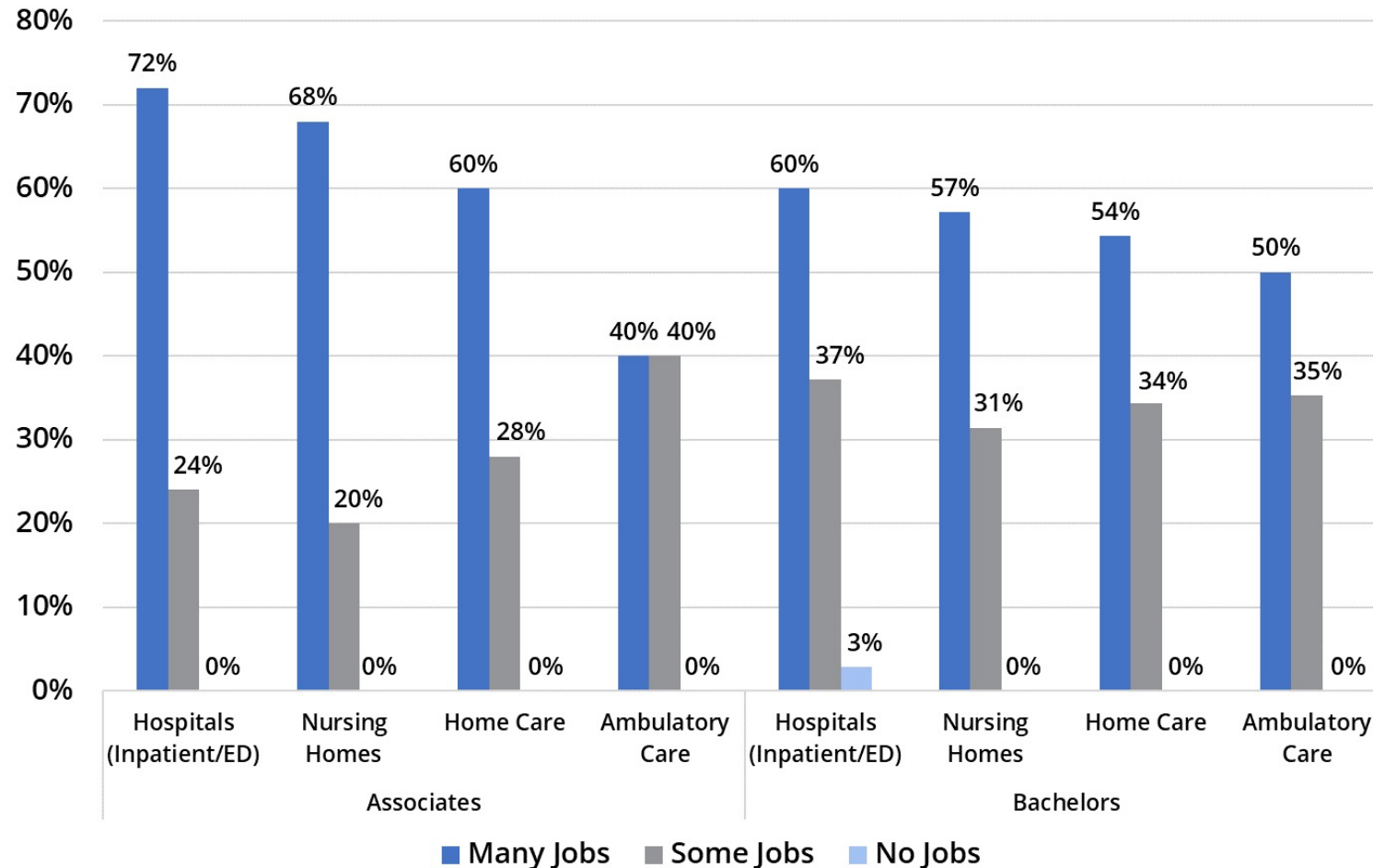
The Pandemic Reduced the Number of Clinical Slots for 1/3 of RN Programs

In what other ways has the pandemic affected your nursing education program?



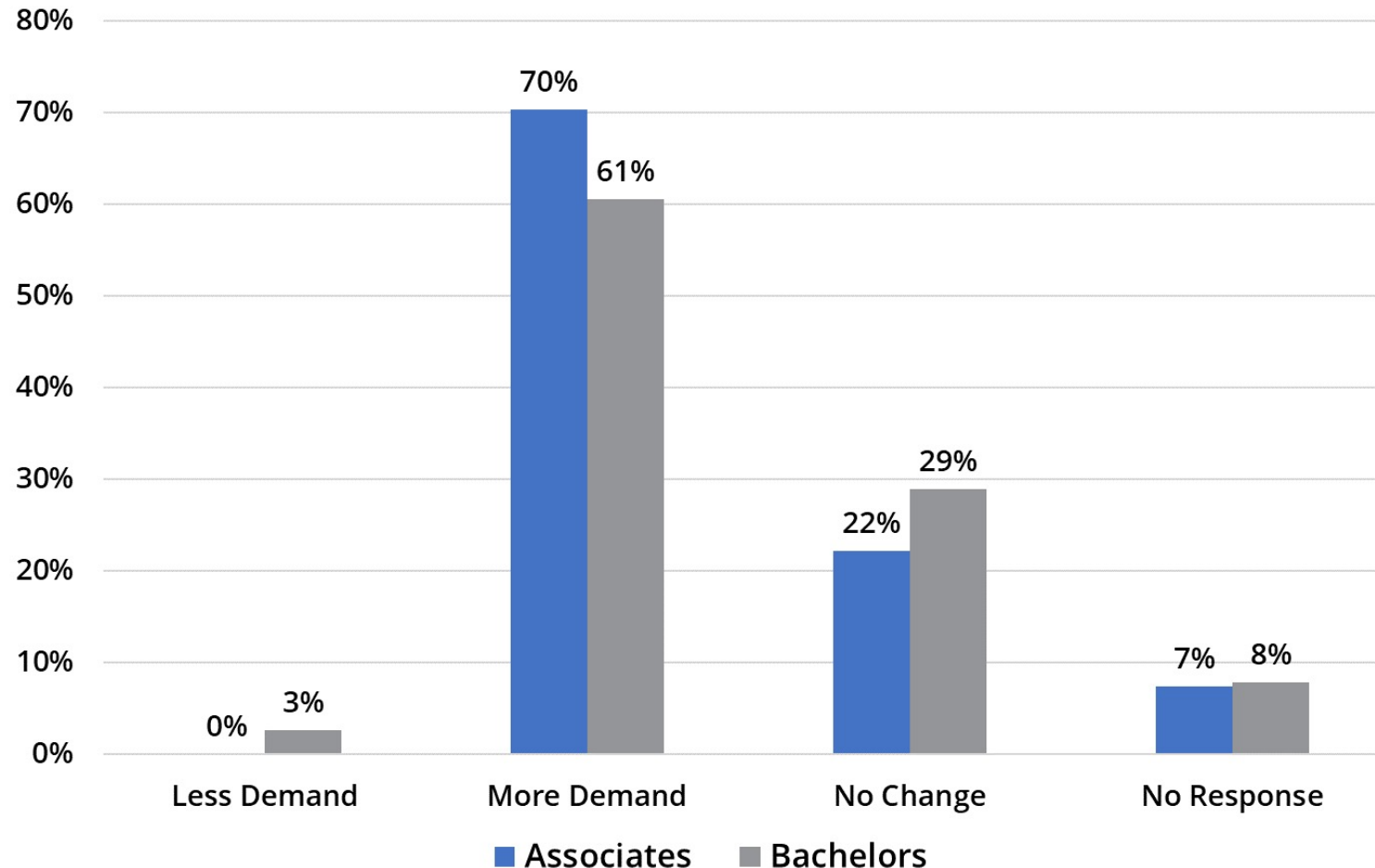
The Job Market for New RNs Is Strong

What is your perception of the job market for new RNs in your region of the state?



The Majority of Programs Indicated That the Pandemic Increased Demand for New RNs

Did the pandemic impact the demand for new RN graduates in your region?



In Conclusion

Closing Thoughts

- We need to continue to monitor the pandemic's impact on the health workforce
- Evaluate the emergency measures enacted by states and health professions education programs
- The strategies used to confront the pandemic may ultimately lead to permanent policy changes that create greater access to care

Acknowledgements

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