The Vicious Cycle Of Healthcare Staffing Shortages. Can It Be Broken?

By: Meaghan Breen **Eagle Times Staff**

"We are definitely seeing shortages. The last two years have been the most difficult for retention of staff in my career," said Timothy McNulty, Senior Director of Human Resources at Valley Regional Hospital in Claremont. Although COVID-19 significantly impacted staff re-

tention, McNulty says numbers were decreasing prior to the pandemic. "There's been a fair amount of people reaching retirement. We're just not seeing enough people going into the field."



Timothy McNulty

Adding to the staff shortages is the reality of the Twin State Valley's population. Residents in both New Hampshire and

Vermont are noticeably older than the national average. McNulty says this results in a "high demand for health care," which places a heavier than normal burden on area healthcare providers.

COVID-19 caused many employees to leave the field. The psychological impact of the influx of patients simply overwhelmed staff. New London Hospital Human Resources Recruiter Marcia Goulart said it's particularly challenging because of their small size. "They get

burnt out. It's hard, but we have

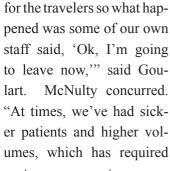
good managers who support them."

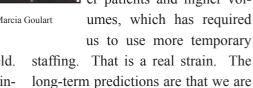
McNulty agreed. "I think it can be a challenging profession in the best of times and, you know, particularly when we have a COVID surge." He said maintaining safe staffing levels to ensure quality patient care "was difficult," noting staff shortages included non-clinical positions. McNulty said COVID caused a definite surge in early retirements and affected

> work attitudes. "I saw, I feel, a reluctance of people to work," he said, stating there are more vacant positions than ever before.

> To address staff shortages, both hospitals have had to hire "per-diem" or "traveling" nurses to cov-

er shifts. It's very expensive and may have made the shortages worse. "Agencies beefed up the hourly wage





shortage in health care," he added. It's Not Just The Hospitals

going to continue with a work force

According to its President and CEO Jim Culhane, the Lake Sunapee Region Visting Nurses Association is having the same staffing issues.

"It's important to point out that the staff shortage issue was problematic pre-COVID and the trends did not look good. We were heading toward a serious crisis, regardless."

When COVID hit, "The problems grew exponentially and, for a couple reasons, [we] suddenly had a high level of sick people...[it] created a high level of burnout in all facets of healthcare," Culhane stated. The VNA overextended itself as it tried to maintain services in its geographic service area. "Staffing was begin-

ning to negatively impact the care we provided and it's going to get worse... we had a problem and it was a significant problem." Retirements were driving the staffing crisis.

Culhane explained how Jim Culhane pandemic impacted patients with non-COVID conditions. "A lot of offices and basic medical care either froze, or were not functional, or not functioning very well. People that had lung disease or diabetes, they weren't seeing their doctor for an extended period of time. That's not good. That creates a lot of exacerbation, meaning those chronically ill people... they're sicker, need a lot more care. It caused a problem downstream."

"Covid killed a lot of people," he added, especially in nursing homes. "Those facilities got clobbered and the staff who worked there got clobbered. It pushed people out of the

workforce at a time when we needed more people, not less," he said.

Culhane said staffing limitations prevented patient care standards from being met, which ultimately forced them to make a difficult decision at the beginning of the year. "We had to make an executive decision. We shrank the number of towns we service...we needed to get back to a place to provide high quality care." They couldn't handle the volume of referrals. "There's only so many patients we can see," he said, em-

> phasizing the correlation between an overwhelming workload and staff burning out and leaving. "That's the last thing we want." They also adjusted the number of patients to four

> or five per day, per nurse. The consequence of re-

ducing their service area is that people in need of care have fewer options to obtain it. "There's no guarantee they can see all those patients," Culhane said of other home care organizations, which are also struggling to see patients consistently.



An often overlooked but critical component of the healthcare system, which is also struggling with staffing shortages, is ambulance service. People expect ambulances to respond quickly to emergency calls; calls that often determine whether



Marcia Goulart

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or not someone lives or dies. Ambulance services are also necessary for non-critical patient transport to and from hospitals, nursing homes and other healthcare facilities. Again, the region's aging population presents an elevated workload.

Claremont Mayor Dale Girard owns and operates Golden Cross Ambulance. It provides emergency and non-emergency transport services in multiple NH and VT communities. Also a paramedic, Girard himself has been working shifts to offset staff shortages. "It's like anything else in the health care in-

dustry at the moment, that staffing has become a very tough situation," Girard said. "I think people left... it kind of created a void."

Girard has observed that there are not enough people to man facili-

ty beds. "We always hear this term 'there's not enough beds." What that really means is "they just don't have the staffing."

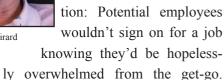
Dale Girard

Valley Regional's McNulty agreed, saying they hold admissions to maintain safe staffing levels when callouts occur. "Unfortunately, this often coincides with when beds are most needed," he said. They reassess bed capacity based on staffing constantly.

As staffing levels have sagged, Girard said 911 calls have risen. "Everybody I talked to in the last couple years, 911 responses have increased." He said the increased call volume makes the strain "that much more difficult." He's unsure why. "It seems to be the same type of calls we've gotten for years." Last July, Golden Cross started working in Brattleboro, VT where it encountered "historical" numbers, three to four calls over what was typical for a day.

Girard recalled speaking to a nurse manager at a large Massachusetts hospital. The manager said the hospital was down 45 nurses in the emergency department alone. To his surprise, the hospital only advertised 15 positions. "Why?" Girard asked. He was told that, if the real numbers were shared

with potential employees, then they would be "going to go the other way, where they know they're not going to be in trouble before even getting started." Translation: Potential employees wouldn't sign on for a job



Girard says that sometimes, when local hospitals don't have beds available, his staff must drive patients excessive distances to out-of-state hospitals. He said that, prior to the last couple of years, this was never necessary. Because at least two employees need to be on an ambulance at once,

It's a "vicious cycle" he said, adding that more stress falls on his employees when someone moves on, which in turn makes remaining employees more likely to work lon-

it's difficult to answer every call.

ger hours and experience burnout. "I'm definitely fortunate. We have a great staff that is with us...you can definitely see it in their faces, that they're tired as well," Girard said.

"You hate to say it, but most people have been very understanding... we have a great working relationship with Claremont Fire Department," he said, praising the work they do to stabilize people before the ambulance arrives. "That and the family members that are with them have been very understanding."

As to the stress, "You almost get hardened to it," he said. "The problem is everyone ends up with a breaking point and it's just a matter of recognizing it before that breaking point...sometimes it can be a career ender for them. There's light at the end of the tunnel, it's just not as short as I'd like to see it," Girard concluded.

Healthcare Companies Innovate, Open Their Wallets To Find Workers

To tackle these staffing shortages, the healthcare industry is striving to improve pay, benefits, flexibility, workplace culture,

conditions and activities.

New London's Goulart says a flexible work environment is key and that they kept the COVID hybrid work option. "It's a really positive thing," she said, asserting it enhances productivity. Wage increases,

a discounted childcare center, parental leave, adoption aid of \$5,000, a revamped retirement plan and generous

referral bonus helped the hospital fill 80 positions this year. Senior Director of Human Resources Andrew Face believes the planned 60-unit Twin Pine affordable housing project will improve the hospital's ability to recruit new employees.

Valley Regional is taking a similar approach, adding such things as reimbursements for gym memberships and fitness-related items like running shoes, lift tickets, skis and golf clubs. McNulty said the hospital is working hard to foster a "work life balance" culture that encourages staff to "get away from work as much as possible" to avoid burnout.

It's planning to create four efficiency apartments and four rooms of temporary, free housing to relocate new hires. McNulty hopes this innovative thinking will create a workplace that employees are attracted to and want to stay in.

At Golden Cross, Girard is very intentional about creating an open dialogue with his staff. He emphasizes physical health and its connection to stress relief to keep "a clear mind," adding employees know when to step back. He says some employees use the ambulance company as a "starting point" in

their medical career. Two of his employees have applied to medical school.

To help staff ambulance companies, NH is offering to pay all EMT and advanced EMT training costs as well as a \$1,000 employee retention bonus. "It's definitely a

great field to get into," Girard said.

Lake Sunapee offers a unique work environment structured



Tim Lund

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around rewarding relationships with patients. Unlike other nursing positions, VNA nurses treat patients for lengthy periods of time and have the opportunity to witness growth in their clients, both psychological-

ly and physically. They educate and instill autonomy and independence.

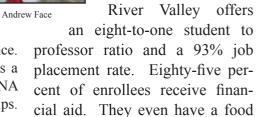
"We offer incentives... [a] flexible work schedule. You help them recover, or if they're in hospice you help them navigate end of life," said Lake Sunapee's Culhane.

"It's a different type of experience. We try to promote the culture as a competitive advantage." The VNA also offers employee scholarships.

Colleges Are Helping To Fill The Gaps

"[We're] really trying to focus on local people and trying to get them interested," McNulty

> said, referring to Valley Regional's collaboration with River Valley Community College for clinical rotations. "We really see that as the wave of the future."



pantry to help students struggling with food insecurity. With respect to healthcare, its degree and certification programs are Nursing, Medical Lab Technician, Medical Assistant, Massage Therapy, Medication Nursing Assistant, Occupational Therapy, Phlebotomy, Licensed Nursing Assistant and Physical Therapy.

It partners with Ed2Go, a leading online training company providing affordable professional and personal development courses, including: Medical Billing and Coding, Personal Training, Advanced Medical Interpreter, Administrative Dental tant, Registered Behavior Technician and Veterinary Assistant.

The college also works with Running Start and Bridge2College; programs that allow high school students to take college-level courses at an exceptionally reduced rate. The classes provide both high school and college credit. River Valley's staff regularly attend career fairs and area high school events to share its offerings. Seventy-six percent of students are part-time. There are summer classes to support a quicker pace, if desired.

"Nurses are really valued and the money is really beginning to be higher than ever before. [There are] opportunities you've nev-



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Denise Ruby

er had in nursing before," said River Valley's Nursing Department Chair Denise Ruby. "... students are going everywhere... they're being courted to get into all of these other fields."

River Valley's Respiratory Therapy Program Director Kathy Hilliard emphasized alternative

career options for those interested in healthcare. "You always hear about the nursing shortage... but you don't hear about the other piece," she said. "There's just so much with this specialty," she said, adding that the re-

spiratory therapist shortage is more severe than the nursing one.

The specialty has ample benefits, flexibility and pay. She says starting pay is typically between

\$65,000-\$72,000 per year and sign-on bonuses are big, amounting to thousands of dollars. Relocation pay is common and traveling respiratory therapists can make between \$150,000-\$200,000 a

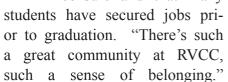
year. "This is only working three days a week." The 12-hour shifts allow for flexibility.

"Everyone wants to be a nurse, but not everyone is cut out for nursing," Ruby said. River Valley's offerings in the medical field provide a wide variety of options. "If nursing isn't for you, it's very easy to switch majors. Thats the benefit for us, we can kind of move people around. Students just don't come in thinking of that," she said.

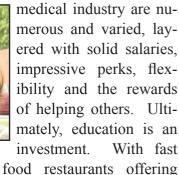
Hilliard had no interest in nursing and appreciates that respiratory therapy is localized to the upper body. "There's nothing below the waist," she said, which is important for those who are uninterested in that facet of care.

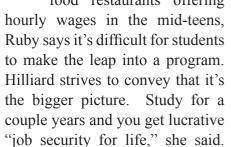
Respiratory therapists regularly treat patients of all ages with COPD, asthma, pulmonary problems and sleep apnea.

Ruby says NH has some of the highest scores for nursing licensure and that many



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