

# HEALTHCARE WORKFORCE CRISIS

*Purpose: To consider the extent to which there is a shortage of frontline healthcare workers, the reasons why, and how it relates to our fight for safe staffing.*

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## Task 1: The Real Healthcare Workforce Crisis Shortage of Good Healthcare Jobs

In the previous activity, we talked about what it means to be a healthcare worker. We all want to deliver the best care for our patients. Healthcare is a human right - everyone deserves care. But our healthcare system is broken.

We all know the facts: The US spends the most money on healthcare in the world, but has some of the worst healthcare outcomes in common health metrics like life expectancy, infant mortality, and unmanaged diabetes. ***In 2020, per capita spending in New York state was \$10,007 - 37 percent higher than the national average (\$10,191) and second highest in the nation, after California.*** Yet, despite the extraordinary and ever-increasing spending, New York has higher hospital admission rates, longer lengths of stay, and more hospital outpatient visits compared to the national average.

Our healthcare system puts profit over patients.<sup>1</sup> Even non-profit hospitals.<sup>2</sup> In a profit-driven system, the goal is not to deliver the best care for our patients but to make big business - to the detriment of the health of patients and to the detriment of the healthcare workforce.

In this activity, we will dig deeper into the problem of why our healthcare workforce is in crisis.

In your groups, please review the following pages and answer the questions below. They are designed to give us a better understanding of the real problems behind the staffing crisis.

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<sup>1</sup> <https://time.com/6281957/american-health-care-is-broken-major-hospitals-solution/>

<sup>2</sup> <https://www.nytimes.com/2023/01/25/podcasts/the-daily/nonprofit-hospitals-investigation.html>

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1. Why are so many healthcare workers leaving the bedside?

2. What could employers do to bring healthcare workers back to the bedside?

3. What are the barriers to hospitals doing those things?

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## There Is A Good Healthcare Job Shortage

**Despite continued growth in the number of employed healthcare workers, hospitals report significant shortages.**

In New York, along with in the rest of the Country, job growth in healthcare exceeds job growth in all other employment areas. While the pandemic has slowed this trend - growth in this sector outpaces other areas of employment.

Hospitals report having issues filling vacancies for frontline healthcare workers. A report by the Hospital Association of New York reported that "100% of hospitals have nursing shortages they cannot fill and 75% reported other frontline staff titles they cannot fill."

According to surveys, RN titles are the hardest to recruit, followed by clinical laboratory technicians, respiratory therapists, licensed practical nurses, and certified nursing assistants.<sup>3</sup> The Center for Healthcare Workforce Studies projects 14,000 annual openings for RNs and nearly 5,000 for LPNs in New York.<sup>4</sup>

**However, the number of healthcare workers are adequate.** For example, according to the NYS Comptroller, in 2022, 30,458 RNs were licensed in New York State, which is an increase from 18,607 in 2018 – a 64% increase. **However, the increase in RN licenses in New York**

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<sup>3</sup> <https://www.chwsny.org/wp-content/uploads/2023/05/Health-Care-Workforce-NYS-Trends-2023-Final.pdf>

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**State does not mean license holders are practicing in the State<sup>5</sup>.** In fact, the US Census shows us that only 52% of those with active licenses are currently working as nurses.



Therefore, while there are significant vacancies, and it is clear there is the need to ensure more healthcare workers are entering the field, there are actually a significant number of actively licensed and qualified healthcare workers in New York State who are not at the bedside.

The question is why - and what to do about it.

## Why Healthcare Workers are Leaving the Bedside

As you've probably seen in the headlines, healthcare workers have been leaving the field in droves. The pandemic pushed healthcare workers over the edge in terms of both healthcare workers leaving the field and being forced out. According to a recent study, nearly a quarter of healthcare workers have quit their jobs following the COVID-19

<sup>5</sup> <https://www.osc.ny.gov/files/reports/osdc/pdf/report-2-2024.pdf>

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pandemic, while another 12% have been laid off as healthcare systems have been trying to cut costs.<sup>6</sup>

Among healthcare workers who have kept their jobs, approximately one-third are planning to leave, up from a quarter the year before.<sup>7</sup>



### Why are workers leaving the bedside?

**Unsurprisingly, the number one issue pushing healthcare workers to leave their jobs is unsafe staffing.** Study after study proves this, as well as preliminary data from CWA's recent survey of healthcare members in NYS. Safe staffing is not only a matter of saving lives, but also a critical matter of recruitment, retention and stabilization of the healthcare workforce.

A recent national study shows that **51 percent** of surveyed nurses considered leaving the profession within the next year, citing short staffing and moral distress as the driving factors.

<sup>6</sup> <https://pro.morningconsult.com/articles/health-care-workers-series-part-2-workforce>

<sup>7</sup> <https://www.mckinsey.com/industries/healthcare/our-insights/surveyed-nurses-consider-leaving-direct-patient-care-at-elevated-rates>

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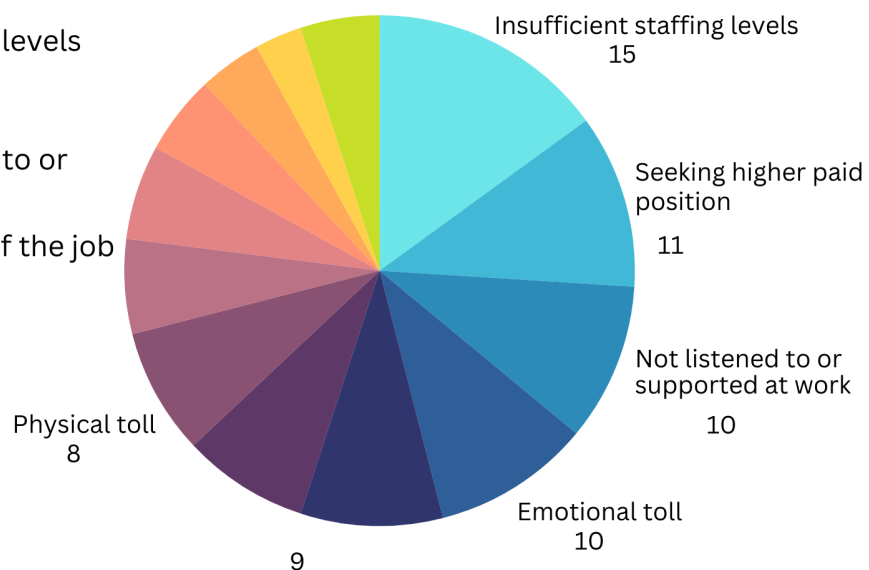
- **95 percent** had experienced moral distress, “when they feel that the ethical course of action is not being pursued due to organizational or institutional constraints”
- **Only 15 percent** felt staffing levels in their workplace were safe
- Of those who considered leaving the profession, **79.3 percent** cited “inadequate industry-wide staffing practices” pursued by hospital executives, and **78.8 percent** cited moral distress, as the factors driving them to consider leaving the field.<sup>8</sup>

**Of course, there are a number of other factors pushing healthcare workers to quit, retire, or join the traveler workforce.**

### The strongest drivers of intent to leave included:

- ▶ Insufficient staffing levels
- ▶ Seeking higher pay
- ▶ Not feeling listened to or supported at work
- ▶ The emotional toll of the job

*Factors influencing decision to leave, mean score out of 100*

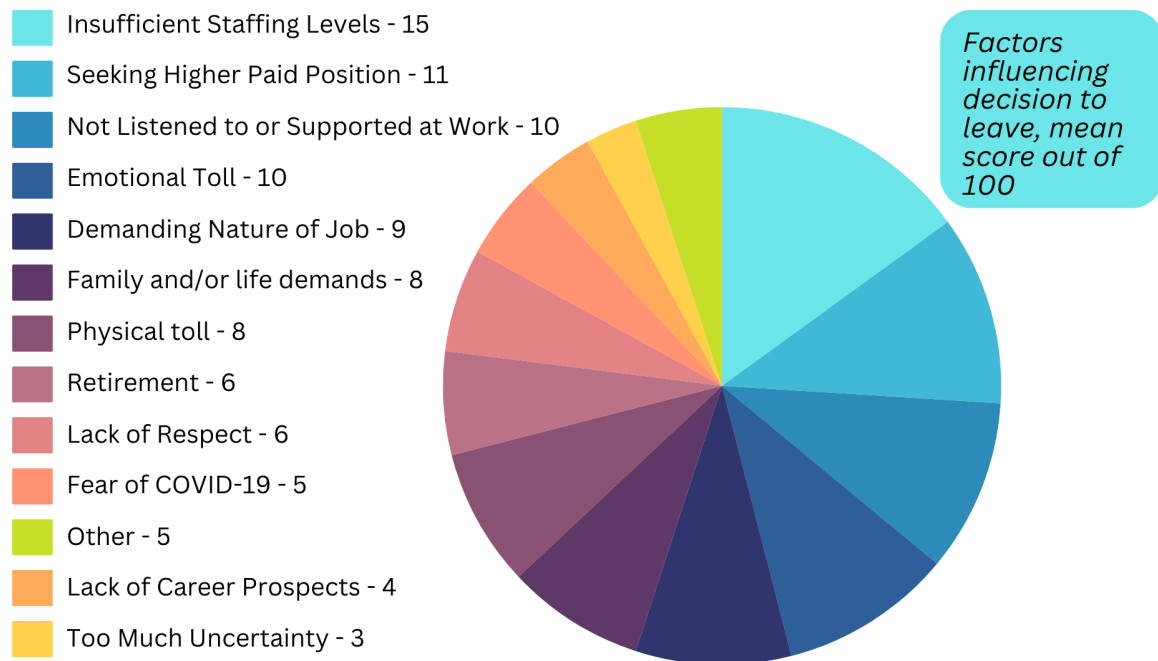


<sup>8</sup> <https://mnnurses.org/over-half-of-nurses-consider-leaving-profession-due-to-short-staffing-moral-distress-new-national-study/>

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## Hospital Systems Have an Economic Incentive to Keep Their Nursing Staff Small

Most US hospitals run under a fee-for-service system: They make money by billing for individual services. Doctors are revenue generators. They order tests to be run, imaging to be taken, medication to be administered, and conduct surgeries and exams. The hospital can charge for each of those individual services, and patients see them on their bills.

Nurses are essential to each of those services. But because hospitals don't bill insurers for the care that nurses provide to support a doctor's orders, they end up on the other side of the balance sheet as a labor cost.

This means hospital systems have an economic incentive to keep their nursing staff as small as possible. And when their finances become tight — such as when a global pandemic forces them to cancel moneymaking elective services — nursing and other labor costs are

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often targeted for cuts. That's why US hospitals were furloughing nursing staff shortly before they became flooded by Covid-19 patients."<sup>9</sup>

## **We are facing a major healthcare workforce crisis.**

But we won't let hospitals get away with blaming it on not enough healthcare workers. The truth is that while bolstering the healthcare worker pipeline is important and we need more healthcare workers in the field, there **are** enough healthcare workers in New York to radically improve staffing.

But in order to fix the staffing crisis, Hospitals need to radically improve working conditions and give healthcare workers the respect and dignity they deserve.

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<sup>9</sup> <https://www.vox.com/policy-and-politics/23076581/us-covid-health-care-nurses-pay-salary>

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## Task 2: “Shortage” Activity

**In an interview about short staffing, your hospital administrator said,**

“The nursing shortage is real. There just aren’t enough healthcare workers in this State. We have a hundred jobs posted and we can’t fill them. And where we fill them, we can’t keep them. Heck, we could double wages, and I still don’t think we’d be able to find enough full-time staff. And, honestly, a little of the blame lies with workers themselves, like the ones who quit to become travel nurses so they can make more. At our hospital, we’re doing everything we can to support our healthcare workers, like providing workplace education on coping with stress through self-care. We’ve even set aside spaces where they can practice meditation and mindfulness. What else could they want?”

**Please list your agreements and disagreements with the above statement.**

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## Takeaways

1. Our healthcare system is broken. We can't fix the staffing crisis if we don't understand the underlying problem of a for-profit healthcare system that puts profits over patients - and the structural incentives that keep it that way.
2. Healthcare workers are leaving the profession because of unsafe staffing and bad working conditions. The only way to end this trend is to improve staffing and give healthcare workers the support and resources they need to do their jobs. And as with all workers, healthcare workers deserve and must demand to be treated with dignity and respect.
3. Our employers blame a worker shortage as the reason why they can't staff up. But the truth is there are enough licensed healthcare workers out there - they just refuse to work under the terrible working conditions in underfunded, short-staffed hospitals.

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