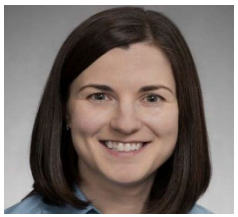
Examining the Health Workforce: Today's Landscape and in the Future

Joint Commission of Pharmacy Practitioners
Alexandria, VA
November 2, 2022

Bianca K. Frogner, PhD
Professor, Department of Family Medicine
Director, Center for Health Workforce Studies
University of Washington

center for health workforce studies
UNIVERSITY of WASHINGTON

Twitter: @uwchws, @biancafrogner



UW Center for Health Workforce Studies

- Established in the Department of Family Medicine in School of Medicine in 1998
- Conducts health workforce research to inform health workforce planners and policy makers
- Supported by multiple grants/contracts including two center grants from the Health Resources and Services Administration with focus on:
  1) Allied health workforce
  2) Health equity & workforce diversity

center for health workforce studies
UNIVERSITY of WASHINGTON

Objectives

- Defining the health workforce
- Identifying COVID effect on health workforce
- Workforce shortages and speculating on the future

Who makes up the health workforce?

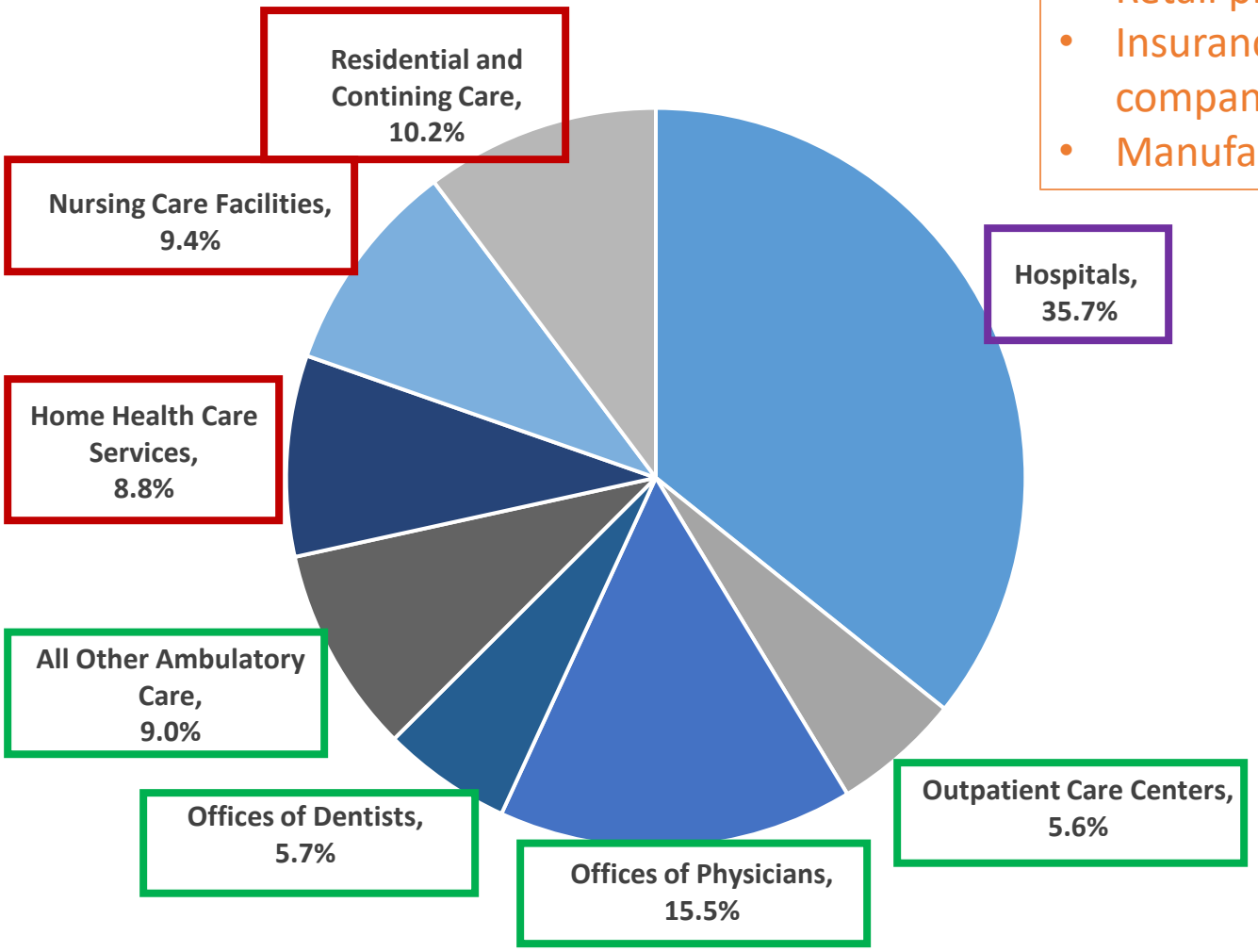
Defining Industries and Occupations

center for health workforce studies
UNIVERSITY of WASHINGTON

Sectors within Health Care Industry, 2019 (n=17,054,890)

Not captured:

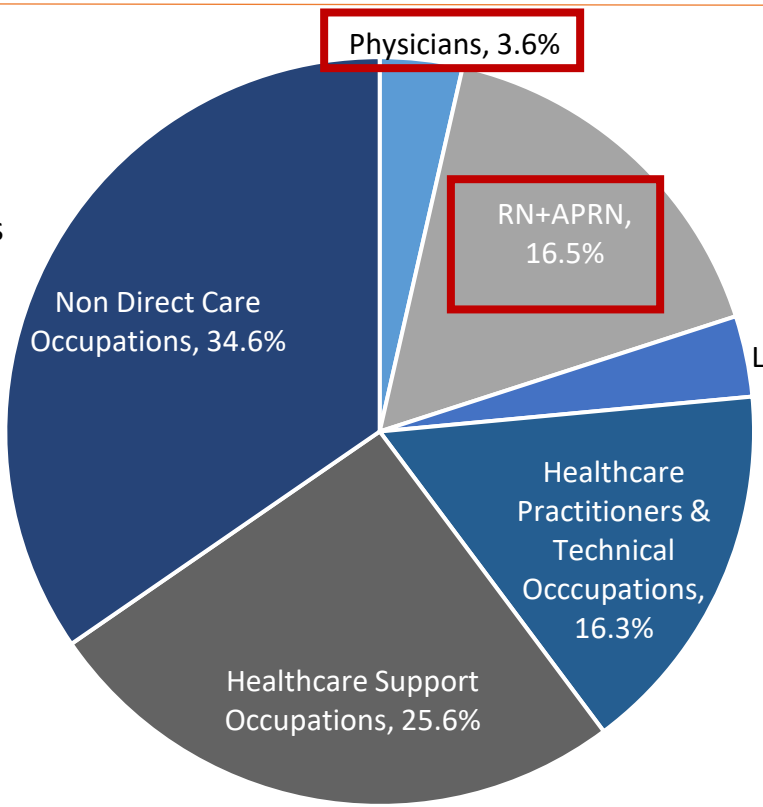
- Retail pharmacies
- Insurance companies
- Manufacturing



center for health workforce studies
UNIVERSITY of WASHINGTON

Source: Frogner calculation of Bureau of Labor Statistics, Occupational Employment & Wage Statistics, 2019

Occupations within Health Care Industry, 2019 (n=17,054,890)



Examples:
Community Health Workers
Social Workers
Administrative/Financial/ Management
Grounds/Maintenance
Food Preparation

Examples:
Dentists
Pharmacists
Pharmacy technicians
Therapists
Physician Assistants

Examples:
Nursing Assistants
Home Health Aides
Home/Personal Care Aides

Medical Assistants
Pharmacy Aides
Dental Assistants
OT/PT Assistants

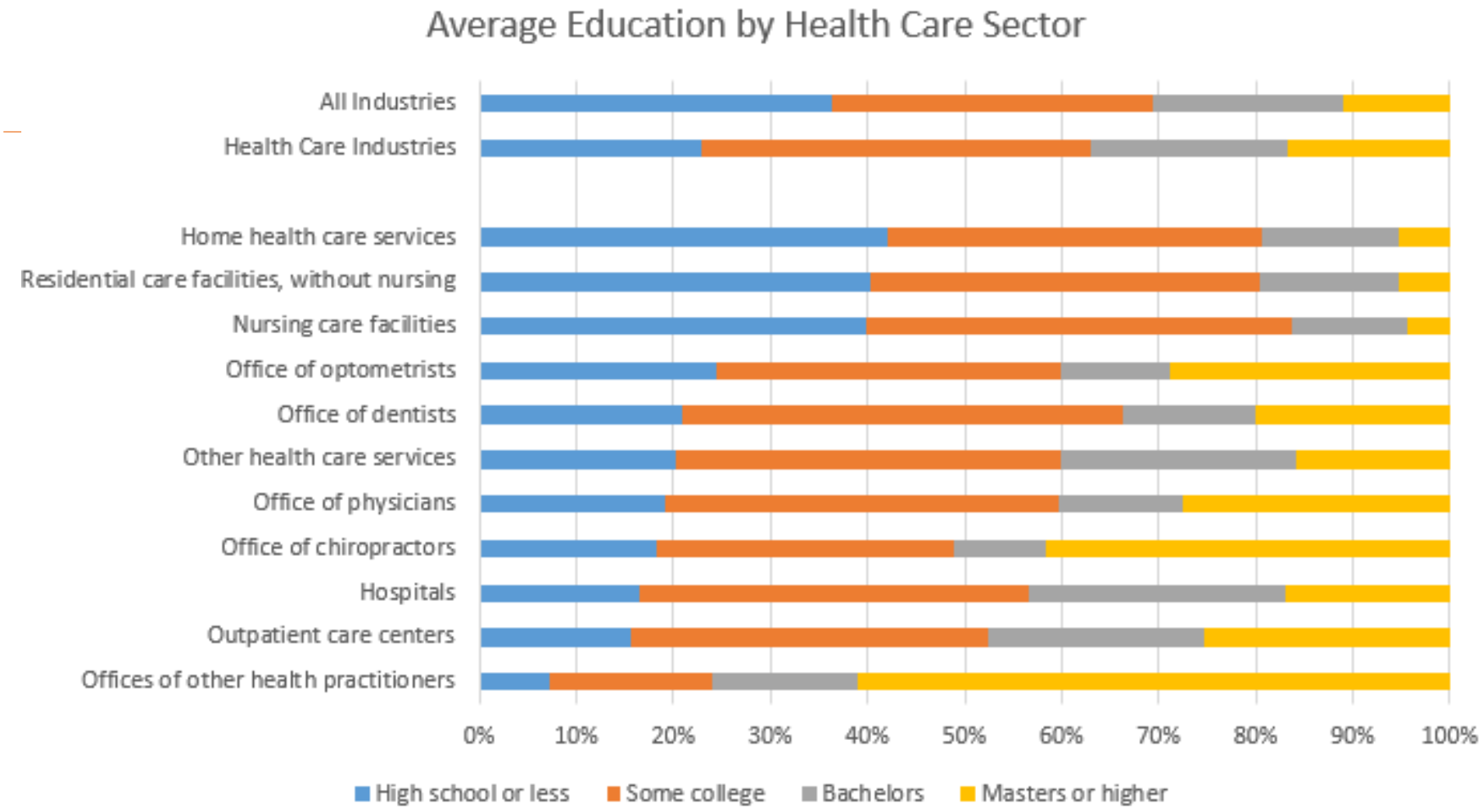
center for health workforce studies
UNIVERSITY of WASHINGTON

Source: Frogner calculation of Bureau of Labor Statistics, Occupational Employment & Wage Statistics, 2019

Pharmacy Workforce in 2021

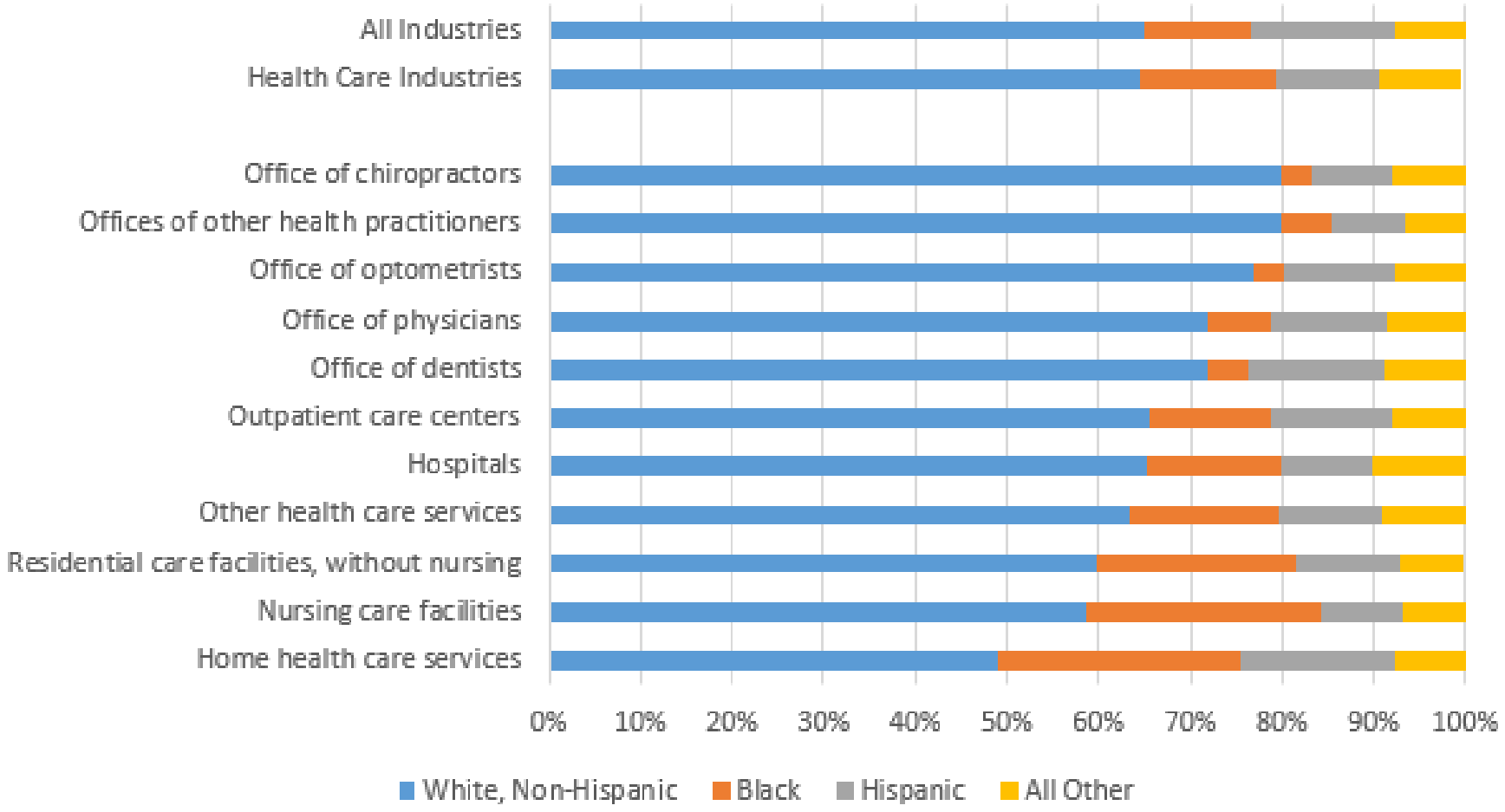
Setting	Pharmacists (n=323,500)	Pharmacy Technicians (n=447,300)	Pharmacy Aides (n=43,560)
Pharmacies & drug stores	40%	50%	64%
Hospitals	27%	16%	7%
Food & beverage Stores	8%	9%	8%

Source: https://www.bls.gov/ooh/healthcare/pharmacists.htm#tab-3



Source: Frogner BK, Spetz J, Parente ST, and Oberlin S (2015). "The Demand for Health Care Workers Post-ACA," *International Journal of Health Economics and Management*, 15(1): 139-151.

Racial/Ethnic Distribution by Health Care Sector



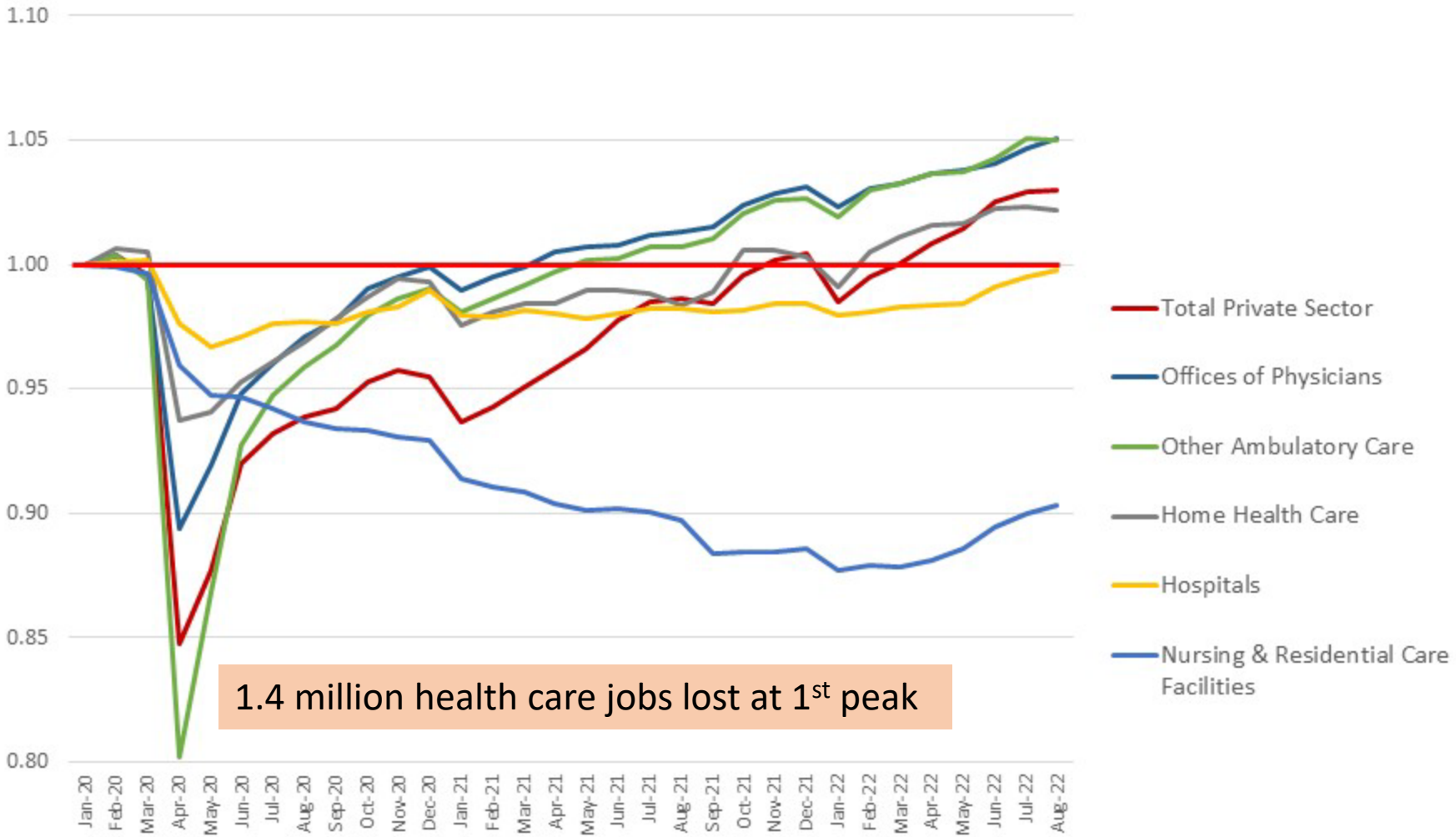
Source: Frogner BK, Spetz J, Parente ST, and Oberlin S (2015). "The Demand for Health Care Workers Post-ACA," *International Journal of Health Economics and Management*, 15(1): 139-151.

How COVID Affected Health Workforce Trends

Employment and Competition

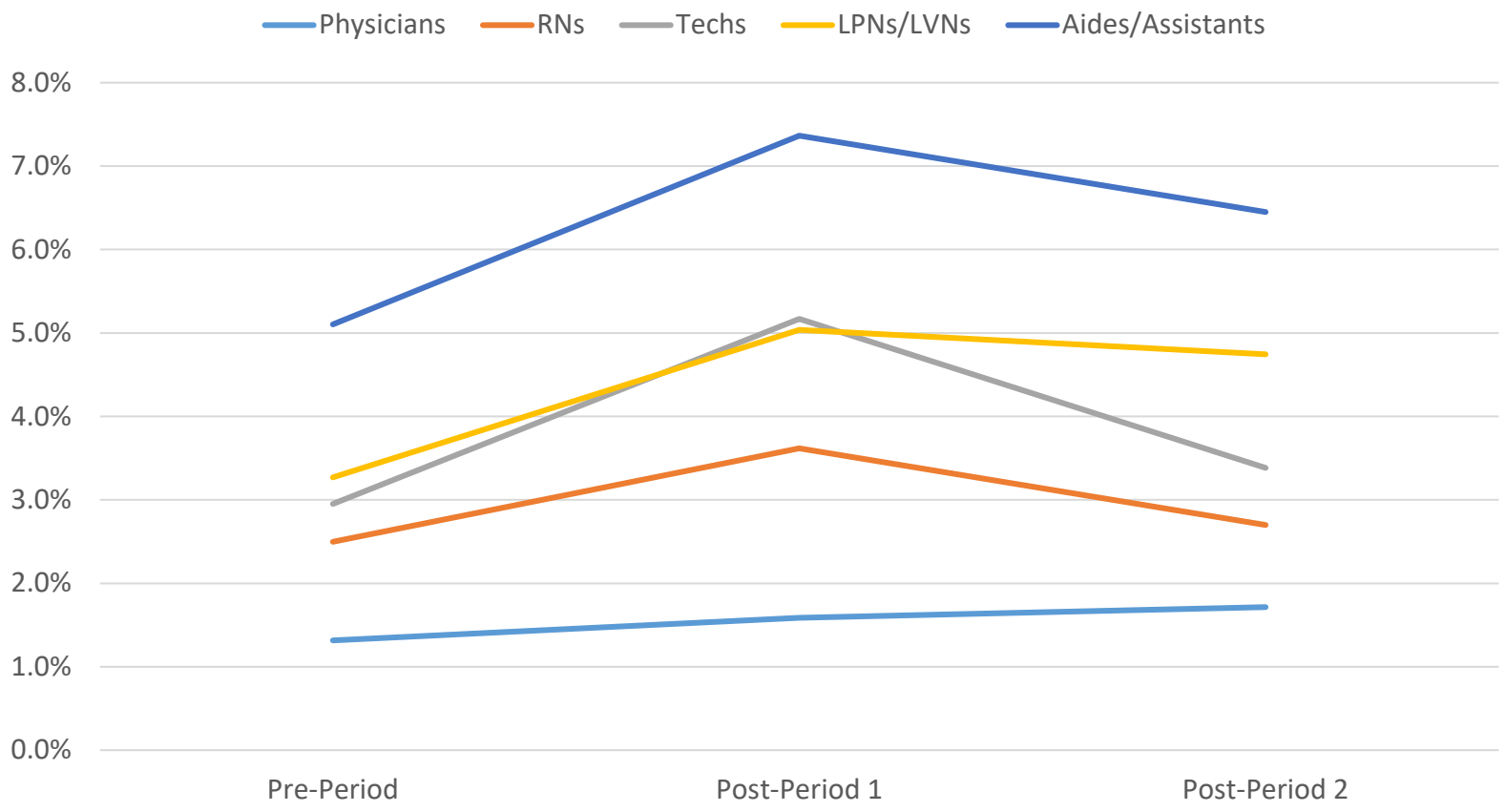
center for health workforce studies
UNIVERSITY of WASHINGTON

Relative Number of Employees by Healthcare Sector, Jan 2020 to Aug 2022 (Jan 2020=1.00)



Source: Author calculation of Table B-1 Employees on nonfarm payrolls by industry sector and selected industry detail, Bureau of Labor Statistics, https://www.bls.gov/news.release/empsit.t17.htm

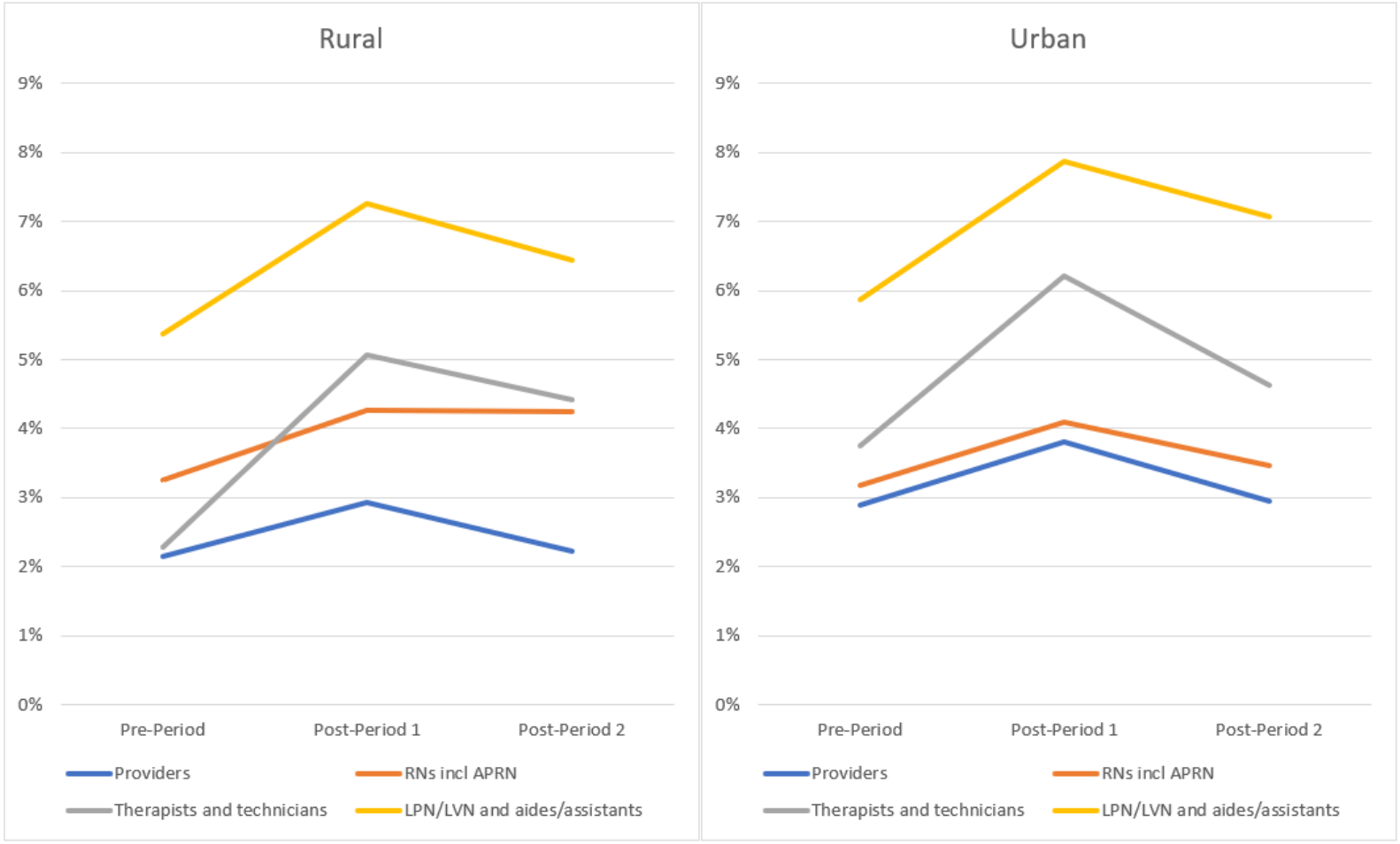
Turnover Rates by Occupation and COVID Phase



RN = Registered Nurse; LPN/LVN = Licensed Practical Nurse/Licensed Vocational Nurse
Source: Frogner & Dill, JAMA Health Forum, 2022

centerforhealth workforcestudies
UNIVERSITY of WASHINGTON

Turnover Rates by Occupation and COVID Phase

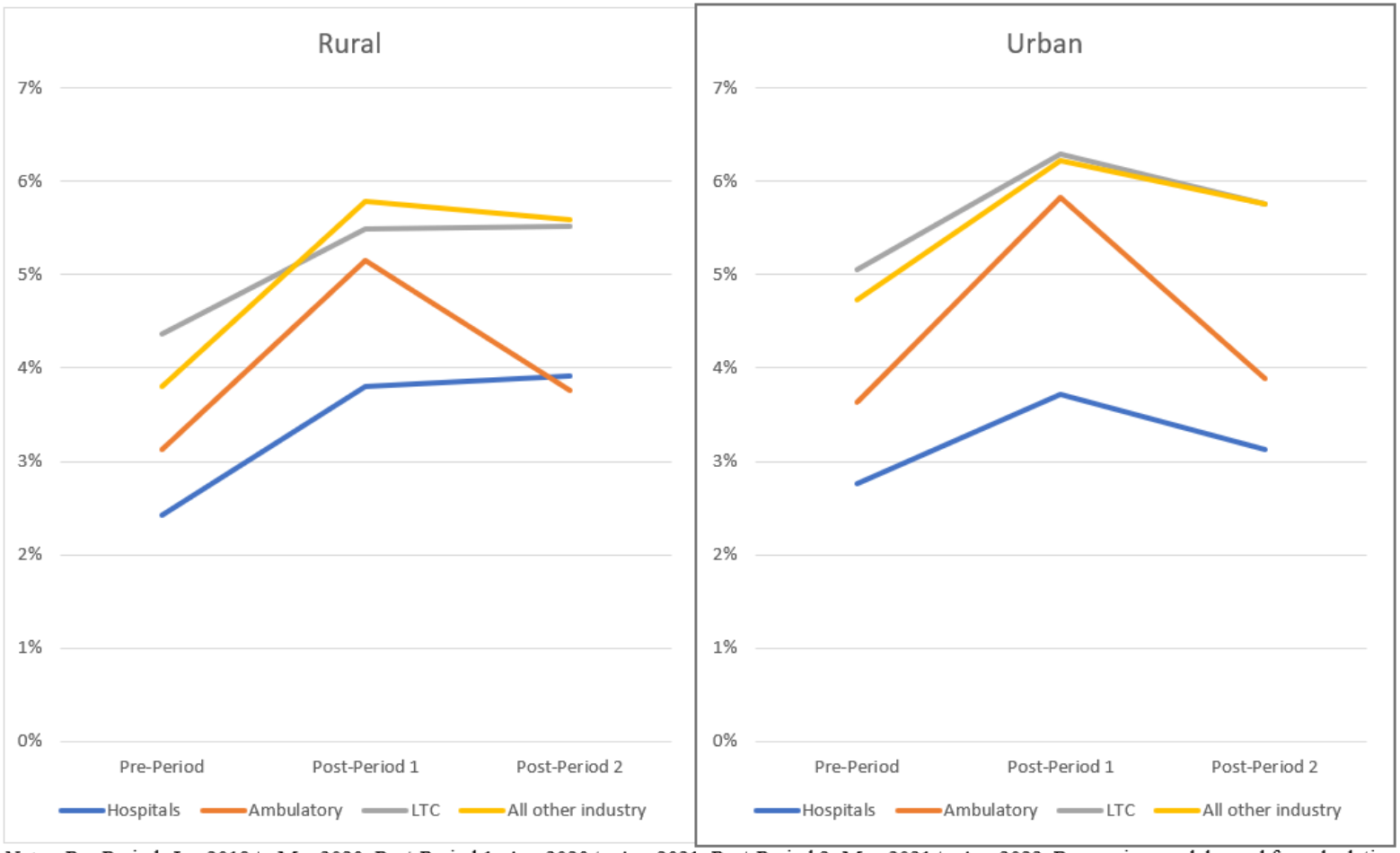


Notes Pre-Period=Jan 2019 to Mar 2020; Post-Period 1=Apr 2020 to Apr 2021; Post-Period 2=May 2021 to Apr 2022. Regression models used for calculating predicted leaver status are shown in Appendix Table 2.

center for health workforce studies
UNIVERSITY of WASHINGTON

NOTE: Results under review

Turnover Rates by Sector and COVID Phase

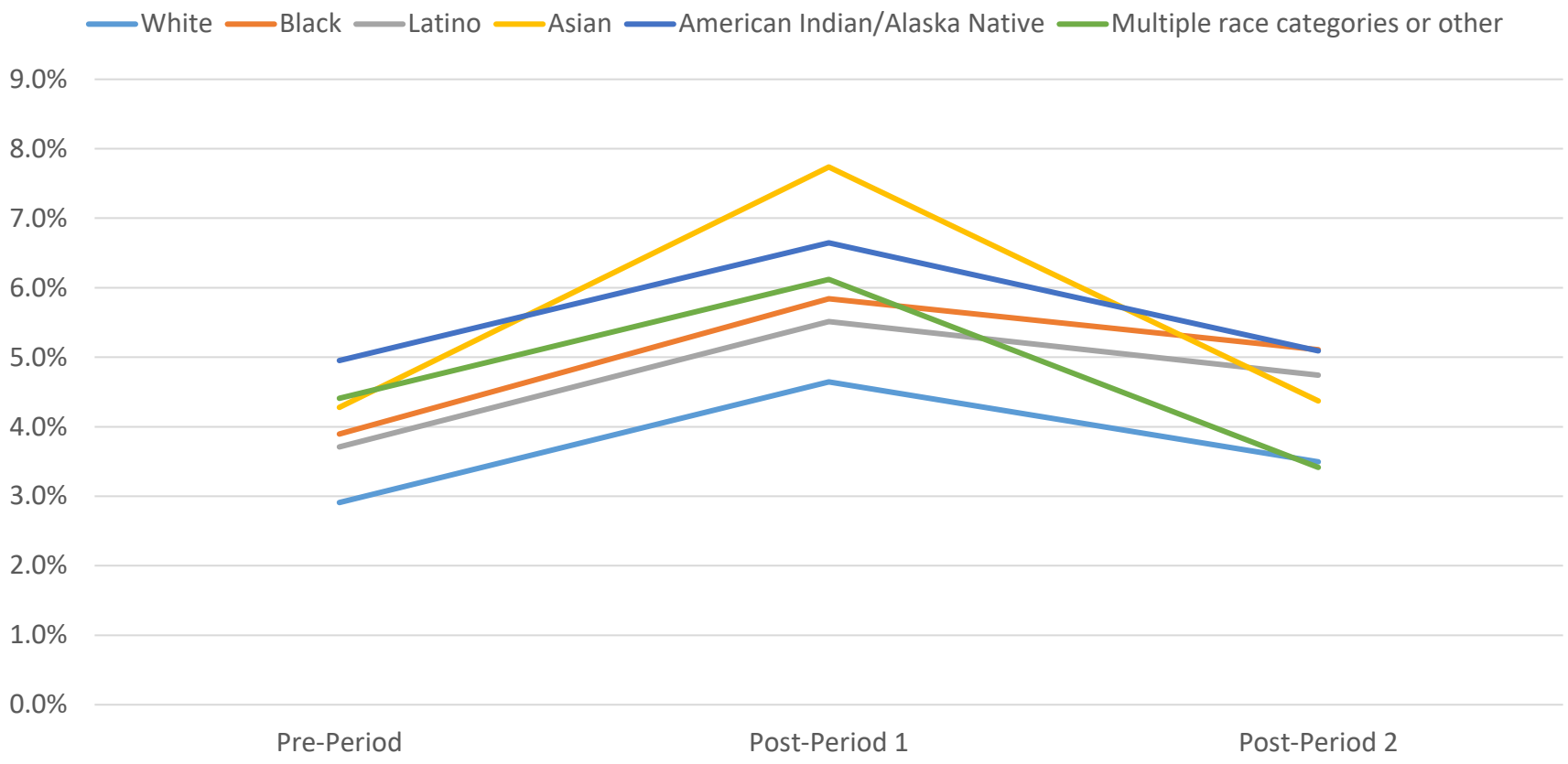


Notes: Pre-Period=Jan 2019 to Mar 2020; Post-Period 1=Apr 2020 to Apr 2021; Post-Period 2=May 2021 to Apr 2022. Regression models used for calculating predicted leaver status are shown in Appendix Table 1.

center for health workforce studies
UNIVERSITY of WASHINGTON

NOTE: Results under review

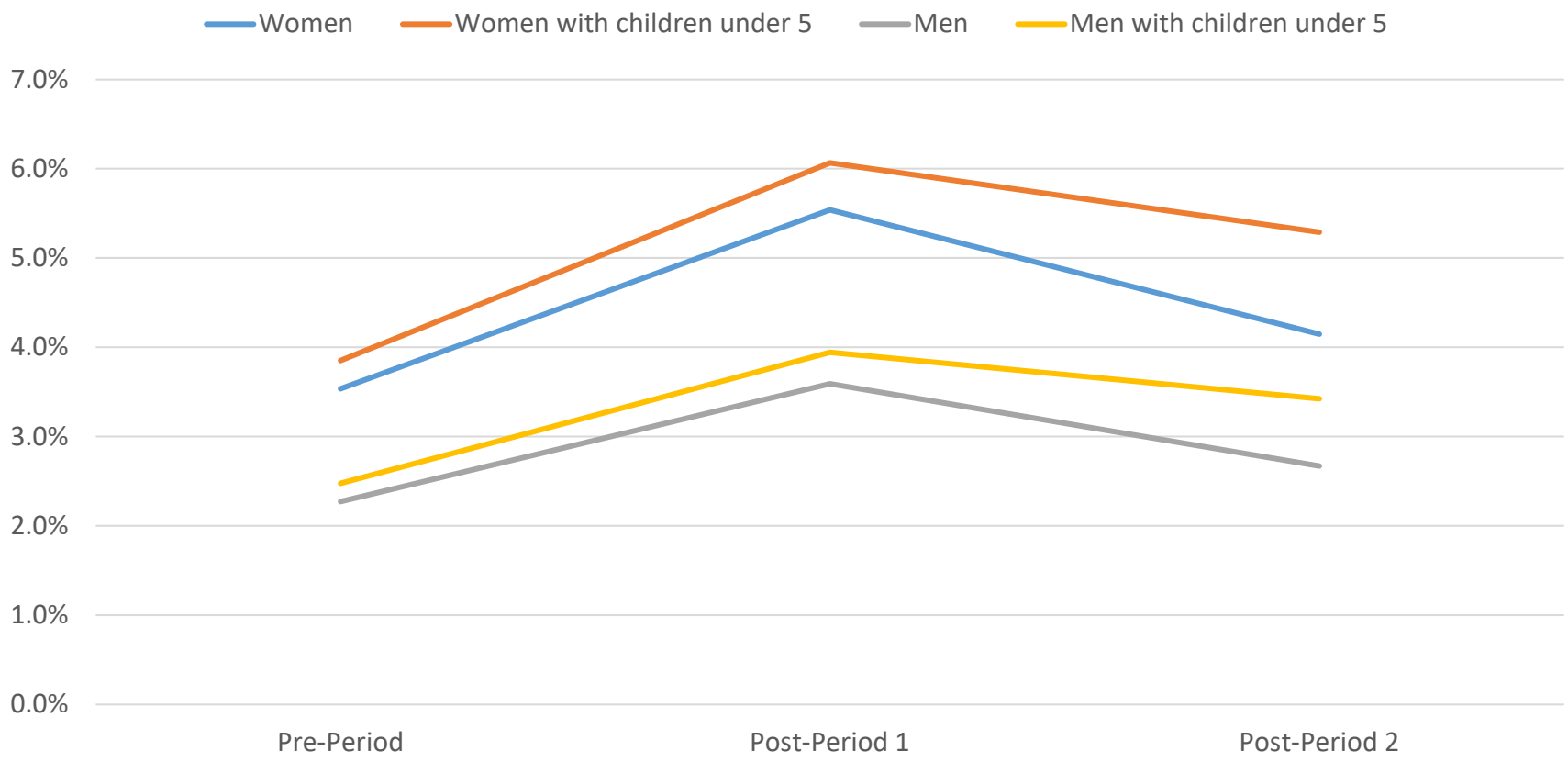
Turnover Rates by Race/Ethnicity and COVID Phase



Race/ethnicity groups are mutually exclusive
Source: Frogner & Dill, JAMA Health Forum, 2022

centerforhealthworkforcestudies
UNIVERSITY of WASHINGTON

Turnover Rates by Gender/Parenthood and COVID Phase



Source: Frogner & Dill, JAMA Health Forum, 2022

Ten Most Common Prior Year Industry for Entrants and Current Year Industry for Leavers of the Health Care Industry Between 2003 and 2013

Entrants' Prior Year Industry (N=15,742,141)		Leavers' Current Year Industry (N=23,729,493)	
Not in the labor force or unemployed (excluding in school)	13.0%	Not in the labor force	34.7%
Leisure and hospitality	11.0	Unemployed	18.6
Retail trade (excluding pharmacies and drug stores)	8.8	Educational services	5.6
Educational services	8.4	Leisure and hospitality	4.6
In school	6.9	Professional, scientific and technical services	4.3
Professional, scientific and technical services	6.3	Retail trade (excluding pharmacies and drug stores)	4.0
Public Administration	6.0	Public Administration	3.9
Management, administrative and support, and other services	5.7	Management, administrative and support, and other services	3.8
Finance and Insurance	5.1	Social Assistance	3.2
Social Assistance	5.0	Finance and Insurance	2.9

centerforhealth workforcestudies
UNIVERSITY of WASHINGTON

Source: Frogner BK. (2017) "The Health Care Job Engine: Where Do They Come From and What Do They Say About Our Future?" *Medical Care Research and Review*, DOI: 10.1177/1077558716688156

Addressing Shortage Concerns

Speculating on the Future

COVID Headlines on Health Workforce: 2022

KQED

Multiple Bay Area Health Care Strikes Reflect a Workforce Under Increasing Strain

The New York Times

Rich Countries Lure Health Workers From Low-Income Nations to Fight Shortages

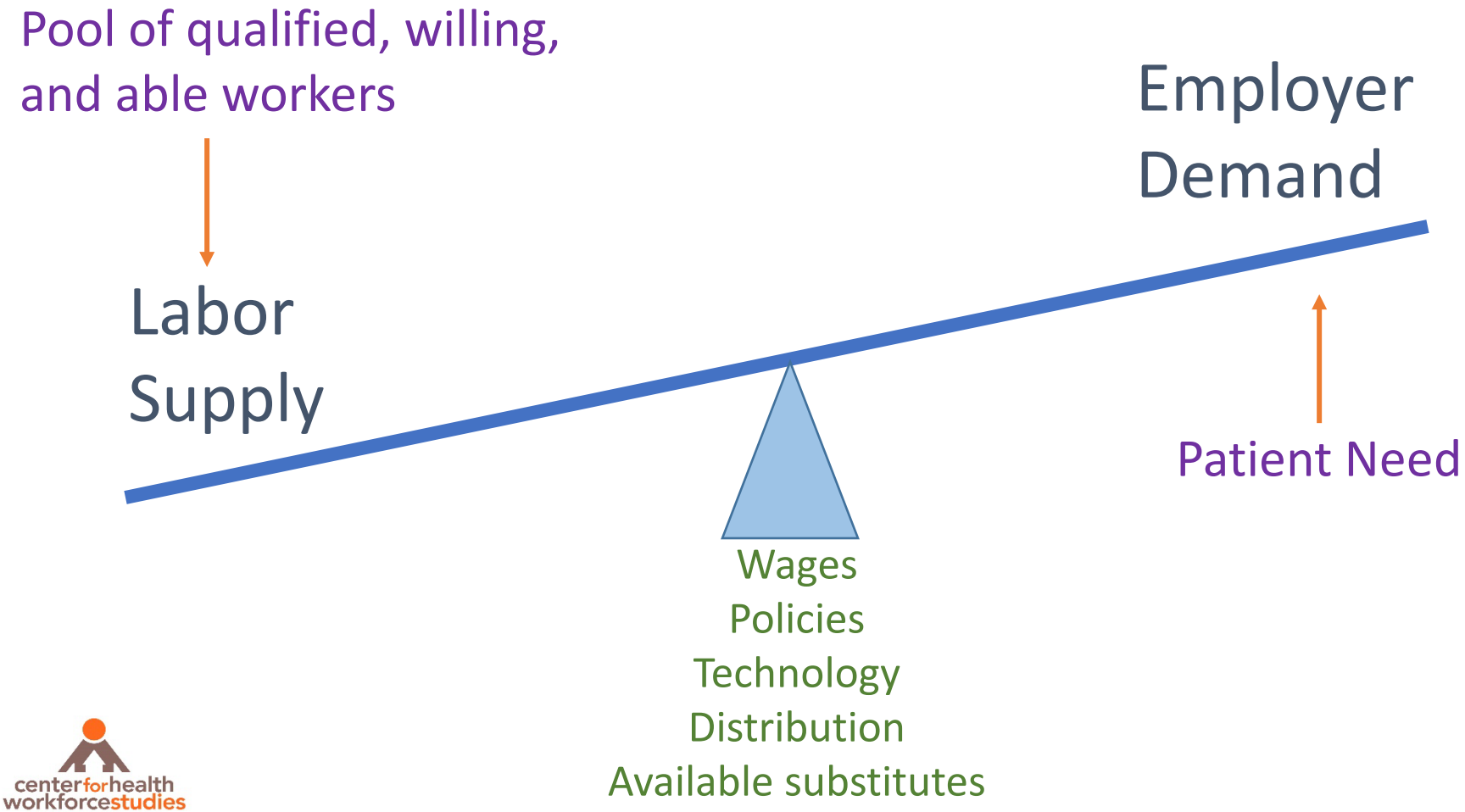
CBS PITTSBURGH

Pharmacy staffing shortages causing headaches for local residents

centerforhealth workforcestudies
UNIVERSITY of WASHINGTON

Very Basic Definition of a Shortage

Tipping the Scale



center for health workforce studies
UNIVERSITY of WASHINGTON

Contributors to Low Labor Supply Need to Be Addressed

Pool not available to work because:

- Directly affected by COVID illness → paid sick leave
- Childcare and other caregiving responsibilities → childcare/dependent benefits

Pool not willing to work:

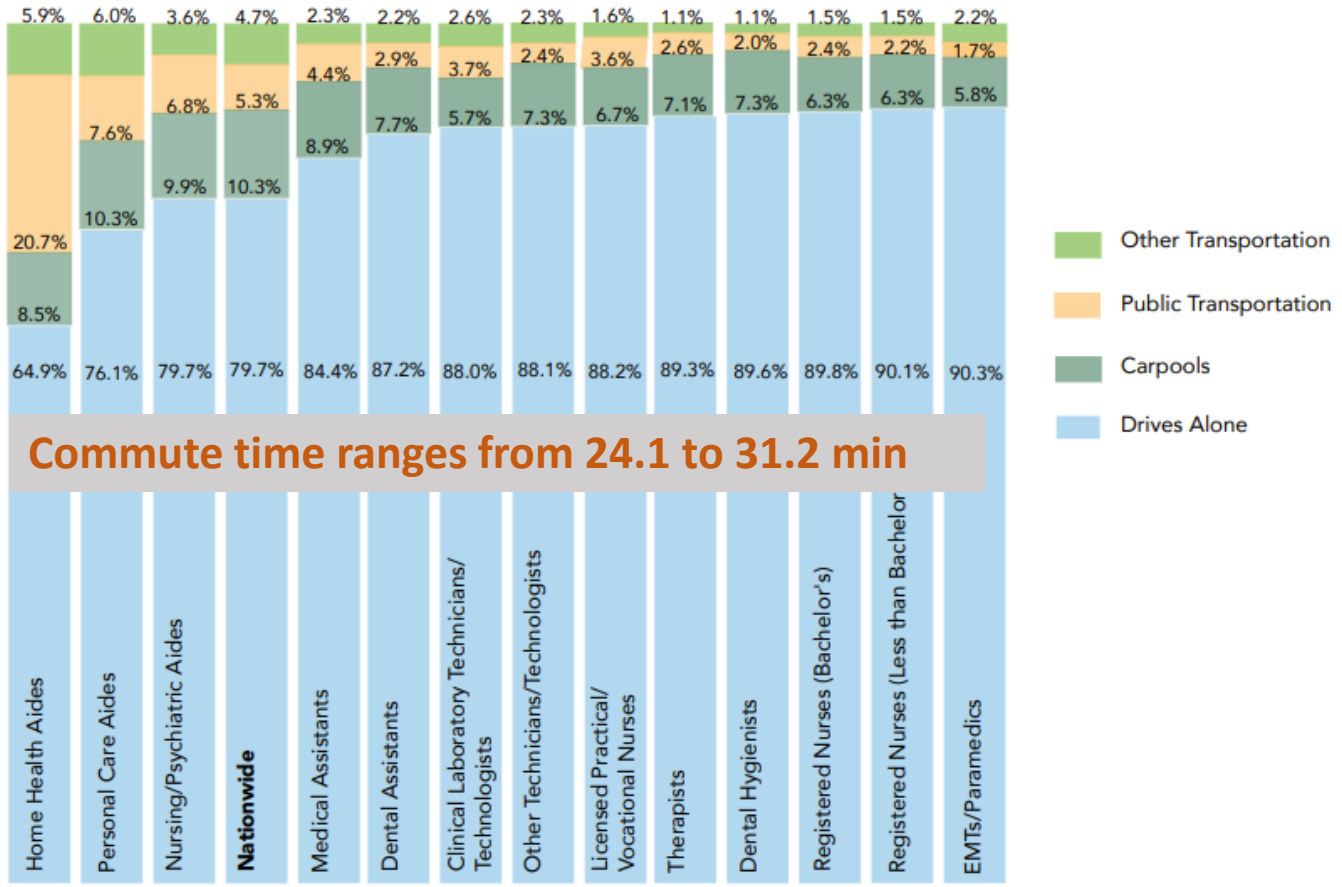
- Burnout/moral distress/moral injury → address workplace culture
- Safety concerns → adequate PPE, vaccine education/availability

Lack of qualified applicants

- Training unavailable, slow and expensive to complete → invest in education/training programs
- Restrictive practice policies → relax training requirements, scope of practice regulations

Subsidize Public Transportation for Low Wage Workers

Figure 1: Percent Using Mode of Transportation as Primary Source for Commuting by Allied Health Workers and Registered Nurses, 2017



Note: EMTs = Emergency Medical Technicians.
Therapists include Radiation, Recreational, Respiratory, Exercise Physiologists, and Speech-language Pathologists.
RNs with a Bachelor's degree not in the field of nursing and RNs with above a Bachelor's degree in any field are excluded.
Data source: Ruggles S, Flood S, Goeken R, Grover J, Meyer, E, Pacas J, Sobek M. IPUMS USA: Version 8.0 [dataset]. Minneapolis, MN: IPUMS, 2018. https://doi.org/10.18128/D010.V8.0

centerforhealth workforcestudies
UNIVERSITY of WASHINGTON

Source: https://familymedicine.uw.edu/chws/wp-content/uploads/sites/5/2020/05/Commute-Patterns-FR-2020.pdf

Explore Creative Efforts for Affordable Housing

PUGET SOUND BUSINESS JOURNAL

Commercial Real Estate

Seattle-area developers turn Anacortes motel into workforce housing

BECKER'S HOSPITAL REVIEW

The Inquirer and Mirror

Essential Nantucket since 1821

Hospital buys duplexes for employee housing

Nantucket Cottage Hospital this week bought a pair of duplexes at 39 and 41 Beach Grass Road for employee housing.

centerforhealthworkforcestudies
UNIVERSITY of WASHINGTON

Maximize Health Care Worker Training & Education

HealthAffairs

PERSPECTIVE | HEALTH PROFESSIONALS

HEALTH AFFAIRS > VOL. 41, NO. 8: SPENDING, PAYMENT & MORE

PERSPECTIVE

Patients Receive Flexible And Accessible Care When State Workforce Barriers Are Removed

Bianca K. Frogner

AFFILIATIONS

PUBLISHED: AUGUST 2022 Full Access https://doi.org/10.1377/hlthaff.2022.00759

Perspective

Ensuring and Sustaining a Pandemic Workforce

Erin P. Fraher, Ph.D., M.P.P., Patricia Pittman, Ph.D., Bianca K. Frogner, Ph.D., Joanne Spetz, Ph.D., Jean Moore, Dr.P.H., Angela J. Beck, Ph.D., M.P.H., David Armstrong, Ph.D., and Peter I. Buerhaus, Ph.D., R.N.

The NEW ENGLAND JOURNAL of MEDICINE

Article Figures/Media Metrics

4 References 4 Citing Articles

CURRENT EFFORTS TO fight the Covid-19 pandemic aim to slow viral spread and increase testing, protect health care workers from infection, and obtain ventilators and other equipment to prepare for a surge of critically ill

Audio Interview

Interview with Dr. Erin Fraher on opportunities for expanding health workforce capacity during the Covid-19 pandemic. (13:32)

Download

centerforhealthworkforcestudies UNIVERSITY of WASHINGTON

Source: https://www.healthaffairs.org/do/10.1377/hblog20200624.983306/full/; https://www.nejm.org/doi/full/10.1056/NEJMp2006376

What employee benefits are, or would be, the most helpful to improve your facility's ability to retain its workforce? If you have been able to implement or increase access to any of these benefits within the past 6 months what effect have they had on retention?

Nursing homes & skilled nursing facilities

We are offering flexible schedules, we have employee assistance programs, tuition reimbursement. Creating more flexibility with our schedules has shown some improvement [but] other [benefits] have not.

Wage increases [have] increased retention and employee satisfaction.

Small hospitals

More access to childcare in our area - with hours that are conducive to shift-work.

Helpful would be access to more affordable family health coverage, more robust mental health resources, accessible funding for employee appreciation, self care education and training.

FQHCs & Community Clinics

Added COVID PTO bank for each employee to use as needed for a COVID-related absence. This benefit expires in June.

Higher pay, cheaper family benefits, childcare, flexible schedules, remote options.

Thank you!

Contact me with questions at:

bfrogner@uw.edu

Follow on Twitter @biancafrogner @uwchws

center for health workforce studies
UNIVERSITY of WASHINGTON