



Nursing Workforce at Boston Medical Center – one hospital's story

Nursing on the Frontlines “this shortage is different...”



From ONL -
2021

Current Challenges

- New nurse onboarding is difficult; many have failed to establish a strong connection
- Young, new graduates precepting and taking on the Charge Nurse role
- Traveler disruption (wages, politics, team dynamics)
- Nurse well being is suffering
- Experience drain: Exodus of experienced nurses
- Wearing of PPE makes it difficult to read facial expressions or sometimes recognize the staff member
- Distancing guidance and space reconfiguration – limits staff socialization at work

Recruitment and Retention are a national story

Forbes

Apr 27, 2021, 03:43pm EDT | 21,305 views

Why The 2021 'Turnover Tsunami' Is Happening And What Business Leaders Can Do To Prepare



Turnover 'Tsunami' Expected Once Pandemic Ends

Studies show as many as half of workers intend to look for a new job this year

“**The Great Resignation**”



As The Pandemic Recedes, Millions Of Workers Are Saying 'I Quit'

June 24, 2021 · 6:01 AM ET

The “Turnover Tsunami”: Why Top Performers are Leaving Their Jobs

The Great Resignation: How employers drove workers to quit

We are facing unprecedented RN shortages across the country

- More than 15 million US workers – and counting - have quit their jobs since April 2021.
- Within healthcare, Nursing has been particularly impacted with CNOs reporting higher turnover and higher vacancy rates than any time in recent history.
- Nurses have faced a grueling 20 months due to the prolonged Covid-19 pandemic and ensuing workforce shortages. Nurses are decreasing their hours, retiring earlier than planned, taking leaves of absence, leaving their roles for less stressful positions, or resigning to take lucrative travel nurse assignments.
- Travel nurses have historically provided a safety net, but are currently being used across the country as replacement staff for open positions. This has caused a market shift which has increased travel rates significantly (pulling more early career nurses into travel nursing). There were 2200 travel nurses in MA in June 2020; on February 14th , 2022, there were 11,774 in MA.
- Millennials and Gen Z nurses compromise about 1/3 of today's nursing workforce and are evaluating work-life harmony, new professional experiences, better compensation, personal and family roles and wellbeing.

Boston Medical Center is a private hospital with a public mission



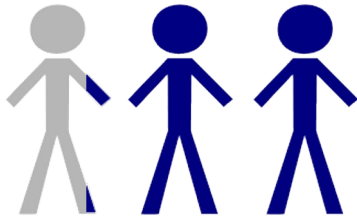
- Boston Medical Center was formed in 1996 by a merger between 2 City of Boston public hospitals (Boston City and Boston Specialty and Rehabilitation) and a private, non-profit hospital affiliated with Boston University (University Hospital)
- Created a private non-profit corporation designed to carry on both Boston City Hospital's public and University Hospital's academic missions

BMC is to be the “centerpiece of the city’s public health network”...

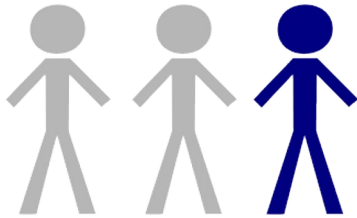
BMC, by the Numbers

- 496 Beds - Over 25,000 inpatient admissions last year
- Over 1,000,000 outpatient visits
- 132, 000 emergency room visits
 - the busiest ER in New England, the 8th busiest nationwide
- 14 Boston health centers in our network, 5 on our license:
- 3rd largest health system in Massachusetts
- Rank 13th in the nation for NIH funding
- Over 6,000 hospital employees
- **1700 RNs**

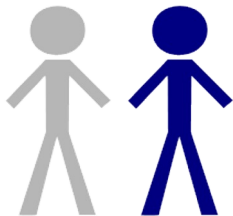
BMC disproportionately serves low-income patients...



- ~70% are underserved minorities
 - ~60% black, ~10% Hispanic



- ~30% do not speak English as their primary language



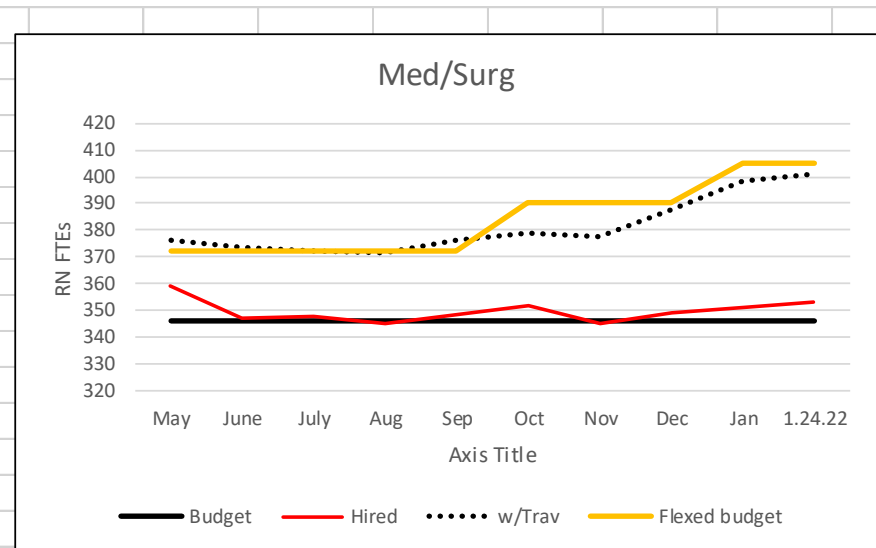
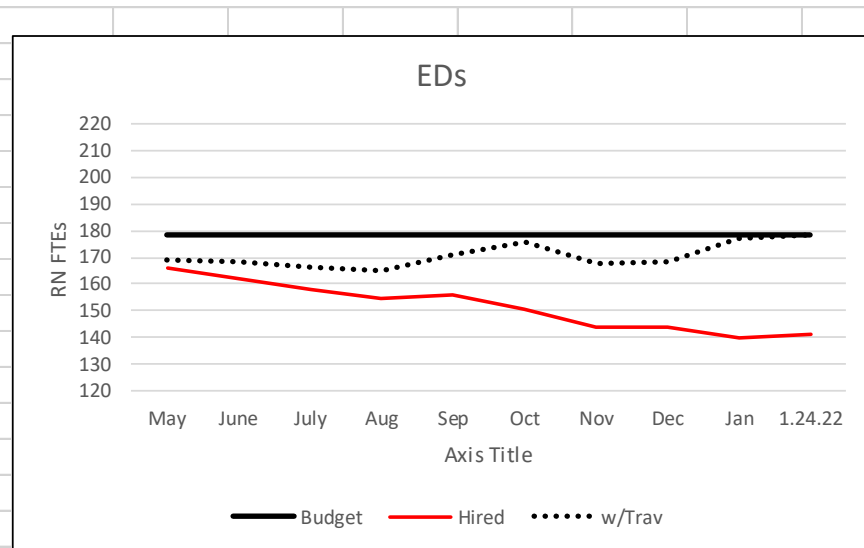
- > 50% have an annual household income below \$20,400 (close to the federal poverty line for a family of 3)

Workforce is ALWAYS a huge focus of CNOs

- Nursing workforce
 - We are always working to insure that we have a well prepared workforce in place to manage the variable volume and acuity demand in every care area.
 - Onboarding, ongoing education and professional development are a focus
 - We are currently facing historic staffing challenges across nursing, with surging demand for RN staff, incredibly high traveler costs, and increased attrition. We have to consider the impact of these changes and work to mitigate them as they so significantly affect quality and patient experience.
 - Because the hospital is so busy, any vacancies we have need to be filled with overtime by our own staff, or by travel nurses

Our need for travel nurses is highlighted in the ED and Medical Surgical areas

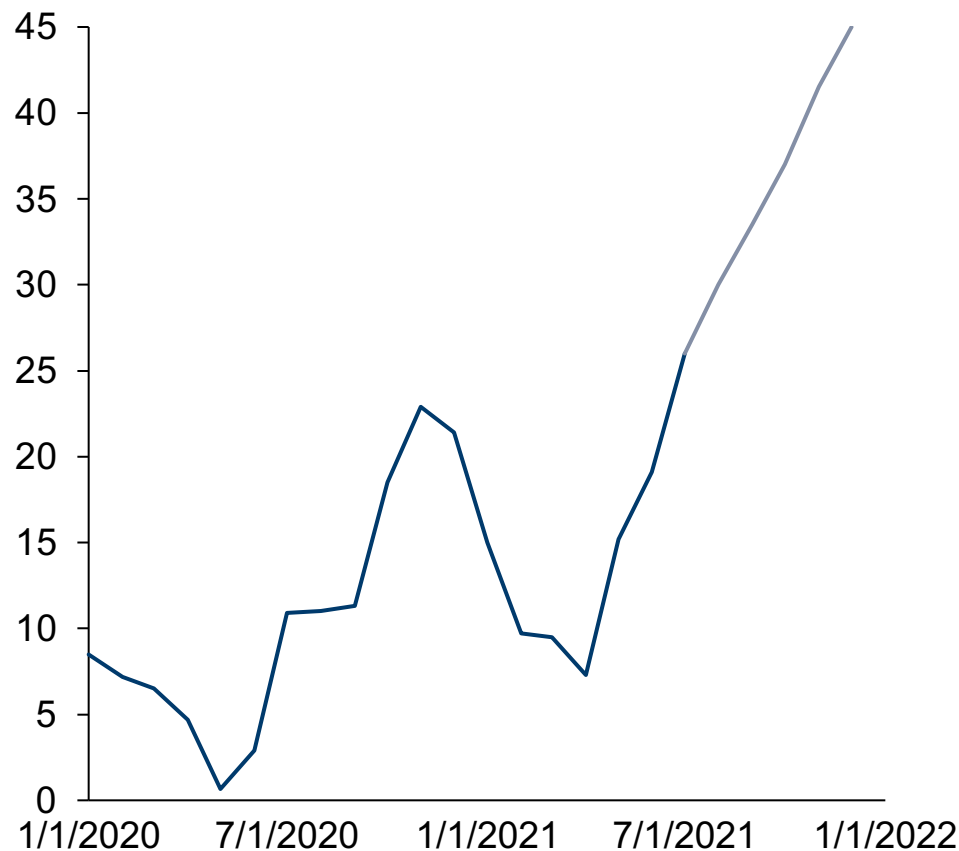
- In the ED we are having a great deal of trouble hiring experienced staff
- In med surg, we are “hired” at our budget, but need so many more staff to meet the volume demand



National demand for travel nurses has increased significantly leading to huge increases in cost and difficulty in filling positions

National Nurse Traveler Job Openings¹

000's of jobs



- Travel nurses were used pre-2020 to cover for difficult to fill positions or LOAs, but have become critical to staff the basic needs of hospitals due to increased volume due to Covid, and huge increases in nurses retiring, leaving the profession, decreasing hours – or leaving their jobs to be travel nurses.
- Travel nursing cost to MA hospitals have increased from about \$90/hour to over \$200/hour
- Travel nurses report making up to \$7500/week in their 13 week assignments
- Pre-Covid <2% of our RN FTEs were traveler nurses , today it is about 8%

Covid 19 has driven national nurse traveler job openings to record highs...

Here at BMC we are feeling the acute challenges of the national nurse staffing shortages due to many factors

“Nurses have remained steadfast amid a calamitous shortage of personal protective equipment, spurred by a sense of duty... More than 1,200 of them have died from the virus.” “Now they are depleted and traumatized, their ranks thinned by early retirements and career shifts...” NY Times

- At BMC we have seen an increase in retirements, in nurses moving to less stressful jobs after a traumatic 2 years, and many of our 2-5 year staff have left to be travel nurses (many “travelling” locally!)
- We are determined to stabilize our nursing workforce by relying on our amazing mission, our talented and committed nurse leaders, our Magnet professional culture, and our commitment to a practice environment that allows nurses to give their best care.
- We have executed on many initiatives to strengthen our position, and are embarking on many more to attract experienced nurses, and to hire talented new graduates.

We have and continue to take multiple steps to strengthen our employee value proposition and address our market position

Tuition Repayment

Implemented a program whereby nurses receive a pre-tax benefit for tuition repayment (172 participants in 2021)



RN Pay Adjustment

Completed a thorough evaluation of the labor market for RNs & implemented market adjustments effective November 28, 2021



Weekend Program

Increased the number of Weekend Incentive Nurse (WIN) positions to better prepare for bringing nurses from every other weekend to every third weekend¹



RN Residency Programs

Implementing a variety of specialty RN residency programs over the next 6 to 7 months



Exit Interviews

Implemented an online exit interview tool to better understand reasons for leaving (*still in data collection process*)



Retention/Recruitment Council

Nurse and leadership council to develop unique retention ideas and assist with recruitment initiatives



RN Referral Program

Reinvigorating the RN referral program



Nursing Landing Page

Updating and refining current landing page to highlight the BMC difference and improve search capabilities



Targeted Advertising

Utilizing a diverse portfolio of advertising channels to directly target RNs within & outside MA

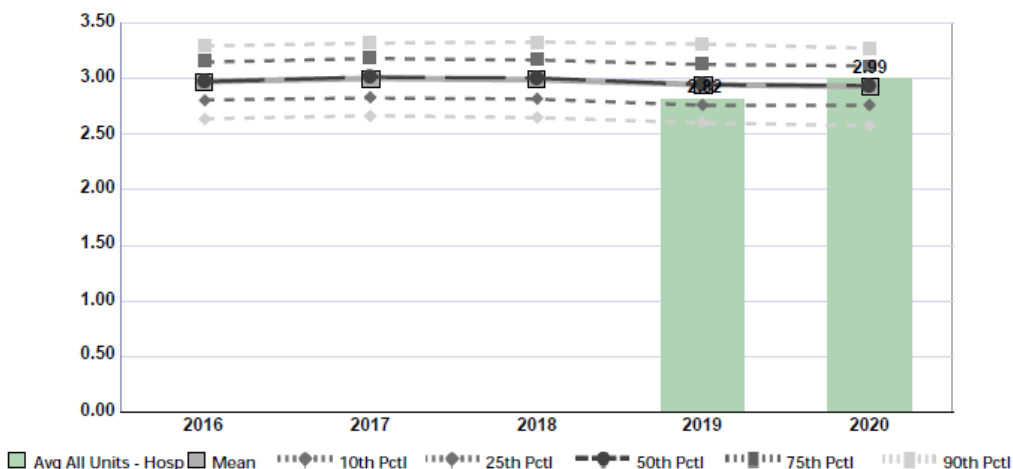


To address nursing retention, we believe in our Magnet culture - but this is an unprecedented time...

August 2020 NDNQI RN Practice Environment Survey Results

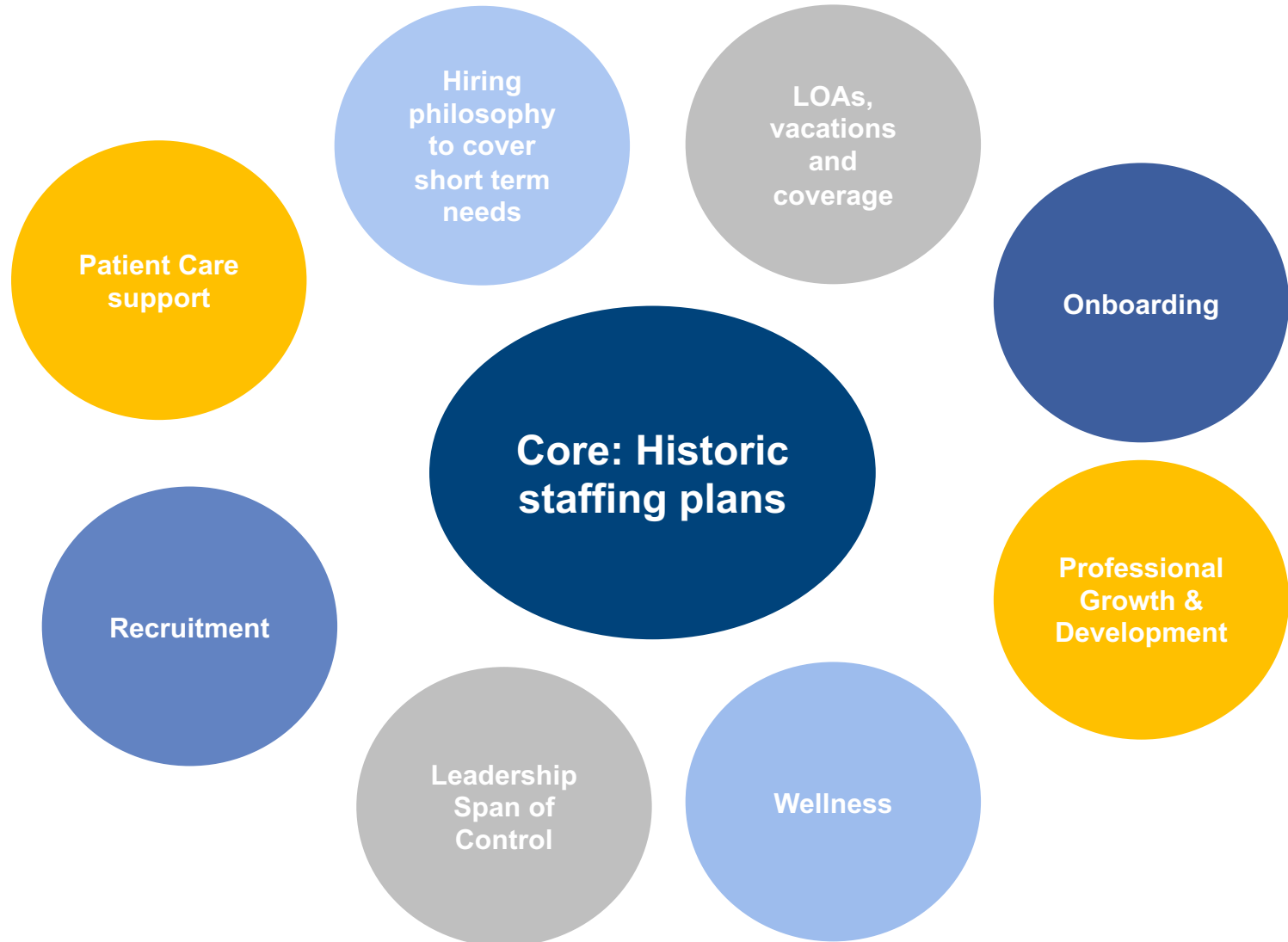
- Every question improved
- Every domain improved
- Overall our score went from BELOW the mean to ABOVE the mean

Boston Medical Center
 Compared by: ACS Trauma Level
 Peer Group: ACS Trauma Level I
 Measure: Mean Practice Environment Scale Score



Year	2016	2017	2018	2019	2020
Average of All Units In Your Hospital	No Data	No Data	No Data	2.82	2.99
Mean*	2.97	3.00	2.99	2.94	2.93
Standard Deviation*	0.26	0.26	0.27	0.27	0.28
10th Percentile*	2.64	2.67	2.65	2.60	2.57
25th Percentile*	2.81	2.82	2.81	2.76	2.76
50th Percentile (Median)*	2.97	3.01	3.00	2.94	2.93
75th Percentile*	3.15	3.18	3.17	3.12	3.11
90th Percentile*	3.29	3.32	3.33	3.31	3.27
# of Units*	1,613	1,337	1,265	1,025	1,170

...and will require significant changes in how we approach nursing in terms of flexibility, professional opportunities, and wellbeing.



Questions...

