



**House Republican Policy Committee Hearing  
Health Care Staffing Crisis  
December 1, 2021, 10:00 a.m.  
By Janet Tomcavage, MSN, RN  
Executive Vice President, Chief Nursing Executive**

I would like to thank the House Republican Policy Committee Chairman Martin Causer, and Representative Thomas Mehaffie for inviting me to participate in today's discussion on the challenges we are facing in the healthcare community around staffing. My name is Janet Tomcavage, MSN, RN, Executive Vice President, Chief Nursing Executive, at Geisinger.

Geisinger serves more than one million people and is committed to making better health easier for those we serve. Founded more than 100 years ago by Abigail Geisinger, the system now includes nine hospital campuses, a health plan with more than half a million members, two research centers and the Geisinger Commonwealth School of Medicine. With nearly 24,000 employees and more than 1,600 employed physicians and 7000 nurses, Geisinger is one of the largest rural vertically integrated delivery systems in the nation.

**Nursing workforce challenges**

We are facing significant and complex issues in the healthcare workforce arena. I would like to focus my comments on the multifaceted issues facing the nursing profession and how that is impacting staffing concerns now and in the future.

First, we must acknowledge that there is a direct and clear impact from the ongoing COVID pandemic. Many of the underlying issues have been evident during the last decade; however, they have been hastened by the unprecedented burden posed by COVID. The acuity and physical and mental demand placed on our nursing teams by COVID have been significant; COVID has clearly caused both young and experienced nurses to re-examine their choices, often causing earlier retirement and new graduates to re-evaluate their career choice. And finally, our staff are not immune to virus exposure with upwards of over 1000 Geisinger employees each day on quarantine driving real time impact in staffing. COVID positive patients continue to occupy 15-20 percent of our beds, thus reducing the availability of staff and beds to care for other emergent and non-emergent health care needs.

Beyond COVID, the trajectory of nurses has radically expanded. Seasoned and skilled registered nurses ("RN's) are leaving the hospital setting. Some RN's are retiring. It is estimated that more than 30% of all RN's are expected to retire in the next 10 years. Many nurses are continuing their education and taking newer opportunities in ambulatory sites where they can work in clinics and the home, provide outpatient services, and as Advanced Practitioners

(Certified Registered Nurse Practitioners “CRNP’s”). The opportunities to work in the ambulatory arena tends to provide RN’s with a better work/life balance, and in the case of Advanced Practitioners better pay as well.

Inpatient nursing is a high stress career. Hospitals provide services 24/7 and nurses are among a group of health care workers that support these needed services – often rotating day/night shifts and shifts every other weekend and every other holiday – all of which significantly impact work/life balance. Our nurses are also faced with bullying (verbal and physical) which has increased with the pandemic.

Even more importantly, there has been a growing increase in the acuity of patients leading to what some call the “changing nurse experience factor” – more graduate nurses with less experience supporting our hospitals. Contributing as well is the increase in the behavioral health needs of our patients which require one-to-one companions and add to the complexity of their management.

The challenges and demands that nursing professionals face has increased the competition for nursing services. The traveler market has put significant pressures on hospitals for high-cost premium pay for traveling nurses to fill nurse vacancies. At Geisinger, we have seen a five percent increase this past year in recruitment; however, our turnover has outpaced any increase in recruitment we have seen. Most of this turnover is due to staff leaving for higher paying traveler positions.

It is important to note that the challenges outlined above are not only impacting nursing recruitment, but also other roles important to health care as well.

### **What are we doing at Geisinger?**

Currently at Geisinger we have over 650 inpatient nursing positions posted for recruitment and another 350 nurses being recruited for positions in the ambulatory setting. Next year we anticipate having a need for an additional 300-400 nurses to support needed growth. It is highly unlikely that we will hire enough nurses to fill those needs. Over the last several years we have had a recruitment gap of approximately 300-400 RNs per year across the Geisinger system. The staffing crisis is not a result of Geisinger not supporting nursing positions – but a direct result of the very real gap in available nurses for hire.

To help ensure we remain competitive in a tight labor market, we recently adjusted our compensation and adjusted our shift differential pay for evening, night and weekend shifts. Those eligible for our enhanced shift differential pay include inpatient RNs, inpatient licensed practical nurses (LPN’s), surgical technicians and nursing support staff.

To “grow” our own nursing workforce, we launched the Geisinger Nursing Scholars’ program to support employees who have worked for Geisinger for one year or more and are interested in a nursing career. The program awards \$40,000 in financial support with a 5-year work

commitment as an inpatient nurse. The goal is to support 175 scholars per year by offering rolling admissions to the program.

Additionally, Geisinger supports the Geisinger Lewistown Hospital School of Nursing which is an affordable, two-year (six-semester) fully accredited nursing program with RN and LPN advanced placement programs. Our goal is to grow this program. To create interest in the nursing and healthcare professions we are actively engaged with many local high schools and technical schools and offer co-op programs where high school students spend school hours with our staff.

### **Nursing Shortage / Pipeline Concerns / Areas of Opportunity**

While we at Geisinger are proud of the work we are doing, it is not enough. There needs to be a significant investment by all stakeholders involved to address this alarming trend. According to the Bureau of Labor Statistics' Employment Projections, registered nursing is listed among the top occupations in terms of job growth through 2029. The RN workforce is expected to grow from 3 million in 2019 to 3.3 million in 2029, an increase of 7%. The nation needs 1.1 million new RN's by 2022 to avoid a nursing shortage.

We recommend the following ideas as potential solutions to assist in addressing the future nurse workforce shortage.

- Increase the number of nursing school programs and graduates of nursing schools.
  - Clinical hours are often highlighted as a bottleneck. We would encourage schools and hospitals to provide and require clinical hours not only during the day, but also during evenings and weekends. This will expand the number of students we are able to accommodate and recruit.
  - Supporting nursing faculty development and pay structures are also needed to properly train students and increase enrollment.
- Support hospitals that serve as a clinical site for nursing rotations.
  - Consideration of a “premium payment” to offset the additional demands placed on nurses and hospitals while they have student learners on their clinical units. To support local schools of nursing, significant infrastructure is needed to assure effective clinical rotations, balancing the needs of multiple programs, assurance of good student experiences and the resulting internship/externship programs.
- Offer financial aid programs to students considering nursing school to increase the pool of candidates.
  - Modeling a military-type program, consideration of funds that support financial aid for school but also a living stipend to support a student while they are in school. This could provide significant assistance to many who may be changing careers, or perhaps a young family with fiscal commitments. In return, the student would agree to provide inpatient nursing services for a defined period of time in a rural or underserved healthcare setting.

- Support hospitals who create new care models for patients – increasing the use of technology, licensed practical nurses, registered nurses, and care team assistants to meet the evolving needs of patients.
  - We need to ensure we are also modernizing the regulations around nursing and nursing support services, potentially testing new technology to support the expanding acuity and mental health needs.
- Support nurses practicing in rural areas.
  - Hospitals serving rural areas generally have a heavy government funded payer mix. In addition, data supports that recruitment to rural areas is not as attractive to nurses. Supporting rural hospitals with additional “premium” to attract nurses to rural areas through enhanced recruitment packages and differential pay could be a solution.

We need to work together to solve the challenges facing all of us. We need to work with schools, the nursing community and healthcare delivery systems to ensure that we create a strong workforce that is skilled and properly prepared to care for our aging population while also creating a healthy work/life balance for nurses and reducing burnout.

I thank you for hosting today’s discussion on health care staffing challenges and I look forward to continuing to work with you, the state legislature, the various state agencies and the Administration on developing new solutions to assure high quality healthcare for all Pennsylvanians.

Thank you.

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