



Podcast



HEALTHCARE INDUSTRY GROUP

HUMAN CAPITAL & WORKFORCE MANAGEMENT

The Future of Travel Nursing – Episode 4

Transcript

[00:00:00] Laura Canfield, DNP, RN, CNS, CNRN, SCRN: I think travel nursing is going to grow, it's going to continue. We do see our full-time nurses and staff want to take a step back. I think if we want to call it COVID clarity, we're seeing more nurses want flexible schedules, part-time schedules. I think there's always going to be a place for talented travel nurses to join us to help support us, and we look forward to the innovations that we know are going to be necessary to help us adapt to this shift in what our workers need and want.

[00:01:09] Bianca A. Briola: Hello, and welcome to the Alvarez & Marsal Healthcare Industry Group Human Capital and Workforce Management podcast. In this podcast series, we discuss the most pressing workforce issues facing healthcare leaders. I'm Bianca Briola, Leader of the Healthcare Human Capital and Workforce Management Practice, and today, I'm joined by my co-host, Kristy Anwuri, one of our workforce experts.

[00:01:33] Kristy Anwuri: Hi, everyone. Thanks for joining.

[00:01:35] Bianca: Today, we have a wonderful guest. We're joined by Laura Canfield, Vice President of Patient Care Services and the Chief Nursing Officer of Cottage Health in California. Laura, we're so lucky to have you as a guest. I personally want to hear your perspective on the future of travel nursing, obviously the topic of this show. Welcome to the show.

[00:01:56] Laura: Thank you so much, Bianca. It's a pleasure to be here.

[00:01:59] Kristy: Laura, thanks again for joining us today. I'm excited to hear your thoughts about the healthcare industry. With that said, could you tell us a little bit more about your role at Cottage Health?

[00:02:11] Laura: Yes. Thanks, Kristy. Cottage Health is a unique not-for-profit hospital system on the Central Coast of California. We have several entities including Santa Barbara Cottage Hospital, Cottage Children's Medical Center, Cottage Rehabilitation Hospital, Santa Ynez Valley Cottage Hospital, and Goleta Valley Cottage Hospital. We also have 13 urgent care centers. For over 125 years, Cottage has been in this community providing advanced medical care, and we are nationally recognized with many of our services. We're a level 1 trauma center. We are accredited by the Joint Commission as a comprehensive stroke center and maintain several other specialty certifications.

We have more than 600 members of our medical staff that include specialists in all major clinical areas, many of whom participate in the training and education of our residents. We have four residencies that are accredited through the Graduate Medical Education Residency Program. It is an incredible place to be a nurse. We are a Magnet-inspired



organization that strives to achieve and sustain outcomes for nursing that reflects our exemplary care. As the vice president of Patient Care Services and chief nursing officer, my role is I am accountable for regulatory requirements and I oversee nursing practice within our system. I also oversee palliative care, education, respiratory care, and the trauma departments.

[00:03:53] Kristy: Wow, that's extensive. Given the past few years, for someone in your role, especially during the pandemic, what did COVID do for you? How did the pandemic basically affect your day-to-day?

[00:04:11] Laura: Thanks for asking, Kristy. Yes, it has been a true challenge, as it has for everyone in health care across this nation and in fact the world. We've really been focused over the last two and a half years on our community and acute care pandemic response 100%. It's only now with an ease in the pandemic that we're really able to prioritize, look forward, plan for the future, bring back our initiatives, our programs to make nursing better, to make care better at Cottage Health.

I'll say I also am a new CNO. I was promoted February 1st of 2021, and at that time, we had more than 100 inpatients positive with COVID and five dedicated COVID cohort units, and it was a true challenge to assume the lead and move forward, but we have an incredible team. There's a lot of support here, and we really work together. We were clearly able to do a great job responding to the pandemic.

[00:05:32] Bianca: Laura, I didn't realize how big Cottage Health is, and your scope is very large. You obviously keep very busy. I'm curious, given the size of Cottage Health, before the pandemic, did you use travel nurses or did you kind of have everything covered with your existing staff?

[00:05:57] Laura: Actually, we've almost always used travel nursing, and our biggest hospital, Santa Barbara Cottage Hospital, is a 519-bed licensed facility, and that's where my office is. Santa Barbara Cottage Hospital in particular has always used travelers, and they've been great partners for us. We've surged up and down with travelers pre-pandemic, in the winter for our flu season is an example, also in pediatrics. We've used travelers in our nursing float pool and in a few specialty areas where it's particularly hard to recruit. Now, the Central Coast of California is a very expensive place to live.

We're a small community, although our offerings in our hospital system are more like academic medical centers in the services we provide. It has always been a challenge to recruit and really retain talent in this community, that's not unique to Cottage Health, that's a known challenge in Northern, Central, and Southern California where things are truly just so expensive.

[00:07:24] Bianca: That's interesting. Unlike many hospitals, it sounds like you've woven the use of contingent workers into your staffing strategy. It seems like that it ebbs and flows, you manage peaks. Now, during the pandemic, did things change?

[00:07:45] Laura: They did. Initially-- It's so interesting to think back to March of 2020, if we want to talk about that being the first wave of the pandemic. We didn't initially see a significant change in our contingent workforce use because at that time we drastically reduced our elective surgeries that were offered, we only did urgent and emergent surgical cases, so we had a lot of workforce that otherwise may have worked in a specialty area. That workforce was able to help us in our higher-volume areas like our emergency departments, in our inpatient areas.

We initially didn't increase our utilization of travelers, but that of course did change as the pandemic continued, and we increased the number of travelers we used in really most clinical areas in our hospital here at Santa Barbara, which was in our system the location that cared for inpatients with COVID, but all three of our emergency departments utilized travelers to some extent in their EDs, caring for outpatients, giving monoclonal antibodies.

We also used travelers for screeners, and those are unlicensed travelers, but they were really important to us as California Department of Public Health and our local public health officers were-- As the pandemic evolved, we were adapting to the changes in guidance from the CDC, from our state, a lot of that included screening individuals, including staff as they entered our facilities, and we used contingent workers for that.

Then, finally, in early 2022, during the Omicron surge, that was really the first time we saw significant call-outs for illness of our own staff, either because they themselves were positive for COVID or they had family members that were positive for COVID, and we did increase the number of travelers that we utilized because of the demand.

[00:10:07] Kristy: Given what you said before, it seems like the integration of contingent workforce and travel nurses, that's just a part of your DNA, but would you say that there are certain specialties that are in greater demand right now or certain shifts that are in greater demand right now where you absolutely have to use contingent workforce?

[00:10:26] Laura: Yes. Thanks, Kristy. It's true. We're having a very small surge, and we're grateful right now not to see large inpatient numbers, but we're seeing more of the community come to our emergency department for treatment. We are seeing a little bit more, of high volume of sick calls amongst our staff. For some of the reasons I discussed previously like our cost of living and interestingly as well, the rental market in our community is saturated. There was a time, it's not quite so impacted now, that there was only 1% rental availability in this community.

When we're looking to-- Even for travelers to find housing a true challenge but we are grateful for our travel partners. We have long-standing relationships with our travel agencies, and they really are going to be a part of the work that we do I think for many years to come, and we are seeing this not just in nursing, surgical techs, respiratory care practitioners, lots of specialties, lots of healthcare workers. We're utilizing all of those roles. Emergency department techs. There's a true need to fortify all types of healthcare workers.

[00:11:51] Kristy: Got it. Thank you.

[00:11:53] Bianca: Okay. Let's talk a little bit about the future, Laura. There are rumors, there's talk that there could be some more regulations related to travel nursing and managing costs. You being in California, that would be a state where we may see that type of legislation because there's more regulations in your state. Do you think that there's any chance of this legislation to come to fruition?

[00:12:24] Laura: I think it's a great question. I also believe it's a sensitive topic, and I'd like to speak thoughtfully and carefully about it. I mentioned that we benefit from long-standing collaborations with our travel agency partners, and we are truly grateful. The travelers that work at Cottage Health are like our family, and we would not have been able to respond to the pandemic in the way that we did without this partnership. There is a Senate bill that was introduced earlier this winter that aims to provide some transparency in the bills that healthcare staffing agencies present to hospitals to ensure hospitals know exactly what they're paying for.

This bill also would intend to prohibit sharp price increases during states of emergencies that aren't supported by market demand. I do think this is positive for the future because we know during the pandemic some healthcare agencies dramatically increased their prices in some cases by up to 400%. Most agencies, that increase has been entirely due to increased demand because of the pandemic coupled with a limited supply of healthcare workers, and everyone has benefited from that arrangement including the travel nurse. There have been report of some bad actors of some agencies not passing that increased rate down to their travelers, and I think that's what this legislation attempts to address.

[00:14:09] Bianca: I'm very curious to see where it's going to go and if we're going to see more action at the state level or if it will be a federal movement but more to come there and we're asking that question of all of our guests just to see what do they think.

You mentioned that you're very much dependent and thankful for the support that you receive from contingent workers, from nursing travelers even before the pandemic but now especially, we sometimes hear that although hospitals are very thankful for getting that support, that sometimes the incumbent nursing staff, the full-time staff, they're not so happy. What are you hearing from your nursing staff about the use of travelers, the presence of travelers within Cottage Health?

[00:15:02] Laura: I do think our culture is unique. We are fortunate, as I mentioned, to have these great partnerships, and the nursing staff here knows that without our travel partners, we would be quite challenged to do the work and provide the kind of care that we want to provide. Just interestingly as well, we have a lot of travelers sign on to Cottage Hospital system because this is a-- imagine young nurses, recently out of school, they're traveling with friends, this is an incredible place to live.

This is a great community. There's so much to do outside, inside, and a lot of our staff started as travelers. I think there is a different tone and culture here that really treats these travelers like family. I was rounding recently during our nurses' week celebrations in early May, and I had the chance to talk to several travelers and asking what do you think about sign on? Many of them want to but again, that cost of living, where can they live? Those are barriers. We're really focused on retention as well. It's not just-- Our nurses are aware travelers make a high rate of pay.

We are doing a lot to retain the staff that we have, to listen. We have a shared governance culture, and we offer competitive wages. Our compensation package is designed to ensure that we're competitive with the market. We follow the California Fair Pay Act, and base pay is determined using years of experience in whatever the profession is. Every year, we do a comprehensive analysis of all of our positions to ensure our wages are market-competitive. Nursing salaries in California are higher than the national average, that reflects the cost of living in the high demand.

I'll say that, well, I'm not speaking for every nurse, that is the predominant sentiment. We have travelers that are snowbirds that take a contract with us in our nursing float pool every winter, go back to Canada for the summer, come back again in the winter, and these people, we are so glad to see them, and they're really a part of our team.

[00:17:45] Bianca: Certainly the option to travel allows both the organization and the individual nurses a lot of flexibility. When we think about your incumbent staff, your full-time and part-time staff that are either benefited or have been there for a long time, it sounds like you've made some changes to compensation. Maybe some bonusing. Are there any other things that you've done to engage your staff, not necessarily financial, but obviously retention is really important. What are some of the things that you're doing?

[00:18:21] Laura: Thanks for asking. I mentioned our shared governance culture, and almost all of our units have a local shared governance council where their ideas and voices for improvements for quality, for fun are brought forward. We have several partnerships with local academic institutions to help support further education and specialty certification. We have robust academic scholarship programs and loan programs and certification reimbursement to help nursing really work to the top of their license. Those have been very attractive.

We have a really high percentage of graduate degree-prepared nurses at Cottage Health System, and lots of people are actually going back for their doctorate degrees. We have a nurse practitioner fellowship. I mentioned our urgent cares. Those are nursing led, nurse leader led, and advanced practice nurse led. We've even had to use some travel workers in our urgent cares because of the demand but recognition too.

We are working hard to say thank you. We have just partnered with the DAISY Foundation which recognizes nurses for compassionate care and just taking the time to listen and say thank you whatever we can. I think our teams appreciate it, but certainly it's a competitive market, and we know that the nurses and the staff that stay with us have local ties to our community and want to raise their families here. Things like child care, expanding child care, expanding commuter benefits.

A lot of our nurses and other team members don't live in Santa Barbara proper, but they might live 30 miles away in Ventura County or in our North County. Really augmenting and supporting our commuter benefits is something that we've recently focused on to help.

[00:20:38] Bianca: I think one thing that we have learned during this very unstable time where we see a lot of movement of workers across different industries, across state lines in general that we call it the Big Quit or Great Resignation, Reshuffling, whatever we say, what we're learning is it's not just about money, it's a lot about money, but there are other components of the total rewards program, for example, child care and then loan forgiveness, they're hot right now, that are really making a difference in the lives of our workers. I've got to ask it, last question. Get out your crystal ball, dust it off. What does the future of travel nursing look like? What are your predictions?

[00:21:28] Laura: Gosh, it's tough. If only we had had these crystal balls back in 2020. I think travel nursing is going to grow, it's going to continue, and we, systems people, other leaders, other CNOs, CHROs, other folks that really partner with these companies need to develop strong partnerships and be nimble and adapt. We do see our full-time nurses and staff who want to take a step back. I think if we want to call it COVID clarity, we're seeing more nurses want flexible schedules, part-time schedules. I think there's always going to be a place for talented travel nurses to join us to help support us.

I hope I've made clear, we are truly fortunate to have long-standing relationships and to be able to support this, but I think we will continue to see travel nursing, and we look forward to the innovations that we know are going to be necessary to help us adapt to this shift in what our workers need and want.

[00:22:56] Bianca: Laura, you're such a wonderful guest. I love your perspective, and I can appreciate this mutual respect and appreciation for the support that the travel nursing field provided Cottage Health, that continues to support you and your organization, and that's so important. Thank you, thank you, thank you for your time. We've learned a lot and can't wait to hear about what our other guests are saying. We're finding that depending on geography, we hear some different variations of what they think about the future of travel nursing, but thank you again, Laura.

[00:23:33] **Laura:** It has been my pleasure. Thank you so much for including me.

ABOUT ALVAREZ & MARSAL

Companies, investors and government entities around the world turn to Alvarez & Marsal (A&M) for leadership, action and results. Privately held since its founding in 1983, A&M is a leading global professional services firm that provides advisory, business performance improvement and turnaround management services. When conventional approaches are not enough to create transformation and drive change, clients seek our deep expertise and ability to deliver practical solutions to their unique problems.

With over 6,000 people across five continents, we deliver tangible results for corporates, boards, private equity firms, law firms and government agencies facing complex challenges. Our senior leaders, and their teams, leverage A&M's restructuring heritage to help companies act decisively, catapult growth and accelerate results. We are experienced operators, world-class consultants, former regulators and industry authorities with a shared commitment to telling clients what's really needed for turning change into a strategic business asset, managing risk and unlocking value at every stage of growth.

To learn more, visit: [AlvarezandMarsal.com](https://www.alvarezandmarsal.com). Follow A&M on [LinkedIn](#), [Twitter](#) and [Facebook](#).