

Staffing Shortages in Healthcare & Maintaining Quality Care

The American healthcare system faces significant challenges in delivering quality healthcare. Perhaps none is more critical than staffing shortages.

In recent years, the problem has become pervasive, affecting many specialties and regions. By 2037, the shortage of full-time equivalent (FTE) physicians is [expected to reach 187,130](#). In March 2023, the International Council of Nurses (ICN) declared the worldwide nursing shortage a [global health emergency](#). The shortage of full-time registered nurses (RNs) in the U.S. specifically is [expected to escalate to 63,720 by 2030](#).

The issue is particularly pressing in rural regions, where the challenges are compounded by lower salaries and higher health burdens among the population. These areas often struggle to attract and retain healthcare professionals, exacerbating the disparity in access to quality medical care.

For providers struggling to overcome staffing challenges, gaining a clear understanding of the scope, causes, and consequences of the problem can be helpful. However, alleviating healthcare professionals' workload and burdens through creative solutions—such as preventative care programs like Chronic Care Management—can be even more useful.

The state of staffing shortages in healthcare

While some locations and specialties maintain an adequate workforce supply, other areas face severe staffing shortages. Almost no healthcare role is completely immune from staffing challenges.

Multiple specialties and roles impacted

Staffing shortages in healthcare affect physicians, nurses, and allied health professionals. For physicians, shortages are more pronounced in some specialties. Vascular and thoracic surgery, ophthalmology, family medicine, and plastic surgery are projected to be the areas of lowest physician supply adequacy by 2037, according to a [National Center for Health Workforce Analysis report](#).

Among nurses, workforce supply varies by geography. Nonmetro areas historically have experienced greater need for nurses than metro areas, and [that trend is expected to continue](#). Nursing adequacy rates also differ across the country, with states like Washington and Georgia expected to encounter a [nurse shortage of more than 20 percent by 2035](#), while other states and metro areas might experience a slight surplus of nursing professionals.

The nursing shortage is compounded by the fact that, in recent years, young nurses have left the profession in droves. [One study](#) showed that 2021 brought the largest drop in nurses recorded in more than 40 years—more than 100,000 exits. Researchers attribute this dramatic decrease less to retirements and more to nurses under age 35 leaving the profession.

Many healthcare providers turning to contingent staffing

Given the stress of staffing shortages, many healthcare systems are stretching workers thin, loading them with more responsibilities and overtime. Hospitals are also filling staffing gaps with contract labor. In 2022, contract labor expenses [grew to 11 percent of total labor expenses](#), up from just 2 percent in 2019.

While contingent labor is used across healthcare roles, nurses have become the face of contract roles. A [2024 survey of hospital nurse leaders](#) reported that, on average, hospital nursing staffs consist of 12 percent contingent nurses.

This contract staffing model has placed a significant financial strain on healthcare systems. Many are exploring ways to reduce their dependence on expensive temporary workers, but the persistent lack of FTE employees makes solving the problem challenging. Full-time workers are being lured away by significantly higher pay in contract roles.

Shortages compounded by mounting financial pressures

The state of staffing shortages in healthcare is inextricably linked with the broader state of healthcare in America. Workforce issues both contribute to and are worsened by a backdrop of other hurdles. Many hospitals also wrestle with financial challenges like the pressure to consolidate, high patient expenses, a graying workforce, [rural healthcare challenges](#), and patient safety.

All of these forces put increased strain on already limited financial resources. Many hospitals are operating on extremely thin margins. As a result, tackling staffing shortages has become a complex issue without a clear-cut solution.

Healthcare staffing shortage statistics

These healthcare staffing shortage statistics illustrate the scope and size of the medical workforce challenges.

1. **Demand for RNs projected to grow:** Between 2023 and 2033, employment opportunities for RNs are expected to [grow by 6 percent](#), with about 194,500 RN openings on average each year throughout the decade.
2. **Older nurses retiring in large numbers:** Between 2027 and 2030, [an estimated 1 million nurses will retire](#). This exodus of middle-aged nurses drains about 2 million collective years of nursing experience from the healthcare system each year.

3. **Physician shortage:** The U.S. is expected to face a [physician shortage of up to 124,000](#) by 2033.
4. **COVID-19's toll on healthcare workers:** A 2021 survey of healthcare workers found that [about one-third of frontline healthcare workers](#) considered leaving their profession during the COVID-19 pandemic.
5. **Physicians report high burnout rates:** In 2023, [48 percent of physicians](#) reported experiencing at least one symptom of burnout.
6. **Nurses leaving healthcare:** In 2022, about [1 in 5 nurses](#) said they planned to retire within the next 5 years.
7. **Healthcare job openings will outpace educational capacity:** A McKinsey analysis [projects an undersupply of healthcare workers](#) in 2031 based on educational completion rates in 2021. The gap is estimated to be more than 13,000 in primary care, more than 60,000 in specialty care, and more than 800,000 in nursing care.
8. **Aging physician workforce:** In 2023, [nearly a quarter](#) of all active physicians in the United States were 65 or older, meaning physician retirements in the coming years will drain a substantial amount of talent and experience from the healthcare workforce.
9. **Widespread nurse burnout:** In a [2023 AMN Healthcare survey](#), 68 percent of nurses either somewhat or strongly agreed with the statement: "Most days I feel burned out."
10. **Rural healthcare at risk:** According to a 2024 study, [50 percent of rural hospitals](#) in America are operating in the red, and 418 are "vulnerable to closure"—which makes attracting already-scarce employees even more difficult.

Causes and consequences of staffing shortages in healthcare

Solving staffing shortages has proved to be a complex challenge since some of the causes are also the consequences of the problem—and vice versa. Any conversation about staffing shortages most likely includes a discussion of these important factors.

Staff burnout

Burnout is one of the primary causes of staffing shortages. On top of clinical work, medical professionals are saddled with administrative tasks. Between time spent in the electronic health record (EHR) on charting, notes, and record reconciliation, many providers spend hours each week on paperwork—[some close to 20 hours per week on average](#).

COVID-19 accentuated burnout trends, with frontline medical professionals experiencing unprecedented levels of trauma, grief, worry, and stress. The pandemic also contributed to a dangerous cycle: burnout causes shortages, and shortages cause burnout. Lean teams are often overworked, which leads to poor mental health and higher stress.

This cycle of burnout and need for workers is particularly prevalent in rural areas, where staffing shortages are heightened. Patients in these areas tend to be older and less healthy, meaning they require higher-complexity care. At the same time, [rural providers](#)—many on the brink of bankruptcy—can't match the more attractive salaries and lifestyles that metro areas offer. All of this amounts to high burnout rates and a tricky staffing shortage challenge.

Graying population and workforce

The U.S. population is growing and aging—a trend affecting medicine in two key ways. In 2020, about [1 in 6 Americans](#) was over the age of 65. So, in the years ahead, the need for healthcare services will increase with the projected growth in the number of older adults. At the same time, physicians and nurses will reach retirement age at high rates. A 2023 report showed that, in the next decade, 40 percent of physicians will be 65 or older. Higher demand for healthcare services, combined with a retiring workforce, is a primary cause of staffing shortages in healthcare.

Limited training slots

The education pipeline continues to challenge the healthcare workforce supply. For physicians, caps on Medicare-funded residency slots are a key barrier. The caps, initiated by Congress over two decades ago as a cost-saving measure, [have not changed since 1996](#), despite a significant increase in medical school students.

This gap is [particularly detrimental to rural hospitals](#), where new providers are needed to fill current vacancies. The cap on training spots has also contributed to a shift away from lower-paying primary care positions, where the need is highest, to more attractive specialty positions.

Similar training gaps exist in other medical specialties, including nursing and dentistry, where the [educational pipeline is not projected to produce enough graduates](#) to fill current or anticipated job vacancies. Some health systems are beginning to invest in their own training and education infrastructures to fill their healthcare staffing needs.

How healthcare staffing shortages impact patient care

Managing staffing shortages in healthcare is a high-stakes assignment since workforce challenges can impact patient care directly. Fatigue, stress, and higher patient loads all increase the likelihood of errors in care—which [account for more than 250,000 deaths each year](#) in the U.S.

Missed nursing care—that is, nursing tasks that can't be completed due to staffing shortages—can also contribute to patient safety issues. Research has established a [strong correlation](#) between [nurse staffing levels and patient outcomes](#).

Staffing shortages also cause turnover, making it difficult to establish continuity in patient care management programs, such as [Chronic Care Management \(CCM\)](#). Turnover, in turn, presents a challenge for patient quality, since it means organizations are always bleeding knowledge.

In an organization where the focus is “putting out fires,” the important, but not acute needs, like preventive care, often fall through the cracks. Office workers in short-staffed practices often don’t have time to manage remote care and other important related healthcare services.

How to maintain quality care in an understaffed practice

Even in the face of staffing challenges, [maintaining quality care is possible](#). These steps can mitigate the impact of staff shortages on patients.

1. Partner with a value-based care program provider

The [value-based care model](#), introduced by the Centers for Medicare and Medicaid Services (CMS), supports a coordinated healthcare approach to improve patient care quality. Participating providers are compensated by CMS based on the quality of care they administer rather than only the services they provide.

A Chronic Care Management (CCM) program is one such value-based care program. CCM offers valuable benefits to patients living with two or more chronic conditions. The program supports a better quality of life and decreases the risk of emergencies. It also provides a structure for patient care coordination, reducing errors and minimizing acute care needs. Thus, a CCM program can also lessen the burden of care on providers and tap into Medicare reimbursements, generating new revenue for providers.

However, achieving the benefits of a CCM or another value-based care program can seem out of reach for short-staffed practices since dedicated staff are necessary to support these initiatives. [Finding the right vendor to support your value-based care offerings](#) can be the key to maintaining quality care in an understaffed practice.

Partnering with a value-based care program provider like ChartSpan brings these solutions within reach. From identifying and enrolling eligible patients to supporting around-the-clock care access with a 24/7 care line, ChartSpan takes the burden of managing CCM off providers. Our team supports you every step of the way with marketing, care coordination, and even connecting with patients to ensure they adhere to their care plans and appointments.

[Learn more about how to start a CCM program →](#)

2. Technology

Against the backdrop of staffing shortages, [technology](#) offers a crucial tool for improved efficiency. For example, platforms that help preceptors manage physician training are an

important piece of the workforce supply puzzle. Likewise, remote care and analytics tools can help practitioners cover large patient loads with improved speed and accuracy.

Learn about [the role of Artificial Intelligence \(AI\) in chronic disease management](#) →

3. Training initiatives

In the absence of sufficient training pipelines for providers, some health systems are building their own. [Training initiatives](#) help fill crucial knowledge gaps and tap into more value from limited staff. Prioritizing continuous education at all levels of your staff improves your resilience and efficiency.

A commitment to learning is also valuable to combat workforce challenges. Practices plugged into the broader medical community can leverage cutting-edge ideas in their practices. Simply knowing preventive care is important isn't helpful for a staff that is too short on time to provide it. Innovative providers recognize the opportunities supplemental workforce resources offer when educating existing staff isn't enough.

For instance, ChartSpan partners don't need to train staff on a new CCM program. Instead, they can get up and running quickly with a ready-to-go team, skilled at achieving CCM program success. Creative solutions like partnering with a CCM provider also improve care coordination in a way training alone cannot. We stretch limited staff further by performing assessments to find gaps in care, helping patients address them, and getting patients back to the practice for services like vaccinations and screenings.

We also support [patient self-management](#), empowering patients to take an active role in their health trajectories. By creating meal and exercise plans that align with care goals, communicating with patients to monitor their conditions, and promptly escalating issues to the provider, our team becomes an extension of yours.

4. Employee satisfaction and retention efforts

Now more than ever, health systems must make a concerted effort to retain employees. High rates of burnout and low provider supply have combined to form a dangerous combination for organizations that fail to prioritize employee satisfaction.

While fair salaries and benefits are part of the solution, so is balance. At ChartSpan, for example, our remote work policy and emphasis on work-life balance offer medical professionals and nurses the [sustainable careers](#) they want.

While focusing on retention might be more expensive in the short term, it saves money over time. The cost of RN turnover has steadily risen each year, reaching more than \$52,000 per nurse in 2022. By avoiding over-reliance on contingent labor and reducing training costs, organizations that focus on employee satisfaction win in the long run.

Streamline Chronic Care Management with ChartSpan

ChartSpan understands the many financial and staff-related pressures today's practices face. We provide relief for stressed organizations by supplementing your team with the staff and experience to help your practice start and manage a [CCM program](#).

From supporting billing to managing patient follow-ups, we reduce the burden of delivering high-quality care. Thanks to our large clinical staff and an easy onboarding program, ChartSpan has lower turnover than the industry. That's a benefit our partners can access by working with us to implement and maintain their CCM efforts.

Interested in learning more about how we can support high-quality patient care, even in the face of staffing challenges? Whether you're a rural provider or an at-max-capacity team looking to improve, we can help. [Talk with an expert](#) to learn how we can support your practice with patient-centric solutions that work in today's challenging healthcare environment.

You may also like:

- [Quality Improvement: Processes & Best Practices in Healthcare](#)
- [What Are Gaps in Care and How to Close Them](#)
- [Three Ways Every Provider Can Improve Health Care for Their Patients](#)