



## **2021 Survey of Temporary Allied Healthcare Professional Staffing Trends**

## Overview

AMN Healthcare (NYSE: AMN) is the largest healthcare staffing organization in the United States as rated by Staffing Industry Analysts and is the innovator of healthcare workforce solutions. A comprehensive healthcare staffing provider, AMN Healthcare assists hospitals, medical groups, government entities and other healthcare facilities in the staffing of nurses, physicians, interim executives, and academic leaders.

AMN Healthcare's Allied Division specializes in the staffing of temporary allied healthcare professionals, including therapists, radiologic technologists, laboratory technologists and many other job categories.

AMN Healthcare publishes multiple surveys and other research reports each year that provide original data on a variety of healthcare workforce-related topics, including healthcare professional compensation, supply and demand trends, practice metrics, provider morale and others. This report marks AMN Healthcare's inaugural *Survey of Temporary Allied Healthcare Professional Staffing Trends*. The survey examines the use of temporary allied healthcare professionals at hospitals, medical groups, and other healthcare facilities.

Survey data may be useful to allied healthcare professionals, healthcare executives, policy makers, academics, journalists, and others who track developments in healthcare staffing.

## Methodology

AMN Healthcare's 2021 *Survey of Temporary Allied Staffing Trends* is based on surveys sent by e-mail to healthcare executives/managers at hospitals, medical groups, and other healthcare facilities nationwide during the months of August and September of 2021. Healthcare executives completing the survey were asked to comment about their use of temporary allied healthcare professionals during the prior 12 months. Survey results are based on responses received from 204 healthcare facilities, including 159 hospitals.

Given the disparate types of facilities the survey was sent to, margin of error for the survey was not calculated, and survey responses are meant to reflect general trends in temporary healthcare staffing and may not mirror the experiences of all healthcare facilities.

The final survey report was released in December, 2021.



## Key Findings

AMN Healthcare's 2021 *Survey of Temporary Allied Healthcare Professional Staffing Trends* examines the use of temporary allied healthcare professionals at hospitals, medical groups, and other healthcare facilities. It is intended to reveal the prevalence of temporary allied healthcare professional at healthcare facilities and the reasons why facilities use these professionals. The survey also examines how health facility managers evaluate the skill level of temporary allied healthcare professionals and whether or not temporary allied healthcare professionals are accepted in the workplace by peers, patients, and managers.

Key findings include:

- 96% of healthcare facilities reported using temporary allied healthcare professionals to supplement their staffs during the last 12 months, signaling an emerging shortage of these key healthcare workers.
- Respiratory therapists were the most in demand type of allied healthcare professional in the last year, used by 26% of healthcare facilities. High demand for respiratory therapists is likely driven by COVID-19, which has caused or exacerbated respiratory problems for many patients.
- Laboratory technologists and radiologic technologists were the second and third most in-demand type of temporary allied healthcare professionals over the last year. 25% of healthcare facilities used temporary laboratory technologists and 21% used temporary radiologic technologists.
- The majority of healthcare facilities (75%) currently are looking for temporary allied healthcare professionals.
- The primary reason healthcare facilities use temporary allied healthcare professionals, cited by 73% of those surveyed, is to fill gaps while permanent professionals are being sought, further highlighting the fact that allied healthcare professionals are in short supply.
- 71% of facilities said they use temporary allied healthcare professionals to fill gaps caused by staff turnover, a reflection of the high turnover rates many healthcare facilities are experiencing in the era of COVID-19.
- The primary benefit of using temporary allied healthcare professionals, cited by 73% of facilities, is that they help prevent burnout of existing staff. Given the challenges presented by COVID -19, staff burnout has become a growing concern for many healthcare facilities.
- The majority of healthcare facilities (53%) indicated that temporary allied healthcare professionals have been moderately to extremely involved in the treatment of COVID-19 patients.
- 97% of facilities rate the skill level of temporary allied healthcare professionals as average to excellent. 65% rate their skill level as good to excellent, while only 3% rate their skill level as either poor or terrible.
- 83% of facilities indicated temporary allied healthcare professionals are accepted by their colleagues, 94% said they are accepted by department managers, and 82% said they are accepted by patients.
- 75% of facilities rated temporary allied healthcare professionals as either as productive or more productive than members of the permanent staff, while 25% rated them as less productive.
- Cost is the main impediment to using temporary allied healthcare professionals. 56% of facilities cited cost as a reason not to use temporary allied healthcare professionals.

Following are questions asked by the 2021 *Survey of Temporary Allied Healthcare Professional Staffing Trends* and responses received. All survey responses rounded to the nearest digit.



## Questions Asked and Responses Received

**1.**  
What type of healthcare facility do you work in?

Hospital	78%
Medical group	5%
Skilled nursing facility	3%
Urgent care center	2%
Home health organization	4%
Outpatient rehab	4%
Other	4%

**2.**  
Have you used temporary allied healthcare professionals to supplement your existing staff any time during the last 12 months?

Yes	96%
No	4%



### 3.

If yes, what specialties?  
(check all that apply)

Other	31%
Respiratory therapists	26%
Laboratory technologists	25%
Radiological technologists	21%
Physical therapists	17%
Occupational therapists	13%
Speech language pathologists	5%

### 4.

Are you currently looking for temporary allied healthcare professionals to supplement your existing staff?

Yes	75%
No	25%

### 5.

If yes, what specialties?  
(check all that apply)

Other	33%
Respiratory therapists	26%
Laboratory technologists	25%
Radiologic technologists	23%
Physical therapists	19%
Occupational therapists	9%
Speech language pathologists	8%

### 6.

In a typical month, how many temporary allied healthcare professionals do you use?

1-5	83%
6-10	10%
11 or more	7%



## 7. Why do you use temporary allied healthcare professionals? (check all that apply)

Fill in while searching for permanent staff	73%
Fill in for staff vacancies following a departure	71%
Meet in rising patient demand	39%
Fill in for vacationing staff	36%
Fill in during peak usage times	22%
Coverage for extra hours and/or permanent staff breaks as hours are expanded	9%
Maintain flexibility to upsize or downsize as needed	8%
Other	5%

## 8. What are the benefits of using temporary allied healthcare professionals to supplement existing staff? (check all that apply)

Prevents existing staff burnout	73%
Allows for treatment continuity of patients	66%
Immediate availability	52%
Prevents revenue loss	24%
Reduces medical errors/readmissions	7%
Ensures quality-based reimbursement	7%
Other	6%

## 9. To what extent have temporary allied healthcare professionals been involved in addressing patient needs created by COVID-19 at your facility?

Not involved at all	22%
Slightly Involved	25%
Moderately Involved	19%
Very involved	20%
Extremely involved	14%

**10.**

What factors would prevent you from using temporary allied healthcare professionals provided by a temporary staffing agency? (check all that apply)

Cost of service	56%
Learning curve and training needed for equipment/procedures	30%
Licensing issues	27%
Lack of familiarity with department/practice	25%
Credentialing issues	24%
N/A	13%
Other	12%
Uninterested in managing multiple temporary staffing providers	6%

**11.**

When conducting a search for temporary allied healthcare professionals, how many staffing agencies do you generally work with?

One	46%
2 – 3	41%
4 or more	13%

**12.**

What are the most important factors when selecting a temporary allied healthcare professional staffing agency? (check all that apply)

	Most Important						Least Important	
	1	2	3	4	5	6		
Quality of professionals provided	56%	26%	10%	4%	3%	1%		
Time needed to fill the position	28%	37%	23%	10%	2%	0%		
Customer service	3%	9%	23%	35%	27%	3%		
Pricing	5%	16%	21%	20%	33%	5%		
Management of the process	4%	10%	19%	27%	35%	5%		

**13.**

What is your perception of the general skill level of temporary allied healthcare professionals?

Excellent	14%
Good	51%
Average	32%
Poor	3%
Terrible	<1%

## 14.

How are temporary allied healthcare professionals viewed by the following at your facility or practice?

	Not accepted	Tolerated	Accepted	Not sure
Their permanent allied colleagues	1%	13%	83%	3%
Their department leaders	<1%	4%	94%	2%
Their patients	0%	3%	82%	15%

## 15.

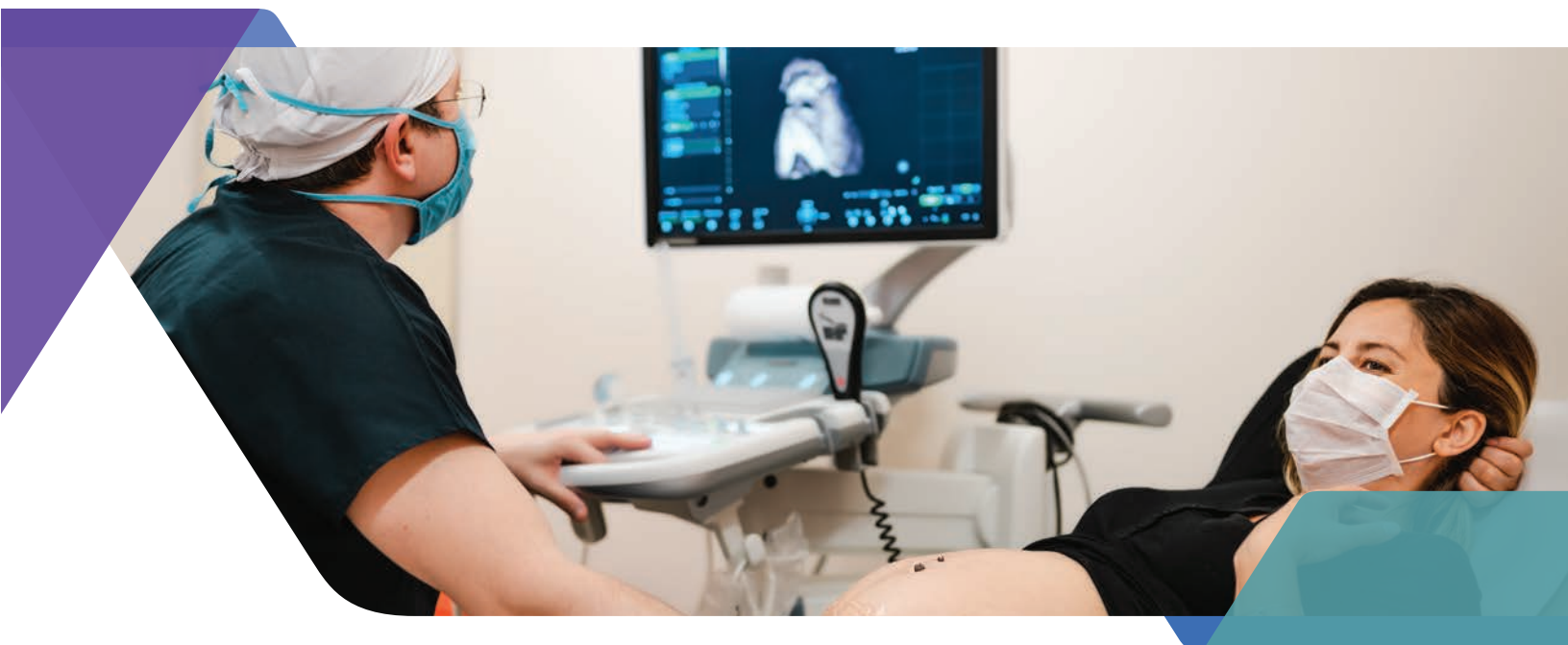
Compared to your permanent staff, temporary allied healthcare professionals are:

Much more productive	3%
Somewhat more productive	13%
About the same	56%
Somewhat less productive	24%
Much less productive	4%

## 16.

How would you rate the cost of temporary allied healthcare professionals?

Extremely reasonable	1%
Somewhat reasonable	21%
Neither reasonable nor unreasonable	31%
Somewhat unreasonable	35%
Extremely unreasonable	12%





## Trends and Observations

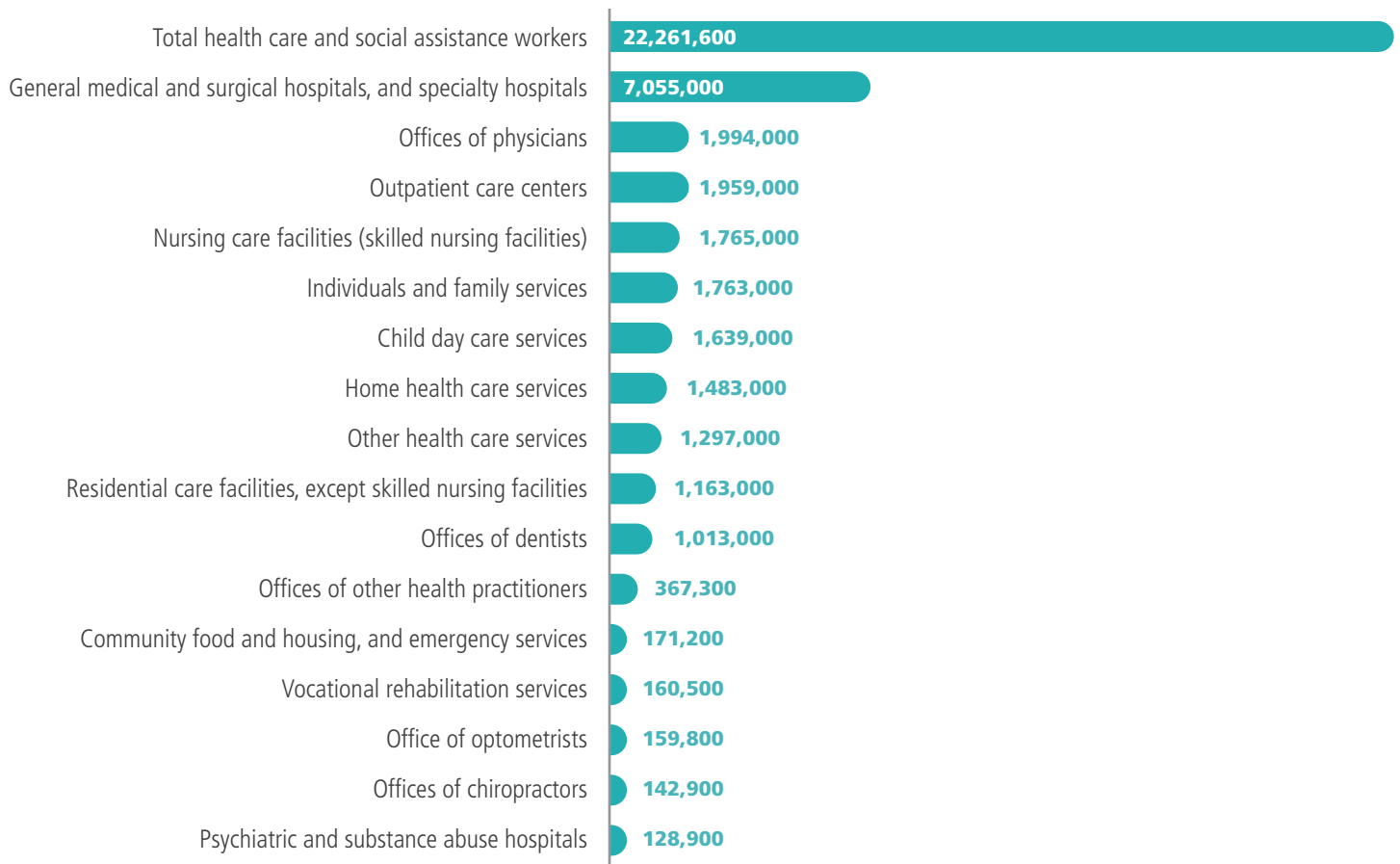
### Overview: The Nation's Leading Employment Sector

According to the Census Bureau's 2019 American Community Survey, approximately 22 million people nationwide are employed by the healthcare and social services sector. Healthcare/social services now employs more people than any other sector of the economy – approximately 14% of all American workers.

Of these, over 7 million work in hospitals, 1.9 million work in physician offices, 1.9 million work in outpatient care centers, and 1.7 million work in nursing care facilities (see chart below).

### HEALTH AND SOCIAL ASSISTANCE WORKERS BY DETAILED INDUSTRY: 2019

(Civilian employed, 16 years and over)



Note: Estimates include United States and Puerto Rico.

For information on confidentiality protection, sampling error, nonsampling error, and definitions, visit [www.census.gov/programs-surveys/acs/technical-documentation/code-lists.html](http://www.census.gov/programs-surveys/acs/technical-documentation/code-lists.html).

Source: U.S. Census Bureau, 2019 American Community Survey, 1-year estimates.

The majority of these healthcare workers -- approximately 60% -- may be classified as allied healthcare professionals, according to the Association of Schools of Allied Health Professions (ASAHP)

## Who Are Allied Healthcare Professionals?

The ASAHP defines allied health broadly as “those health professions that are distinct from medicine and nursing.” Today, advanced practice professionals (APs), such as nurse practitioners (NPs) and physician assistants (PAs) also are considered as a separate category of healthcare professional. If a healthcare professional is not a physician, nurse, or AP, it is likely they are an allied healthcare professional.

The ASAHP’s web site states, “Allied health encompasses a broad group of health professionals who use scientific principles and evidence-based practice for the diagnosis, evaluation and treatment of acute and chronic diseases; promote disease prevention and wellness for optimum health and apply administration and management skills to support health care systems in a variety of settings.” Together with a range of technical and support staff allied healthcare professionals may deliver direct patient care, rehabilitation, treatment, diagnostics, and health improvement interventions to restore and maintain optimal physical, sensory, psychological, cognitive, and social functions.

Allied health professionals are trained in a variety of educational settings: community colleges, proprietary schools, four-year colleges, universities, and academic health centers. It is estimated that 8-10 allied health professionals are required for every physician.

## OVER 80 JOB CATEGORIES

There are more than 80 job categories that are included in the allied healthcare professions. Included among these are:

Physical Therapists	EKG Technicians	Histotechnicians
Occupational Therapists	Electroencephalography (EEG) Technologists	Histotechnologists
Speech Language Pathologists	Polysomnographic Technologists	Medical Laboratory Technicians
Respiratory Therapists	Computed Tomography Technologists	Medical Technologists
Laboratory Technologists	Interventional Radiology Technologists	Phlebotomists
Dialysis Technologists	Magnetic Resonance Technologists	Dialysis Technologists
Medical Dosimetrists	Mammographers	Nutritionists
Medical Physicists	Nuclear Medicine Technologists	Dieticians
Radiation Therapists	Radiologic Technologists	Pharmacy technicians
Cardiac Monitor Technicians	Sonographers	Dental Hygienists
Cardiovascular Interventional Technologists	Special Procedures Technologists	Emergency Medical Technologists/Paramedics
Cath Lab Technologists	Vascular Sonographers	Exercise Physiologists
Echo Technicians	Clinical Laboratory Scientists	Medical assistants
Electrophysiology Technologists	Cytologists	

Source: Bureau of Labor Statistics Occupational Outlook Handbook

## Looming Allied Healthcare Professional Shortages

Even though healthcare now is the number one employment sector, a shortage of various types of healthcare professionals has emerged in many areas of the country. In its June 2021 report, *The Complexities of Physician Supply and Demand*, the Association of American Medical Colleges (AAMC) projected a shortage of up to 124,000 physicians by 2034. The physician shortage is being driven by a variety of factors, including population growth, population and physician aging, new technologies and the prevalence of chronic health conditions such as obesity, diabetes, heart disease, pulmonary disease. COVID-19 complications and many others.

Many of these factors also are driving the need for allied healthcare professionals, including population aging. According to the Centers for Disease Control and Prevention (CDC), patients 65 and older account for 34% of inpatient procedures though they represent only 14% of the population. They also account for 37.4% of diagnostic treatments and tests. Many of these procedures and tests, including diagnostic imaging, laboratory work, and others, involve allied healthcare professionals.

COVID-19 has directly and indirectly compounded the ill health of many Americans, both those who contracted the virus and those whom the virus caused to delayed needed care. The pandemic also has created the type of stress and tension that erodes both physical and mental health, further driving the need for healthcare professionals of many types.

Shortages also have been seen in nursing. According to the American Hospital Association (AHA) *Fact Sheet: Strengthening the Healthcare Workforce*:

The U.S. needs more than 200,000 new registered nurses (RNs) each year to meet increasing health care needs and to replace nurses entering retirement. In 2017, more than half of all nurses were age 50 or older, and almost 30% were age 60 or over. Workforce pressures also exist across a variety of allied health professions. According to one recent survey, the annual turnover rate of hospital certified nursing assistants (CNAs) was 27.7% (nearly double the turnover rate of nurses and physician assistants). Meanwhile, the Bureau of Labor Statistics projects a need for 11% more CNAs by 2025. The lack of laboratory technicians may be particularly acute – a 2017 survey conducted by the American Society for Clinical Laboratory Science concluded that there were, nationally, 7.2% lab technician positions unfilled.

The Healthcare Resources and Services Administration (HRSA), in its *Allied Workforce Projections*, considers supply and demand trends in a variety of allied healthcare job categories, forecasting increased demand in many of them (see below):

By 2030, HRSA projects the following demand for allied health workers:

**↑7%**

in demand for chiropractors (to 61,540) and 28% increase in demand for podiatrists (to 23,290)

**↑9%**

in demand for optometrists (to 46,730) and a 9% increase in demand for opticians (to 67,290)

**↑17%**

in demand for EMTs and paramedics (to 305,770)

**↑19%**

in demand for clinical laboratory technologists (to 198,440)

**↑19%**

in demand for pharmacists (to 359,770)

**↑21%**

in demand for registered dietitians (to 95,540)

**↑30%**

in demand for respiratory therapists (to 144,100)

Source: <https://bhwh.hrsa.gov/data-research/projecting-health-workforce-supply-demand/allied-health>

Below are projections from the Bureau of Labor Statistics (BLS) *Occupational Outlook Handbook* focusing on therapists, an allied profession experiencing particularly high demand due to population aging and other factors cited above.

### PHYSICAL THERAPY

Employment of physical therapists is projected to grow 21% percent from 2020 to 2030, much faster than the average for all occupations.

About 15,600 openings for physical therapists are projected each year, on average, over the decade. Many of those openings are expected to result from the need to replace workers who transfer to different occupations or exit the labor force.

### OCCUPATIONAL THERAPY

Employment of occupational therapists is projected to grow 17% from 2020 to 2030, much faster than the average for all occupations.

About 10,100 openings for occupational therapists are projected each year, on average, over the decade. Many of those openings are expected to result from the need to replace workers who transfer to different occupations or exit the labor force.

### SPEECH-LANGUAGE PATHOLOGY

Employment of speech-language pathologists is projected to grow 29% from 2020 to 2030, much faster than the average for all occupations.

About 15,200 openings for speech-language pathologists are projected each year, on average, over the decade. Many of those openings are expected to result from the need to replace workers who transfer to different occupations or exit the labor force.

## Shortages Exacerbated by COVID-19

Many of these shortages are likely to be exacerbated by COVID-19, which has driven up demand for various types of healthcare professionals, but also may be causing healthcare professionals to change roles or to leave the healthcare professions entirely.

In the 2020 *Survey of America's Physicians* conducted by Merritt Hawkins on behalf of The Physicians Foundation, 38% of physicians said they would like to retire in the next 12 months (Disclosure: Merritt Hawkins is a company of AMN Healthcare). In AMN Healthcare's 2021 *Survey of Registered Nurses*, 56% of nurses reported they are burned out most days, and 23% said they are likely to leave nursing. Burnout and attrition among many types of healthcare professionals was widely prevalent prior to the COVID-19 pandemic and evidence suggests the pandemic has made the problem even more acute.

## A More Mobile Workforce

Widespread shortages of healthcare professionals have spurred the increased use of temporary healthcare professionals in both medicine and nursing. Physicians working on a temporary basis are referred to as "locum tenens," Latin for "to take the place of." As far back as the 1800s or earlier, physicians would call upon colleagues to "mind the store" for them while they were away on travels or for other reasons.

The practice continued into the modern era, though on a limited, ad hoc basis. This began to change in the 1970s when the federal government, concerned about physician shortages in rural areas, offered grants to private companies to help staff these areas with temporary physicians. The physician locum tenens staffing industry was born, and hospitals, medical groups and other facilities now invest billions of dollars each year on locum tenens physician staffing.

According to Staff Care's *2020 Review of Temporary Physician Staffing Trends*, 85% of hospitals and medical groups now use locum tenens physicians, usually to hold a place until permanent physicians can be recruited, to address turnover, or to fill-in while physicians are on vacation, sick or otherwise absent (Disclosure: Staff Care is a company of AMN Healthcare).

Similar dynamics have taken place in nursing, where shortages have led to the widespread use of temporary nurses, often referred to as "travelers." Pervasive shortages of healthcare professionals have created a clinical workforce that has become increasingly mobile and less tied to a particular site of service.

## Survey Points to a Shortage of Allied Healthcare Professionals

AMN Healthcare's *2021 Survey of Temporary Allied Healthcare Professional Staffing Trends* suggests that temporary allied healthcare professionals now are widely used by hospitals, medical groups, and other healthcare facilities to supplement their permanent staffs.

Ninety-six percent of healthcare facility managers responding to the survey indicated that their facilities have used temporary allied healthcare professionals sometime in the last 12 months. The majority of those surveyed (75%) said they are currently seeking temporary allied healthcare professionals.

As in medicine and nursing, the widespread use of temporary professionals indicates that shortages now exist in the allied healthcare professions.

## Respiratory Therapists in Highest Demand

When asked what type of temporary allied healthcare professionals they have used over the last 12 months, a plurality of survey respondents (31%) checked the "other" category, indicating they used various types of allied professionals not among the two dozen or more listed on the survey, a finding that underscores how many different types of allied professionals there are.

Of those job categories that were included in the survey, more respondents (26%) indicated they had used temporary respiratory therapists in the last 12 months than any other type of allied healthcare professional.

Demand for respiratory therapists has traditionally been driven in large part by the prevalence of chronic obstructive pulmonary disease (COPD). Over 11 million Americans have been diagnosed with COPD and millions more may have it but do not know it. COPD now is the third leading cause of death in the U.S. after heart disease and cancer, according to the American Lung Association.

The chart below indicates COPD prevalence in various states.

### COPD PREVALENCE IN ADULTS BY STATE

Highest Prevalence		Lowest Prevalence	
<b>West Virginia</b>	12.1%	<b>Colorado</b>	3.8%
<b>Kentucky</b>	11.5%	<b>Utah</b>	3.8%
<b>Tennessee</b>	9.9%	<b>Minnesota</b>	4.0%
<b>Alabama</b>	9.6%	<b>North Dakota</b>	4.3%
<b>Illinois</b>	8.3%	<b>Connecticut</b>	4.7%

Source: American Lung Association



Recently, demand for respiratory therapists has been accelerated by COVID-19. Respiratory therapists play an active role in helping patients affected with COVID-19. Many patients with COVID-19 experience shortness of breath and low oxygen levels. Respiratory therapists help to manage the devices that can deliver high levels of oxygen therapy. These devices might include:

- Heated high flow nasal cannulas
- Non-invasive ventilation (wearing a tight-fitting mask and using pressures to help with shortness of breath and oxygen delivery)
- Ventilators

Patients recovering from COVID-19 may experience long-term respiratory problems, which could contribute to a continued high demand for respiratory therapists high for the foreseeable future.



## Demand for Laboratory Technologists and Radiologic Technologists Also High

Laboratory technologists rank second on the list of temporary allied healthcare professional in the highest demand, the survey indicates. One quarter of those surveyed (25%) indicated they have used temporary laboratory technologists over the previous 12 months.

Demand for medical laboratory technologists and technicians is expected to increase by 7% nationally between 2019 and 2029—more than double the average increase in demand among all occupations, according to the U.S. Bureau of Labor Statistics (BLS 2020).

Mercer's *U.S. Healthcare External Market Analysis* projects a shortage of 98,700 medical and laboratory technologists by 2025. Even more troubling is a statement from the American Society for Clinical Laboratory Sciences (ASCLS) that "the profession is educating less than half of the number of laboratory professionals needed." (*U.S. Can't Keep up With Demand for Health Aides, Nurses and Doctors. CNN Money. May 4, 2018*)

Blood tests and other tests to determine the presence of disease or health deficiencies continue to multiply as technology advances, driving up the need for additional laboratory technologists. A shortage of laboratory technologists can create test turnaround delays that may cascade throughout the spectrum of care, delaying needed diagnoses and procedures and expanding wait times.

Laboratory technologists have been particularly active throughout the COVID-19 pandemic, though demand for their services preceded the pandemic and is likely to outlast it.

Radiologic technologists rank third on the list of temporary allied healthcare professionals in the highest demand, the survey indicates. More than one-fifth of those surveyed (21%) indicated they have used temporary radiologic technologists in the last 12 months.

Strong demand for radiologic technologists, who perform x-ray and other diagnostic imaging exams on patients, signals that utilization of healthcare procedures is rebounding from the shutdown or slowdown of elective and other procedures caused by COVID-19.

A survey by the Area Health Education Center (AHEC), an organization created by Congress to enhance access to healthcare in underserved areas, shows 81% of healthcare facility imaging departments are experiencing a shortage of imaging technologists.



The most cited reasons for these shortages were burnout and the heavy work schedules many radiologic technologists are subject to. (*Help Wanted: Radiology Staffing Shortages Nationwide? Area Health Education Center (AHEC) Blog. September 21, 2021*).

As with laboratory technologists, a shortage of radiologic technologists can create turnaround delays of imaging tests that in turn trigger delays in required procedures, thereby extending wait times for care.

## Strong Demand for Physical Therapists, Occupational Therapists and Speech Language Pathologists

The survey indicates that 17% of healthcare facilities used temporary physical therapists in the last 12 months.

As was referenced above, job openings for physical therapists are projected to grow faster than for most job categories, according to the Bureau of Labor Statistics. Population aging is a key driver of rising demand for physical therapists. More than 10,000 baby boomers turn 65 every day. By 2032 there will be more people 65 or older in the U.S. than 17 or younger – the first time in the nation's history this demographic imbalance has occurred.

Today, many senior citizens are committed to maintaining an active lifestyle and may require physical therapy to do so. Patients in this age group generally are covered by Medicare and so have the resources to access physical therapy services. The Affordable Care Act included physical therapy among essential services health plans must cover, further expanding access to physical therapy services.

Nine percent of facilities used temporary occupational therapists in the last 12 months while 8% used speech language pathologists (SLPs). There are a limited number of openings in SLP graduate programs and an increased need for SLPs as their scope of practice widens, the autism rate grows, and the population ages. The SLP shortage is most severe among schools, many of which are required to provide SLP programs.



## Need to Fill Gaps, Address Turnover Driving Use of Temporary Allied Professionals

When asked to indicate why their facilities use temporary allied professionals, the primary reason cited by 74% survey respondents is to fill gaps in their staffs while permanent allied healthcare professionals are being sought.

For the reasons cited above, many healthcare facilities cannot meet all their allied healthcare professional staffing needs because demand for allied professionals exceeds supply. As in medicine and nursing, healthcare facilities have turned to temporary professionals as a stopgap until they can fill openings on their permanent staffs.

The second most cited reason healthcare facilities use temporary allied professionals, cited by 71% of survey respondents, is to fill in for vacancies caused by staff departures. Turnover rates among healthcare professionals often are high, and turnover in a variety of healthcare professions has been exacerbated by COVID-19. The survey suggests that healthcare facilities are using temporary allied healthcare professionals as a means to fill service gaps caused staff attrition.

Thirty-nine percent of survey respondents said they use temporary allied healthcare professionals to address rising patient needs while 36% said they use them to cover for staff members on vacation. More than one-fifth (22%) said they use temporary allied healthcare professionals to supplement staff during peak usage times. The use of temporary professionals to “right staff” – staffing up or down as appropriate based on fluctuations in patient utilization – has become a common practice for healthcare facilities seeking to meet patient needs while controlling costs.

## Preventing Burnout is Benefit Number One

Survey respondents indicated that preventing staff burnout is the primary benefit of using temporary allied healthcare professionals. About three quarters (73%) of those surveyed said that preventing burnout of their existing staff is one of the benefits of using temporary allied healthcare professionals.

This finding underscores the damaging effect COVID-19 has had on the morale and wellbeing of many healthcare professionals. While burnout among healthcare professionals was a concern before the pandemic, it has become an even greater concern since. The use of temporary allied healthcare professionals can relieve the work burden on permanent staff, allowing them more free time to focus on family and personal wellbeing. It is a tangible way for healthcare facilities to show support for their staffs, beyond thank you notes, staff parties and other forms of encouragement.

Two-thirds of survey respondents (66%) indicated that providing care continuity is a benefit of using temporary allied healthcare professionals. This has been a longstanding reason why healthcare facilities use temporary professionals, pre-dating COVID-19. Staffing gaps can reduce patient access to needed services, eroding patient satisfaction, and causing patient outmigration to competitors. Temporary professionals can maintain continuity of care, which has a significant impact on both healthcare outcomes and patient retention.

One quarter of those surveyed (24%) indicated that preventing revenue loss is one of the benefits of using temporary allied professionals. Without an adequate number of laboratory technologists, imaging technologists and other allied healthcare professionals, healthcare facilities cannot generate revenue from many types of ancillary services that are important to their bottom lines. Temporary allied healthcare professionals can help ensure both continuity of care and continuity of revenue.

Similarly, 7% of survey respondents indicated that temporary allied healthcare professionals can reduce medical errors and readmissions, for which healthcare facilities can be financially penalized, while 7% said temporary allied healthcare professional can help ensure quality-based reimbursement, which is dependent on patient access to care and favorable outcomes.

## Role of Temporary Allied Professionals in COVID-19

The majority of those surveyed (53%) indicated that temporary allied healthcare professionals have been moderately involved, very involved or extremely involved in addressing patient needs caused by COVID-19 at their facilities. The remaining 47% said that temporary allied healthcare professionals have been slightly involved or not at all involved.

The level of involvement of allied healthcare professionals in COVID-19 related care varies by type of professional. As noted above, respiratory therapists and laboratory technologists can be very involved in COVID-19 care, while a wide range of other types of healthcare professionals may not be.

## Rating the Skill Level of Temporary Allied Healthcare Professionals

Survey respondents were asked to rate the general skill level of temporary allied healthcare professionals. The majority (65%) rated their skills as either good or excellent. About one third (32%) rated their skills as average, while fewer than 4% rated their skills as either poor or terrible.

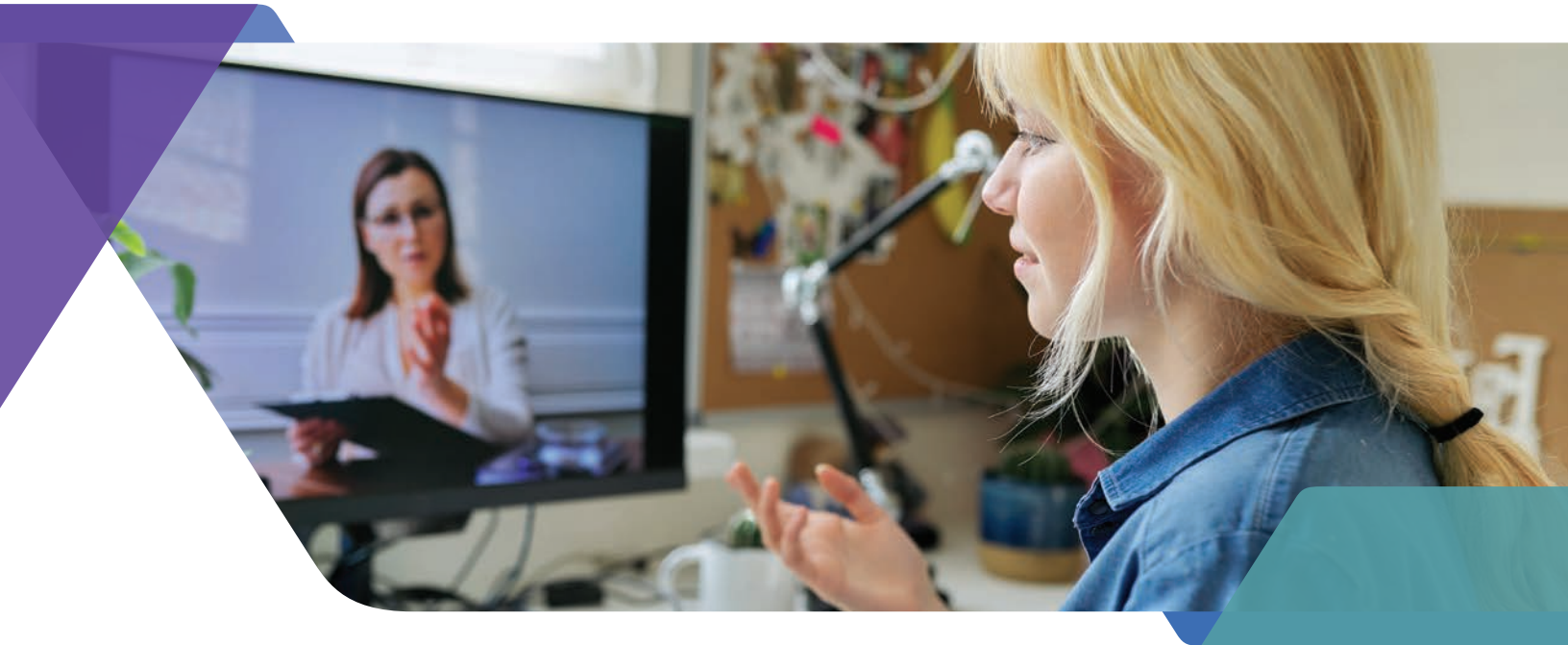
Temporary allied healthcare professionals today are rigorously screened because staffing agencies are at risk for their malpractice insurance and because agencies compete with each other based on the quality of professionals they are able to provide. As a result, the quality of temporary allied healthcare professionals is generally considered to be high, or at least average, by the majority of those surveyed.

## Acceptance by Peers, Patients and Managers

Temporary professionals of various types (including allied professionals) now are common at many healthcare facilities and the survey indicates they are generally accepted by their peers, managers, and patients.

The majority of those surveyed (83%) indicated that temporary allied healthcare professionals are accepted by their colleagues, while only 1% said they are not accepted. Ninety-four percent said allied healthcare professionals are accepted by department leaders, while less than 1% said they are not. Eighty-two percent said temporary allied healthcare professionals are accepted by their patients, while 0% said they are not.





The perceived skill level of temporary allied professionals, referenced above, may be one reason for wide rates of acceptance. In addition, the majority of those surveyed (72%) indicated that temporary allied healthcare professionals are as productive or more productive than members of the permanent staff. Given adequate levels of skill and productivity, and the fact they may be relieving existing staff of work burdens and long hours, allied healthcare professionals typically work side by side with members of the permanent staff in amity. In some cases, patients may be aware that they are being seen by temporary allied professionals, and in other cases they may not. None of those surveyed indicated that allied healthcare professionals are not accepted by patients.

## Use of Temporary Staffing Agencies

When asked how many staffing agencies they work with when seeking temporary allied healthcare professionals, close to half of respondents (46%) indicated they work with only one. However, the majority (54%) work with two or more, while 13% work with four or more.

Temporary staffing agencies typically are paid on a contingent basis, with fees due only when temporary professionals have been placed. Their client contracts rarely call for exclusivity. This allows healthcare facilities to work with multiple agencies and provides incentive for agencies to ensure rapid placement of temporary allied healthcare professionals.

Not surprisingly, the second most important factor in selecting a staffing agency, cited by 82% of those surveyed, is the time in which the agency is able to fill positions. As was referenced above, both continuity of care and revenue are jeopardized when allied healthcare positions are not fully staffed. The morale of existing staff also may be at stake. It is incumbent upon staffing agencies to have a sufficient number of providers in its pool, and to provide efficient enough licensing and credentialing services, to place allied professionals in a timely manner.

Those survey indicates that price is a tertiary consideration when selecting an allied healthcare professional staffing agency. About one-fifth (21%) of those surveyed identified pricing as an important consideration when selecting a staffing agency, while 12% indicated that customer service is an important factor. The survey therefore suggests that when selecting a staffing agency, the choice is centered around the provider – both the quality of the allied professional being placed and the speed with which he or she is placed.



Cost, however, is the primary reason why healthcare facilities may choose not to work with an allied healthcare staffing company. The majority of those surveyed (56%) indicated that cost would be an impediment to working with a staffing agency, while 30% said the learning curve required for temporary allied professionals to become familiar with equipment and procedures would be impediment. An additional 27% indicated that licensing would be an impediment while 25% indicated lack of familiarity with the department or practice would be an impediment.

## Conclusion

AMN Healthcare's 2021 Survey of Temporary Allied Healthcare Professional Staffing Trends indicates that the use of temporary providers at hospitals, medical groups, and other healthcare facilities, common in medicine and nursing, also is widespread in the allied healthcare professions. Ninety-six percent of those surveyed indicated they have used temporary allied healthcare professionals in the last year, while 75% currently are looking for allied healthcare professionals.

The widespread use of temporary professionals is a signal that worker shortages exist. These shortages have been observed among physicians and nurses, and the survey suggests they now extend to the allied healthcare professions.

The survey indicates that respiratory therapists are in most demand among the allied healthcare professions, with demand being accelerated by COVID-19, which has caused or exacerbated respiratory problems among many patients. Also in strong demand are laboratory technologists, radiologic technologists and physical, occupational and speech therapists. Demand for these professionals is being driven by population aging, advances in technology and, in some cases, by COVID-19.

Hospitals, medical groups, and other healthcare facilities use temporary allied healthcare professionals primarily to fill gaps while they seek permanent staff, further indicating that various types of allied health care professionals are in short supply. The primary benefit of using temporary allied healthcare professionals is to prevent burnout of the existing staff. This finding underscores the challenge many healthcare facilities face in retaining allied healthcare professionals and the damage COVID-19 has done to the morale and wellbeing of many types of healthcare professionals.

The survey also indicates that the skill level and productivity of allied healthcare professionals is generally deemed to be adequate or better and that allied healthcare professionals are accepted at their work sites by their peers, managers and by patients.

For more information about this survey, please contact:

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