A photograph of three healthcare workers in blue scrubs. A man in the foreground is smiling broadly, looking towards the camera. Behind him, two women are also smiling and looking towards the right. They appear to be in a hospital or clinical setting. The image is partially obscured by a large blue diagonal graphic that serves as a background for the text.

Leaning in During Lean Times: Resource Management Solutions

Benjamin Kenyon, CHESP, T-CHEST, CMIP
Doe Kley, RN, MPH, T-CHEST, LTC-CIP, CIC

Internal

About Today's Speakers

Benjamin Kenyon

CHESP, T-CHEST, T-CSCT, T-CNACC, CMIP
EVS Manager at Saratoga Hospital



Doe Kley

RN, MPH, T-CHEST, LTC-CIP, CIC
Clorox Healthcare – Infection Prevention Fellow



Session Description



- ▶ The pandemic took a toll on US healthcare systems and the healthcare workforce with financial struggles and the Great Resignation — resulting in critical staffing shortages — due to stress and burnout. This has resulted in low morale among remaining staff.
- ▶ This session will provide a snapshot of the current healthcare financial and staffing situation. We will:
 - Review practical solutions and best practices to help with staff recruitment and retention,
 - Help existing teams to safely complete their workload without lowering patient satisfaction, and
 - Arm leaders with what is needed to get them through these tough times.

Learning Objectives



Describe current state of U.S. healthcare finances and staffing.



Evaluate impact of EVS staffing challenges on healthcare facility's bottom line and patient safety & satisfaction.



Analyze role of education and training in staff retention.



Discuss 3 potential solutions to aid EVS leaders when resources are limited.



The Post-Pandemic State of Healthcare



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Poll Question



In one word, let us know
your top challenge in your
EVS department right now?

The Pandemic Took a Toll on our Healthcare System



US Rates as of 3/10/2023*

Total Cases
103,804,263

Total Deaths
1,123,836



3 in 4 Americans have had COVID-19²



Overall hospitalization rate: 5.7% and 25.9% for older patients³

References:

1. John Hopkins University. COVID-19 Pandemic. Available from <https://gisanddata.maps.arcgis.com/apps/dashboards/bda7594740fd40299423467b48e9ecf6>
2. CDC. COVID Tracker. Available from [cdc.gov](https://www.cdc.gov/covid/tracker/)
3. Griffin I, et al. Estimates of SARS-CoV-2 Hospitalization and Fatality Rates in the Pre-vaccination Period, US. Emerging Infectious Diseases; Vol 30, No. 6; June 2024

Hospital Financial Status



U.S. Hospital YTD Operating Margin Index November 2021-December 2023



Graph Source: KaufmanHall¹

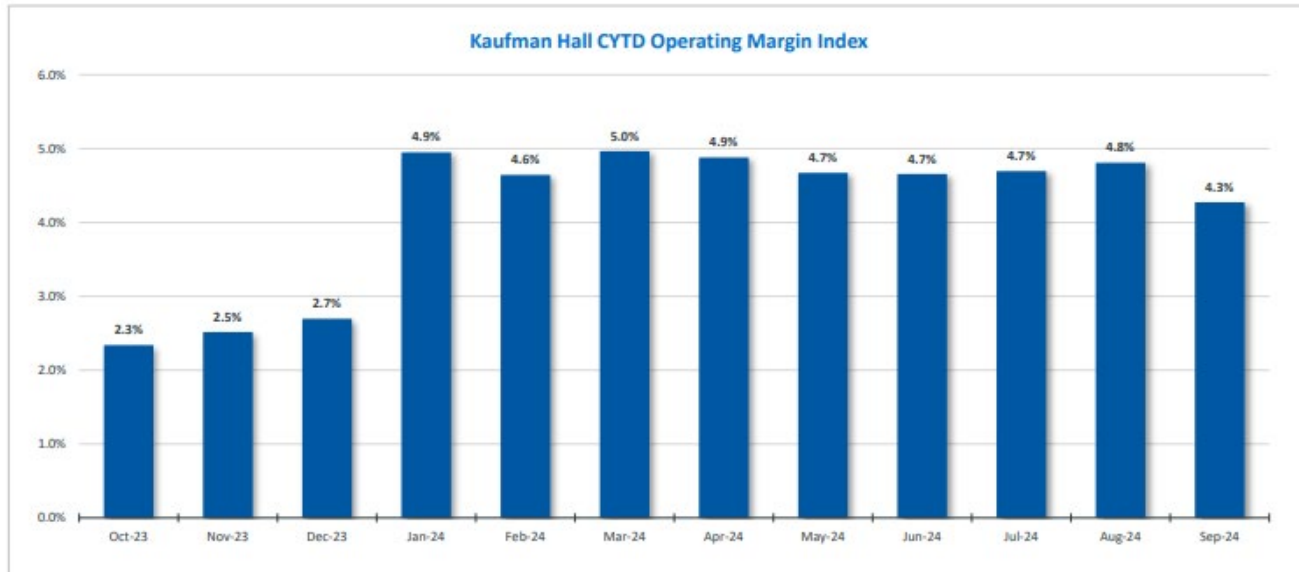
Healthcare bankruptcies increased 84% in 2022²

40% of US hospitals are losing money¹

References:

1. KaufmanHall. The Numbers Behind the Numbers, Feb 2024 [Internet]. Available from [KaufmanHall.com](https://www.kaufmanhall.com)
2. HealthExec. Healthcare bankruptcies jumped 22% in 2022 [Internet]. Available from [HealthExec.com](https://www.healthexec.com)

Hospital Financial Status: Today-ish



Head Winds²

- ▶ Low patient volumes
- ▶ Labor expenses
- ▶ Cost of supplies
- ▶ Inflation

Graph Source: KaufmanHall¹

2019 (pre-pandemic) median operating margins = 7%³

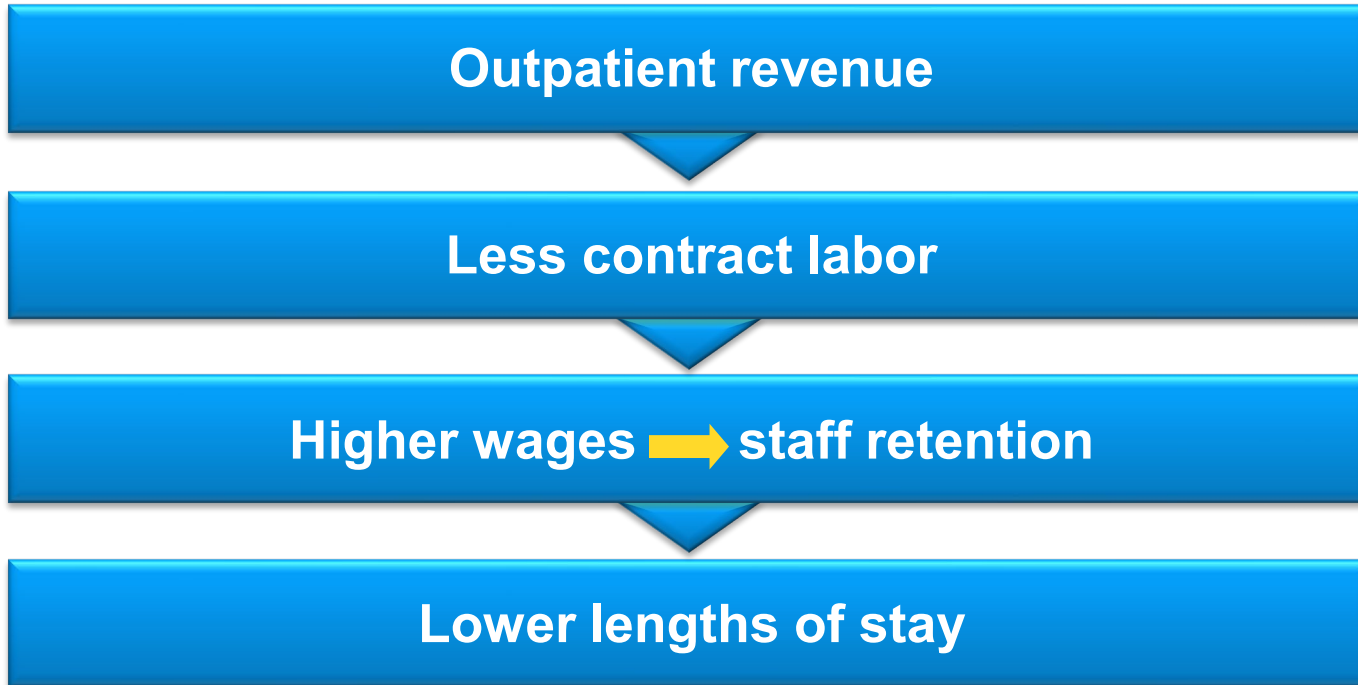
References:

1. KaufmanHall. National Hospital Flash Report, Sep 2024 [Internet]. Available from [KaufmanHall.com](https://www.kaufmanhall.com)
2. Strata Decision Technologies. StrataSphere Research Report: Signals, Trends, and KPIs: The Changing Face of Healthcare Finance, 2021. Available from [Strata Decision Technologies](https://www.stratadecision.com).



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4 Reasons that Some Hospitals are Performing Better

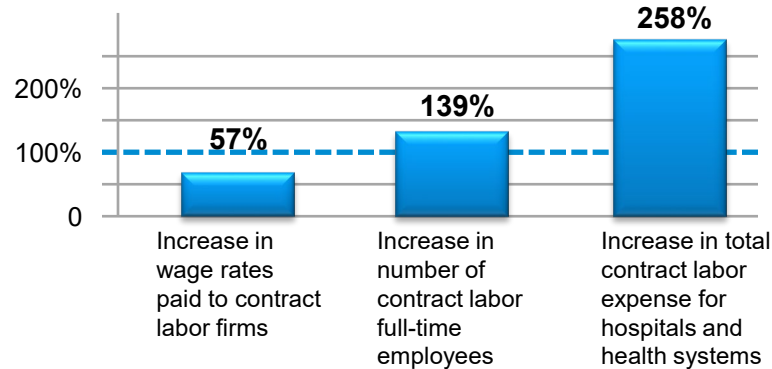


References:

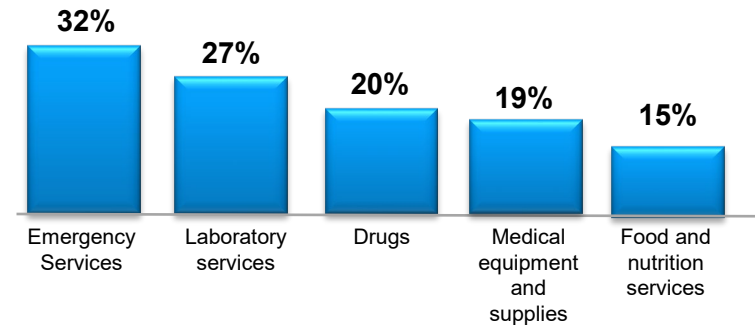
1. KaufmanHall. The Numbers Behind the Numbers, Feb 2024 [Internet]. Available from [KaufmanHall.com](https://www.kaufmanhall.com)

A closer look at those head winds...

1 Contract labor expenses skyrocketed, 2019 – 2022



3 Expense increases per patient, 2019 – 2022



"The Financial Stability of America's Hospitals and Health Systems Is at Risk as the Costs of Caring Continue to Rise," AHA, April 2023

2 Overall ALOS increase 19%



4 Expense growth more than 2X Medicare reimbursement

Hospital pocketbooks weren't the only thing that took a hit...



Pandemic Fallout: The Great Resignation



- ▶ **Nurses:** ~100,000 RNs have left the workforce; 800,000 intend to leave the workforce by 2027.¹
- ▶ **Physicians:** 2/3^{rds} of reported considering an employment change and >1/3rd contemplating early retirement.¹
- ▶ **EVS:** 9 in 10 experienced burnout in last 2 years.²

The Great Resignation

The mass exodus of workers across all sectors during the pandemic

20-30% workers have left healthcare since the pandemic began due to burnout³

References:

1. AHA. 2024 Health Care Workforce Scan. Available from [aha.org](https://www.aha.org)
2. CloroxPro. 2023 Clean Index Report.
3. Physicians Practice. Staff shortages – The root cause of the problem. Available from [physicianspractice.com](https://www.physicianspractice.com)



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What about EVS Staffing?



Pre-pandemic EVS staff turnover rate was 10%¹.

~75% of hospitals reported inability to fill key positions²

Staffing makes up ~75-80% of the EVS Dept budget³

Cost of replacing an employee: 1.5-2X their annual salary!⁴

References:

1. AHE . 2019 Annual Trends Report. Available from ahe.org
2. Hany's. Critical Condition: New Yorkers are losing access to care. Available from hanys.com
3. Healthcare Facilities Management. Environmental services staffing methodologies, 2015. Available from hfm magazine.com
4. McKinsey Health Institute. Addressing employee burnout: Are you solving the right problem? [Internet]. Available from MHI.

What is driving the staffing shortages?



Burnout



Better Pay,
lower risk work



Aging Workforce

References:

- AHA. Data Brief: Health Care Workforce Challenges Threaten Hospitals Ability to Care for Patients, 2021. Available from [aha.org](https://www.aha.org).
- BusinessWire. 67% of HCWs are Experiencing Burnout, Leading to Staffing Shortages, 2022. Available from [businesswire.com](https://www.businesswire.com)
- HealthManagement. Compensation, Burnout, and Healthcare Challenges: Doximity Report 2024. Available from [HealthManagement](https://www.healthmanagement.com).

Short Staffing Driver #1: Burnout



- ▶ Excessive workloads¹
- ▶ Limited say in scheduling¹
- ▶ Lack of organizational support¹
- ▶ Long hours²
- ▶ Hiring issues, short staffed²
- ▶ Insufficient time for training²
- ▶ Stressed, stretched thin³
- ▶ Emotional, physical exhaustion³

What is Burnout?

It's a **workplace issue**. It's characterized by a high degree of **emotional exhaustion** and **depersonalization** (i.e., **cynicism**) and a **low sense of personal accomplishment** at work.

Leading causes
of burnout as
identified by cleaning
professionals

40%

Long hours

61%

Hiring issues/short
staffing

44%

Not enough time
for training

Image Source: CloroxPro. 2023 Clean Index Report.

References:

1. HHS. Health Worker Burnout, May 2024. Available from [hhs.gov](https://www.hhs.gov)
2. CloroxPro. 2023 Clean Index Report
3. Mental Health America [2021]. [The mental health of healthcare workers in COVID-19](#). Alexandria, VA: Mental Health America.

Short Staffing Driver #2: Better Pay Elsewhere



"I'm out of here Ben!"



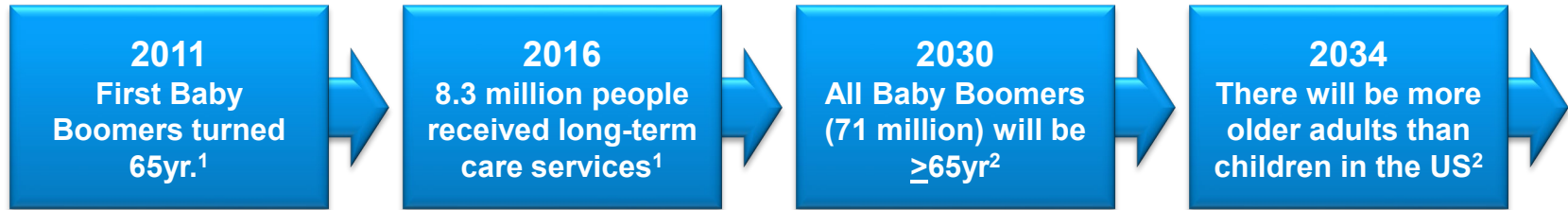
Sad Fact: EVS workers are paid less than food service workers with wages below the poverty level for family of four.^{2,3}

References:

1. HealthManagement. Compensation, Burnout, and Healthcare Challenges: Doximity Report 2024. Available from [HealthManagement](#).
2. Harvard Medical School Center for Primary Care. EVS Workers: Our First Line of Defense Against Infection, 2020. Available from [hms.harvard.edu](#)
3. Zippia. Service Worker vs Food Service Worker. Available from [zippia.com](#)

Short Staffing Driver #3: Aging Workforce

Projections



Key Facts:

- ▶ Every day, 10,000 Americans turn age 65yr.¹
- ▶ 85% of individuals over 65 have at least 1 chronic condition.³
- ▶ Most Americans >65yr will need long-term care services at some point in their lives.¹

References:

1. The Checkup. Long-Term Care Statistics 2022. [Internet]. [Cited 2022 May 20]. Available from <https://www.singlecare.com/blog/news/long-term-care-statistics/>
2. US Census Bureau. Older People Projected to Outnumber Children for First Time in US History. [Internet]. [Cited 2022 May 20]. Available from [https://www.census.gov/newsroom/press-releases/2018/cb18-41-population-projections.html#:~:text=%E2%80%99CB%202034%20\(previously%202035\),decade%20for%20the%20U.S.%20population.](https://www.census.gov/newsroom/press-releases/2018/cb18-41-population-projections.html#:~:text=%E2%80%99CB%202034%20(previously%202035),decade%20for%20the%20U.S.%20population.)
3. NIH. Supporting Older Patients with Chronic Conditions. [Internet]. [Cited 2022 May 20]. Available from [https://www.nia.nih.gov/health/supporting-older-patients-chronic-conditions.](https://www.nia.nih.gov/health/supporting-older-patients-chronic-conditions)



The Impact to EVS Departments



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Impact of Current Financial Situation on EVS

FTE Audits

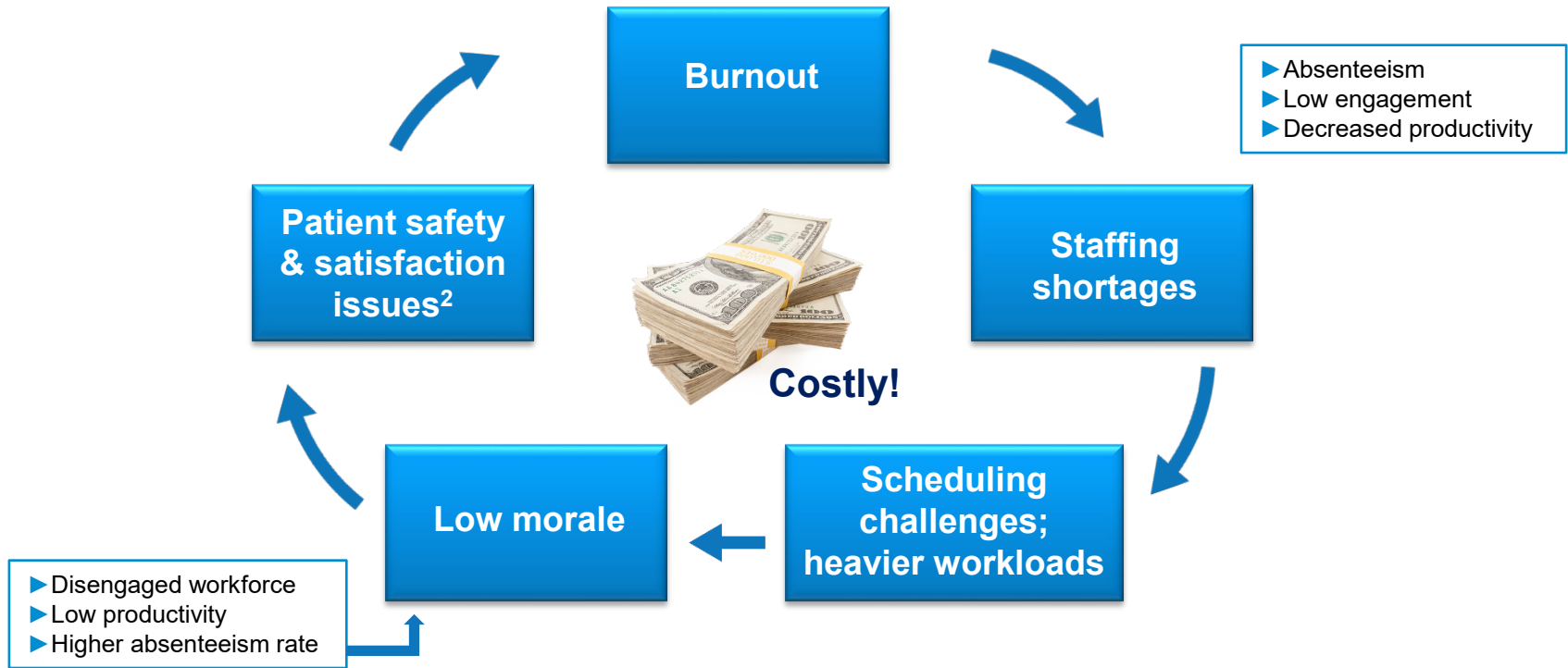
Contract workers

Budget cuts (OT, education & training, etc)

Capital Equipment



Impact of Burnout & Quiet Quitting on EVS Depts¹



References:

1. McKinsey Health Institute. Addressing employee burnout: Are you solving the right problem?. Available from [mckinsey.com](https://www.mckinsey.com)
2. HHS. Health Worker Burnout, May 30, 2024. Available from [hhs.gov](https://www.hhs.gov)

Staffing Challenges Strain the EVS Dept



Scheduling



Overtime



Workload

Impact on Patient Satisfaction



Average HCAHPS Cleanliness Scores ¹		
Year	Average Cleanliness Score	Comments
Jul 2018-Jun 2019	76	Pre-pandemic
Jul 2020-Dec 2020	73	Peak of pandemic
Jul 2022-Jun 2023	75	Coming out of the pandemic

Ben's Experience

- ▶ Unit D3 is in the 99th percentile
- ▶ Unit D2 much lower 39th percentile

Why??

****NOTE: January 1, 2025****
New HCAHPS survey questions go live²

References:

1. HCAHPS. Summary Analysis. Available from hcahpsonline.org
2. HCAHPS. Updated HCAHPS Survey. Available from hcahpsonline.org



Internal

Impact of Patient Safety



- ▶ 19% increase in errors^{1,2}
- ▶ Increase in infections:
 - HAIs¹ (MRSA)³
 - *C. auris*⁴
 - Multidrug-resistant organisms⁵

14% increase in MRSA
(2021 compared to 2020)³

HAI Type	Acute Care Hospital
LabID MRSA bacteremia	↑ 14%

60% increase in *C. auris*
(active cases only)^{4,5}

Year	<i>C. auris</i> Case Counts (U.S.)
2019	478
2020	757
2021	1,474
2022	2,377

15% increase in MDRO infections and deaths!⁵

References:

1. HHS. Health Worker Burnout, May 30, 2024. Available from [hhs.gov](https://www.hhs.gov)
2. Advisory Board. Healthcare is undergoing seismic shifts. Here's how to prepare. Available from [advisory.com](https://www.advisory.com)
3. CDC. 2021 National and State HAI Progress Report. Available from [cdc.gov](https://www.cdc.gov)
4. CDC. Tracking *C. auris*. Available from [cdc.gov](https://www.cdc.gov)
5. CDC. COVID-19 & Antimicrobial Resistance, 2022 Special Report. Available from [cdc.gov](https://www.cdc.gov)



Practical Solutions



****Internal****

Poll Question



What have you implemented to address **EVS staffing** challenges at your facility?

Poll Question



What have you implemented in your department to address the **financial** challenges at your facility?

Recruiting Ideas

Offer a competitive wage

Reconnect/rehire
previous employees¹

Outreach (e.g., veterans,
incarcerated,
immigrants, etc.)¹

Employee referral
program²



Highlight potential career
growth opportunities²

Train while paying
program³

References:

1) AHA. 2024 Health Care Workforce Scan. Available from [aha.org](https://www.aha.org)

2) Health Facilities Magazine. Developing career opportunities for frontline EVS, 2019. Available from [hfmagazine.com](https://www.hfmagazine.com)

3) Becker's Hospital Review. How leaders are building the healthcare workforce pipeline. Available from [beckershospitalreview.com](https://www.beckershospitalreview.com)

Retention Ideas

Improve
workplace culture

Offer career
advancement

Offer incentives

Improve
engagement

“If you can create an environment where people are not looking for jobs, they won’t leave for jobs”

– Jonathon Goldberg, Edward-Elmurst Health



Reduced
frontline
turnover rate
by a **THIRD**



References:

- 1) AHA. 2024 Health Care Workforce Scan. Available from [aha.org](https://www.aha.org)
- 2) Harvard Business Review. Tackling the Health Care Workforce Crisis through Human Innovation. Available from [optum.com](https://www.optum.com)
- 3) McKinsey Health Institute. Addressing employee burnout: Are you solving the right problem? [Internet]. Available from MHI.

Retention: Why Education and Training Programs are Key



Trained Employees Stay Longer!

Increases engagement¹

Increases feeling of value¹

Creates a safe environment¹

Increases confidence²

Reduces burnout⁴

Provides a career path/upward mobility

"The only thing worse than training your employees and having them leave is not training them and having them stay."

HENRY FORD

References:

1) AHA. 2024 Health Care Workforce Scan. Available from [aha.org](https://www.aha.org)

2) CloroxPro 2023 Clean Index Report

3) Healthcare Facilities Today. Training Frontline Healthcare Staff for Effective Pathogen Control. Available from [healthcarefacilities.com](https://www.healthcarefacilities.com)

4) Razia M, et al. Strategies and Interventions to Improve Healthcare Professionals' Well-Being and Reduce Burnout. [J Prim Care Community Health](https://www.jprimcare.com). 2023 Jan-Dec

Education and Training Considerations



**“You think training is expensive?
Do the math for repeat training for turnover replacements!”**

– Doe and Ben

References:

1. Medline. The role of workforce education in retaining and attracting healthcare staff. Available from [medline.com](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3125000/)
2. AHE. AHE Education. Available from [ahe.org](https://www.ahe.org/)

Retention: Fix Systemic Problems

Fix toxic workplace —
single largest predictor of resignation¹:

- ▶ Unreasonable workloads
- ▶ Unfair treatment
- ▶ Low autonomy
- ▶ Lack of social support

Solutions¹:

- ▶ Inclusivity and belonging
- ▶ Supportive growth environment
- ▶ Freedom from stigma
- ▶ Organizational commitment
- ▶ Leadership accountability
- ▶ Access to resources
- ▶ Adaptability and resiliency skill building

**“Train
employees well
enough so they
can leave, but
treat them well
enough that they
won’t want to”**

– Richard Branson

Still Short Staffed? Strategies to Maximize Resources



Assess current efficiencies^{1,2}

Reassess “We’ve always done it this way”

Leverage technology

Consider ready-to-use products³

Prioritize¹

Educate and Train^{2,4}

References:

1. CDC. Environmental Cleaning Procedures. Available from [cdc.gov](https://www.cdc.gov)
2. Health Facilities Management. Improving EVS departmental efficiencies, 2019. Available from [hfmagazine.com](https://www.hfmagazine.com)
3. Wiemken T et al. The value of ready-to-use disinfectant wipes: Compliance, employee time, and cost. AJIC. 2014;42:329-30
4. Schneringer K. 3 Strategies to Streamline Cleaning Labor in Senior Living Facilities. [Healthcare Facilities Magazine](https://www.healthcarefacilitiesmagazine.com).

Patient Satisfaction: Back To Basics

Inventory

Educate & train¹

Standardize products
& protocols²

Cleaning schedules

Slow down

Communication
(e.g., AIDET)³

Inform

Quality audits²



References:

1. Australian Commission on Safety and Quality in Health Care. Environmental cleaning practices in small health service organisations, 2023. Available from [safetyandquality.gov.au](https://www.safetyandquality.gov.au)
2. CDC. HAIs: Considerations for Reducing Risk: Surfaces in Healthcare Facilities. Available from [cdc.gov](https://www.cdc.gov)
3. Scott, J. Utilizing AIDET and other tools to increase patient satisfaction scores. *Radiol Manage*; 2012: 34:29-33

Poll Question



What's been done at your facility to get EVS staff engaged?

Engaging your Staff: Addressing (and Avoiding) Burnout

- ❑ **Demonstrate** how their work is tied to **purpose**¹
- ❑ **Support** well-being, safety, and satisfaction²
- ❑ **Check in** ^{3,4}
- ❑ **Listen** to improve processes, workflows, workplace culture^{3,5}
- ❑ **Encourage** use of leave³
- ❑ **Increase work schedule flexibility**³
- ❑ **Combat bias, racism, discrimination** in the workplace³
- ❑ **Make work FUN!**

74% Of employees report they are more effective at their job when they feel heard.⁵



References:

1. Harvard Business Review. Tackling the Health Care Workforce Crisis through Human Innovation. Available from [optum.com](https://www.optum.com)
2. AHA. 2024 Health Care Workforce Scan. Available from [aha.org](https://www.aha.org)
3. HHS. Health Worker Burnout, May 30, 2024. Available from [hhs.gov](https://www.hhs.gov)
4. CDC. NIOSH Impact Wellbeing Campaign. Available from [cdc.gov](https://www.cdc.gov)
5. Optum. Health Care Workforce Toolkit. Available from [optum.com](https://www.optum.com)

Ideas for Making Work Fun



- Celebrate birthdays
- Provide a meal for the team
- Games with prizes
- Shout out board (huddles)
- Off site events
- Volunteer work
- Hold meetings outside on nice days
- Community garden on hospital grounds

Volunteer Work Ideas

- ▶ Assemble Valentines boxes for Peds
- ▶ Team fundraiser



Game Ideas

- ▶ Guess the employee (\$5 gift card)
- ▶ Bingo using staff pictures
- ▶ Bed-making races
- ▶ Scavenger hunts

References:

1. Team Building. 13 Team Building Ideas for Healthcare Professionals. Available from teambuilding.com

Ben's Zen Den



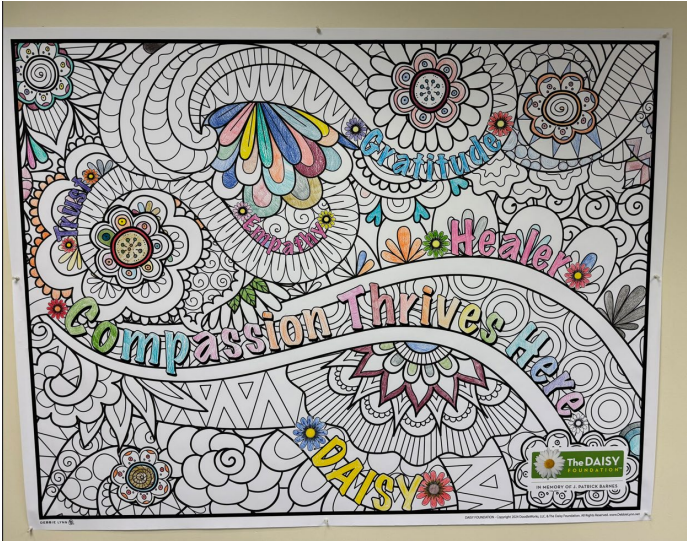
REGENCY SLED Health System
HARTSDALE HOSPITAL

The Zen Den.

Enjoy a moment of relaxation.

This room is designated for
EMPLOYEES to relax and recharge.

Massage Chair Guidelines
Wash your hands
Cover chair with sheet
Have Socks on
To lower chair to start position
Press and hold the Power/Pause button
on the screen





Making Work Fun (and Relaxing): Adult Coloring

Image used with permission from [Debbie Lynn, Inc.](#)



Summary



Internal

Resources



- ▶ [American Hospital Association \(AHA\)](#) - How Boards Can Support Workforce Behavioral Health
- ▶ [Association for the Health Care Environment \(AHE\)](#)
- ▶ [CDC's Cleaning Frequency Risk Assessment](#)
- ▶ [CDCs Impact Wellbeing Program](#)
- ▶ [CDC's Project Firstline](#)
- ▶ [Debbie Lynns Adult Coloring Posters](#)
- ▶ [HHS Health Worker Burnout](#)
- ▶ Leverage your vendors – no need to reinvent the wheel!

Key Take-Aways



1. A better understanding of the **financial fallout** of the pandemic and the pressures our leadership are facing.
2. The **Great Resignation** brought on by burnout has led to severe healthcare worker shortages, including EVS.
3. Recommendations were shared to help with **recruiting and retention** as well as to addressing **burnout**.
4. Poll responses demonstrated how we can **do more with less to improve efficiency**.
5. **Common themes**: **career pathways** and ongoing **education & training** are key to happy and productive employees.

Speaker Contact Info

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Follow us on LinkedIn!



Appendix (Bio's)



****Internal****

Speaker Bio



Benjamin Kenyon, **CHESP, T-CHEST, T-CSCT, T-CNACC, CMIP** **EVS Manager at Saratoga Hospital**

Ben is the evening environmental services manager for Saratoga Hospital in Saratoga Springs, NY. which is part of the Albany Med Health System in upstate New York. He has been certified to train the CHEST, CSCT, & CNACC programs at his facility and is closing in on 12 years of working within the environmental services department. Ben has both taken and facilitated many of AHE's online course offerings. At his facility, besides managing 2nd and 3rd shift, he assists with the infection prevention committee and helps oversee the work being done in the surgical suite.

Ben has served as a panelist on the webinar: Open Forum: Healthcare Environmental Services' Response to COVID-19 Challenges in May of 2020. He has served three times on AHE's Exchange Planning Committee and is member of the Emerging Leaders Task Force.

Speaker Bio



Doe Kley, RN, MPH, LTC-CIP, CIC **Infection Prevention Fellow** **Clinical and Scientific Affairs, Clorox Healthcare**

Doe Kley is an Infection Prevention Fellow within Clorox Healthcare's Clinical and Scientific Affairs team and is passionate about helping glean insights and solutions to tackle the many challenges faced in infection prevention. Her role focuses on providing consultative services and developing practice tools using her nearly 20 years of clinical expertise in acute care infection prevention from working in large healthcare systems, such as Intermountain Healthcare and Kaiser Permanente.

Doe is a registered nurse and received her Master of Public Health from the University of Nevada, as well as a Bachelor of Microbiology from Weber State University. She teaches an infection control course for the Ohio State University (OSU) and is also dual-board certified in infection prevention and epidemiology in both acute and long-term care. Additionally, Doe is certified to train EVS through Association for the Healthcare Environment (AHE) and is currently a member of AHE, the Association for Professionals in Infection Control & Epidemiology (APIC), the Association of periOperative Registered Nurses (AORN), and the Society for Healthcare Epidemiology of America (SHEA). Doe is active on several committees including Test Committee for the Certification Board of Infection Control & Epidemiology (CBIC) and the Advisory Council for the Pearce Foundation Environmental Services Optimization Playbook (EvSOP). She also served on the board of directors for California APIC Coordinating Council (CACC) in 2022.