

A mounting casualty of coronavirus crisis: Health care jobs

April 4 2020, by Marc Levy



In this photo made on, April 2, 2020, nurse anesthetist Jessica Poole checks for updates on the coronavirus pandemic in her home office in Greensburg, Pa. Poole, until a couple weeks ago, worked for a private anesthesia practice that serves the Pittsburgh area until she was laid off. She is one of the tens of thousands of medical workers across the United States suddenly out of work as operating rooms and doctor's offices go dark, casualties of urgent calls to prioritize coronavirus patients at overwhelmed hospitals and of the economic waves the crisis is churning. (AP Photo/Keith Srakocic)

Tens of thousands of medical workers across the United States are suddenly out of work as operating rooms and doctor's offices go dark, casualties of urgent calls to prioritize coronavirus patients at overwhelmed hospitals and of the economic waves the crisis is churning.

Even as hospitals scrounge for professionals from the industry to treat the burgeoning numbers of people with COVID-19, others are on the sidelines as elective procedures, diagnostics and appointments are canceled or postponed.

For instance, many nurse anesthetists in Pennsylvania have been laid off, even though they are particularly critical to the coronavirus response because they can help intubate patients and manage them on ventilators.

"I certainly never thought there would be a day as a nurse that I would be filing for unemployment, so it's quite surreal for all of us," said Jess Poole, a nurse anesthetist who, until a couple weeks ago, worked for an anesthesia practice in the Pittsburgh area.

Big-city physician and specialist groups, tiny independent hospitals from Oregon to Connecticut, and big multistate hospital systems such as Steward Health Care are seeing big dropoffs in revenue and laying off or furloughing hundreds of workers.

A tally of out-of-work medical professionals is elusive, since the coronavirus began taking a devastating toll on jobs only in mid-March. Many institutions have said nothing publicly, quietly making cutbacks, and the monthly jobs report issued Friday by the [federal government](#) showed 42,000 job losses in [health care](#)—just a small indication of what's to come, because the government surveyed employers before the heaviest layoffs hit.

Not all states release that data in real time, although Minnesota reported that from March 16 through March 31, more than 13,600 health care practitioners or technicians filed unemployment claims in that state alone.

Some layoffs, the generally permanent loss of a job, and furloughs, a reduction in hours or a leave of absence with the option to return, are focused on nonclinical staff. Elsewhere, clinical professionals—specialists, lab techs, operating room staffs, nurse specialists, support staff—suddenly find themselves with a cut in pay or hours, or sitting at home, including some in coronavirus hotspots.

In hard-hit Michigan, Mercy Health and Saint Joseph Mercy Health System, which runs eight hospitals in the state, said it will furlough 2,500 workers, including an undisclosed number of clinical staffers, and shift others to jobs "needed to respond to the crisis."

The cuts are driven primarily by pressure from state and federal officials to shelve elective procedures, appointments, diagnostics and other services to preserve [hospital](#) beds, while many patients are postponing appointments to observe social distance restrictions.

For some provider groups and hospitals, the lion's share of their revenue has dried up.

While \$100 billion from the federal relief package signed last month by President Donald Trump might help cover that, it's not clear how the money will be distributed, or how soon, or whether it will be enough.

Erlanger Health System, which operates six hospitals in Tennessee and one in western North Carolina, reported it lost millions of dollars in the past week alone.

"The financial bleeding was immediate," said Chip Kahn, CEO of the Federation of American Hospitals.

The federation said it believes hospitals are eligible to apply for loans in the federal emergency relief bill to maintain payroll or rehire workers, loans that can then be forgiven.

In the meantime, states reeling from the pandemic are calling for help from [medical professionals](#) or relaxing regulations to allow retired workers, students or out-of-state professionals to come to the rescue.



In this photo made on, April 2, 2020, nurse anesthetist Jessica Poole poses for a photograph as she sits on the porch of her home in Greensburg, Pa. Poole, until a couple weeks ago, worked for a private anesthesia practice that serves the Pittsburgh area until she was laid off. She is one of the tens of thousands of

medical workers across the United States suddenly out of work as operating rooms and doctor's offices go dark, casualties of urgent calls to prioritize coronavirus patients at overwhelmed hospitals and of the economic waves the crisis is churning. (AP Photo/Keith Srakocic)

Some hospitals—such as rural hospitals or urban ones with a heavy Medicaid caseload—were on precarious financial footing when the crisis struck, sending some states scrambling to keep them open, including in Pennsylvania and West Virginia.

In North Carolina, Cape Fear Valley Health system is furloughing about 300 employees but offering idled specialty nurses the opportunity to fill open positions as floor nurses.

Hospital executives say they have no choice but to issue furloughs and meet the most immediate needs, while shifting to telemedicine and retraining or moving some clinical staff.

Mercy Medical Center in Springfield, Massachusetts, gave 37-year nurse Bruce Moore the option of a furlough from the cardiac catheterization lab—with no guarantee of a recall—or retrain to care for coronavirus patients on ventilators in the intensive care unit.

Moore took the retraining, with a mix of emotions: worried that he would never be recalled if he went on furlough, wanting to help, and apprehensive about the adequacy of two or three weeks of retraining and the prospect of using rationed masks and gowns, which are in short supply.

"Nurses are being expected to do things that they've never done," Moore said.

Hospital officials say furloughed employees, in most cases, can expect to be recalled if they are needed or when the crisis subsides.

Clinical staff members being sent home are not treating coronavirus patients, or they have little to do in suddenly quiet offices and facilities where there is no crisis, the institutions' leaders say.

"But they may be in areas where there will be growth in the virus, which makes layoffs particularly alarming, because hospitals are gearing up or should be gearing up even in places where coronavirus is not an emergency as it is in other parts of the country," said Tricia Neuman, who directs the Medicare policy program at the Kaiser Family Foundation.

Alex Hlumyk, of Hubbard, Ohio, a certified medical assistant, had been helping screen potential [coronavirus](#) patients before his Steward-owned physicians' practice furloughed him.

"I was pulled into a backroom and told, 'We're furloughing you because we don't have the money,'" Hlumyk said.

He's not sure how he would sign up to help in areas slammed by the virus, and his employer didn't give him any guidance, he said.

"That's the problem with the for-profit health care system," Hlumyk said, citing the tendency of hospitals to compete for resources instead of share them.

In recent days, hospitals watching the spreading outbreak in the Pittsburgh area are building disaster relief plans and contacting Poole, the nurse anesthetist, to see if she would come in in an emergency.

She's saying yes.

"We don't know if or when we're going to be called back to work," Poole said. "We're kind of stuck in between right now."

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