



Reinventing care delivery is essential to solve the clinician shortage



The clinician shortage has reached a new level of urgency as we face rising demand.

Costs continue to rise. Healthcare workers are burned out and leaving in droves. Those who remain to do the work are overburdened.

It's an unsustainable situation, one that can't be solved through workforce hiring or training alone.

A continuous, dynamic reinvention of care delivery is required—a [Total Enterprise Reinvention](#). It becomes a unifying force across every function. It requires new skills and an increased depth of understanding of technology, change management, communication and how to leverage partners to achieve results faster.

Talent strategy and people impact are central to reinvention, not an afterthought. Reinventors that empower their workforce with tools that make their jobs easier, and free clinicians to do what they are trained to do, can build resilience in the organization.

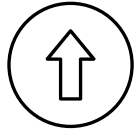
Centered around a strong digital core, a total reinvention of care delivery will help optimize operations and establish a new performance frontier for Reinventors—improving healthcare access, experience and outcomes for years to come.

Accenture research estimates that 70% of healthcare worker's tasks could be reinvented by technology augmentation or automation.¹



The current situation is not sustainable

The workforce deficit problem has worsened in recent years as the healthcare industry has focused more on broad technology innovations than on improving its work model. While technology is an important part of the staffing equation, it alone is not enough to address these four forces that have driven the industry to where it stands today:



1 | Demand continues to rise

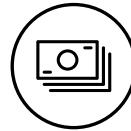
The next 10 years will see a continued rise in the number of 60–90-year-old people, the highest utilizers of healthcare services.² There are about 53.5 million people in this cohort now in the US, but the number will grow by 45% to ~78 million over the next two decades.³ If health systems cannot meet current demand, how can we possibly address this growing tsunami of need?



2 | Capacity is strained

There is a worker shortage in general. In the US, there are 10 million job openings yet only 6 million unemployed workers.⁴ In healthcare, this gap can even be life-threatening. There simply aren't enough clinicians to care for patients. An estimated 6.4 million physicians are needed to meet goals for universal health coverage across the globe.⁵

In the US alone, nearly 500,000 nurses (17% of today's total workforce) are expected to leave the profession in the next five years.⁶ This gap puts added pressure on the workers who remain, leading to fatigue, frustration and burnout—issues health systems are already battling. A depleted clinical workforce affects the quality of patient experiences and outcomes. Just as importantly, the design of a transformation needed to deliver on future demand is going to require the engagement of just these resources, so where will they find that time?



3 | Costs are up

Costs have risen because health systems have had to increase base pay and incentives for their current employees. Many health systems have had to use outside resources to help deliver care, and the cost of replacing employed nurses with agency resources is significantly greater.

Spending on agency staff rose 20% last year in England to reach £3 billion. NHS trusts have paid up to £2,500 to nurses to fill shifts.⁷


In the US, nurses could earn \$150 an hour to be an agency ‘traveler’ versus the \$48 an hour they are paid as hospital staff.⁸ And though the cost picture is beginning to plateau, with large systems renegotiating contracts and repatriating some percentage of employed staff, labor costs will never return to their prior baseline. Even the immediate respite will be short-lived unless we creatively address the escalation in demographic demand trend.



4 | The workforce is retiring

Most concerning of all, this shortage will only escalate as more healthcare workers retire. The International Council of Nurses projects that the current nurse shortage could balloon to 13 million by 2030, with more than 6 million nurses expected to retire over the next decade.⁹ In addition, we are currently unable to train more than 80,000 qualified applicants to US nursing schools each year due to a lack of faculty. With rising demand and a diminishing pool of resources, affordable, equitable and high-quality access is under threat.

The unprecedented challenge for health systems is that *we can never hire our way out of this problem*. For the system CEO, this makes it much less clear as to who they can tap to develop a solution. For example, the HR leader is not able to address the operational transformation needed, nor can the technology leadership drive the clinical process changes on their own. In fact, most systems are currently not structured to address this issue at all.



Accenture's research into [The CHRO as a Growth Executive](#) has found that by activating the growth combination of data, technology and people, organizations stand to gain a premium of up to 11% in productivity. It's the human element that makes a critical difference: When organizations implement data and tech solutions that fail to put people at the center, the premium reduces to just 4%. That 7% gap in productivity underscores the significant impact that people have as an important source of delivering improved outcomes.



Reinventing care delivery from the core

The longstanding care delivery model is unsustainable given demographic, workforce and competitive challenges. The industry simply can't hire and train its way out of this conundrum. Addressing the clinician shortage for the long term calls for making changes now to reimagine work and the workforce, enable technology and transform how care is delivered. Accenture has identified four imperatives that health leaders need to prioritize to reinvent care delivery.

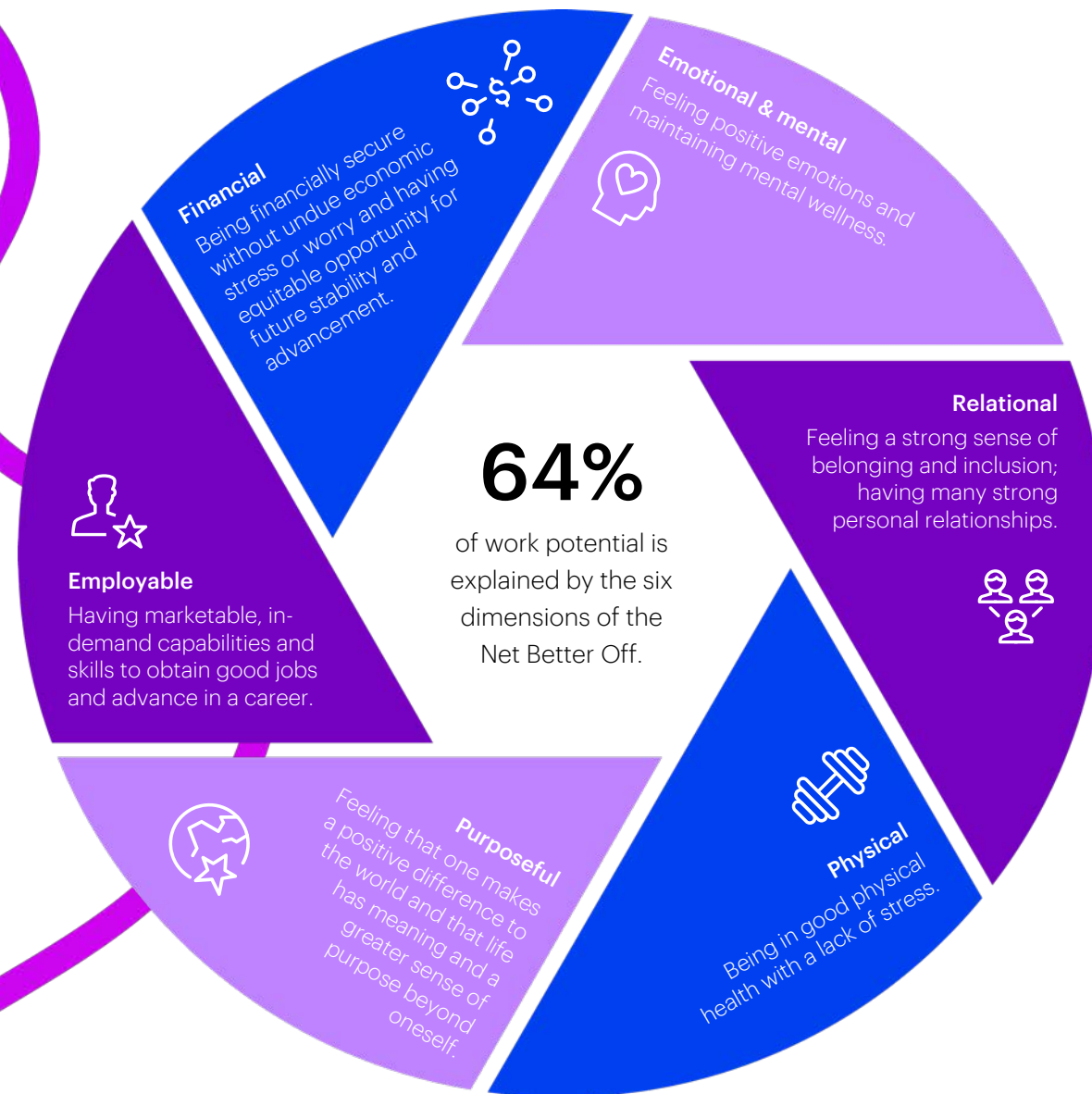


Transform work experiences from the top

Change starts by reinventing care so that healthcare workers have greater wellbeing and better work experiences that leave them happier, healthier and more productive.

Accenture's ["Care to do Better" research](#) across multiple industries in 10 countries showed that satisfying human needs in the workplace unlocks workers' full potential—and that has a significant positive impact on the business. The study references the Accenture ["Net Better Off" framework](#), which quantifies human wellbeing across six dimensions.

Figure 1. The six dimensions of Net Better Off





The multi-country study revealed that the healthcare industry faces a 26% gap between workforce expectations and what employers provide in terms of the Net Better Off framework.

If leaders don't pay attention to these dimensions, they risk continuing or even accelerating the loss of healthcare workers with important skills to other sectors. Leaders can also focus on building omni-connected cultures in which people feel highly connected to each other, their leaders and their work. [Being omni-connected accounts for 59% of someone's intention to stay with an organization.](#)

Delivering on employee needs and expectations has its difficulties, given institutional challenges such as lack of a coherent workforce strategy. Many healthcare executives need to cultivate the skills needed to develop a resilient, sustainable agile management culture that expects and embraces change.

Change in any successful organization is an ongoing process where the goal is continuous improvement. It is not a one and done. For instance, health systems that migrated from paper records to EMRs understand this well. Many aren't getting all the benefits they could from that change because they aren't seizing ongoing opportunities to make the organization more resilient and capable of absorbing change.



Rethink teams and work models to increase capacity

Team designs and work models are fertile ground for continuous improvement and can help move organizations beyond optimization to transformation. However, true agility requires a ‘test and learn’ approach, as opposed to the protocol-driven standardization approach to ‘high-reliability’ that has permeated the healthcare culture for decades.

A major transformation in our thinking will be needed to allow for a focus on standardizing outcomes rather than processes. Transforming teams to successfully operate in different environments or configurations can increase capacity. It will also drive efficiency and improve job satisfaction, which is part of leaving workers Net Better Off.

Reconfiguring task distribution will be needed to allow team members like doctors and nurses to work at the top of their license. Tasks that don’t require their expertise can be allocated to other colleagues, machines or even home caregivers.

Removing tasks from existing roles isn’t just about giving time back, though there will be benefits in terms of reducing burnout and improving downstream metrics, such as ALOS or readmissions.

However, if time back does not increase capacity, then it will only increase cost. Time back must allow for an increase in productivity, whether through seeing more patients, or taking on a greater number of top-of-license tasks. This is the only way to create capacity to serve the growing population of high utilizers.

Imagine that the nursing workforce could be expanded with the help of remote nurses or technology that can alleviate the burden. Aethon’s TUG autonomous robot¹⁰ delivers sterilized surgical supplies, linens to nursing units and equipment in hospitals and food trays, freeing up staff to work on tasks that require human judgment and problem solving.

Automation technology in nursing can free up 20% of repetitive, lower complexity tasks and unlock ~\$50B in potential annual value, according to Accenture estimates.¹¹ Technology is essential to enabling care models and empowering patients and teams to operate in different configurations and environments. It is not about replacing humans with machines. The benefit is that technology can augment and support what humans do.

Remote nurses free up capacity

A Catholic health organization wanted to reduce the impact of nurse shortages and define innovative delivery approaches that could be repeated easily across multiple inpatient care settings.

Accenture worked with the client to develop clinical and business protocols for use of a remote nurse expert to participate in huddles, integrate into floor activities and support the unit.

This improved the capabilities of new nurses while reducing burden on veteran nurses and overtime costs.



Address workforce capacity with a blend of technology and human ingenuity

Technology has been helping healthcare workers for decades, but its full potential has not been realized. Moving to a model that activates the power of data, tech and people can alleviate the pressure on people and, in many cases, allow them to better serve patients.

On the acute side where patients are the sickest, health systems can streamline repetitive tasks and shift non-bedside processes to lower-cost solutions. For instance, robotic process automation can take on many of the tasks in the patient registration or admission processes. Electronic medical records (EMR) systems can simplify the process of submitting orders with the support of artificial intelligence.

In ambulatory and outpatient settings, a technology-enabled model can help optimize eAdmissions, scheduling, educate and provide care plan follow-up information to the patient.

It also can enable greater preventative medicine through things like text reminders of screenings that are due.

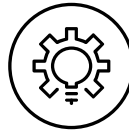
A human + technology model can improve engagement through virtual and AI-enabled omnichannel connections with patients, freeing scarce clinical resources to manage problems by exception at the top of their license. But health systems will still need more clinicians to do the work only they are trained to do.

Recruitment will continue to be needed, but processes can be dramatically improved at lower cost through digital tools. Onboarding can be automated through virtual reality in the metaverse, and advanced analytics can help predict supply and demand so that health systems can put resources where they are needed most. This not only reduces costs, but it can also improve outcomes by having the right workforce in the right place at the right time.

Future-ready workforce in Singapore

With a growing aging population and a shortage of workers, Singapore sought new ways to meet demands on the national healthcare system. Accenture analyzed front-line and front-line support roles that represent 76,350 people in the Singaporean healthcare system (or approximately 159,000,000 hours and SGD4.04bn/ US\$2.98bn in cost). The data revealed that automation could make 15.7 million extra working hours available to help workers support the growing need for chronic care in Singapore.

Technology has the potential to automate specific activities in both front-line and support roles. This frees up patient care capacity and time to perform tasks workers are needed for and suited to do.



Use technology to reinvent care

As noted earlier, the full potential of technology has not yet been tapped. The metaverse represents a new world of technologies that can collectively create greater access, better experiences and improved outcomes while keeping people at the heart of healthcare.

The digital technologies that are brought to bear in the metaverse, such as artificial intelligence, machine learning and augmented reality, allow clinicians to transcend time and space to simulate interactions or practice procedures, such as surgical training. These technologies can also enable life-like virtual therapeutics that empower patients to perform self-care.

[Accenture's Digital Health Technology Vision 2022 report](#) found that 81% of healthcare executives expect the metaverse to have a positive impact on the healthcare industry.

Even outside of the metaverse, there are real-world applications for digital tools now to help alleviate the clinician shortage and reinvent healthcare. Ambient listening tools assist with nursing documentation.

AR and VR tools can provide data to clinicians in context. During a procedure, a doctor could see a patient's vitals in real time or access other information by which to make informed decisions. During a patient visit, doctors can live-stream examinations and add information to electronic medical records instantly.

Not only does automating or shifting tasks to technology save time for clinicians, but it also saves money for health systems. The average provider organization could see \$260M in annual value from automation, including work time savings of 17% for physicians and 51% for RNs.¹²

The path to value for care delivery reinvention

Reinventing care delivery and workforce models will take substantial time and investment, but significant value can be unlocked in the short term. Below are suggestions to start initiating change immediately through stabilization, in the medium term by repositioning and in the long term to holistically reinvent care delivery.

Stabilize. Reposition. Reinvent.



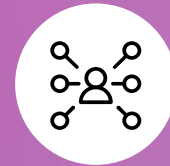
Humanizing change

requires making improvements that leave workers net better off, enhancing skilling opportunities and normalizing change through new operating structures that support greater flexibility and adaptability.



Transforming teams and models

begins with reconfiguring task distribution and enabling remote work, using analytics to improve experiences and outcomes, and empowering teams to be agents of change.



Maintaining workforce capacity

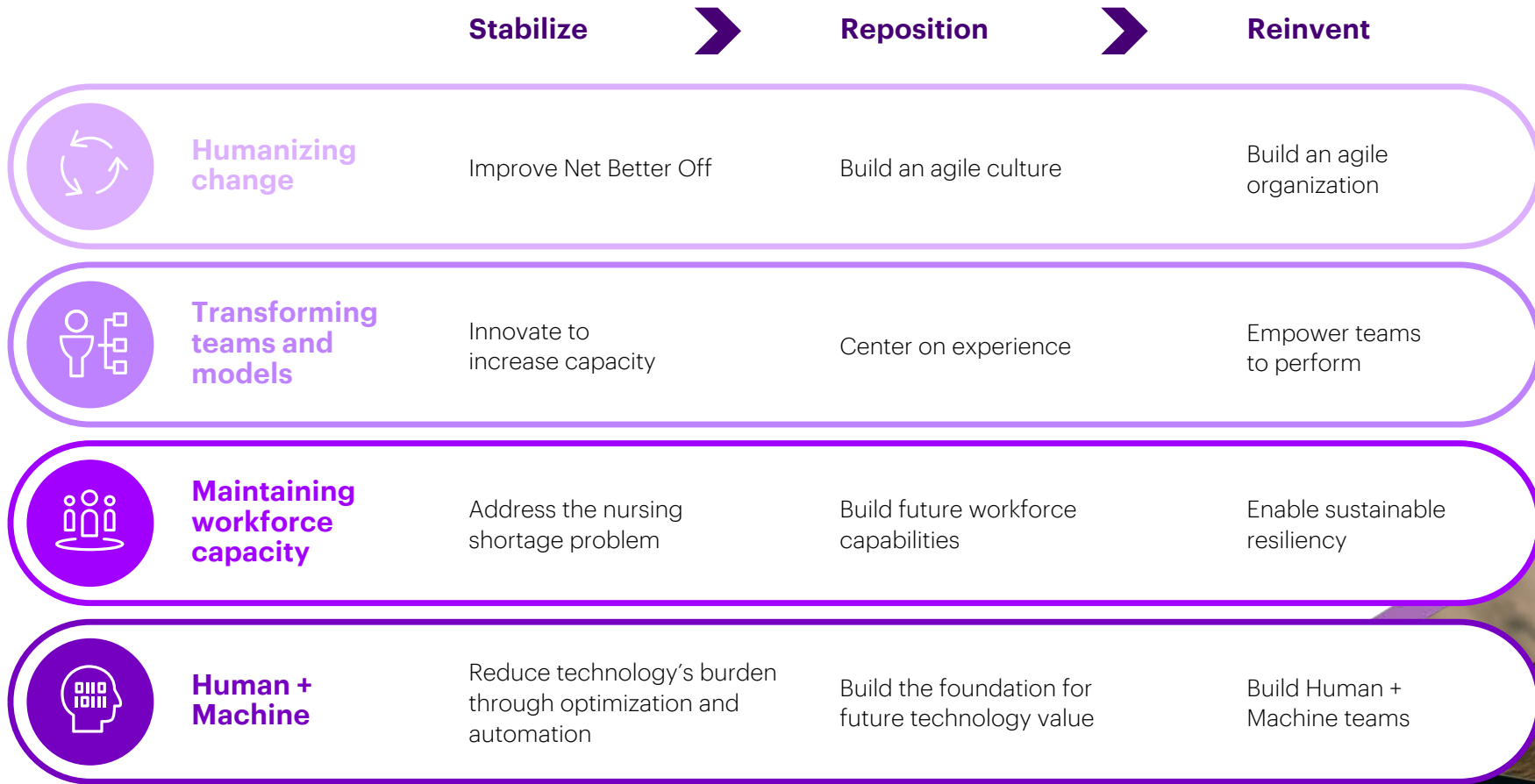
involves reducing attrition and cost to begin solving for the clinician shortage, reinventing work models to promote skill development and building an agile culture with flexible talent pools that can adapt to change.



Adopting a technology + human ingenuity model

allows the organization to use technology to automate and optimize work, improves interoperability to reduce silos and increase speed, and helps build technology-enabled teams that work in connected environments.

Figure 2. The Reinvention Journey



Reinventing care delivery for better access, experiences and outcomes

Business as usual will no longer work as the clinician shortage reaches a breaking point. Once you accept that technology is a primary source of competitive advantage that enables healthcare organizations to build exceptional experiences and achieve breakthrough innovations. It can open new possibilities for accelerating growth and optimizing operations.

Together, we can reinvent care delivery for caregivers while delivering to patients the services they need, how and when they need them.

Reinvent care delivery today. Help a growing patient population in the future. Let's begin.



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