

Letter to editor

Staffing Shortage of Healthcare Workers after the Pandemic: A New Hidden ChallengeEdwardo Mullini¹

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Dear Editor,

Subject: Staffing Shortage of Healthcare Workers after the Pandemic: A New Hidden Challenge

We write to underscore a critical issue that has emerged in the aftermath of the COVID-19 pandemic - the alarming shortage of healthcare workers and its profound repercussions on patient care quality. As the healthcare landscape continues to grapple with the aftermath of the pandemic, addressing this issue becomes increasingly imperative to safeguard the well-being of patients and ensure the resilience of healthcare systems.

The staffing shortage crisis poses a direct threat to patient care quality across healthcare settings. With fewer healthcare workers available to meet the escalating demand for medical services, patients are confronted with prolonged wait times for consultations, delayed diagnoses, and compromised access to essential healthcare interventions. The repercussions of understaffing extend beyond mere inconveniences; they manifest as tangible risks to patient safety and well-being.

In the post-pandemic healthcare landscape, where healthcare facilities are already strained by the ongoing repercussions of the global health crisis, the impact of staffing shortages is particularly acute. The surge in patient volumes, coupled with the lingering effects of the pandemic on healthcare personnel, exacerbates the strain on healthcare systems and heightens the vulnerability of patients to lapses in care quality.

Moreover, the post-pandemic era heralds a paradigm shift in healthcare delivery, with evolving patient needs and expectations necessitating a more resilient and responsive healthcare workforce. The shortage of healthcare workers threatens to impede efforts to adapt to these changing dynamics and undermines the ability of healthcare systems to deliver patient-centered care that meets the evolving needs of diverse patient populations.

We confront the biggest hurdle of trust crisis. We focus now on who and where — just as much as how — we work. We will stop hunting unicorns and start searching for work horses. COVID-19 has come and left us exposing all the areas need improvement in the healthcare sector and told us what's next in the world of improvement. the health system was challenged heavily. The ever increasing COVID-19 cases demanded reshuffling health care workers and repurposing health care facilities.

We Conducted A Prospective Cohort Study between March 2021-March 2023 on 1750 patients admitted as inpatient in different hospital departments and followed up in outpatient clinics in King Saud University Medical City, Riyadh Saudi Arabia. We traced the quality of care given through evaluation of satisfaction, outcome, morbidities and mortalities. We investigated the electronic files and medical records and focused on clinical documentation, proper consultation, communication, iatrogenic complications, delayed/wrong diagnosis, delayed referral/transfer, delayed admission, delayed/improper assessment. We conducted root cause analysis for cases categorized as

Citation: Edwardo Mullini.
Staffing Shortage of
Healthcare Workers after the
Pandemic: A New Hidden
Challenge. *Canad. Jr. Clin.
Perf. Eval.*, 2024, 1, 14, 193-
194

Academic Editor: Paul Weber

Received: 14 January 2024

Revised: 24 February 2024

Accepted: 3 March 2024

Published: 24 March 2024

adverse events, sentinel events and gross negligence. consent and IRB obtained. We used SPSS version24.

The era has passed away, when a healthcare provider could individually provide high-quality care. We aimed to improve the healthcare sectors that get in direct contact with clinical care management of the patients; inpatient wards, ICU, outpatient clinics and surgical theaters. Those critical areas need a quorum of trained staff with good behavior and attitude. Shortage of staff after the pandemic as well as high turnover due to burn out were the root causes behind the poor patient outcomes noticed during this period. distorted staff to patient ratio was the specific problem and system dysfunction that we aimed to improve.

After we defined the problem we gathered data, identify the stakeholders, performed RCAs, quantified and prioritized the issues. We brainstormed the potential solutions, selected them and evaluated them. We developed an action plan to implement those solutions and monitoring the progress. We disseminated the analysis of the problem to the staff and to the patient groups involved through compiling of a comprehensive report including a clear description of the problem, root causes identified through analysis, proposed solutions and interventions., data and evidence supporting the analysis, expected outcomes and benefits of implementing the solutions, action plan with timelines and responsibilities.

In light of these challenges, addressing the staffing shortage crisis is not merely a matter of operational efficiency; it is a moral imperative and a strategic imperative for safeguarding the integrity of healthcare systems and preserving the well-being of patients. Failure to address this issue risks compromising the very foundation of healthcare delivery and jeopardizing the trust and confidence of patients in the healthcare system.

In conclusion, the staffing shortage of healthcare workers post-pandemic represents a pressing and multifaceted challenge that demands urgent attention and concerted action. By recognizing the specific impact of this crisis on patient care quality and understanding its broader implications for healthcare delivery in the post-pandemic era, we can begin to chart a course towards a more resilient, responsive, and patient-centered healthcare system.

Thank you for considering our submission.

Sincerely,

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