

Staffing down 190,000 post versus Pre Pandemic



84% of Industry face staffing shortages



US State Dept STOPPED processing EB-3 "Nursing" visas

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# **U.S. NEWS**

# **Green-Card Woes Worsen Nurse Shortage**

### Healthcare providers squeezed as overseas pipeline is halted and many exit workforce

#### BY STEPHANIE ARMOUR AND MICHELLE HACKMAN

Foreign nurses can't get green cards to work in the U.S., alarming hospitals, nursing homes and other medical providers who have relied on them to help alleviate staffing shortages.

Some nursing-home associations say facilities already operating on thin margins could be forced to close or be unable to accept seniors transitioning to care following hospitalizations. Hospitals say th age triggered by the could undermine patie

Foreign nurses are in tant to the medical in Β Hospitals, nursing hon home health-aide companies were contending with a severe staffing crisis even before the Covid-19 pandemic, when companies often supplemented full-time domestic nursing hires with traveling nurses and a small pool of international recruits, typically from the Philippines or Jamaica. After the pandemic, those hires became even more crucial.

The pandemic strained health systems and led to about 100.000 registered nurses leaving the workforce during the past two years because of retirements, stress and burnout, according to a study released in April by the National Council of State Boards of Nursing, More than 600,000 additional nurses reported that they intended to abroad has come to a halt be-

#### leave by 2027.

Eighty-four percent of nursing homes are facing moderate to high levels of staffing shortages, according to a January State Department this month survey of 524 nursing-home providers by the American Health Care Association.

"There are a lot of consequences we're dealing with.' said Clif Porter, senior vice president of government relations at the American Health Care Association and the National Center for Assisted Liv-

federation that reprersing homes, assisted-С communities and factures for people with disabilities. "We are already down 190,000 hands-on staff compared with where we stood unlike most other professions, prepandemic. We're seeing facilities closing in rural areas." Recruiting nurses from

cause the type of green card that health institutions use to hire has become so oversu that the stopped processing applications from anyone who applied after February 2022. Each year, the government reserve roughly 40,000 of such green cards, known as EB-3 visas, for immigrants and their families being sponsored by employers-though the healthcare industry must compete with companies in other sectors, such as tech and finance, for the limited pool.

Healthcare institutions are particularly squeezed by the immigration system because, nurses and nursing aides aren't eligible for temporary work visas such as the H-1B. Tech companies are able to

hire employees on temporary visas while they wait in the green-card queue-often for years-but hospitals and nursing homes can't bring over employees at all until a green card becomes available.

A bipartisan bill has been introduced in Congress, led by Sen. Thom Tillis (R., N.C.), that would reclaim unused green cards from previous years to bring over more foreign nurses. But the bill has stalled, caught up in the broader politics of the southern border, with many Republicans unwilling to sign on to any increase in legal immigration until a bill tightening border security is first passed.

Paula Butts, chief nursing officer for patient-care services at Piedmont Henry Hospital in Stockbridge, Ga., said the 14 international nurses she

had in the pipeline to come are now in limbo, as are the additional nurses she had reguested through an international nursing-staffing agency.

"Because of the situation. I'm unable to get more," Butts said. "We can't get them here. It means our patients suffer because we can't provide the care they need."

Hospitals say they are also trying to alleviate the shortage by focusing on retaining nurses with higher salaries and benefits, as well as investing to expand nursing programs at colleges and universities.

Some nursing associations and unions oppose the overreliance on international recruiting, arguing that more trained nurses who have left the profession would return if employers paid better.