



6 Remedies for the *'Empty Bed Syndrome'*

In the true spirit of long-term care, where perseverance, innovation, and triumph over obstacles are trademarks of the industry, leaders are tackling the current staffing crisis with vision, focus, and optimism. A recent episode of the [Spoonful of Sugar podcast](#), a partnership between McKnight's and PharMerica, took a frank look at the issue and strategies to attract new team members and retain current ones.

In "Empty Bed Syndrome: The Impact of Staffing Shortages," Sherrie Dornberger, Executive Director of the National Association of Directors of Nursing Administration in Long-Term Care (NADONA), offered six ways to help solve the crisis in long-term care:

1. Make med pass easier, more efficient, and more accurate so DONs and other nurses have more time for direct patient care and a healthy work-life balance.
2. Increase flexibility. Facilities should be able and willing to take "what time nurses can you give you," she said. "The eight-hour shift isn't practical anymore. People need flexibility in their schedules. People want and need to spend time with their families, and that's not possible with long shifts and even longer workdays."
3. Rein in staffing agencies that are "gouging" facilities and paying nurses and CNAs much higher wages than long-term care settings can afford. Momentum is building on this, she stressed. For instance, in Pennsylvania, a bill has been introduced to establish oversight of healthcare staffing agencies and cap rates at no higher than 150% of the average rates.
4. Focus on aggressively recruiting and training nursing

students and opening facilities as clinical sites. "Bring students in and let them see that long-term care is a great place to work," Dornberger said.

5. Think outside the box on benefits and work amenities. How innovative and even fun it would be to have free vending machines with offerings such as pens and stethoscopes, Dornberger suggested.
6. Take the pressure off. Don't expect the DON or other team leaders to shoulder all the burdens on their own. For example, she said, the DON can't be the nurse leader, infection preventionist, staff development nurse, and more at one time. "I know there is a workforce shortage, but there are facilities that are thriving because they think outside the box and have good teams."

Also during the podcast, T.J. Griffin, RPh, Vice President of Long Term Care Operations & Chief Pharmacy Officer at PharMerica, stressed that the company is committed to working with facilities, including the DON and others, to make administration and other aspects of medication management easier, more efficient and intuitive, less time consuming, and more accurate. Expressing gratitude for nurses and other staff who have worked so hard, he suggested we put our heads together to make long-term care a good place to work moving forward.

Listen to [the full podcast](#) to hear more from Sherrie, TJ and co-host John O'Connor, Vice President, Associate Publisher/Editorial Director McKnight's. And [join Illuminate](#) to get notice of new monthly episodes on emerging at trends, issues, and the future of the skilled nursing industry.