

1108 Lavaca Street, Suite 700 Austin, Texas 78701 512/465-1000 www.tha.org

Aug. 5, 2021

The Honorable Greg Abbott Office of the Governor P.O. Box 12428 Austin, TX 78711-2428

Dear Governor Abbott:

On behalf of our more than 450 member hospitals and health systems, we are asking for your assistance in addressing the critical staffing needs of hospitals as they work tirelessly to respond to yet another COVID-19 caseload surge.

Hospitals have been taking proactive measures to retain their existing staff, including offering bonuses, extra shift pay and other incentives. They are tapping nursing schools and volunteers for relief. Many hospitals have curbed services and diverted patients in order to extend staffing capabilities as hospitalizations mount. Hospitals also are reaching out to staffing agencies for assistance.

Despite these efforts, turnover and stress have created extreme challenges on the frontlines, and the costs for contract nursing assistance continue to surpass rates higher than ever seen before. Unfortunately, hospitals are coming up woefully short in their ability to ensure staff is in place to respond to COVID-19 as well as handle other urgent and acute health care needs in their communities. Additionally, clinical and bedside staff are not immune to community spread of the delta variant, and many hospitals have unvaccinated employees sidelined with COVID-19, further stressing the workforce.

We believe the pressing nature of this situation signals the need to go back to a statewide system to centralize and triage contract staffing, which was in place earlier in the pandemic. That system, implemented by the state, was successful, clear and organized, allowing hospitals to quickly trigger staffing in areas of greatest need. However, the Texas Division of Emergency Management recently issued a letter to local governments instructing them to use community resources and county relief funding to assist with COVID-19 demands on the health care system — a clear shift from state to local organization and support.

This change in policy was communicated abruptly and without notice. The ensuing scramble for resources will leave some communities without sufficient inpatient capacity. It would be a tragedy if Texans are unable to access life-saving care. This decentralized approach lacks a statewide lens into overall need and will lead to differing levels of access to care in communities. It also has the potential to pit communities against each other in the recruitment of staff, creating additional and unnecessary competition in an already tight market.

Additionally, we appreciate your prioritization of COVID-19 health care staffing needs in the special session proclamation. TDEM has noted there is significant funding available to local governments through the American Rescue Plan (Coronavirus Local Fiscal Recovery Funds) for response efforts,





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including staffing expenses at hospitals and premium pay for essential workers. However, local entities indicate these funds are very limited and have already been earmarked for other uses in many cases. And, available local funds for hospital staffing are a mere fraction of the total. We hope to see a thorough examination and discussion about the use of these and other available dollars to ensure frontline staffing efforts can continue as the COVID-19 situation evolves.

We appreciate your consideration and are available to discuss the best way to meet these challenges.

Sincerely,

Ted Shaw President/CEO

Texas Hospital Association

CC: Texas Lt. Gov. Dan Patrick

Texas House Speaker Dade Phelan

Dr. John Hellerstedt, Texas Department of State Health Services Chief Nim Kidd, Texas Division of Emergency Management

