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GUEST COLUMN: Health care workers key to our future

BY Sara Orozco and Peter Smulowitz

Since 1894, we have celebrated Labor Day as a day off for the working men and women of America.

With another Labor Day behind us, we are called to reflect upon the importance of the health care workforce to the health and vitality of Massachusetts. While safeguarding the future of health care reform requires that we reduce the cost and improve the quality of health care, a quality health care system is first and foremost dependent on a sufficient and qualified workforce. Yet we are already in the midst of a dire shortage of health care workers ranging from nurses to home health aides to primary care physicians that threatens our ability to care for an aging and more medically complex population.

Unimpeded access to a primary care physician is an essential linchpin for disease prevention, detection and management, but a shortage of primary care physicians is getting worse, not better. In fact, according to the Massachusetts Medical Society, the average wait by a new patient for an appointment with an internist has jumped from 33 days in 2006 to 52 days in 2007.

Though we have enough trained nurses in Massachusetts, hospital cutbacks and nursing workloads drove many qualified nurses out of patient care roles and into administrative, pharmaceutical, and other less physically demanding positions. Furthermore, because of a shortage of faculty at our local nursing schools, fewer nurses are being trained in Massachusetts. Consequently, there are not enough nurses to care for patients throughout the hospital.

We support the efforts already underway to bolster the supply of health care workers in Massachusetts. Recently signed by Governor Patrick, "An Act to Promote Cost Containment, Transparency, and Efficiency in the Delivery of Quality Health Care" includes significant provisions including loan forgiveness programs for physicians and nurses, affordable housing models, expansion of primary care training and recruitment, and expansion of the role of nurse practitioners in meeting our primary care needs.

These steps are necessary, but not sufficient, to provide access to timely, quality health care services. We must recognize the importance of primary care physicians in coordinating patient care by improving the methods for their reimbursement and reducing their suffocating administrative burden. Direct care nurses must have a work environment that encourages retention and invites a new generation of nurses to be trained and employed locally. And, home health aides, who have the most intimate access to our loved ones, deserve to be paid a living wage.

The economic infrastructure of the commonwealth is tied to a strong labor market in health care. Hospitals, medical schools, pharmaceutical companies, and biotech companies contribute substantially to the economic and intellectual productivity of Massachusetts. Some estimates suggest that 30% of the overall workforce in our state is involved in health care. Reducing costs does not mean squandering this wealth of human capital. It means using it more wisely to improve the value and efficiency while deliberately promoting our health care infrastructure as one more reason to live and work in Massachusetts.

We applaud the efforts made by health care workers in the trenches, and we recognize the contributions these workers make every day to improving our health and prosperity.

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