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Thinking globally to fill jobs locally

Atlanta hospitals like Children's keep up with demand for nurses by recruiting in India

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Helping hand: Nurses such as Ligby Jacobs at Children's Healthcare are often asked to work in intensive care units and emergency departments.

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Facing a domestic supply of talented nurses too small to meet demand, hospitals like Children's Healthcare of Atlanta are combing India's workforce for new recruits.

Children's Healthcare, which includes Scottish Rite and Egleston hospitals in Atlanta, has plucked seven nurses from India's health-care system since May, with the potential for more to join the staff. The nurses stay for an initial two-year commitment.

Children's, which has about 2,000 full- or part-time nurses, has about 80 nursing vacancies to fill.

The Indian nurses are working in the intensive care units and emergency departments -- areas that are typically the most difficult to staff in American hospitals because of the high level of stress that comes with the job.

The recruitment program's mission at Children's is to help find 3,100 new and replacement registered nurses for the state annually during the next six years -- a pace Georgia nursing schools can't meet alone, according to a report issued last year by the University System of Georgia's Board of Regents, titled "Task Force on Health Professions Education."

Overall, some 20,000 registered nurses are needed in Georgia by 2012, according to the report.

But the recruitment program does more than offset the nursing shortage. It also helps Egleston and Scottish Rite cut high labor costs spent on travel nurses -- a special kind of highly qualified and often highly paid health-care professional. These nurses typically are hired for specific short-term assignments when hospitals are short-staffed. Some travel nurses can make several thousand dollars a month when hospitals call on them to help get through a crush of patients, as often happens during flu season.

Children's and other systems, which might pay travel nurses at least \$40 an hour, see a clear advantage to recruiting from India, even if there is a learning curve.

"We are moving them into areas where there is sometimes a lot of burnout and high stress," said Ann Miller, Children's Healthcare of Atlanta vice president of workforce strategies.

"It is the long-term investment -- a two-year commitment, but many will end up staying here for 20 years."

And many have an obvious incentive to stay longer -- money.

While nurses in India might be lucky to make \$1,500 a year, they can typically pull in at least \$40,000 annually in the United States, and even more as they gain experience.

A direct pipeline of talent from India has benefits for Children's beyond the bottom line.

"What has been interesting is the other ways it also helps us," Miller said. "These nurses have been working for years in India; they are not just fresh out of school. They have to have experience before they come here. But this is also about what it teaches our staff, particularly the diversity and the cultural changes that come with it. The nurses already on our staff realize how scary it must be for the Indian nurses, and they really take them under their wing. They do little things for them all the time, like driving them home."

This isn't the first time Children's has turned to the global labor force -- just its most successful attempt.

The company tried an international exchange program a few years ago, but it was hampered by the after-effects of the Sept. 11 attacks. International travel fell under much tighter scrutiny, and restrictions were increased.

"A once-quick process was changed to a much slower one," Miller said. "Sometimes we faced delays of at least six months. So we basically walked away from the program."

International nursing programs are nothing new in the United States. Typically, recruitment firms have mined the work forces of India and the Philippines. They can be expensive, charging more than \$10,000 per recruit. But, when weighed against the prospect of sometimes paying the most sought-after travel nurses \$80 an hour, hospitals see international exchange programs as a bargain.

But there are other challenges.

Although Indian nurses are well-trained and must be able to speak English, their country's health-care system is about 20 years behind the United States in technology. Indian nurses are also given more responsibility in U.S. hospitals -- something they are not accustomed to in their own country's health-care system, where doctors call the shots.

"That's a big change for them," said JoLeigh Payne, vice president of client development for Miami-based JOB2 Career, a recruitment firm that works with several U.S. hospitals, including Children's Healthcare of Atlanta.

"In the American health-care culture, nurses and doctors work more collaboratively," Payne said. "Here they have to develop their critical-thinking skills."

Sometimes the nurses also struggle with being homesick. Sindhu Chacko, a 28-year-old nurse from Delhi, makes a lot more money working for Children's. But she misses her extended family she left behind in India.

"It's hard sometimes," Chacko said. "I like it here, but two years seems like a long time."

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