



Healthcare Trends Report: 2026

A Look Back: 2025

In 2025, healthcare leaders faced a convergence of pressures: a persistent financial squeeze, an intensifying workforce crisis, and an increase in workplace violence against care providers—all while navigating the rapid expansion of artificially intelligent tools across clinical and operational systems. Together, these factors are forcing leaders to fundamentally rethink strategy, technology investment, and the employee value proposition.

While financial instability is not new to the industry, new and pending legislation amplified uncertainty, requiring leaders to scrutinize each investment with greater caution.

The Prominent Introduction and Scaling of AI

In 2025, AI tools transitioned from pilot programs to enterprise-wide implementations, driven by the desperate need for efficiency gains and administrative relief.

The Race for Efficiency: To combat administrative overload, organizations rapidly implemented generative AI tools for clinical documentation, coding, prior authorization, and workflow optimization. This transition promises to successfully reduce manual tasks and return clinical time back to providers.

A New Risk Layer: The scaling of AI, however, introduced new, complex security and legal risks. Executives wrestled with questions around data privacy and security (especially for large language models), algorithmic bias in diagnostic tools, and the legal/ethical liability of AI-driven clinical recommendations.

The Deepening Workforce Crisis and Burnout

The workforce landscape shifted from a projected shortage to an urgent concern about retention and resilience. The National Center for Health Workforce Analysis projected a 10 percent national RN shortage by 2027, with some regions anticipating gaps up to 24 percent.

Leaders began prioritizing what healthcare workers value most: psychological safety, visible support, and improved working conditions.

Retention Tipping Point: Burnout, rising violence, and emotional distress continued to drive turnover. Organizations focused on workload redesign, automation of administrative tasks, flexible staffing models, and, most critically, providing safer work environments.

The Shift to Workforce-Centric Leadership: Organizations have recognized that compensation alone is no longer enough to stabilize the workforce. Leading systems invested heavily in safety measures, mental health support, and programs designed to attract new talent while retaining existing staff.



**61% of Nurses
said they plan to leave their
job within the next 12 months.**

AMN Healthcare. Nursing in Transition: Workplace Changes, Challenges and Solutions. 2025 Survey of Registered Nurses. 9th ed., AMN Healthcare, 2025. PDF file.

The Escalation of Workplace Violence in Healthcare

This year, workplace violence cemented its status as a major financial, legal, and operational risk—no longer just a security concern, but a core driver of the staffing crisis, compliance risks, and quality of care.

A Pervasive Threat: Healthcare workers remain five times more likely to experience violence than the average U.S. worker, extending beyond EDs and behavioral health units, and into nearly every care setting.

High Financial Burden: The AHA's Burden of Violence to U.S. Hospitals report estimated \$18.27 billion in annual costs tied to violence, including turnover, workers' compensation, legal fees, and care for injured employees.

Violence is now recognized as a direct threat to quality, safety, retention, and financial stability. Yet many organizations are failing to sufficiently prevent it.



A 2025 survey by Harris Poll found that:

85% of healthcare workers have experienced some form of workplace violence

77% said safety measures haven't improved in the past 12 months

61% of nurses, 53% of doctors are more concerned about their safety now

48% of healthcare workers want access to panic buttons

Alder, Steve. "The Harris Poll Survey Reveals Growing Concern About Workplace Safety in Healthcare." The HIPAA Journal, 24 July 2025, <https://www.hipaajournal.com/harris-poll-survey-concern-healthcare-workplace-safety/>.

2025 Duress Alert Trends and What They Signal for Healthcare Leaders

CENTEGIX® is a leader in wearable safety technology, including the CrisisAlert™ wearable duress badge. Each time a CrisisAlert badge is used to signal for help, an incident report is initiated, providing valuable insights into workplace safety vulnerabilities. The following data reflects key trends from these reported incidents.



#1: Duress is a Daily Reality

2024 saw alerts peak on certain days of the week. This year, alerts have **evened out across all seven days**, with only slight dips on Sundays and Mondays.

INSIGHT: Behavioral escalations are no longer isolated to high-volume days. Safety planning must assume *every day is a risk day*, with staffing, training, and readiness reflecting that.

NOTE: CrisisAlert allows you to visualize your own trends, specific to your facility, taking the guesswork out of planning.

2025 Duress Alert Trends

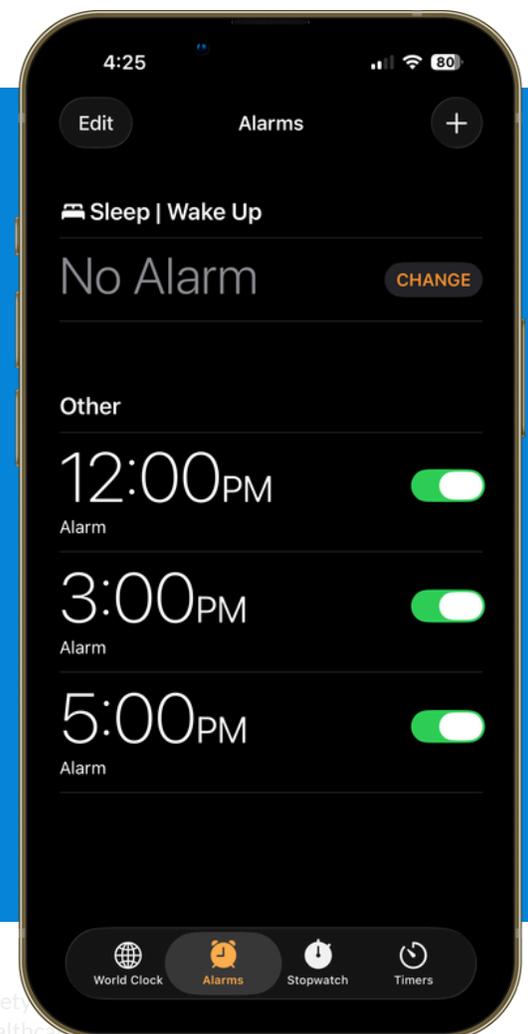
#2: The Most Dangerous Hours Are Midday

Alerts tend to peak at **12 PM, 3 PM, and 5 PM**, suggesting patterns tied to patient flow, transitions, and shift overlaps. Most strikingly, between 8:30 AM and 12:15 PM, the number of alerts increased by almost 300%.

INSIGHT: These windows may correspond to:

- Rounds, care-plan discussions
- Family visits, increased foot traffic
- Discharges, admissions, lunch-hour staffing gaps

For leaders, this underscores the importance of aligning staffing, targeted rounding, de-escalation resources, security presence, and response readiness with clearly defined and predictable escalation windows.

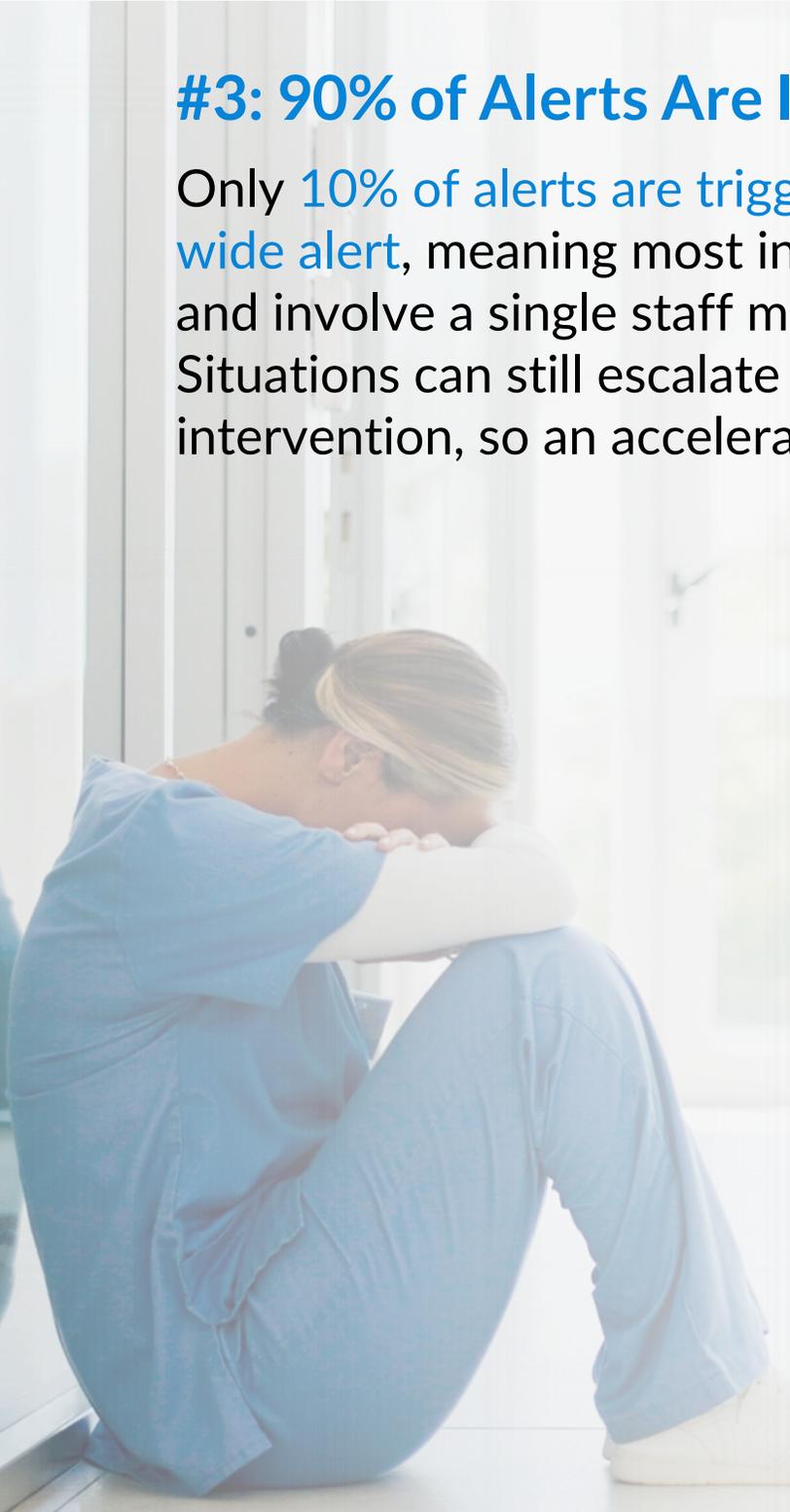


Alder, Steve. "The Harris Poll Survey Reveals Growing Concern About Workplace Safety." *Hippaajournal.com*, 24 July 2025, <https://www.hippaajournal.com/harris-poll-survey-concern-healthca>.

2025 Duress Alert Trends

#3: 90% of Alerts Are Individual Incidents

Only 10% of alerts are triggered for a campus-wide alert, meaning most incidents are localized and involve a single staff member needing support. Situations can still escalate without timely intervention, so an accelerated response is crucial.



INSIGHT: This is a powerful indicator that frontline support matters most.

The ability to respond quickly to individual incidents prevents escalation into major security events, protecting staff and reducing operational disruption.

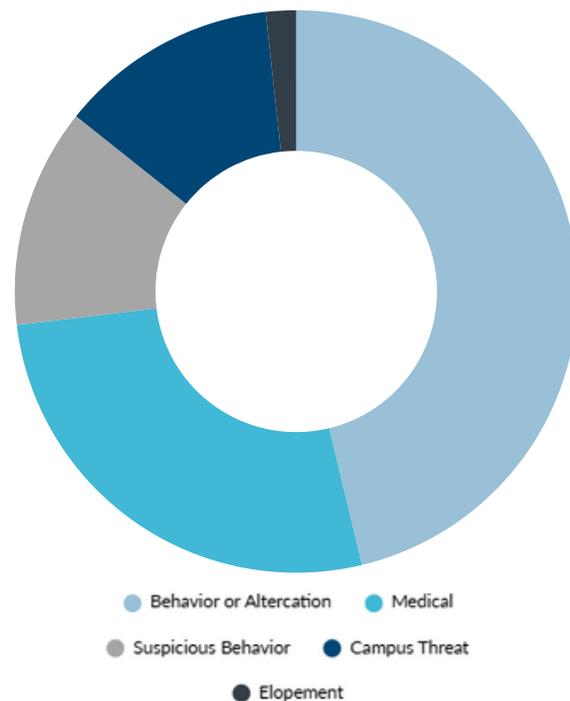
Sometimes, even just the presence of another person can pause an escalating incident.

2025 Duress Alert Trends

#4: Aggression Remains the Top Trigger for Staff Alerts

46% of all duress alerts stemmed from aggressive or physically threatening behavior.

This could be from a patient, family member, or occasionally another staff member.



INSIGHT: Despite investments in training and environmental design, interpersonal aggression is still the primary safety threat in healthcare. This reinforces the ongoing need for:

- ✓ Discreet, wearable safety devices
- ✓ Behavioral de-escalation support
- ✓ Ongoing training and drills

It also reinforces national trends showing underreported violence compared to actual risk.

2025 Duress Alert Trends

#5 Hallways Are the Epicenter of Behavioral Incidents

Top locations where behavioral alerts were triggered include:

42%

HALLWAYS

27%

PATIENT, EXAM ROOMS

14%

NURSE STATIONS

Other notable location trends include exterior areas such as parking lots and ambulance bays, reception or registration areas, and waiting rooms.

INSIGHT: Hallways are consistently a high-risk transition point where staff are isolated, visibility may be limited, and visitors can move unpredictably. Nurse stations and exam rooms/patient rooms follow, as they involve frequent contact with distressed individuals.

For healthcare leaders, this signals a need to invest strategically in coverage around these three zones, ensuring staff can summon help even when isolated.

Looking Forward to 2026

The challenges that shaped 2025 have become the expectations for 2026. Leaders must become more adaptable, decisive, and bold. Stagnancy will be the biggest detriment to success this year.

Transformation Expectations

From AI integration to community engagement, this will be a year to embrace change. Leaders must pursue an adaptable and nimble mindset as they react to changes in policy, technology, and compliance. Success will require reimagining legacy systems, policies, and delivery models. As care continues shifting toward community and outpatient settings, leaders will prioritize agility in clinical operations, technology adoption, and workforce strategy.

AI acceleration will continue, but with stronger guardrails and governance in place. At the same time, new workforce models will emerge, including expanded nurse education pipelines, flexible staffing arrangements, and increased remote patient monitoring roles.

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As Providence President and CEO Erik Wexler shared with Becker's, “It's a year of having to have courage. It's a year of really beginning to embrace transformation.” Healthcare leaders who act decisively in 2026 will emerge stronger.

A Workforce-Centric Approach

To build on anticipated workforce preservation strategies, expect a shift in priorities that puts more emphasis on protecting and empowering healthcare providers. For every new investment, policy, or operational redesign, leaders must ask, “How will this impact the workforce?”. To solve for the anticipated staffing deficiencies, every decision related to the workforce must contribute to its stabilization.

Andrea Greco, SVP of Healthcare Safety for CENTEGIX, emphasized, “2026 will be defined by an intense, strategic focus on the healthcare workforce. This means safety initiatives will no longer operate in a silo; they must be explicitly aligned with core business goals and metrics like retention and profitability. Having reached a critical tipping point in workforce instability, leaders are now aggressively demanding solutions that demonstrably reduce burnout and strengthen retention.”

Notably, safety technology is under greater scrutiny from nurses and nursing unions, who are rejecting RTLS-based duress solutions that continuously track staff movements in favor of privacy-preserving platforms.

As one nurse wrote in a column, “Hospitals that manage nurses by tracking their every move can end up with unhappy employees, not surprisingly...It is particularly insulting when employers try to spin the use of tracking devices as helpful to [nurses] when they intend to use it to discipline nurses.”

Expect these dynamics to continue as leaders prioritize solutions that protect staff without eroding their trust.

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“Hospitals that manage nurses by tracking their every move can end up with unhappy employees...”

The Demand for ROI

Purchasing decisions in 2026 will be shaped by quantifiable, data-backed ROI. Safety, technology, and operational investments must demonstrate measurable improvements in:

- Financial performance
- Workforce stability
- Quality and regulatory compliance
- Patient care

For safety initiatives, the ability to show reductions in turnover, workers' compensation claims, and incident severity will be key to securing funding. The new benchmark is clear: if an investment cannot demonstrate measurable financial or workforce impact, it will struggle to gain approval.

Longtime healthcare executive and CENTEGIX Healthcare Advisory Board Member, Nancy Shendell-Falik, spoke about the positive financial impact of investing in safety. "When people don't feel safe, they leave—and the cost of that is enormous. Turnover for a single bedside RN is \$61,110.

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For the average hospital, that's between \$3.9 million and \$5.7 million lost every year. So even a small improvement in safety, that helps keep just a few more nurses, can translate to hundreds of thousands of dollars saved.”

CENTEGIX ROI Calculator:

Use this tool to quantify the cost of violence and prove your return on safety investments.



Workplace Safety Accountability

High-profile incidents in 2025—including the attack on nurse Leelamma Lal and the UPMC Memorial Hospital hostage situation—intensified national attention on healthcare safety.

These events have increased awareness and fueled bipartisan efforts to further legislation, like the SAVE Act (H.R. 3178/S. 1600), which makes assaulting hospital staff a federal crime.

Local governments are also prioritizing state legislation to hold healthcare facilities accountable for the safety of their employees. Illinois is considering SB 1435, which would require hospitals to provide wearable duress buttons physically attached to employee ID badges. The proposed mandate would ensure every staff member has immediate access to emergency assistance.

Even without legislation, public scrutiny and workforce activism are accelerating the adoption of strong prevention strategies. Safety is now a board-level issue.

ENA Chief Clinical Officer and CENTEGIX Advisory Board Member Jennifer Schmitz noted, “In the coming year, [healthcare leaders] will be compelled to acknowledge that their duty of care extends not only to patients, but also to staff. Clear policies, defined procedures, and consistent enforcement build trust and accountability.

“These, coupled with tools that accelerate emergency response, such as wearable duress buttons, will allow healthcare organizations to track trends, measure effectiveness, and continuously refine their workplace violence prevention strategies.”

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In Closing

As healthcare enters 2026, one truth is increasingly clear: violence prevention, workforce stabilization, and organizational resilience are no longer parallel priorities—they are deeply interdependent. The challenges facing hospitals today are interconnected pressures that require coordinated, forward-leaning leadership.

The healthcare organizations that succeed in 2026 will be those that:

- Invest in solutions that deliver measurable financial, operational, and workforce impact
- Prioritize workplace safety as a strategic imperative, not just a compliance expectation
- Adopt scalable, privacy-preserving technologies that empower every employee
- Align violence prevention with broader organizational goals like retention, quality, and patient experience
- Leverage data to drive resource allocation and risk decisions

Workplace violence will remain a defining issue that shapes staff morale, patient outcomes, regulatory exposure, and public trust. Healthcare leaders who champion a comprehensive, data-backed approach to workplace safety will not only reduce risk but also build stronger, more resilient organizations capable of navigating uncertainty with confidence.



At CENTEGIX, we innovate safety solutions to empower and protect people (every day).

To see how we're strengthening safety for healthcare workers nationwide, visit www.centegix.com/healthcare.