What we know

- Aging population
  - 10,000 baby boomers turn 65 every day
- Nursing shortage
  - 1.1 million
- Turnover costs
  - Loses $5.7 million average
What we know

- Operating margins
  - 2.7%
- Operating margins
  - 2.7% and narrowing
- Overtime
  - 33% of nurses work longer than scheduled shift
What I know…

1. There is no silver bullet
2. Research is solid
3. Must adapt findings
4. Things can not stay the same
5. We all need to challenge our thinking
6. Everything is interrelated and connected
7. Oregon is known for innovation and we CAN be the example
Five outcome areas

- Clinical
- Financial
- Compliance
- Staff engagement
- Patient experience

Must be balanced!
Research-Patients

• Decreases in RN direct care hours lead to increases in safety issues
  □ Increased mortality rates- 7% increase within 30 days for each additional patient added
  □ Numerous hospital acquired conditions: UTIs, pneumonia
  □ Increased readmission rate and longer length of stay
• Delayed or Missed Care
  □ Required patient care that is omitted or delayed due to multiple demands
  □ Ambulation, assessment of medication effectiveness, turning, oral care, teaching, and PRN meds
  □ One study cited 50% of nurses reported missed care from prior shift
• Experience
  □ Higher experience scores correlates with hours nurses spent with patients per day
Research- Nurses and Work Environment

- Missed Care
  - Moral distress
- Job Satisfaction
  - Negatively impacted
- Burnout
  - Higher turnover and intent to leave
- Fatigue
  - Understaffing linked to adverse events and higher turnover
  - Understaffed organizations encourage staff overtime leading to adverse outcomes
- Turnover
  - Experienced nurses leaving
Research-Healthcare Organization

• Hospital Readmission Reduction Program (HRRP)
  □ Better staffed hospitals had 25% lower odds of being penalized
  □ Nursing interventions such as teaching, care coordination fundamental to lower readmissions
• Patient Care Costs savings
  □ Shorter lengths of stay
  □ Decrease adverse outcomes
• Nurse Turnover costs
  □ Costs range from $38,900-59,700 per nurse
Actionable Items

• Flexing staff relative to patient care needs
• Using EMR and ADT data for better staffing decisions
  □ Admission entry points
• Balanced, equitable nurse workloads
• Continuity of care
  • Patients to nurse vs nurses to patient
• Professional variability
• Professional governance
Actionable Items

• Self-Scheduling
  – Better work/life balance for nurses
  – Managers spend less time creating schedules
  – Templates

• Open Shift Management:
  Visibility to staffing needs enterprise-wide
  – Nurses have more scheduling flexibility
  – Nurse working to the top of their license
  – Larger pool of nurses to fill open shifts

• Central Staffing Office
  □ View of all needs
  □ Partner with patient placement office
Actionable Items

- Make scheduling systems effective
- Culture of accountability and standardization
  - Clocking's, attendance, lunch attestation and self-scheduling
- Track real-time productivity and budget tracking
- Capacity project
- Focused on people, process and technology to create more capacity without more beds
- Manage patient volumes more effectively
  - Variability – patient
Next steps

- Challenge your thinking
- Collaborate
- Evidence Based Projects
  - Doesn’t mean cookie cutter implementation
Thank you!

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