

## **Podcast Show Notes**

# Making Sense of Dollars and Cents: Staffing Skills for Nurse

## Leaders

Before you take a seat at the healthcare leadership table, you'll need to be prepared with knowledge and skills that aren't typically taught in nursing school. In this series, you'll gain practical tips to help you develop – and showcase – your business acumen.

This CE course is relevant to nursing and advanced practice nursing professionals.

## Episode 2 – Remedies for Workforce Woes, Part 2

Are you stumped for ways to avoid the high costs of travelers on your team – or to keep your current staff from jumping to the traveler life? A nurse-leader-turned-healthcare-finance-expert offers ideas, along with the initial how-to's for developing an effective staffing plan.

#### Guest

Pamela Hunt, MSN, RN, NEA-BC, FAAN

- Independent healthcare consultant specializing in productivity, quality and safety, improved organizational performance, caregiver engagement, leadership competence, talent development, and team building
- Associate Faculty, Indiana University School of Nursing and Kelly School of Business
- Nursing Management Conference Chair for Wolters Kluwer in Philadelphia, Pennsylvania
- Former Vice President of Patient Care Services for Community Health Network, Community Hospital North in Indianapolis, Indiana

## Host

Faith Roberts, MSN, RN

- Former Executive Director of Spiritual Care and Environmental Services for Carle Health in Urbana, Illinois
- Former Executive Director of Magnet, Pathway to Excellence, Professional Practice, Pastoral Care, and Faith Community Nursing at Carle Foundation Hospital and Carle Physician Group in Urbana, Illinois

### **Episode Key Points**

Workforce Challenges



#### Workforce Projections

- Hospital growth continues to trend up with 40% of hospitals projecting to increase their RN complement.
- Overtime, internal resources pools, and critical-need pay are at an all-time high.
- Travel nurse rates have jumped more than 200% and premiums remain elevated.
- Hospitals are spending 62.5% more for travel RNs than they did at the beginning of 2020.
- For every 20 travel RNs eliminated, a hospital can save an average of \$3,084,000.

#### Workforce Opportunities – Think Upstream

- Talent acquisition team (Hospitals expect to grow workforce but often do not recognize the need to expand the recruitment team.)
- Relationships with universities, clinical rotation offerings
- Staff/leaders serving as adjunct faculty to create interests and connection
- Marketing at community and school events
- Enhanced orientation and onboarding:
  - Virtual for nonclinical components
  - Saturday/evening opportunities
- Varied shift times: 4/8/10/12
- Unlicensed personnel as support in all areas

- Temporary licensure for individuals who are currently licensed in another state
- Financial wellness programs

Workforce Opportunities – Curtail Travel Resentment

- Offer money to the current staff first. Suggestion: Cap the number of hours.
- Build relationships with universities for clinical rotation offerings.
- Make retention, recruitment, and hiring plans transparent, visible, communicated, and updated.
- Consider actions to discourage current members from leaving to travel. Do not hire travelers who:
  - Live within a 50-mile radius.
  - Have worked for the organization for more than 1 year.
- Involve current caregivers in hiring decisions.

#### Workforce Opportunities – Consider Pay Practices/Incentives

- Creative practices with targeted needs
- Expensive and risk of entitlement when need has passed
- Is everyone working at the top of their license?
- Strong medical staff leadership and administrative collaboration
- Staff engagement and resilience

#### Functions of the Budget

- Planning
- Management of ongoing activities
- Control of spending

#### Functions of the Staffing Budget

- How many
- Productivity
- Costs

Care Team Composition

- RN
- LPN
- NA
- Transporters
- Lift team
- Phlebotomy
- Case managers
- Pharmacists
- Social workers
- Physicians

#### Calculating Full-Time Equivalents (FTEs)

- 40 hours per week or 80 hours per pay period
- 1 FTE = 2,080 hours per year

 Hours/day multiplied by number of days worked per week = hours/week, divided by 40 hours = amount of FTE worked

Example:

- 8 hours/ay x 3 days/week = 24 hours/week
- 12 hours/ay x 3 days/week = 36 hours/week divided by 40 hours = .9 FTE

Points of Census for 30 Days

| 29 | 28   | 25 | 22 | 15 |
|----|------|----|----|----|
| 28 | 27   | 25 | 20 | 15 |
| 28 | 27   | 24 | 20 |    |
| 28 | 27   | 24 | 20 |    |
| 28 | (25) | 24 | 17 |    |
| 28 | 25   | 22 | 16 |    |
| 28 | 25   | 22 | 16 |    |
|    |      |    |    |    |

## Mean: 23.6 Median: 25 Mode 28

Mean/Median/Mode

| Census   | Frequency | Overstaffed | Understaffed |
|--|-----------|-------------|--------------|
| Mean-24<br>(average)   | 3 days    | 11 Days     | 16 days      |
| Median-25<br>(data point in the<br>middle of the data<br>points) | 5 days    | 14 days     | 11 days      |
| Mode-28<br>(most frequently<br>occurring)                        | 7 days    | 22 days     | 1 day        |

## References

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#### **Resources**

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Agency for Healthcare Research and Quality

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