HAVING SPENT well over a decade thinking about, meditating on, and trying to help solve the challenges of staffing in health care, I am convinced of two things. First, this will never be easy. Second, we can do better.

We should not expect a new model or a brilliant new study to transform staffing in health care from hard to easy.

Nurses can’t change the complexity of our work; however, we can and must improve the art and science of staffing.

We have not mastered the translation of evidence on staffing to influencing budgets, adjusting policies, procedures, and changing cultures as rapidly as we need.

Research has helped in countless ways, but we need more and there is still much to understand.

Accurate data collection and a willingness to share that data with researchers will help advance the science of staffing.

The road ahead is not easy and will take courage, tenacity, and a lot of energy.

Because of the nature of our work, it will never be simple; it will never be easy. When a mother dies giving birth, when a father wakes up from a coma to learn his wife and three children were killed by the drunk driver who hit their car, when a child fights cancer or a soldier loses his legs, we are staffing for their care. When an elder breaks a hip, when a cleft palette is repaired, when a family is burned in a house fire, we staff for their care. When hearts fail, when illness overpowers someone’s body and wins, when we fight and win over illness, nurses are there because someone made sure that staffing was done correctly.

Improving Staffing

Nurses can’t change the complexity of our work. We can, however, improve the art and science of staffing — and we must. We need to improve for ourselves, for our patients, and for our health care system.

There has been much work in the area of staffing. There is more research than ever to guide us. We have grown in our business acumen as well as in our care delivery models and technology, but we can do better. We have been slow to leverage what we have. We have spent countless dollars on new technologies but they are often poorly adopted, leaving their powerful benefits of supporting evidence-based decision making, data collection, business intelligence, and advanced communication on the table. We have not mastered the translation of evidence on staffing to influencing budgets, adjusting policies and procedures, and changing cultures as rapidly as we need to.

We seem to be in another cycle of looking for answers to our financial and performance woes by applying pressure to improve productivity and efficiency — looking high and low for more places to cut. While few would argue we need to find ways to be more efficient, one can not help but wonder how many times we are going to acquiesce to an outdated manufacturing model of measuring productivity and to business models and people who do not understand the work that we really do – help people heal, help people die with dignity, educate people towards wellness – and what it takes to do all that well.

I think we understand on many levels what is needed to achieve staffing excellence, where patients, the health care workforce, and our organizations all benefit. Not one over the other, or at the cost of the other, but all benefit. We just need to make the decision to leverage what we and others know and then tackle it with the same determination we do in advocating for our patients. In thinking about all of this and the path to get there, several things come to mind.
While interviewing Linda Aiken, PhD, FAAN, FRGN, for the 3rd Annual Nursing Economics Special Issue on Staffing Excellence (Kerfoot & Douglas, 2013b), it became very clear to me that while I had followed her work for many years, I had not been truly listening to what she had to say. I realized, after careful listening, that I had formed opinions on things I was now seeing in new ways and my opinions were shifting on things I felt very strongly about. Wow! I hope everyone reads carefully parts 1 and 2 of the interview with Dr. Aiken (Kerfoot & Douglas, 2013b) and truly listens to the experience and wisdom therein. This is just one example, but a powerful reminder, to take the time to listen well and absorb the wisdom around us, be it from highly accomplished scholars or a staff nurse on the night shift who has ideas on how to improve staffing.

Tackling the Hard Stuff

We must be willing to tackle the hard stuff to achieve breakthroughs. How long have we complained about midnight census? While some have made progress by collecting census more frequently, we have not successfully changed the pay practices that keep us fixated to a number that so misrepresents our work. Big changes are hard, but they do happen when we take action and are persistent. Once we solve midnight census, nursing care hours per patient day should be next!

One reason advances in staffing are slow is we have not leveraged the power of data collection and analysis that comes with automation. We need data to make our case to finance for the staffing, yet, how many of us are still using paper and pencil? We live in a digital age. While it is not always smooth sailing, it is our reality and we are not taking advantage of technology to its fullest potential. When we document staffing situations on clipboards and sheets of paper, we are losing precious data to the recycle bin, trash, or filing cabinet. Stagnant data are not helpful in today’s world. It’s like throwing away the very trash, or filing cabinet. Stagnant data are not helpful. By resisting acuity systems, we are losing out on evidence to understand the specific needs of a patient, something staffing grids (stagnant data) will never do. By not capturing staffing changes electronically, we are missing house-wide communication and the ability to manage our workforce effectively. Technology solutions are not perfect and it is not easy to shift from paper to automation, but we must. The sooner we do, the sooner we are equipped to stand behind the staffing decisions we make and champion the budgets we need. With accurate data collection and a willingness to share that data with researchers, we help advance the science of staffing.

Courage, Tenacity, and Energy Required

Progress requires that we try new things. While making the film “NURSES If Florence Could See Us Now” (On Nursing Excellence [ONE], 2012), I was honored to meet many amazing nurses. Among them was Barbara Blakeney who spoke passionately about the innovation potential within a group of direct-care nurses with whom she was working. These nurses were testing a new way to organize their nursing resources to better assist patients in efficiently making their way through an episode of care without increasing staffing. Staff nurses developed the ideas and were designers and implementers of the solutions. When Barbara described the innovation efforts of the direct-care nurses, she said “I can’t wait to see what they come up with, it is going to be mind bogglingly brilliant” (ONE, 2012). Imagine if we all had that kind of attitude toward innovation!

Research has helped staffing in countless ways, but we need more; there is still much to understand. More solid evidence is needed so we can change the conversation to one of offense, not defense. With the help of more research, we can shift away from questioning the value of effective staffing based on evidence. We will strengthen the dialogues around how to build and sustain a highly qualified, highly motivated workforce. We will see the value in investing in our workforce because we will understand without doubt that the key to performance, efficiencies, and cost containment lies in the people who work for us.

The road ahead is not a smooth one. It’s going to take courage, tenacity, and a lot of energy. If we leverage the wealth of experience and wisdom that is within and all around us, it will serve us well. If we tap into those resources and take action, as Barbara Blakeney said, the results would be “mind bogglingly brilliant.”

Passing It On

This is my last column as column editor of Staffing Unleashed. As I turn over this awesome opportunity and responsibility to others, I do so knowing and trusting in the wisdom that will carry forward what we started. I leave this phase of my work with deep gratitude to Nursing Economics for their visionary and ongoing commitment to the topic of staffing, and for helping us bring the wisdom forward, so that we can all benefit and grow. And I leave with deep gratitude to the readers. You are why we do this, in hopes of inspiring, in hopes of giving voice to the wisdom, and passing it on.

REFERENCES


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