What Every Nurse Executive Should Know About Staffing And Scheduling Technology Initiatives

EXECUTIVE SUMMARY

- Staffing in hospitals has a history of being based in opinion and tradition, not evidence.
- In recent years, for many, staffing practices have spun out of control creating chaos in overtime, the use of incentives, entitlement behaviors, dissatisfaction and frustration among nurses, and has opened doors for such things as staffing ratio legislation.
- Unprecedented pressures around budgets and financial performance have no doubt compounded this situation.
- We are in a new day, where technology can help us more than ever in a move towards staffing excellence and staffing practices based on evidence.
- Highly successful implementations of new technologies are the result of good leadership.
- The effectiveness of staffing and scheduling has significant business, safety, and quality implications that sit at the heart of the nurse executive’s role.

When people ask me what the key to success is in achieving maximum benefits from staffing and scheduling technologies the answer is simple, it is the nurse executive. This may not be the expected answer and it may not be good news to the already busy life of a nurse leader. It is, however, a message that, if embraced, can chart the path for achieving optimal performance in workforce management and maximum return on investment from the dollars spent on automation initiatives.

To understand this position, it helps to begin with a few reminders. Every nurse leader who takes a position in a care delivery environment knows a primary responsibility of that role is assuring the effectiveness of the workforce in delivering safe and quality patient care. From the technology side, we know, or should know, technology solutions are tools through which philosophy, policies, and practices are reflected and operationalized. In the case of staffing and scheduling, we are talking about a technology used to help manage the complex world of delivering patient care. We rely on these systems to improve our ability to assure the right resources are assigned to the right situations that result in the best possible quality, safety, and financial outcomes. This places staffing and scheduling technology squarely in the middle of the nurse leader’s domain.

It seems logical to assume any technology that touches a primary responsibility of the nurse leader would be at or near the top of her or his priority list, among the many demands for her or his attention. So here is were it gets confusing. It is not unusual for the oversight of selecting, implementing, and using these tools to be handed off, delegated to an implementation team and oversight assigned to a project leader who keeps the nurse leader informed. Not to say these roles are not important; they are essential. The issue here is in the word “handover,” implying minimal to no involvement by the nurse leader. And that is a mistake. This position needs to be reconsidered if we are ever to enjoy the full benefits of staffing excellence and full value these systems have to offer.

Taking a deeper dive into the relationship of the nurse leader into the sea of staffing, scheduling, and associated technologies can provide important insights. As understanding grows around the many operational, cultural, and financial implications or opportunities associated with staffing and scheduling technologies, it will become clear how important the role of the nurse leader is and how much her or his experience and wisdom can influence success.

How We Got Here

To move forward it sometimes helps to look back a little; not too much, the past is a big place where one can get lost. But it can inform movement forward with influence and purpose. There are many reasons why nurse leaders have not been at the helm when it comes to technology selections and implementations. But that is a history we must leave behind. In the past we were unclear of the significant business, quality, and safety connections to the world of staffing. Similar to the shift to evidence-based practice, health care staffing is moving in the same direction.

We are fortunate today to have research to inform us, as well as the use of technology to collect and manage large amounts of operational data that can paint a picture of what is happening in staffing like never before. This has not always been the case. Staffing in hospitals has a history of being based in opinion and
tradition not evidence. It has been seen as a clerical task. It has pulled nurse managers away from their role of overseeing the delivery of care on their units. In recent years, for many, staffing practices have spun out of control creating chaos in overtime, the use of incentives, entitlement behaviors, dissatisfaction and frustration among nurses, and has opened doors for such things as staffing ratio legislation. Unprecedented pressures around budgets and financial performance have compounded this situation.

We also have a past wherein technology decisions and implementations were the responsibility of the information technology (IT) staff. This has shifted with time and today more nurses have a say in the selection of technology. However, the shift to real ownership by nursing for the tools that run the business for which the nurse executive is accountable is still evolving. Evidence of this lies in the absence of, or minimal participation of, the nurse executive in defining goals for technology, overseeing requirements (operational and business), setting expectations, requiring accountability, leading cultural change, monitoring impact, and overseeing continual improvement efforts.

In nursing, we are still learning the world of technology and developing the strength of our voice in getting what we need and want from it. We are still evolving our understanding of technology, it’s nature as a tool, and it’s relationship to a bigger picture of outcomes, goals, and cultural and business objectives. To make the shift from our past and lead the charge on staffing excellence that is grounded in an evidence-based framework will require shifting how we look at staffing and scheduling. We must give staffing technology its rightful place as a top strategic priority and then allow it the leadership attention all top priorities enjoy.

**Before Starting a Staffing Technology Initiative**

Keeping in mind technology is a tool reminds us that like any tool, it is there to help us achieve something; it is not the “thing” itself. For example, you may have excellent tools to build a house, but if you have poorly developed plans, questionable building materials, and a building crew that does not understand the plan, the chances of getting the house you envisioned are slim. It is not any different with implementing a technology to help with staffing. The tool (technology) in and of itself is of little use. In some cases, adding technology to an already broken system can exacerbate existing problems. Then the technology becomes an easy target for blame and the underlying issues remain unaddressed. The old adage, garbage in garbage out, comes to mind.

You cannot expect technology to fix a lack of clear goals, outdated or ineffective staffing policies, inconsistencies among managers, a culture of entitlement, or out-of-control overtime. You can use a new technology initiative as a catalyst to re-examine staffing in your organization, refresh and renew your approach, and bring evidence into the picture so that what you automate is aligned with your goals.

You can and should expect technology to be an enabler of a well thought out strategy for staffing. All this may seem a bit overwhelming or a huge mountain to climb. It may be helpful to remember technology vendors are filled with people who work with these issues every day. If you select the right vendor partner, their experience can be a wealth of information and guidance.

Before choosing a tool for your organization, invest in a clear understanding of the current state of your staffing and scheduling landscape. This will formalize the picture of what is working and what needs to be fixed. It will also set in motion the involvement and support that will be needed later. From your assessment of current state, identify the goals you want to achieve.

**Example of Goals for Implementing New Staffing and Scheduling Technology**

- Improve the efficiency and effectiveness of scheduling activities
- Promote participation, choice, and fairness
- Enable evidence-based decision making
- Optimize communication with the workforce and between departments
- Standardize the collection of data for monitoring, managing, and improving staffing practices

While these are just examples, it is important to note each requires much more than technology to achieve. Don’t fall in the trap of expecting technology to “fix everything.” Be realistic in what you expect from technology. Know the difference between what the technology will address and what other things need to be addressed so the technology can be set up to support optimal performance.

You may notice in the example of goals, the absence of such targets as decreased overtime or better control over contract labor use. These are outcomes you can and should expect, but the way they are achieved is through doing many things right. Goals focused on an underlying cause have the best chance of positive impact on outcomes. It’s the difference between treating symptoms versus treating cause. It is important to identify symptoms, so they can be part of the overall strategy and addressed prior to or early in launching a new initiative. They can also serve as measures to inform areas that need further attention, to celebrate success, or monitor return on investment.

**Overseeing the Selection Process for New Technology**

Technology has advanced so quickly in the last decade, even those who have previously invested in technology should be looking at what benefits they may be missing by staying with the status quo. One
thing is certain, to achieve staffing excellence and move to an evidence-based staffing model without the help of new technology will be very hard. Communication and data use requirements underlying an evidence-based approach to staffing depend on the benefits that technology brings.

Once you are ready to start looking for a technology solution that best fits your goals and needs, the value of involvement from the nurse leader cannot be overstated. It begins with sending a clear message of the initiatives’ importance. This is also a time where you can plant the seeds for success. It is a time to educate, share goals, begin the buy-in process, set expectations, inspire participation, and establish momentum for the shifts that will occur with the coming change.

If you have a multidisciplinary staffing committee with strong staff nurse representation, this group, with the addition of some technical consulting or participation by IT, can be an excellent place to assign responsibility for the selection process. If you do not have such a committee, this may be a good time to form one and let this be their initial assignment. If you’re not sure how to get started, there is an abundance of information on the Internet that others have made available on setting up multidisciplinary staffing committees. Whatever group is assigned to manage the selection process, there should always be regular involvement by the nurse leader.

With project goals as the guideposts, system requirements need to be identified. Some organizations make this a very formal and lengthy process. Some develop a request for proposal with defined criteria and questions for potential solution vendors. Others keep the requirement definitions fairly simple. There are pros and cons to both the very detailed and formal approach and the more simple streamlined approach. The more experience and background with staffing and scheduling systems represented among the selection group, the less need for a very formal process. Some organizations bring in consultants to help them organize a selection process effort. The right consultants can be very helpful and lift time demands on internal resources. When using consultants, stay involved. This is a system that you will be living with long after they are gone.

**The Implementation Process**

Education around staffing excellence, why it is important and everyone’s role in achieving it, should begin during the pre-project phase. If not, kick-off your implementation with it. Ideally, education is ongoing and the beginning of a project is perfect timing to review and reinforce the value of the change that is occurring. During actual training of end users is a great education opportunity to reinforce goals and address change. Learning features and functions in context to goals and values and linking decisions to evidence will increase interest and support adoption. This may be the most important part of a formula for success. Remember, this is a time of change and if the change process is not well attended to, the project can go south or result in partial success where the full potential is not realized.

During implementation you can leave the details to teams assigned but that does not mean the nurse leader role diminishes. Establishing and leading a strategy team that meets regularly during implementation is a good idea. The lead from your vendor partner should be a part of this group to facilitate decision making and to discuss barriers or concerns. Getting the marketing department involved can also be helpful with setting up messaging and communications, even making it fun with things like posters, buttons, and other items that help cheer the project on.

**Post Implementation**

After “go live” the need for listening and good communications increases. This is a critical period during which people can easily fall back into more familiar patterns and practices. High visibility of the nurse leader will help smooth the way as people adjust to what is new. Establish formal feedback processes and provide forums for processing concerns and answering questions. Invite your vendor partner into these activities so that on-the-spot training can occur and issues quickly carried back for resolution.

A common mistake made after a new system is live and in use is the perception the project is over. Some activities will indeed be over, but the system now in place needs regular attention to ensure adoption and optimize benefits through continual improvement. Monitoring should be an ongoing process that not only informs ways to improve system use, but to monitor impact, monitor return on investment, and track progress toward goals.

To enjoy the benefits of a staffing program that is grounded in evidence, monitoring new research or information which impacts staffing is essential. The literature should be reviewed regularly so that policies and practices can be updated as warranted.

**Conclusion**

We are in a new day, where technology can help us more than ever in a move towards staffing excellence and staffing practices based on evidence. Highly successful implementations of new technologies are the result of good leadership. The effectiveness of staffing and scheduling has significant business, safety, and quality implications that sit at the heart of the nurse executive’s role. Nurse leaders bring leadership, experience, and wisdom needed at every phase of implementing a staffing and scheduling strategy, including using a technology tool. Those who get involved will enjoy the best results and achieve outcomes that benefit all.