

Workforce Challenges? Focus on Improving Operational Processes



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Hospitals today face major workforce management challenges. On one hand, the lingering financial stress of COVID-19 is forcing many health care organizations to lay off workers. On the other hand, many other organizations are struggling to recruit and retain staff to ensure basic services.

The contrast is striking, but it shows one thing clearly: While hospitals cut FTEs during the pandemic to control costs, this strategy is nearly played out. The only way most organizations will move forward in 2022 is to focus on *operational effectiveness* — finding untapped efficiencies and pursuing neglected performance improvement opportunities.

This is the first in a series of articles on how to use operational effectiveness to reduce costs, increase revenue and improve patient outcomes. Other articles in this series explore how to make surgical services more efficient, optimize the revenue cycle and fully leverage transitions of care.

In this article, we show how improving operational effectiveness will not only boost financial results, it can also help health care organizations address their biggest workforce problems.

TOOLS: LEAN ANALYSIS

One of the biggest challenges facing health care organizations today is staff burnout. Burnout has many contributing factors, but one of the main causes is poor workload management.

The problem: Most physicians and nurses today are expected to toggle back and forth between their core clinical work and non-clinical activities and administrative tasks. The need to continuously juggle competing responsibilities leaves caregivers stressed and unmotivated. The result is not only burnout but an increased risk of quality and safety issues.

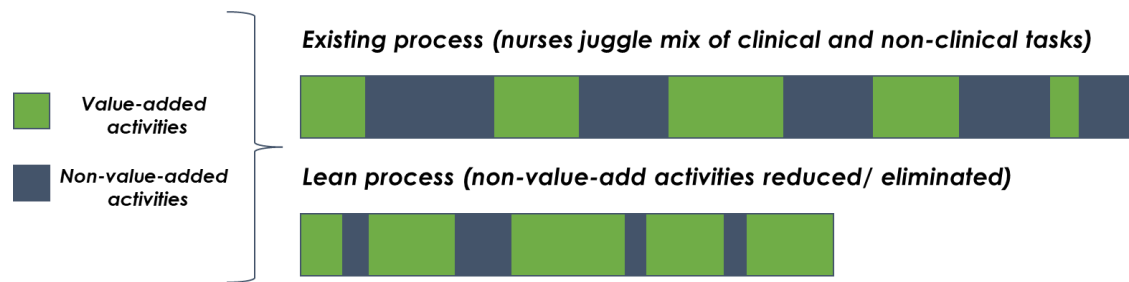
The opportunity: Using operational initiatives to improve the workload mix for clinical staff can alleviate burnout and increase staff satisfaction. One effective tool is the Lean concept of “value-added” versus “non-value-added” activities.

Say a hospital is facing limited capacity in its intensive care areas. Leaders realize they need to improve the working environment for ICU nurses. To do this, they convene a workgroup of ICU stakeholders to review workloads and staff responsibilities.

The group’s goal is to identify which activities add value to clinical staff in terms of patient outcomes and which activities can be delegated to non-clinical team members:

- Value-added activities include performing nursing assessments, making care plans, providing bedside interventions and conducting patient evaluations.
- Non-value-added activities might include patient transport, searching for equipment, supplies and forms, and redundant documentation activities.

Using this analysis, the team redesigns ICU nursing roles around their core clinical activities. Other activities are eliminated or reduced by delegating them to medical assistants, scribes and transporters. A “before and after” view of this initiative might look something like this:



Caregivers benefit because they can spend more time on the challenging, high-satisfaction work they were trained for. The organization benefits because higher-cost labor is devoted more efficiently to higher-value activities and working at top of license.

OUTCOMES: STRONGER WORKFORCE

This strategy will not transform the working environment overnight. However, Lean analysis and other change management efforts can create small improvements that immediately benefit staff and patients. In the long term, a steady series of these incremental improvements will lead to major gains:

Decreased turnover and lower recruitment costs. Improvements in the work environment can improve staff and physician satisfaction and engagement, which will increase retention rates. At scale, turnover improvements can significantly decrease the costs of recruiting and onboarding.

Improved value structure. Ensuring that the right skills are deployed to the right activities will allow an organization to deliver more value with the same FTE count. In some cases, efficiency improvements will enable staff members to be redeployed to other units.

Stronger organizational culture. Any successful effort to improve staff workloads will help build an overall culture of improvement. It will also support leadership initiatives to align team development projects with the organization’s strategic and operational goals.

NEXT STEPS

Many people think of operational improvement in terms of efficiency and cost control. The “best kept secret” of operational effectiveness is that it can also play a powerful role in building a strong workforce.

To explore more strategies for solving organizational problems through operational effectiveness, check out these resources:

- PODCAST: [Embracing Operational Effectiveness to Drive Performance](#)
- PODCAST: [The Health Care Workforce Challenge: Three Solutions that Work!](#)
- WEBINAR: [Reducing Clinical Variation and Increasing Margin: What, Why and How](#)

If you have any questions about this article or would like to discuss your organization’s workforce challenges, we welcome you to contact us any time:

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