

# Optimized Staffing & Workflow

## Case Study



**Novation**  
A VHA and UHC Company  
AWARDED SUPPLIER



*Novia Solutions placed an Interim Director of Medical/Surgical/Telemetry at an acute care hospital with just under 300 beds that is part of a health system with hospitals in 3 states and system-wide revenues of just over \$10B.*

### The Challenge

The hospital had a 44-bed high-acuity Telemetry unit with 104 total staff positions (including nurses, patient care techs and monitor tech/clerks), with a 24% vacancy rate, including 5 open charge nurse positions.

The unit was experiencing key challenges due to a high vacancy rate and high turnover, resulting in short-staffed shifts, increased overtime costs, and delays in patient flow. There was a lack of data to provide the insight to forecast the number of staff needed based on census and acuity levels. Leadership was fragmented due to the lack of a regular and consistent charge nurse on each shift; and workflow was chaotic with overflow patients placed in units across multiple floors. Additionally, communication was inconsistent, morale was low, and the unit was not meeting budget targets.

### The Approach

Novia Solution's interim leader conducted a staffing benchmarking study using standardized data from within the hospital system to identify variances in workload & acuity between this unit and other Telemetry units in the system. An hours-per-patient-day metric for the telemetry unit was identified that was comparable to the system metric, adjusting for the higher acuity, and a method was developed for tracking census and patient acuity level, and staffing to a core grid adjusted for acuity.

To determine what was contributing to the unit's high vacancy and turnover rates, Novia's interim leader met with staff and hospital leadership to research the unit history, and developed an action plan to address key areas. A collaborative approach was then used to engage unit staff and physicians in articulating the unit's challenges, opportunities and needed solutions.

In addition, Novia's interim leader discovered that the workflow of utilizing overflow beds on other floors was inadvertently causing patients to be miscategorized for billing purposes as regular medical/surgical patients rather than the higher acuity telemetry patients, resulting in potential lost revenue for the care of those patients.

### Bottom Line Results

- Right-sized staffing based on census and acuity
- Reduced incremental overtime by nearly 75% per pay period
- Reduced turnover to <2%
- Re-energized and re-engaged staff
- Recaptured lost revenue

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### The Solution

To close the staffing gaps, a focused recruiting campaign was launched with Novia's interim leader partnering closely with Human Resources and working as a team to expedite the recruiting/interviewing cycle to fill the substantial number of open positions. The result was 23 of the original 25 open staff positions were filled within 5 months, including all 5 charge nurse positions, largely from in-house nursing staff that were attracted to the new energy and teamwork of the unit.

As a result of the benchmarking study, staffing targets were adjusted and staffing plans were created to match real-time census and acuity levels, and a new process was put in place to review the acuity staffing every 4 hours to ensure alignment to targets. New staffing levels and work processes reduced end of shift overtime, improving budget compliance. Additionally, the interim leader worked with revenue cycle staff to identify and realign patient identification processes to ensure accurate patient billing.

New communication protocols and standards were developed to increase clarity such as shift hand-offs, bedside change of shift reports, and change of shift team huddles, with new processes, leadership structure and training implemented to ensure sustainability. Patient flow processes were improved through aligned staffing levels and a collaborative team approach to patient placement, involving unit staff, case management and hospitalist staff.

The staff's identification of what wasn't working in the environment along with how to change it, became the basis for developing new ground-rules and expectations for working together as a cohesive team, and fostered a new culture for the unit with behavioral expectations for how staff treat and interact with one another. The new expectations were used to hold everyone accountable to the vision they collectively created, supporting a team-focused, positive work environment.

***These changes provided a stabilized workforce with consistent leadership presence, improved quality and consistency of patient care, renewed budgetary compliance and an enhanced revenue stream. As a result, the unit enjoyed a new found reputation as a healthy, stable, fiscally sound work environment, and was able to successfully recruit a permanent Director.***

### About Novia Solutions, Inc.

Novia Solutions is a nationwide healthcare leadership placement agency, specializing in interim leadership placement. As specialists in healthcare, Novia has cultivated an extensive team of top tier, specially trained, professional interim leaders who are committed to executing your organization's strategic priorities. Successful Interim Leadership starts with a strong partner who delivers seasoned experts at a moment's notice to stabilize turmoil, manage change, and produce results.



Our sister company, Novia Strategies, has one goal: To help hospitals and health systems improve their operations, quality and financial strength so they can continue to care for patients. As one of the longest-established clinician-owned healthcare consultancies in the country, Novia has the experience, flexibility, structure and size to implement results quickly and to create the culture of change needed to sustain those results.

Novia works within individual departments, and also delivers integrated services across the entire organization as the team partners with clients to operationalize their strategic plans. Key focus areas include:

- Care Management Transformation
- Surgery
- Safety & Quality
- Non Labor
- Labor Productivity
- Compensation & Benefits
- Revenue Cycle
- Pharmacy
- Technology