

# HOW TO RECRUIT AND RETAIN A TALENTED HEALTHCARE WORK FORCE

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EXHIBIT C Committee Name **HealthCareDelivery** Document consists of **19**

**Slides**

☒ Entire document provided.

☐ Due to size limitations, pages \_\_\_\_\_ provided. A copy of the complete document is available through the Research Library (775/684-6827) or e-mail [library@lcb.state.nv.us](mailto:library@lcb.state.nv.us).

Meeting Date: **2-19-04**

# **Problem Overview**

- **The nursing shortage is a local, regional, national, and global problem. This shortage is unlike any in the past and projected to persist far into the future.**
- **Despite 2.5 million registered nurses in the United States, a shortage exists in nurses with needed specialties, skills, and experience. Particularly, nurses are greatly needed in areas such as critical care, emergency room, and the operating room.**

# **Nevada**

**520 Nurses per 100,000**

- **Nevada now has the worst nurse-to-population ratio in the nation.**
- **California is 544**
- **National Average is 782**



# **Disturbing Trends**

- **The Federal Bureau of Labor Statistics projects that during the next six years, the need for RN's will grow by 21%. Demand is expected to exceed supply by 2010 and statistics suggest that by 2015, the deficit will reach 114,000 full time RN's needed nationally.**
- **There is a lack of appropriate diversity in nursing workforce.**
- **1 in 5 nurses plan to leave the field within 5 years because of unsatisfactory work conditions.**

# **Long-term Strategy**

**To provide the best possible nursing care for regional citizens, we must strive to ensure that:**

- **Supply of nurses meets the demand for nurses**
- **Right nurse with the right competencies is in the right job at the right cost**

# **Current Reality at UMC**

## **Demographics:**

**Licensed 542 acute care beds – 34 acute rehab beds**

- **Occupancy rate 95-100%**
- **3,600 employees**
- **1,200 RN's employed**
- **> 80% of our nursing staff are RN's; supported by LPN's and CNA's**
- **Consistent nurse-to-patient ratios**



# Number of Unfilled RN Positions

<b>Statewide</b>	<b>650.1</b>
<b>UMC</b>	<b>45</b>

## RN Attrition Rate

<b>Statewide</b>	<b>12.6%</b>
<b>UMC</b>	<b>3.38%</b>

# **What to do??? What to do???**

## **(Temporary Fixes)**

- **Recruitment bonus**
- **Hikes in salaries**
- **Increased use of registry, travelers**



## **Strategic Initiative:**

- **Alternative recruitment strategies to address nursing and other clinical staffing shortages.**



# Strategic Objectives

- Concentrate on recruiting for the “magnet” hospital
- Focus on retaining nursing talent

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- **Highest cost involved in delivering healthcare is related to human resources.**
  - **Largest group of human resources are nurses.**
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# **OUR EMPHASIS SHOULD BE:**

**Goodbye to Recruitment and  
Retention ...**



**Hello to Attraction and Passion**





# **Keys to Success**

- **Mission of the organization**
- **Excellent pay, benefit package, and retirement**
- **Sign-on bonus, tuition reimbursement, scholarship opportunities**
- **Longevity bonuses**
- **Teaching environment and wide array of services**
- **Promote higher learning and offer tuition reimbursement**
- **Flexible scheduling – self scheduling**

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- **Limited floating of personnel – consider scheduled floating to alleviate “burnout”**
  - **Low RN vacancy rate**
  - **Outstanding nurse-to-patient ratios**
  - **High percentage of RN staff**
  - **Autonomous practice – active participative councils**
  - **Positive relations between nurses and medical staff**
  - **Exemplary front–line leadership**
  - **Visible executive leadership**
  - **Prohibit use of mandatory overtime**
  - **State of the art technology**
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# **UMC Believes**



- **To increase the overall “attractiveness” of the healthcare professions to youth and other audiences.**
- **To enhance partnerships and linkage between healthcare education and healthcare delivery worlds**
- **To rebuild commitment and passion into the work of healthcare**



# **Keys to Success**

- **Dedicated nurse recruiter**
- **On-line applications – web site**
- **“On-the-spot” hire approach**
- **Expand recruitment office hours on demand**
- **Finder’s Fee Program**
- **Video Productions for Recruitment**
- **Curriculum development – specialty area**

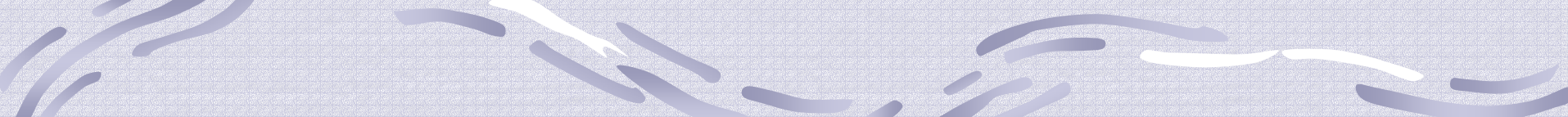
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- **Promote higher learning, advanced degrees, certifications**
  - **Collaboration with nursing schools**
  - **Volunteer Programs**
  - **Career days**
  - **Motivation and Reward Programs**
  - **Focus on professional practice environment**
    - **dress code, code of behavior, professional autonomy**
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- **Flexibility**
  - **RN Rollover Program**
  - **Embrace the hiring and training of new graduates**
  - **Apprentice nurse program**
  - **Partnered with local, accessible daycare / childcare**
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# **A Few Thoughts on Redesign**

- **Design models to retain and productively work our “mature” nurses in the workforce. RE: Case managers, utilization review, charge nurses, admitting nurses.**
- **Re-tool other healthcare workers, i.e., Dietary, Housekeeping, Transportation, EKG/Lab Tech, Secretarial**

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- **Utilize technology to gain efficiency – robotics, automated medication systems.**
  - **Use of automation – clinical documentation**
  - **Expand the role of the family in patient care**
  - **Establish leadership development programs and succession plans**
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