

6 Steps

to Rethinking Nursing Productivity to Enhance Organizational Performance

It's time to change the way we define, measure, and monitor nursing productivity. Aside from the inevitable effects of COVID-19, several other factors are influencing the healthcare industry and the approach to caring for patients. Some of these include the transition from volume-based to value-based care, the anticipated shortage of registered nurses, and the need for more refined metrics that measure both the inputs and outputs of the productivity equation.



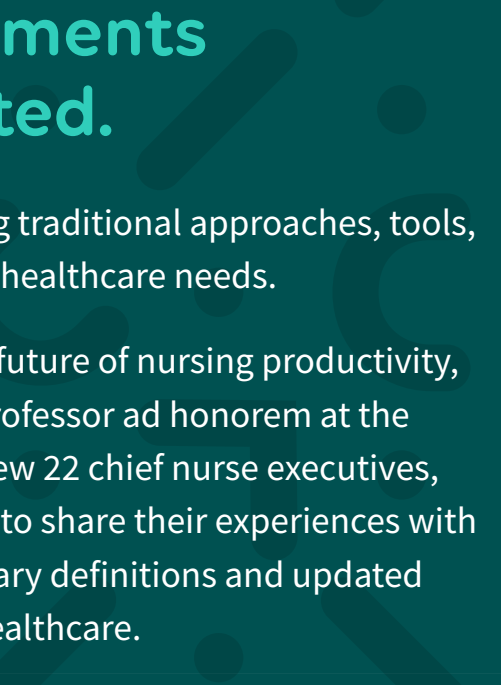
Nursing productivity is the fine balance between the inputs (nursing resources) and quality/safety/financial outcomes.

Each organization should determine the right balance.



For the past 50 years, nursing productivity has been expressed in terms of:

- Nursing hours per patient day
- Midnight census
- Number of patients per nurse
- Number of orders written by physician per day
- Average daily census



These measurements are antiquated.

Reimagining nursing productivity means abandoning traditional approaches, tools, and processes that do not sufficiently meet evolving healthcare needs.

To gain firsthand perspectives on and help drive the future of nursing productivity, UKG partnered with Joanne Disch, PhD, RN, FAAN, professor ad honorem at the University of Minnesota School of Nursing, to interview 22 chief nurse executives, chief financial officers, and industry thought leaders to share their experiences with the concept and to make suggestions for contemporary definitions and updated processes to improve this critical measurement of healthcare.

The time has come to reimagine nursing productivity not just for the benefit of those who work in and lead the profession but also for patients who depend on the effective functioning of these important care providers.

Here are six steps to rethinking nursing productivity in your organization.

1

Create a governance structure responsible for nursing productivity.

- Is your workforce a strategic focus for your executive leadership team?
- Is there a process or structure in place for your organization to develop and review workforce strategy and tactics?

~55%
of hospital expenses are labor-related.¹



2

Define a consistent approach to data definitions and measurement methods.

- Who is accountable in your organization for data science and data management?
- What workforce-related data is provided to your executive team, and does this team define consistent measures for all departments?



3

Design dashboards of essential data consisting of quality/safety and financial measures.

- Is your executive team engaged in the review of data representative of your complete workforce?
- Do your dashboards provide the right information to drive workforce-related decisions for all care settings in your organization?



4

Execute a budget process that provides viewing in as close to real time as possible.

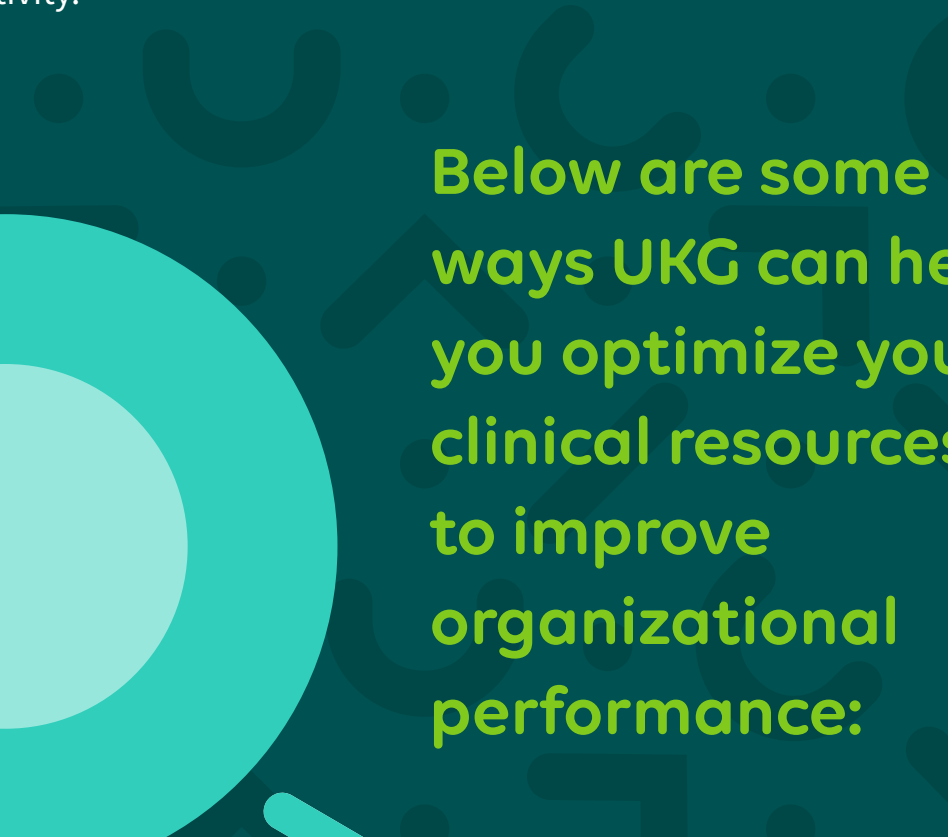
- What is your budget planning process, and how do you monitor real-time financials and adjust as needed?
- Is your organization able to predict and forecast based on real-time financial information?
- Are you considering a model to do real-time budget forecasting versus the traditional annual budget approach?



5

Educate and engage staff to understand concepts of nursing productivity.

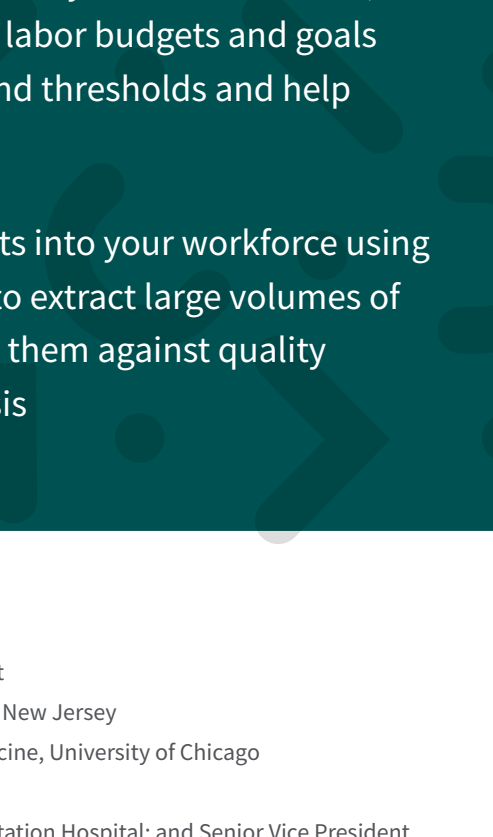
- What is the process to engage all staff in understanding the budget process and how productivity is measured and monitored?
- Is there adequate local understanding of productivity and the data available to make workforce decisions appropriately?



6

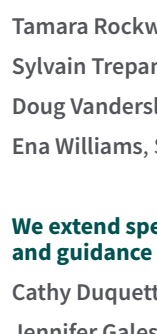
Design and implement staffing and leadership models that support integration across the care continuum.

- Is your organization reviewing productivity data by service line or department, and does this view align with your strategic workforce direction?
- As your organization focuses more on the journey of a patient across care settings, how does your data view align with this model?
- Do you have a strategy to stay the course and sustain your improvements over time?

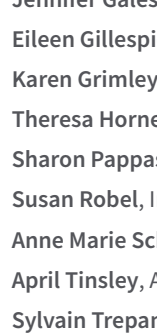


The time is now to rethink nursing productivity for a better future for both nursing professionals and patients. This must be a collaborative effort by executive leaders who jointly determine the best ways to define and monitor nursing productivity.

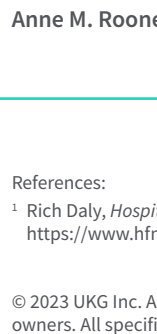
Below are some ways UKG can help you optimize your clinical resources to improve organizational performance:



Our advisory services help drive standardization, governance, and long-term planning



UKG Employee Voice™ — our advanced natural language processing- and machine learning-based employee survey tool — provides real-time, deeper insights from employees' open-ended survey responses to empower real actions and outcomes for your engagement strategy



With UKG Pro Workforce Management™ (formerly UKG Dimensions®) Analytics, your organization can easily align labor budgets and goals with key performance indicators, metrics, and thresholds and help reduce employee burnout

You can access and transform deeper insights into your workforce using UKG Pro Workforce Management Data Hub to extract large volumes of labor hours and financial data and compare them against quality outcome metrics for deeper strategic analysis

Study Participants

Don Berwick, President Emeritus and Senior Fellow, Institute for Healthcare Improvement
 Helene Burns, Senior Vice President and Divisional Chief Nursing Officer, Jefferson Health New Jersey
 Marshall Chin, Richard Parrillo Family Professor of Healthcare Ethics, Department of Medicine, University of Chicago
 Beth Cloyd, Principal, Advisory Services Solution, Premier, Inc.
 Julie Creamer, President, Northwestern Memorial Hospital; President, Marianjoy Rehabilitation Hospital; and Senior Vice President, Northwestern Memorial Healthcare
 Regina Cunningham, Chief Executive Officer, Hospital of the University of Pennsylvania
 Cathy Duquette, Executive Vice President, Quality and Safety and Chief Nursing Executive, Lifespan
 Mary Beth Kingston, Chief Nursing Officer, Advocate Aurora Health
 Kim Landers, Vice President of Patient Care and Chief Nurse Executive, Morris Hospital and Healthcare Centers
 Giancarlo Lytle-Edrosolo, Chief Nursing Officer, Providence Saint John's Health Center
 David Marshall, Senior Vice President and Chief Nursing Executive, Cedars-Sinai
 Erik Martin, Vice President, Patient Care Services and Chief Nursing Officer, Norton Children's Hospital
 Jack Needleman, Fred W. and Pamela K. Wasserman Professor Chair, Department of Health Policy and Management, UCLA Fielding School of Public Health
 Nan Nelson, Executive Vice President, Financial Operations, Advocate Aurora Health
 Todd Nelson, Director, Partner Relationships and Chief Partner Executive, Healthcare Financial Management Association
 Sharon Pappas, Chief Nurse Executive, Emory Healthcare
 Susan A. Reeves, Executive Vice President, Dartmouth-Hitchcock Medical Center
 Betty Jo Rocchio, Senior Vice President and System Chief Nursing Officer at Mercy
 Tamara Rockwell, Clinical Finance Director, Financial Planning, Dartmouth-Hitchcock Medical Center
 Sylvain Trepanier, Senior Vice President and System Chief Nursing Officer, Providence
 Doug Vanderslice, Executive Vice President, Finance IT and Real Estate and CFO, Boston Children's Hospital
 Ena Williams, Senior Vice President and Chief Nursing Officer, Yale New Haven Hospital

We extend special thanks to the members of the Chief Nurse Executive Advisory Board at UKG for their feedback and guidance during this project:

Cathy Duquette, Lifespan
 Jennifer Gales, Rochester Regional
 Eileen Gillespie, Northwest Community HC (at the time of the study)
 Karen Grimley, UCLA
 Theresa Horne, Tenet
 Sharon Pappas, Emory Healthcare
 Susan Robel, Intermountain Healthcare
 Anne Marie Schenk, Johnson Memorial Hospital
 April Tinsley, Ascension Health
 Sylvain Trepanier, Providence

A special thank-you to these experts who shared their time and talent:

Courtney Green, Regional Nurse Executive, UKG
 Kathy Owens, Lead Product Manager, Healthcare Extensions, UKG
 Anne M. Rooney, Anne Rooney & Associates, Inc.

References:

¹ Rich Daly, *Hospitals innovate to control labor costs*, Healthcare Financial Management Association [October 1, 2019], found at <https://www.hfma.org/topics/hfm/2019/october/hospitals-innovate-to-control-labor-costs.html>