

PROACTIVELY RESPONDING TO ORGANIZATIONAL STAFFING NEEDS THROUGH REGULAR WORKFORCE PLANNING MEETINGS

Nancy Raponi RN; Mariekris Albano BBA; Derek Hutchinson RN, BScN, MN; Jennifer Yoon RN, BScN, MSc (QI/PS), PhD Student



DESCRIPTION

Nursing workforce planning is essential in supporting stability in healthcare organizations. Humber River Health (HRH) prioritizes strategic workforce planning to ensure that inpatient units operate seamlessly. The Nursing Resource Team (NRT) was intended to support day-to-day staffing requests due to sick calls. However, other factors such as unfilled vacancies and leaves of absences (LOAs) have greatly impacted staffing needs. Without having accurate oversight of all factors impacting day-to-day staffing needs throughout the organization, processes designed to meet staffing demands were largely reactive in nature. Implementing monthly workforce planning meetings was a proactive approach to improve visibility of gaps associated with persistent staffing needs and facilitating the NRT's ability to meet these needs.

OBJECTIVE

To improve visibility of organizational shortages through monthly workforce planning meetings and proactively support operations.

ACTIONS TAKEN

NRT fill rates, illustrating the percentage of staffing requests fulfilled, are monitored to understand the impact of workforce planning decisions on supporting unit needs. HRH's Workforce Planning Manager met monthly with Human Resources Recruiters and Inpatient Clinical Unit Managers to discuss factors impacting nursing shortages (Figure 1). Simultaneously, data regarding staffing requests and associated fill rate was trended to depict the NRT's ability to meet unit needs.

SUMMARY OF RESULTS

Workforce planning meetings promoted visibility on organizational shortages. By adjusting hiring practices within the NRT in accordance with vacancy and LOA rates, the NRT enhanced their ability to meet unit needs. For example, in June 2023, an additional 15 NRT nurses were hired in response to an increased demand for nursing staff. With an 81% fill rate in July 2023, preliminary findings have determined that the onboarding of additional staff has been beneficial in meeting unit needs despite shortages (Figure 2).

LESSONS LEARNED

By comparing the number of vacancies and LOAs against the fill rate, the Workforce Planning Manager was able to adjust NRT hiring practices accordingly.



UNIT	ON LOA RN FT	ON LOA RN PT	ON LOA RPN FT	ON LOA RPN PT	VACANCY RN FT	VACANCY RN PT	VACANCY RPN FT	VACANCY RPN PT	TOTAL RN	TOTAL RPN
06E	0	0	0	0	10	3	0	0	13	0
06W	0	0	0	0	13	0	0	0	13	0
07E	0	0	0	0	2	1	0	0	3	0
07W	0	0	0	0	1	1	0	0	2	0
08E	0	0	0	0	1	0	1	0	1	1
08W	0	0	0	0	3	2	0	0	5	0
09E	2	2	0	1	1	4	0	1	9	2
09W	2	0	0	0	0	0	0	0	2	0
10E	0	0	0	0	0	2	1	0	2	1
10W	0	0	0	0	0	0	0	0	0	0
11E	0	0	0	0	0	0	0	0	0	0
11W	0	0	0	0	0	0	0	0	0	0
12E	0	0	0	0	2	0	0	0	2	0
12W	2	0	0	0	2	0	0	0	4	0
13E	0	0	0	0	1	3	0	0	4	0
14E	0	0	0	0	0	1	0	0	1	0
13W	0	0	0	0	4	2	0	0	6	0
RCC - F	0	0	0	0	0	0	0	0	0	0
RCC - C	0	1	0	0	0	1	2	0	2	2
TOTAL	6	3	0	1	40	20	4	1	69	6

Figure 1. Data collected from Workforce Planning Meetings with Clinical Unit Managers are entered to trend factors impacting workforce shortages, such as LOAs and vacancies.

Figure 2. NRT Fill Rates in comparison to Count of Vacancies/LOAs from August 2022 to July 2023. Increased visibility of nursing shortages associated with vacancies and LOAs supported informed decision-making on hiring practices within the NRT to increase the NRT Fill Rate (# of requests met / # of staffing requests x 100%). In June 2023, 15 additional nurses were hired to support staffing needs. Since August 2022, there has been a 25% increase in the NRT's ability to meet unit needs

