APPROPRIATE SKILL MIX IN NURSING: A CHANGE MANAGEMENT SOLUTION

by

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ABSTRACT

The dilemmas of appropriate staffing mix in nursing units across the country are often overlooked by managers and directors. In an era of staffing shortages and balancing the unit bottom line financials, it is often that hires are made just to have people in staffing grids. It falls upon managers to hire a force of lesser experienced nurses to meet core staffing needs. Newly registered nurses comprise a significant proportion of the workforce now on acute medical and surgical wards (Duffield, et. al., 2010). As the country focuses on staffing ratios and safe, quality care it is often just as important to look at skill mix of staff in order to balance out the competency levels. Studies have shown that better skill mixes of staff result in better teamwork and satisfaction among caregivers and change management efforts involving the staff are more successful. This paper will review potential solutions and the implementation strategies to develop and sustain a model that will help address skill mix balancing concerns.
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The implementation of a solution for staffing skill mix is one that must be handled delicately. In order to develop a model that will be accepted it is best to work to obtain buy-in from the people that will be impacted by the model the most. Often staffing schedule implementations do not have the feedback of staff; therefore, they are prone for failure. A complete and well developed process of implementation will allow less room for failure and will help to identify weaknesses in the plan should they arise. It is also important to develop an acceptance into the process by the leadership whose investment of the plan may determine financial and staff satisfaction impacts.

In the development of a strategy to address skill mix balances, the research of staffing processes is important to evaluate. There may be other potential solutions that other facilities have tried, so background knowledge helps identify the benefits as well as the lessons learned. Some staffing models that have been utilized only focus on how to determine staffing levels but very few that fully address balancing skill level. Having plenty of staff does not guarantee good care (we saw unacceptable care on well staffed wards, and excellent care on understaffed ones), but not having enough is a sure path to poor care (Robb, Maxwell, & Elcock, 2011). Most nurses often feel that more numbers of staff is needed. Having more staff would logically lead to more availability of other team members to monitor one another and help when the need arises (Kalisch & Lee, 2011). One model that can help to determine the needs is based on the Winnipeg Assessment of Nursing Needs Tool (WANNT). The WANNT provides reliable objective information about skill levels needed in order to assist the charge nurses in making staffing decisions and in determining when the unit might not be safe (Sawatzky-Dickson & Bodnaryk, 2008). However, the WANNT tool mainly addresses the acuity and staffing workload to determine the staffing for the unit with a little information that is based skills.
Patricia Benner's studies believed the focus on skill mix impacted the patient's health and recovery. Her work, is proposed that experience can “offer the basis for the expert nurse to move from two-dimensional linear thinking to a more fluid practice, gaining from three-dimensional thinking (Lynheam, et al., 2009, p. 2483-2484). In balancing the skill mix it will help to aide in assuring that not only the needs of the staff are met, but the patient focus and help to assure the quality of the patient experience is met. Based on this concept a formal tool was developed with staff input to determine the advancing levels of the nurses as they begin as novice and gain experience into experts. The proposed solution is the development of multiple staffing tools to help plan and implement a balanced schedule. Each tool evaluates and determines the current staff, the balances of skills each shift, and the rules of the road to make sure the schedule balance is maintained.

The process began with the development of an organized competency grid listing the names of the staff and focus on the set definitions of the skill level each held by a color code that signifies their experience levels and composed of the job role, education level obtained, a color coded block based on their skill level. The staff personalized education goals to advance themselves to higher levels. Knafl and Deatrick (2000), have determined that the concept of knowledge “entails synthesizing existing views of a concept and distinguishing it from other concepts” with the purpose of resolving gaps or inconsistencies in the knowledge base of the discipline (p.39).

The next step evaluated the workload requirements to determine the number of staff needed on a given shift. Facilities utilize workload systems much like that of Army facilities and focuses theirs on the Workload Management System for Nursing to help evaluate the workload for departments. Because the nursing workforce accounts for the largest cost of care in every hospital, achieving and sustaining efficiency is critical to managing the delivery of high quality care (Wolgast, Taylor, Garcia, & Watkins, 2011). A schedule template that outlines the number of experience levels was developed to allow a shift by shift determination to enhance the staff needed. The purpose of the color code will help balance out
the schedule for each shift. The rules around how to maintain the skill level balance were made in order to prevent situations where the schedule may fluctuate. These limitations, such as that of only same competency levels trading shifts, will help to maintain the balance of skill mix.

The implementation plan includes the nurse's feedback to determine many of the concerns and issues they were encountering in their work setting to develop the appropriate plan to address their concerns. The plan's success needs staff input in order to pinpoint the most effective process. In having their input the development of the staffing model can gain support with the implementation. If plans are developed without their support the results would be apt to fail. It is important that the people who are working the process have a say because they know the dynamics of their own processes. In most situations leaders make change without the support of their staff and their plans are prone to failure. Not gaining the adequate support will create hostility, decrease employee satisfaction, and will likely eliminate any potential successes the plan could achieve. Therefore, the roll out plan would include sharing the project proposal to the staff and asking for their feedback. In creating an open forum atmosphere, the staff will be able to share and will help to improve or address the potential problems.

The implementation included a full definition of the skills, the schedule process, and all of the rules that encompass appropriate staffing mix maintenance. In order to determine if the process is effective it would be important to develop quality measures and reports to aide in proving any potential theories on how the plan made improvements. Surveys for the staff to take will also show if there was an impact in morale. If issues are noticed with implementation, timely response and correction should be utilized. An important factor to assure that all voices are heard, will be important as problematic issues occur when the leaders are addressing them and working on the resolution.

Other factors of influence to success are the collection of quality information. Most staff feel that adding more staff helps but financials limit the staffing at the bedside. Numbers do not always improve quality,
knowledge improves quality. Data collection around the process would reduce costs, but keeping employees engaged, reduction of turnover, improvement of quality care, and reduce the stress of building a schedule.
CONCLUSION

There are proven benefits in developing a systematic approach to determining skill levels of staff and a balanced work schedule. The overall impact reduces turnover in investing in nurses the financial benefits are often seen. There are other known factors in advancing the novice nurse to an expert nurse because there is a valid attempt to promote professional growth. Knowledge is a lifelong journey that each professional nurse and healthcare leader needs to commit to when working in the healthcare profession and helps to build a better skill mix of staff. Nurse's interactions with patient can define the organization, rather it be good or bad. The investment in staff can help transform a negative to a positive. The hope is that the next big push in research will bear a relationship to addressing the right skill mix over numbers.
References


