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Title: Acuity-Based Staffing

Instructions: this is for western governors university c-824 task 1. this is chapter 3-5 of the capstone project. i have included chapters 1-2 for reference along with the rubric and references.

Acuity-Based Staffing

Name

Module

Module Code

Abstract

        South Texas Health System assigns patients regularly based on nurse availability and

not patient complexity or acuity. The lack of acuity-based staffing has led to poor nurse

retention, recruitment, patient experience, and quality outcomes. The current project aimed at

implementing a standardized acuity-based staffing tool at South Texas Health System to

improve staff and patient satisfaction. Various steps were implemented to set-up the acuity

based staffing model. Various secondary sources were analyzed to determine the

appropriateness of such a model before a preliminary acuity-based staffing tool was created.

Various stakeholders were also engaged to ensure collaboration. The final staffing tool was

then created and required post-implementation plans adopted to ensure that the project is

sustained into the future.

Chapter 3: Implementation

The main aim of the project was to develop a standardized acuity-based staffing tool

at South Texas Health System to improve staff and patient satisfaction. Various steps were

therefore undertaken to implement the acuity based staffing model. First, 30 scholarly articles

were collected that provide evidence to the proposed change. The literature materials

collected supported the adoption of the model and showed that an effective staffing tool

increased patient and staff satisfaction, enhanced the quality of care and enhanced

communication between different stakeholders. The second step involved developing the

preliminary acuity-based staffing tool. Relevant stakeholders were engaged and the necessary

technologies were utilized to develop the tool. Thirdly, the preliminary acuity based staffing

tool was critically analysed and reviewed and necessary edits implemented. The fourth stage

involved developing the final staffing tool. The last stage involved discussing the tool with

relevant stakeholders to ensure that they can use the tool and support the change.

Changes that occurred to the original implementation plan during this process.

There were various changes that occurred after replacing the original staffing tool

with the acuity-based staffing tool. First, the new staffing tool enabled nurses to assess the

acuity of the patients more accurately and efficiently as compared to the previous tool.

Secondly, the new tool replaced the nurse-patient ratio staffing model which was ineffective

and led to numerous patient deaths, poor outcome and poor nurse and patient satisfaction.

The new model increased the accuracy and efficiency of staffing hence resulted to reduced

number of patient deaths, increased patient outcome and increased nurse and patient

satisfaction.

Barriers associated with the implementation of the project

The implementation of the project was exposed to various challenges. First, there was

lack of support from some of the nurses and members of the management. After engaging the

professionals who were reluctant to support the project, it was clear that they feared adopting

a new system. Various educational sessions were organized to critically explain the system

hence showing them that the new system would actually enhance their services and improve

their satisfaction. The sessions were critical in increasing the number of professionals who

supported the project.

Additionally, it was challenging to conduct the change from the nurse-patient ratio staffing model and immediately adopt the new model. To ensure that no gaps are created when changing to the new model, the new model was implemented in three phases.

Collaboration

The project required various professionals to collaborate and effectively engage to ensure that the project is implemented successfully within the budgeted time and resources. There was collaboration between different parties. First, there was collaboration between the hospital administration and the project implementation team. The hospital administration including the nursing officer, chief executive officer (CEO) and chief financial officer (CFO). Various meetings were held with the hospital administration to inform them of the progress of the program and its expected changes. Engaging the administration regularly ensured that the necessary resources were provided in time. For example, the CFO ensured the necessary financial resources were released on time.

The nursing leadership were also instrumental in the implementation of the project. The collaboration between the nursing leadership and the other nurses ensured that all employees had the necessary information regarding the project. For example, the nursing managers and directors communicated the major benefits of the project and also motivated the nurses to embrace the model.

Chapter 4: Project Considerations

The most transformational aspect of the acuity-based staffing tool at South Texas was the reduction of length of stay and increased nursing and patient satisfaction. The tool was more effective and easier to use as compared to the original model which was based on nurse-patient ratio. The reduction of length of stay enhanced the reputation of the facility and also ensured the delivery of quality care. The model also reduced the number of deaths and also increased nurses' retention. Only a limited number of nurses left the facility after the

adoption of the new model as compared to the high number of nurses leaving the facility during the old model.

The project's success can be attributed to effective collaboration and communication between different professionals within the health facility. Engaging the management and nursing leadership ensured that the project was supported by various relevant stakeholders. Future projects should ensure that different professionals interact and exchange ideas to ensure that the projects are accomplished successfully. Additionally, the project evaluated how rates of death can be reduced and patient satisfaction enhanced by focusing on the staffing model. Future projects can determine how patient satisfaction can further be enhanced through other strategies including effective bedside handover and patient-centered care among other interventions.

The project anticipated that the project would lead to an increase in nurse satisfaction. However, a large proportion of the nursing professionals were satisfied by the project but some viewed the new model as complex. It is however expected that nurse satisfaction will increase with time and not drastically as expected.

It was expected that the project would lead to an immediate increase in nursing satisfaction but the actual increase was lower than expected. Although it is expected that more nurses will appreciate the new model after using it for a longer period, the deviation from expectation demonstrated that expected results should be categorized as short-term or long-term. In future projects, the expected outcomes will be separated into long-term and short-term to reduce such unexpected instances. Short-term outcomes will be experienced immediately the project is implemented while long-term outcomes will occur at a later date hence proper preparation will be undertaken.

The capstone project bridged the gap between evidence and current practice in various ways. First, before the new staffing project was implemented a research was conducted to

determine the viability of the new model. The research demonstrated that a credible staffing model would reduce patient deaths and increase patient and nurses' satisfaction which was in-line with the objective of the project. Secondly, the project was based on various theories and concepts including Lewin's Change Theory and evidence-based practice. Considering such theories and concepts when creating the project was instrumental in bridging the gap between evidence and current practice.

The health facility that implemented the acuity-based staffing tool created various short-term and long-term plans to support the post-implementation of the project. The long-term plans included creating a team of professionals drawn from various departments to regularly review the project and ensure that risks are detected early and mitigated. Secondly, the facility tasked the CFO with creating an annual budgetary allocation of the project to ensure its sustainability. The short-term plans included holding monthly meetings with nurses to allow them to express their concerns regarding the project. Additionally, the facility will ensure that all new nurses are trained on the system before they start working.

To ensure effective post-implementation of the project, various resources will be required. First, the nursing educational department will create an educational program to train current and future employees on the program. The educational program will require resources including trainers and training materials like books and brochures among others. The program will also require additional financial resources to finance upgrades and maintenance expenses.

Chapter 5: Reflection

There are various MSN program outcomes that were integrated into the project. First, the MSN program objective of utilizing inter-professional communication to improve healthcare outcomes was integrated into the program. The program educated various health care professionals and created avenues for close collaboration. Secondly, the program

integrated the objective of integrating advances in technology into healthcare. The

standardized acuity-based staffing tool allows the use of advanced technology to ensure that

the staffing process is undertaken effectively. Effective software and hardware were adopted

to ensure that the tool is effective and achieves the objectives of the project.