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Teleseminar conferences will began July 2008. If you have any subjects for discussion, please submit them by "[Clicking Here](#)" so that they may be placed in the selections of seminars. Be sure to watch newsletter for more information.

Participate in our [forum](#) to share ideas, review reports on the latest trends and topics in the medical field, and interface with other medical professionals!



Are Agency Nurses the Answer?

As more and more states are faced with the possibility of legislated nurse to patient ratios, many CNOs are beginning to ask "where will the staff come from?" Already many institutions are spending millions of dollars on agency and traveling staff. Although few hospitals require mandatory overtime, there is a perception that it is an expectation and staff are frequently holding administration hostage to get extra bonuses, double time or other perks for work over and above their FTE.

This month I asked Peter Callan, an associate with a strong background in RN Recruitment and Agency Use Reduction to discuss his thoughts on the subject.

End the Culture of Agency Use By Peter Callan, RN

The issue of agency usage has been a thorn in the side of CNOs, CEOs, CFOs and HR leaders for over three decades. The concerns have remained the same: high cost, lack of commitment to mission, physician and patient satisfaction, and the extra burden placed upon existing staff, which accelerates turnover. As the economy and trends have changed over the decades, so too has the level and nature of supplemental staff. Gone are the days of scheduling agency staff on a shift by shift, day by day basis. In most hospitals, that has been replaced with 13 week travel nurse, or local agency nurses on contract for two weeks to six months.

There is general acknowledgement that contracting with agency staff has raised the level of care and professionalism and provides some short term peace of mind. However, the shift to longer contracts for supplemental agency nurses has created a new set of problems: The involvement of a culture of agency dependency with its associated costs.

So are you one of those hospitals that are agency dependent? I have identified ten questions to determine if there is a culture of agency usage developing in your facility.

1. Do you allow agency staff to extend or renew contracts?
2. Do you have any agency nurses that have been at your facility for more than a year?



Previous Articles

You will find informative articles on various topics, as well as previous editions of our newsletter by either clicking the links below, or visiting our web site at

www.achievementtutors.com

Note: Documents will open in a new window for printing or viewing.

More of these articles will be available soon, check back later.

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[Crisis In The Country](#)
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[Hardiness Development adds to the Bottom Line](#)

3. Do you adhere to request policies for additional agency staff?
4. Is a vacant position ever 'held' so that an agency nurse can remain?
5. Are agency nurses permitted to compete for time off with your own permanent staff?
6. Does each stakeholder know the exact cost of an agency nurse?
7. Does each unit manger know what is spent each month on agency staff, both collectively and in their unit?
8. Is there a system in place to monitor or curb agency nurse overtime?
9. Is there an alarm system in place when agency usage reaches a certain point?
10. Are there routinely scheduled meetings between administration, nursing, finance and HR to discuss staffing and recruitment?

Any strategy to lower or eliminate agency nurse usage requires the involvement and commitment from all stakeholders: administration, nursing, HR, finance, education and marketing. Agency nurse utilization isn't simply a nursing department issue. And the frequently mandated, "cut the nursing budget" will not lead to the desired results.

After working with hospitals nationally we have determined that a culture of agency usage can be eradicated only if there is:

- Acknowledgement that a culture of agency usage exists
- Clarification for accountability for agency nurse usage
- Improvement or overhaul the process for scheduling staff
- Systematic approach to convert agency nurses to staff
- Support and options provided to unit managers
- Immediate reduction among the units that are the highest users
- Elimination of all agency usage by low end users
- Optimization of the prn/float pool
- Transformation of the recruitment process
- Implementation of an agency usage 'alarm system'

By developing, implementing and monitoring a systematic approach to culture change, the chain can be permanently broken, and the bottom line enhanced. Working together, administration can stop the bleeding and blaming while improving not only staffing, but ultimately, patient care.

For further information on ending agency usage or recruitment transformation, please call Vanessa at 877-331-4321 to schedule a 15 minute phone conference.

Leslie Furlow, PhD, MSN is president of AchieveMentors, Inc, an operations and management consulting firm that has assisted clients nationwide with *Achieving success through Mentoring excellence*. AchieveMentors works with hospitals to develop and implement more effective communication models and to engineer more effective processes. In addition, AchieveMentors provides temporary leadership through experienced nurse leaders who provide interim management and mentoring services to hospitals across the country. For more information visit their website at www.AchieveMentors.com.



PO Box 38 - Cleburne, TX 76033 - 877-331-4321 toll free - 866-203-0622 fax
www.achievementors.com info@achievementors.com