



Root Causes Analysis and Recommended Solutions to Growing Demand for Experienced Nurses in Specialty Roles

Executive Summary (May 2016)

Purpose

Across Southern California, there is a sense of growing demand for experienced nurses in specialty areas. The Hospital Association of Southern California (HASC) engaged HealthImpact to work with its members to explore this issue and recommend solutions.

Scope

HASC established a workgroup of administrators, nurse educators and Human Resources leaders from 18 member hospitals to: 1) review data to inform contributing causes, addressing if a shortage of specialty nurses truly exists, why it happened and how HASC can help; 2) gain consensus on root causes; 3) determine the approximate size of the gap; and 4) recommend strategies or programs to resolve the issue.

Process

From January through early May 2016, HASC hosted a series of workgroup meetings: three in-person and three by teleconference. Following the first two in-person meetings, the nursing school voice was deemed critical and brought into the conversation. Meetings included data review, small group exercises, large group discussion, and short surveys, focused on relationship development and consensus building.

Results and Recommendations

The workgroup determined a shortage of specialty nurses does exist and prioritized seven areas, with hiring projections over the next year as follows¹: Critical Care: 2,320; Emergency: 1,392; Perioperative: 1,072; Labor & Delivery: 864; Neonatal ICU: 688; Case Manager and Care Coordinator: growing.

Key root causes were identified as loss of specialty nurses due to increased retirements; turnover caused by intensity and stress of these work environments; high cost of recruitment and onboarding; and insufficient pre-licensure education specific to specialties.

The workgroup recommends a series of programs, targeting students, new graduates, and experienced nurses. Programs would be shared across hospitals, in partnership with local nursing schools, and include pre-licensure elective courses for specialty roles, transition programs for new and existing nurses, and a Case Management and Care Manager course or series.

Strategies to address the causes should reduce competition for nursing staff, increase retention, lower overtime and traveler expense, connect both new and experienced nurses to needed roles, and benefit multiple hospitals in the region. Next steps are in development, and include a phased approach for program implementation and evaluation across the region and across specialty areas.

Talking Points and a slide presentation are available with further details of this initiative.

¹ Based on work group sample in February 2016 extrapolated to 175 HASC hospitals