Workforce Planning: The Key to Recruitment Success

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Overview

Workforce planning is:
Methodological process of analyzing current workforce, identifying workforce needs, establishing gap between present and future needs and implementing solutions.

Key feature- need to project workforce requirements and then design strategies to meet them.
Background

Nursing Shortage:
60,000 in Canada by 2022 and 1.05 million in US by 2022 (CNA & AACN)
Average age: Canada 45.2, Ontario 45.7 (CIHI) and TOH 42.7

Workforce characteristics linked to patient outcomes:
↑ RN staffing associated with ↓ mortality and adverse events (Kane et al)
Higher direct care RN hours related to shorter LOS
Higher nurse patient ratios higher mortality rates and failure to rescue (Aiken et al)
Uniqueness of nursing workforce:
  61% nurses work Full Time
  95.6% female
  81% 35 and older with 17% 55 and older (CIHI)
  24/7 work

Proactive approach:
  Traditional approach of hiring only when positions vacant would not sustain
  Need to have accurate prediction of need and develop plan to attract
Methodology

Literature review
No universal agreement on means & methods used in workforce planning (Anderson)

FTE’s vs. people count
Funding in FTE’s, but don’t graduate or hire FTE’s
Conversion varies with FT/PT balance
50% = 2.2 and 70% = 1.62 (Smith)
Need to know how many people are needed to recruit
Logic Model

Developed with stakeholder input, then presented to larger stakeholder group for input

Logic models are a way of thinking or the story of the program

Simplified picture demonstrating the relationships among resources invested, activities that take place and the benefits / changes that are expected to result

Describe a sequence of events thought to bring about benefits or change over time
<table>
<thead>
<tr>
<th>Components</th>
<th>Activities</th>
<th>Target Audience</th>
<th>Short Term Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Determining uniqueness</td>
<td>Review data demographics, hours of operation &amp; staffing</td>
<td>Nurses</td>
<td>Will understand requirements of workforce</td>
</tr>
<tr>
<td>Understand organizational supply</td>
<td>Review current state and trends</td>
<td>Human Resources</td>
<td>Clear picture of organizational supply</td>
</tr>
<tr>
<td>Understand organizational demand</td>
<td>Review components of demand</td>
<td>Corp Ops</td>
<td>Understand all different demand components</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Human Resources</td>
<td></td>
</tr>
<tr>
<td>Determine organizational inflow</td>
<td>Review education requirements, regional supply &amp; recruitment opportunities</td>
<td>Human Resources</td>
<td>Understand potential organizational inflow</td>
</tr>
<tr>
<td>Develop workforce planning</td>
<td>Develop model</td>
<td>Human Resources</td>
<td>Will implement workforce planning cycle with evaluation</td>
</tr>
<tr>
<td></td>
<td>Complete model predictions</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Perform gap analysis</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Perform solution analysis</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Perform evaluation</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
# Definitions

<table>
<thead>
<tr>
<th>Item</th>
<th>Definition</th>
<th>Assumptions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total nursing workforce</td>
<td># Nurses + # vacancies</td>
<td>Represents total # nurses needed to provide services</td>
</tr>
<tr>
<td>Normal churn</td>
<td>Mean external turnovers 5 years</td>
<td>Stable as a percentage of workforce</td>
</tr>
<tr>
<td>OT and Agency</td>
<td>OT + Agency hours /1950 = FT with excess hours PT positions</td>
<td>New positions created first year to eliminate OT and agency</td>
</tr>
<tr>
<td>LOA's</td>
<td>Mean last 5 years + temp positions/2</td>
<td>Stable and is adjusted as percentage of total workforce</td>
</tr>
<tr>
<td>Retirements</td>
<td>Percentage of those retiring last 5 years of those retirement age</td>
<td>Assume stable</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Assume no influencing factor such as SARS</td>
</tr>
<tr>
<td>Program</td>
<td>Program growth or decline in people</td>
<td>Predictions for new positions or deleting current positions</td>
</tr>
</tbody>
</table>
5 Steps

Supply Analysis
Demand Analysis
Gap Analysis
Solution Analysis
Evaluation
Workforce Planning Model

Supply: Current #’s + Current Vacancies

Demand: Outflow (Churn, LOA’s) + OT/Agency + Growth + Retirements

Gap: New Grads in Region + Other External Recruitment

= Solution

Evaluation
Reporting

Quarterly Targets
Monitor Overall progress

<table>
<thead>
<tr>
<th>Group</th>
<th>1st Quarter</th>
<th>2nd Quarter</th>
<th>3rd Quarter</th>
<th>4th Quarter</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>New Grads</td>
<td>170</td>
<td>22</td>
<td>13</td>
<td>7</td>
<td>212</td>
</tr>
<tr>
<td>Experienced</td>
<td>34</td>
<td>36</td>
<td>22</td>
<td>21</td>
<td>113</td>
</tr>
<tr>
<td>Total</td>
<td>203</td>
<td>57</td>
<td>35</td>
<td>3</td>
<td>325</td>
</tr>
</tbody>
</table>
Findings

Growth / Decline:

2 methods: planned program changes and population
don't include aging population needs
Evaluation

Done quarterly and annually
Includes target recruitment numbers and recruitment activities
Goal: get the most useful information to the key decision makers in the most cost effective and realistic fashion
Provides evidence of our successes and shortcomings
Links daily recruitment activities to specific goals and objectives
Benefits

- Having target recruitment number
- Monitoring progress & report on organizational impact quarterly and annually
- Adjust if change
- Budget & Resource justification
- Decreasing the impact of the nursing shortage
- Proactive approach
- Improved patient outcomes and efficiencies
Limitations

Accuracy of information received on growth / decline
External factors such as SARS
No way to know how many nurses hold positions at more than one organization within the region which affects their movement and ability to move
Assumptions include retirement age and turnover stable
Lessons Learned

When done regionally, not every organization can provide the required data easily
External factors such as changes in funding agreements
Healthy vacancy rates to allow for movement within the organization
Increased turnover and associated costs when not enough opportunities
Has been used for other groups within TOH with the same variance
Conclusion

Use of evidence based workforce planning model moves organizations from reactive to proactive
Supports the business of the organization and has several roles in planning: budget justification, demonstrates need and the current state for the next 3 years
Supports “out of the box” recruitment strategies
Provides a new way to do old task
Puts the organization in a good positions to ensure we have the right staff to provide quality patient care.
References


Contact Information

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