At no time has managing nurse resources been more important to hospitals than today. Nursing is a key component of care delivery and cost. In acute care facilities, nursing can account for as much as 50% of total costs and provides 95% of its patient care (Nguyen, 2006). Hospitals and clinicians are increasingly asked to take on more risk under value-based care. Reimbursement is tied to quality outcomes, such as 30-day readmit penalties, patient satisfaction scores and a diverse range of quality metrics.

Maintaining a stable nurse workforce and the right competency mix can be challenging. When nursing is under-staffed, the subsequent stress on nurses causes burnout. If a hospital is not able to maintain a stable nurse workforce, not only are patient outcomes, safety and satisfaction at risk, but nurse satisfaction and retention deteriorates, resulting in additional recruitment, overtime and agency personnel costs.

Nursing resources are allocated based on assessed patient acuity, which can be complex for nurses to assess. There is increasing legislature for mandated staff ratios, and growing evidence that staffing aligned with patient acuity directly and positively impacts Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) survey scores and adverse events. Acuity-based staffing solutions are becoming the standard of care in hospitals to manage valuable nurse resources and deliver quality care.

The importance of acuity-based staffing solutions increases as hospitals transition to risk-based reimbursement and data-driven management:

**Figure 1 - Acuity-Based Solutions to Strategic Workforce Planning Continuum**

<table>
<thead>
<tr>
<th>Key Environment Drivers</th>
<th>FROM</th>
<th>TO</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Patient complexity and acuity</strong></td>
<td>Patients considered similar based on diagnosis/unit population</td>
<td>Differentiating patients based on variability and complexity</td>
</tr>
<tr>
<td><strong>Nursing workforce</strong></td>
<td>Core staffing based on HPPD*</td>
<td>Flexible staffing based on patient’s needs for care, incorporating patient volume, workload and complexity of care</td>
</tr>
<tr>
<td><strong>Reimbursement and financial environment</strong></td>
<td>Targets- and incentive-based</td>
<td>Strong financial management incorporating patient acuity and complexity</td>
</tr>
<tr>
<td><strong>Nursing and finance collaboration</strong></td>
<td>Traditional collaboration</td>
<td>Strong nursing, finance and organization-wide collaboration</td>
</tr>
</tbody>
</table>

* Nursing hours per patient day (HPPD)

Today, a strategic nurse workforce plan with technology is essential. A new breed of acuity-based staffing technology solutions is available today. Nurse managers can plan and manage staffing with greater ease, consistency and accuracy based on multiple considerations important to nursing. These systems support a standardized approach to assessing patient acuity where transparent classification is a byproduct of the clinical documentation process. Nurse administrators can maintain a stable nursing workforce, improve patient and nursing satisfaction scores, and avoid incidental overtime or agency personnel costs. These data-driven systems enable accurate staffing, real-time management, and the forecasting, analysis and reporting for a new era of CNO and CFO partnership.

Leading solutions enable:

- Patient classification methodology that is evidence-based and updated every few years to match the evolving needs of the clinical specialty and hospitals practices;
- Ability to assess patient complexity and make objective, evidence-based recommendations to improve staffing allocations;
- Benchmarking database to compare performance against other hospitals and departments, incorporating acuity as an important comparative data point;
- Ability to quantify how changes in nurse staffing impact relevant patient outcomes and safety;
- Management reporting capabilities to help with nursing labor budgets and strategic planning; and
- Sophisticated forecasting capabilities to help with future staffing challenges.
Nurses are the key users of acuity-based staffing solutions. Key questions CNOs might ask include:

- Does their current staffing system take into account acuity and complexity, and enable consistent and accurate staffing allocations?
- Is there high confidence in ability to achieve patient satisfaction scores and safety and quality outcomes required for reimbursement?
- Is there a high level of nursing satisfaction, workforce stability, and cost management?
- Is there a strong partnership between nursing and finance to manage value-based care requirements?

Nursing leadership interested in pursuing the use of an acuity-based staffing solution should:

1. Identify the best-fit technology solution for their environment;
2. Identify a small nursing team for implementation and continued coordination;
3. Validate precision of acuity data and methodology from potential vendors for your needs;
4. Develop a collaborative dialogue with finance on nurse staffing;
5. Identify IT support for optimal integration of the acuity-based staffing solution;
6. Define, plan and implement new workflow, decision-making, and collaboration within nursing; and
7. Develop a program to educate nursing on the value and use of the solution.

ACUITY-BASED STAFFING SOLUTIONS: A FOUNDATION FOR A NEW ERA OF CFO AND CNO PARTNERSHIP

Staffing based on patient acuity is central to ensuring quality patient outcomes, a stable nursing workforce and financial viability. Acuity-based staffing solutions are an essential element of a strategic nurse workforce plan. CNOs and CFOs who utilize acuity-based staffing solutions can anticipate improved productivity, workforce cost-savings, and accurate and consistent staffing directly tied to patient need. They will have the data to meet mandates and requirements, manage staffing in real time and continuously improve performance. Equipped with a solution like this, a new level of CNO and CFO partnership can be achieved, focused on delivering the highest possible quality of care, safety and cost management.