3/2 Staffing Model: A New Team Approach

A Team Staffing Model to provide additional support to staff

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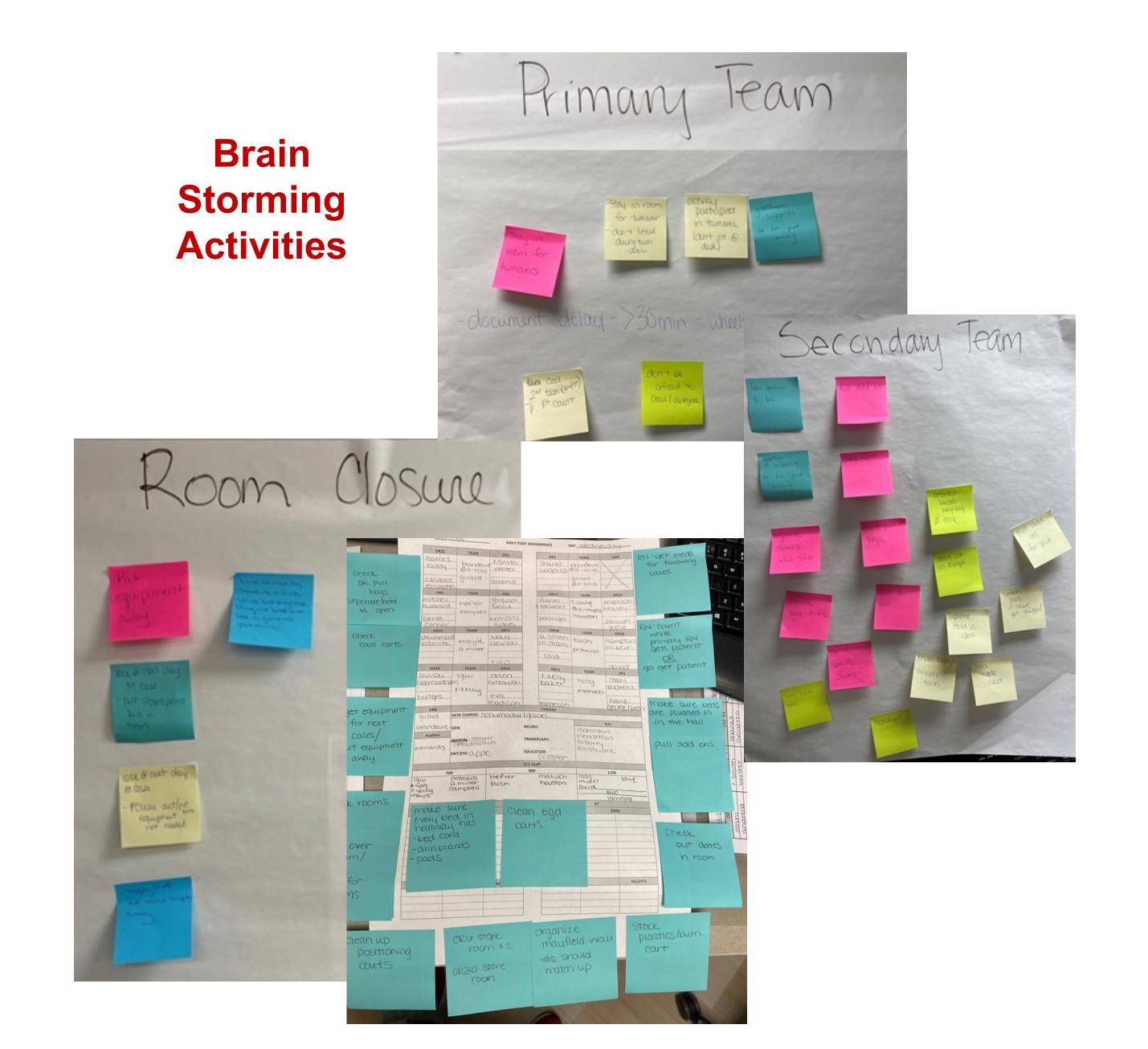


Background/Assessment

Prior to the Covid-19 pandemic, as a nation, there was a shortage of operating room nurses. Unfortunately, over the last 3 years, the pandemic has exacerbated a nursing shortage due to nurses leaving the profession, retiring early, or shifting their career outside of the acute care setting. Combined with the nursing shortage and burnout, there has been an increased need for nursing support and innovative ways to meet the surgical demand. To support the current nursing surgical team and busy operating room schedule, a new staffing model with a team approach was developed and implemented.

Project Goals

- Provide support for the surgical team
- Reduce variability in the surgical schedule
- Improve patient throughput



Description of the Team

- Registered Nurses and Surgical Technologist in an Academic Level 1 Trauma Medical Center
- 17 Operating Rooms with multiple different specialties

Preparation and Planning/Implementation

Preparation and Planning

- Staff made site visits to other hospitals to learn about different staffing models
- A group of project champions enlisted to provide the foundation for implementation
- The new model allows for 3 teams to be assigned to 2 Operating Rooms (3/2 Staffing Model)
 - 1 RN and 1 Scrub Tech make up a team
- Roles and responsibilities of Primary and Secondary Team were defined
 - Primary Team Members- core team members in the surgical suite
 - Secondary Team Members- Team members that flex between two operating rooms
- New daily staffing sheets were designed (4 options)
 - Staff had 1 week to vote
 - Vote results: 40:7:2:1

Implementation

- Soft role out of new staffing model
- Brought to light adjustments that needed to be made
- Staffing model was presented at staff in-service and implemented

Primary Team OR16 TEAM OR18 Secondary Team

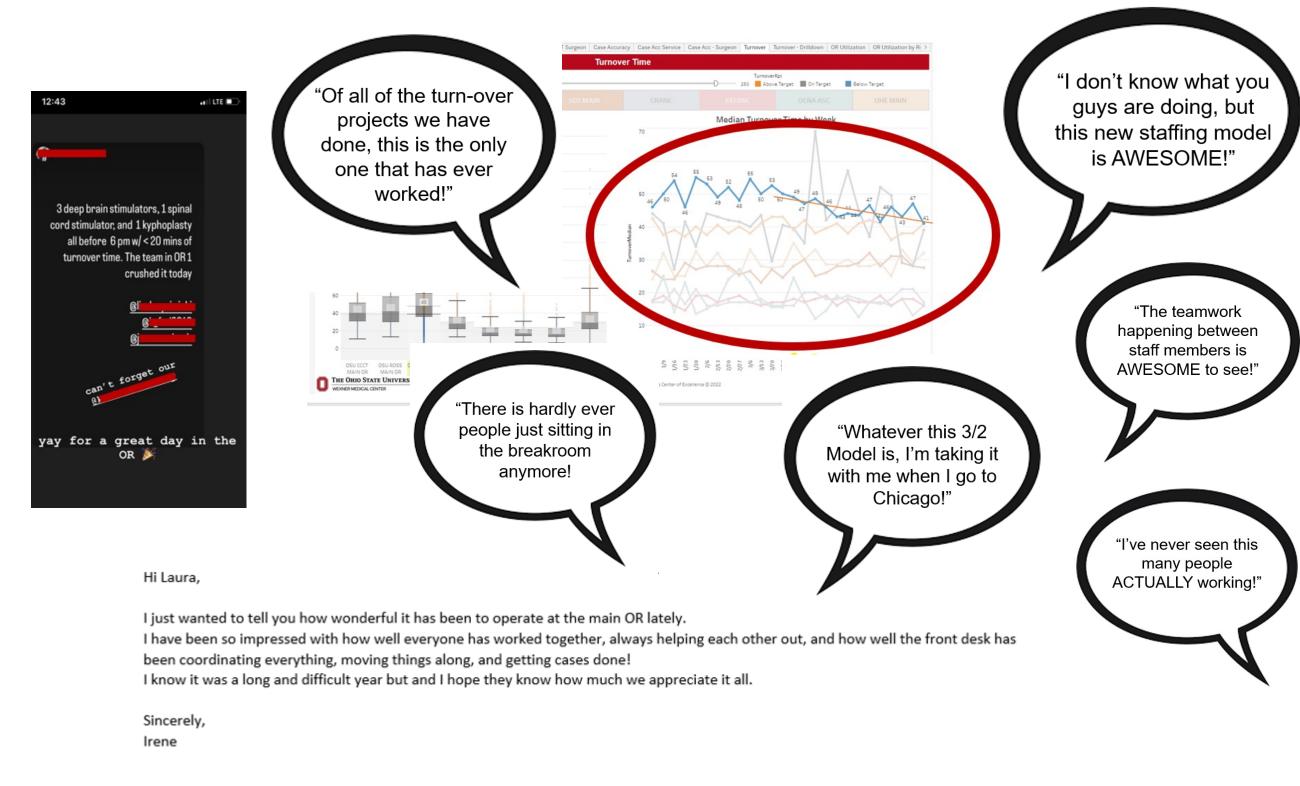


References

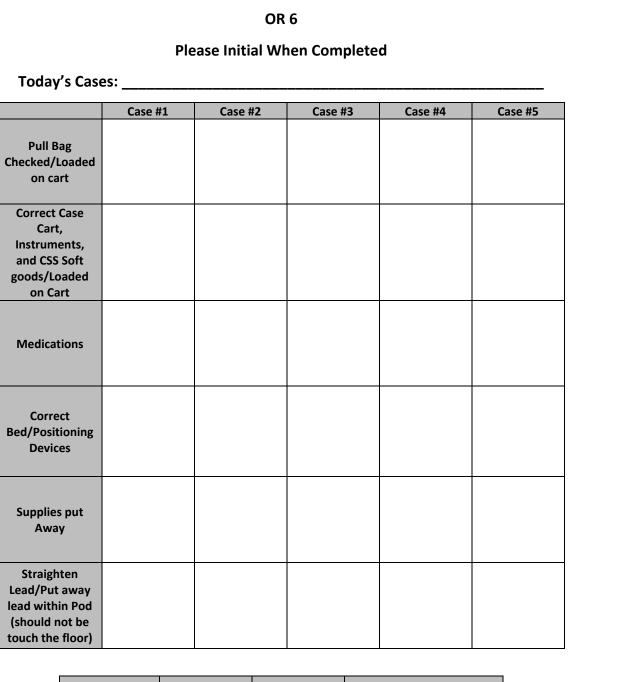
- Ann-Mari Fagerdahl, Eva Torbjörnsson, Martina Gustavsson, Andreas Älgå, Moral Distress Among Operating Room Personnel During the COVID-19 Pandemic: A Qualitative Study, Journal of Surgical Research, Volume 273, 2022, Pages 110-118.
- Vassell P. (2016). Improving OR Efficiency. AORN journal, 104(2), 121-132. https://doi.org/10.1016/j.aorn.2016.06.006

Outcome

- Positive feedback amongst multiple disciples
- Decrease in room turn over by an average of 7 minutes per case over the course of 20 weeks

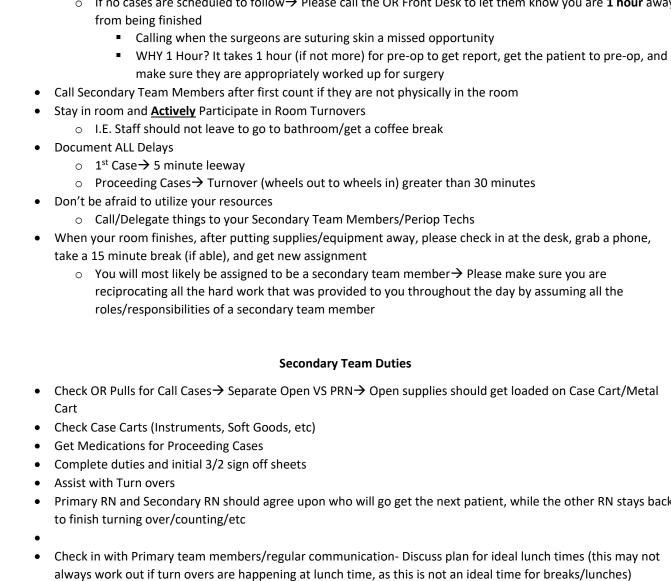


Each OR has a room specific laminated paper hanging on the Core Door for secondary team members to sign off and complete tasks/defined roles and responsibilities



Room/Pod specific duties for secondary team members to

complete



• Gather Supplies/Items to be put away by Secondary Team Members

Hourly Rounding on Assigned rooms

 Put unused supplies away Put equipment away

> **Defined roles** and responsibilities

End Of Day/Room Closure

If the bed will be used for 1st case, configure the bed accordingly

• It will be the responsibility of BOTH the primary AND secondary team members to Close the Roon

LEAVE THE USED BED IN THE OR FOR TERMINAL CLEANING