From Evidence to Practice: Developing an Outpatient Acuity-Based Staffing Model

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**Background:** Reliable and valid outpatient oncology acuity-based staffing systems are lacking. The existing staffing model in a midwestern cancer center demonstrated inefficiencies related to unpredictable patient flow, treatment regimen complexity, and physician practice variation.

**Objectives:** A project was initiated to implement an evidence-based oncology outpatient staffing system maximizing patient satisfaction, employee engagement, and equity in workload distribution. The strength of evidence for 34 articles and 12 additional documents was moderate to strong, supporting development of an acuity-based staffing system. Evidence indicates that nursing assignments directly contribute to patient flow efficiency. An acuity point system was established.

**Methods:** A six-month pilot was completed comparing a control group to a pilot group, with defined maximum acuity points per nurse. Inter-group comparison included acuity scores, patient satisfaction, wait time, employee engagement, nurse overtime, and turnover.

**Findings:** Resultant changes included scheduled nurse time (preparation, charting, lunch breaks), revised acuity-based patient scheduling, and a revised nursing care delivery model. Implementation of the acuity-based system provided consistent staffing, improved efficiency, reduced overtime, and improved patient and staff satisfaction. Recommendations include adaptation of the acuity-based system to other outpatient settings and development of staffing level benchmarks.

**Keywords:** evidence-based practice; outpatient; acuity-based staffing; cancer center

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