



FLEX STAFFING with SCP Health



The volume trends throughout the global health crisis have been difficult for hospitals and health systems across America to predict, react to, and recover from. Throughout this crisis, SCP Health (SCP) has been supporting our partners with a variety of flex staffing options to help them adjust to volume fluctuations in Hospital Medicine.

Commitment to Collaboration

SCP espouses a consultative approach to our partnerships, which cultivates collaboration and teamwork between hospital/system leadership teams and our medical/operational leaders. We are committed to providing our partners, clinicians, and patients the best support—especially in this universally challenging season.

In early March of 2020, we recognized a comprehensive, customized response plan was imperative to ensure that our partners and their clinical teams were as prepared as possible.

When volumes across the country started to surge and/or dip, we sat down with each one of our partners' executive teams to level set. We discussed questions such as:

- ▶ What is our total capacity, and where are we now?
- ▶ What is predictive modelling showing?
- ▶ What are the local infection trends?
- ▶ What are the available personnel resources within the organization and community?
- ▶ How comfortable is your medical executive committee and front-line medical team with using telehealth in the hospital?
- ▶ What do you need from us today, and going forward?

As answers began to surface, we introduced various strategies for flexing Hospital Medicine staff up and down according to needs. Together, we determined the best combination of strategies for each hospital. In some cases, there was an element of change management required to socialize new tactics and tools with the current staff. The final step was using the same teamwork-based approach to prepare and ultimately deploy these strategies.

This process is tailored to the needs of each facility and their Hospital Medicine programs, but can be easily and quickly replicated at any facility facing similar staffing challenges and questions; all it takes is a spirit of collaboration and a commitment to success.

TOGETHER WE HEAL

Flex Staffing Strategies



National Response Team

150+ physicians, nurse practitioners, and physician assistants available to support hot spot emergency sites, telehealth needs, and more. Declared state of emergency enhances pool/bench strength of local and regional references.



Redeploying Internal Resources

Leveraging CRNAs, anesthesiologists, critical care resources and other roles seeing low work volumes in other areas of the hospital where more support is needed. Use partial shifts - physicians and other members of the clinical care team- when necessary to account for census fluctuations. Prioritize daily decision-making huddles to stay on top of changes in staffing needs and resources.



Patient Information Line

Hospital receives custom 800 number to publicize to community; number connects directly to SCP clinical and nonclinical Care Coordinators for centralized screening and informational services.



Regional Response Team

Leverage SCP regional bench strength by using regional clinicians to increase/enhance the capacity of the core team; Use of regional support mitigates challenges due to licensure and issues associated with travel and is an excellent staffing option during times of mandatory quarantine of local core team.



24/7 Telehospitalist Response Team

Rapidly deployable virtual hospitalist telemedicine platform to support surge, triage, daytime rounding, COVID units/isolation units, night coverage, and more. This support option is deployable in combination with any of our flex staffing strategies.



Local Core Response Team

First line of defense. Request core clinical team flex up to add shifts/days to add additional support for local provider groups where and when needed. Engage with community PCPs to create an integrated PCP-HM team. Leverage the community clinicians willing to partner to cover surge volumes inclusive of night call to support the core team.

See it in Action

40-bed hospital	49-bed hospital	49-bed hospital	139-bed hospital
<ul style="list-style-type: none"> ▶ Typical volume: 15 patients/day 	<ul style="list-style-type: none"> ▶ Typical volume: 16 patients/day 	<ul style="list-style-type: none"> ▶ Typical volume: 17 patients/day 	<ul style="list-style-type: none"> ▶ Typical volume: 35 patients/day
<ul style="list-style-type: none"> ▶ Census high during COVID-19: 41 patients (173% increase) 	<ul style="list-style-type: none"> ▶ Census high during COVID-19: 35 (119% increase in) 	<ul style="list-style-type: none"> ▶ Census high during COVID-19: 34 patients (100%) 	<ul style="list-style-type: none"> ▶ Census high during COVID-19: 2 COVID waves with ~60 pts (70% increase in)
<ul style="list-style-type: none"> ▶ Flex staffing strategies used: Local Core Response Team + 24/7 Telehospitalists 	<ul style="list-style-type: none"> ▶ Flex staffing strategies used: Local Core Response Team of MDs and NPs + Additional day rounding Telehospitalists 	<ul style="list-style-type: none"> ▶ Flex staffing strategies used: Local Core Response Team covered 6-10hr. shifts + Night call coverage to allow the hospitalist team a reprieve 	<ul style="list-style-type: none"> ▶ Flex staffing strategies used: Wave 1 – Local Core Response Team Wave 2- Regional Response Team + Locums tenens