As health care facilities continue to face tight economics, the staffing picture of ambulatory surgery centers (ASCs) is much the same as last year. Compared to a year ago, most ASC managers say the number of open positions, staff turnover, and recruitment are about the same.

There are few open positions, and if you are a new graduate or an RN without OR experience, finding a job at an ASC may not be easy.

But ASCs are not affected as much as hospitals, according to the 20th annual OR Manager Salary/Career Survey. Two-thirds (66%) of ASC managers said the economic downturn had affected their staffing in the past 6 months, basically unchanged from 69% in 2009. This compares to 78% of hospital directors and managers.

Responses to downturn

Reducing overtime, requiring staff to take time off without pay, and eliminating open positions were once again the top three responses to the downturn.

Some commented these strategies have worked. “We have managed to keep the work hours down without jeopardizing quality of care,” said one manager.

For many ASCs, the economic situation is serious—43% of respondents report “financial difficulties,” up from 31% in 2009. These managers point to declines in elective surgery (81%) and changes in Medicare reimbursement (68%) as the primary sources of financial problems.

The OR Manager Salary/Career Survey was mailed in March to 1,000 OR Manager subscribers and an external list of nurse managers of ASCs, with 182 usable responses for an 18% response rate. The margin of error is ±6.7% at the 95% confidence level. Results from the remainder of the survey, including salaries and benefits, will appear in the October issue.

The largest group of survey respondents (45%) work in physician-owned ASCs, followed by joint-venture (25%), corporate/LLC (20%), and hospital-owned (8%) facilities.

Cutting back

With surgical procedure volumes and annual operating budgets down slightly from 2009, more managers reduced overtime (51% vs 44%), with fewer eliminating open positions (14% vs 20%), but the differences aren’t statistically significant. More than a third (37%) required staff to take time off without pay (essentially unchanged from 36% last year), and 13% (the same as in 2009) reduced use of agency/travel staff.

Some ASC managers cited staff participation as a key factor in making adjustments. “Ability to cross-train RNs to all areas and the willingness to...
flex when the schedule is tight,” said one respondent in answer to the question to name the OR’s “greatest improvement” in the past year. “Ability of staff to be very flexible in adjusting their schedule to fit the needs of the department,” one commented, while another leader noted, “working together to take time off without pay—so no one loses their job.”

**Staffing numbers**

There are few open positions for either RNs or STs. Most ASCs (83%) had no openings for RNs, and 89% had no openings for STs. ASC leaders reported only 0.3 RN and 0.2 ST open FTE positions. Both RN and ST positions are open an average of 9 weeks.

As in 2009, 79% of respondents reported no change in open RN positions compared to the previous year, with 85% (compared to 89% last year) reporting the same for STs. Only a small number of ASC leaders reported a higher number of open RN (4%) and ST (2%) positions. In all, 16% of managers said open positions had decreased for RNs, similar to the 12% reporting a decrease in ST open positions.

Most leaders (80%) said staff turnover, a key indicator of retention, stayed about the same for RNs compared to a year ago; 9% reported a decrease, and only a small number (11%) noted an increase. The pattern was similar for STs: 86% said turnover stayed the same, 8% reported it decreased, and only 6% noted an increase.

**Recruiting stays consistent**

Most ASC managers found recruiting experienced staff unchanged from a year ago. But in spite of stable turnover numbers, about one-fourth of ASC leaders reported greater difficulty in recruiting RNs (27%) and STs (21%). Nearly two-thirds of respondents (63% for RNs, 62% for STs) found recruiting to be about the same. Only a few (10% for RNs, 17% for STs) said it was easier.

“We were able to fill open positions and maintain our surgical case load,” said one respondent.

**‘Not welcome’ sign for new grads**

ASCs have not rolled out the welcome mat for new graduates or RNs without OR experience. More than half (54%) hire neither. While 45% hire RNs without OR experience, only 19% hire new graduates.
Lack of experience isn’t always a drawback. One leader commented, “Hired a new graduate from surgical tech school. She has made my job a lot easier. She still has a lot to learn.”

**Success in difficult times**

In spite of challenging times, ASC managers report successes. When asked for the greatest improvement in the past year, several cited staffing examples, such as “no turnover,” “decrease in staff turnover,” and “employee retention.”

ASC managers are taking creative steps to staffing and economic challenges, including “cross-training preop and PACU RNs to OR” and “switching anesthesia providers from anesthesiologists to CRNAs.”

Some respondents even reported they have been able to expand the number of cases and their list of surgeons. “We continue to increase our cases with present surgeons and are recruiting new surgeons,” said one manager.

Profitability is key to staying in business, as one respondent acknowledged: “Reduced overtime, had no layoffs, made a profit despite decreased census.” Still, quality is the desired outcome. “We continue to strive to be the best for our patients,” said one manager.

—Cynthia Saver, RN, MS

*Cynthia Saver, president of CLS Development, Inc, is a freelance writer based in Columbia, Maryland.*