

# Why You're in **Danger** of Building the Wrong Workforce

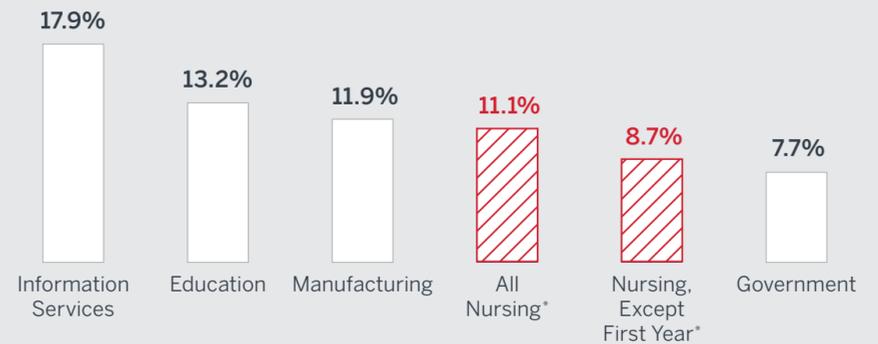
## Are We Building the Wrong Workforce for Tomorrow?

To succeed in the future, health care organizations will need to provide care in the lowest-cost, most appropriate setting—and to accomplish this, they'll need a different complement of people than in the past. But if today's leaders don't revise their workforce planning strategy, they're in danger of building the wrong workforce.

And investing in the wrong workforce would be costly. In light of relatively low nurse turnover rates, leaders can't rely on attrition to make workforce adjustments. In fact, labor investment mistakes leaders make today will take 10–12 years to correct.

## Today's Workforce Decisions Will Linger for a Decade

Average Turnover Rate Across Industries, 2014



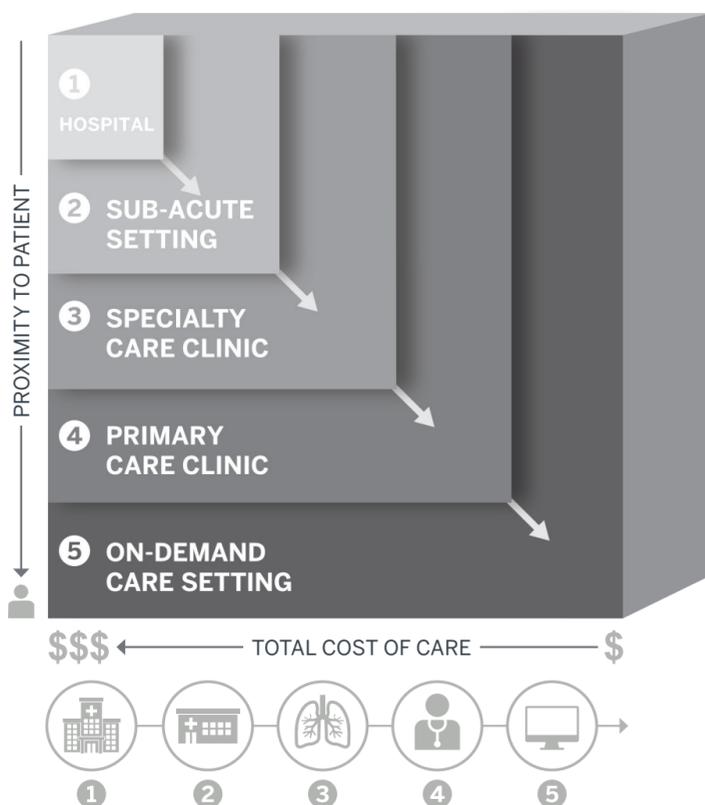
\* Includes acute care hospital staff only; excludes PRN.

## Build Your Future Workforce Blueprint from the Outside-In

The conventional approach to workforce planning is to move from the “inside-out”—refining inpatient care models and then designing cross-continuum and outpatient models that complement inpatient staffing. But this reinforces a costly, hospital-centric model.

Our research shows that market leaders are challenging conventional wisdom and building their staffing plan from the “outside-in”—improving patient access, bolstering care coordination, and limiting unnecessary acute care.

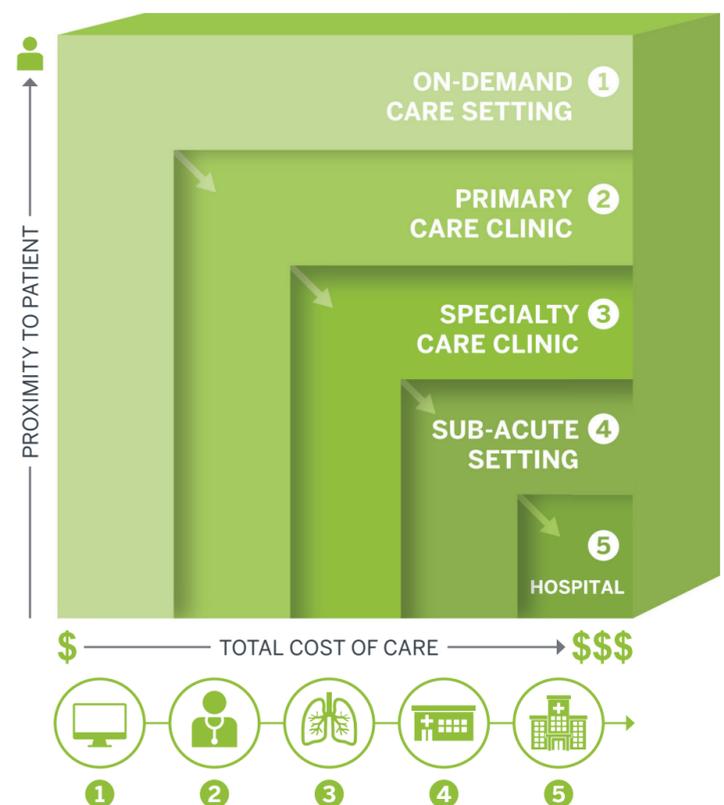
### Inefficient “Inside-Out” Perspective



#### STUCK IN YESTERDAY'S APPROACH

- Positions providers at the center
- Relies on more costly staff
- Results in unnecessary health care utilization

### Efficient “Outside-In” Workforce Strategy



#### WORKFORCE STRATEGY ALIGNED WITH FUTURE NEEDS

- Improves access to the most appropriate care setting
- Improves efficiency without compromising quality
- Limits redundancies and gaps in care