

Bridging the Gap: How One Hospital Addressed Anesthesia Staffing Challenges with ARRP

- ARRP participants comprised 20% of the facility's staff and handled 21% of cases over the year.
- Patient satisfaction for ARRP participants was 94.8%, nearly matching the facility average of 95.3%.
- Patient safety outcomes for ARRP participants (0.59%) were statistically similar to the facility average (0.58%).
- 5 Full Time Employees in the program saved nearly \$1MM in just one year while saving the overall staffing annual spend

SITUATION

Likemany hospitals nationwide, this facility serving its local community faced critical staffing challenges within its anesthesia department. They struggled to recruit and retain experienced anesthesiologists, leading to scheduling gaps, increased workload on existing staff, and potential delays in surgical procedures. This situation threatened both operational efficiency and the quality of patient care.

SOLUTION

Recognizing the urgent need for a solution, the Anesthesia Remediation and Reentry Program (ARRP) stepped in to address these critical staffing shortages and ensure consistent, high-quality anesthesia services. ARRP offered a unique solution by providing highly qualified, experienced anesthesiologists who were returning to the field. This partnership allowed the hospital to quickly augment its existing anesthesia team with skilled professionals who were thoroughly vetted and prepared to seamlessly integrate into the hospital's environment.

The ARRP's rigorous screening and training process ensured that participating anesthesiologists possessed the necessary clinical expertise and were up to date with current best practices. This approach provided a flexible and cost-effective way to bridge staffing gaps without compromising patient safety or quality of care.

RESULTS

The impact of the ARRP partnership at Hospital XYZ has been significant and demonstrably positive. Data collected following the implementation of the program reveals the following key outcomes:

- **Productivity:** ARRP participants accounted for 21% of all anesthesia cases completed, slightly exceeding their proportional representation within the overall anesthesia workforce. This indicates that ARRP participants were effectively integrated into the surgical schedule and contributed meaningfully to the hospital's overall surgical volume. **Case Variety:** Participants maintained a balanced distribution of anesthesia methods,
- delivering slightly more general anesthesia and slightly less MAC (Monitored Anesthesia Care), ensuring a diverse case mix. This variety allowed ARRP participants to maintain a broad range of skills and experience, contributing to their ongoing professional development. **Patient Outcomes:** Critically, there were no statistically significant differences in patient safety or satisfaction scores between cases managed by ARRP participants and the
- facility average. Specifically, patient satisfaction scores were remarkably similar, with ARRP participants achieving a 94.8% satisfaction rate compared to the facility's 95.3% average. Similarly, the adverse event rate was identical, with ARRP participants experiencing a rate of 0.58% compared to the facility average of 0.59%. These results demonstrate that ARRP participants provided safe and high-quality care, comparable to the existing anesthesia staff.

COST SAVINGS

ARRP participants were incorporated into the facility's anesthesia team, reducing the need for contract anesthesia providers or locum tenens, which are often significantly more expensive. By leveraging ARRP-trained professionals who had undergone a structured remediation and reentry process, the facility could fill key positions at a lower cost while maintaining workforce stability. With the training of five full-time employees, ARRP reduced these staffing costs by \$1M. This metric was reached by reducing locum tenens dependency, increasing retention, and lower recruitment and onboarding costs.

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