Best Practices in Productivity and Staffing:
Value-Efficiency

The American Association for Respiratory Care (AARC) recognizes that defining labor hours required to provide high quality, safe patient care remains important. However, the ARC also recognizes that simply providing services efficiently is no longer enough. Today in the climate of value-based care, stakeholders demand that the value of respiratory care services be understood and accepted. The AARC asserts that staffing metrics must include the concept of value. Certainly, respiratory care services must be performed efficiently, but also be shown to provide benefits worthy of the cost in an increasingly complex, expensive, and evolving health care environment. This environment mandates a “call to action” and a new focus to establish respiratory care services based on value. This is not a value as perceived by the AARC historically. Rather, the value must be established in terms of patient safety, improving outcomes and cost effectiveness.

Towards achieving these stated imperatives, the following best practices must be implemented:

• Doing the wrong things (i.e., no evidence of effectiveness) the right way (i.e., efficiently) is a paradigm no longer supported and is counter to our professional identity and survival.
• Respiratory Care departments report validated metrics of efficiency combined with effectiveness called “value-efficiency.”
• Respiratory Care departments incorporate value-efficiency to define the number and type of care givers required for safe and appropriate patient care.

With this critical paradigm shift, three key issues must be addressed.

• The interventions provided are necessary and of clinical value.
• The value that respiratory care services add to the health care organization.
• The value that respiratory therapists bring to patients when performing these services.
These concepts support a practical response to the increasing demands of payers, administrators, consultants, and patients. Therefore, the AARC recommends the implementation of value-efficiency metrics to quantify the value of respiratory care services, and to optimize patient care by assuring appropriate staffing. The quantification of value-efficiency is essential for the continued growth, value, and success of the respiratory care profession. Evidence supporting the proposed considerations and methods to assist with their implementation are provided in the AARC issue paper entitled Determining Value-Efficiency.

References: