The Value of SRNAs to Healthcare Institutions



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Student Registered Nurse Anesthetists (SRNAs) are of tremendous value to healthcare institutions. Not only do they ensure continued access to high quality, cost effective anesthetic care when they transition from SRNAs to Certified Registered Nurse Anesthetists (CRNAs), they also provide value to their clinical sites as students and reduce costs associated with recruitment, orientation, and retention when hired as nurse anesthetists.

As students, SRNAs improve workflow efficiency by supplementing and/or completing work normally done by CRNAs or anesthesia techs at no cost to the clinical site. They assist with anesthesia workstation and table top set up, room turnover between patients, stocking anesthesia carts, and preparing off site locations for anesthesia administration. SRNAs provide anesthetic care to patients throughout the perioperative period. They conduct preoperative assessment and preparation of patients (conducting history and physical, gaining venous and arterial access, performing or assisting with regional anesthesia, and inpatient preoperative visits), provide anesthetic care to patients intraoperatively, and complete postoperative care and assessment of patients (management of pain, nausea, and other complications; and inpatient postoperative visits).

Significant cost is associated with recruitment and orientation of a new CRNA.1 The Human Resources Department at Mayo Clinic in Rochester, MN, estimated that it costs approximately one and a half times a CRNA's salary to recruit, interview, relocate, and orient a new nurse anesthetist.1 The median salary of a CRNA in Michigan is approximately $189,000 per year.2 At this rate, each week of orientation for a new CRNA costs a healthcare institution approximately $5,500. Average orientation ranges from 4 to 8 weeks equaling a total cost of $22,000 to $44,000. The majority of this expense is attributed to paying the salary of the new CRNA as well as clinical preceptors and supervisors during the orientation process.1 Much of the orientation includes non-productive, non-billable hours for the new CRNA and/or one or more other CRNAs.1

Hiring former SRNAs that have spent a significant time at a healthcare facility has the potential to significantly shorten the orientation process. SRNAs frequently spend the last month of their clinical rotations at the clinical site for which they will work. This effectively serves as the orientation decreasing the amount of non-productive time for the new CRNA, preceptors, and supervisors. Orientation for these new CRNAs may simply consist of required institutional orientation days with no anesthesia specific orientation days resulting in a substantial cost savings.

Quality orientation leads to CRNA job satisfaction, commitment to the healthcare institution, retention of employees, and can decrease turnover 3,4 Decreased turnover reduces costs for an organization, because recruitment and orientation of new employees requires time, money, and manpower of existing employees.5-8 Replacing a highly skilled employee with specialized skills in a difficult to replace position, such as a CRNA, can cost up to 250% of the position's salary.10 Replacing a CRNA in Michigan can cost a healthcare institution up to $472,500. Direct costs of turnover include recruitment, selection, hiring, orientation and training, lost productivity, hiring temporary workers, training of replacement workers, and paying overtime to remaining staff until a new person can be hired and trained.10,11 Indirect costs include lost work hours; decreased productivity, operating capacity, and customers; and increased training time.11

Turnover can decrease the consistency and quality of customer service causing decreased revenue and profitability – new employees may not have the same level of expertise and service as those employees who were there longer term and had mastered the tasks needed for the job.10 Turnover can be attributed to many factors including the job was not what the employee expected, unsatisfactory working conditions, and the employee not being a good fit for the job.10,12 These issues are avoided when hiring a CRNA that trained at a clinical site as a SRNA. The work expectations, conditions, and fit are known by the CRNA before accepting the position. The healthcare institution gets the opportunity to observe the CRNA as an SRNA to ensure fit as well as evaluate clinical and soft skills.

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