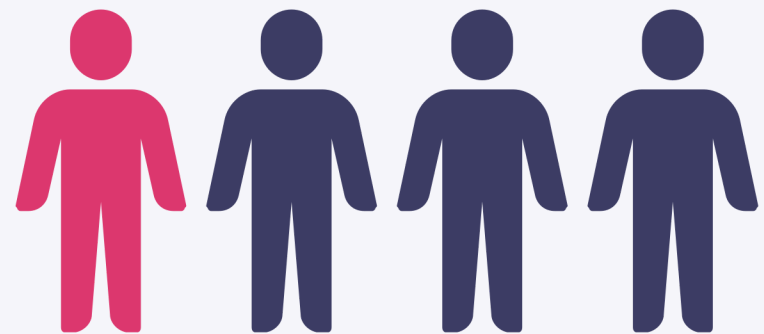WORKAXLE

→ Optko

UNDERSTAFFED & UNDEREQUIPPED

Support systems for healthcare haven't evolved with clinical demands

CLINICAL IMPACT BEGINS WITH STAFFING

Every missed shift has downstream effects

1 in 4 clinicians say their unit is **unsafe due to staffing**.

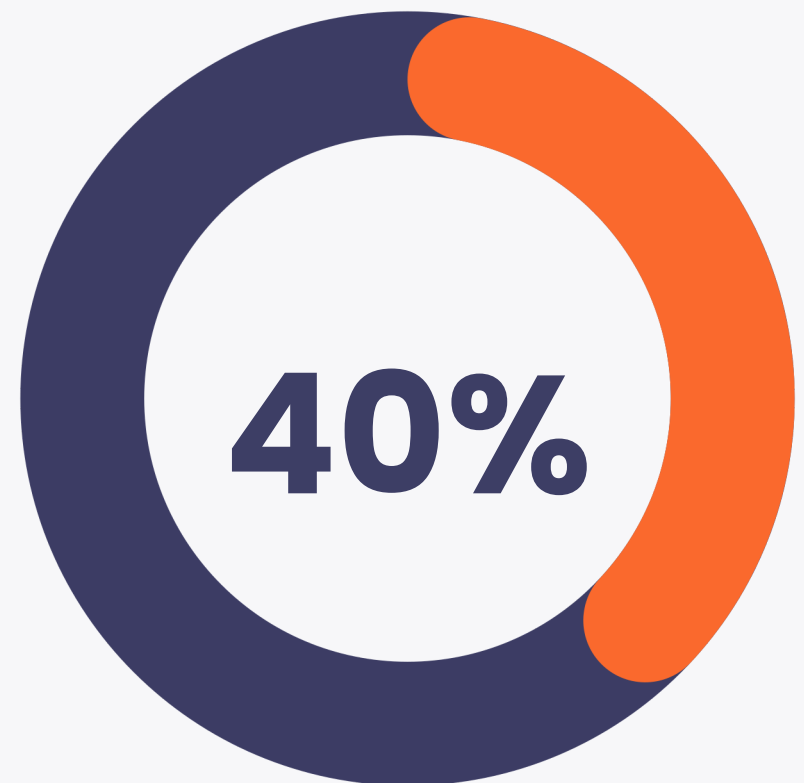From care delays to increased readmissions, quality starts with the schedule.

Fatigue is a safety risk, not just a wellness issue

40% of nurses report **chronic fatigue**.

Shift length and rotation patterns affect cognition and patient safety.

40%

AGILITY ISN'T OPTIONAL. IT'S CLINICAL.

Can your staffing flex when acuity spikes?

A reactive schedule **can't handle a surge**.

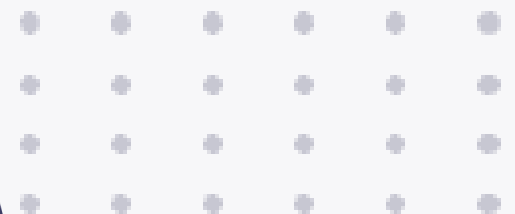Responsive systems help protect both care quality and staff well-being.

Are your teams scoped correctly for the units they're covering?

Gaps in care coordination increase the **odds of preventable harm** by **55%**.

Real-time credential governance helps ensure the right people deliver the right care.

SCHEDULING AS STRATEGIC INFRASTRUCTURE

Workforce decisions shape every clinical outcome

Staffing decisions impact every KPI:

- patient satisfaction
- staff retention
- length of stay
- compliance

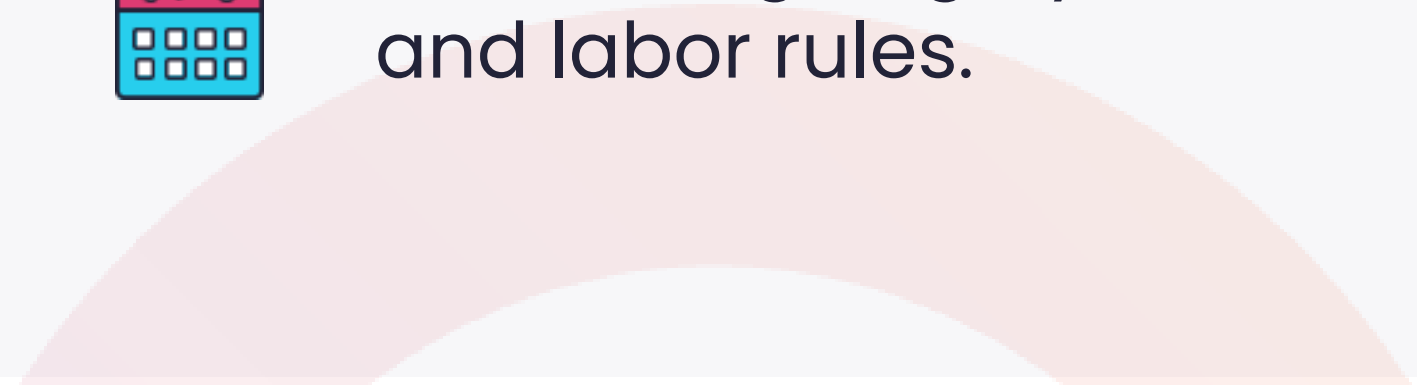# Modern WFM systems for safety, compliance, and care

Staffing to acuity, not census

Replacing static rosters with intelligent, rules-driven coverage.

Auto-assigning by credentials, scope, and labor rules.

A WFM system that supports both patients AND staff

The healthcare crisis is real.
Let's redesign how we support the
humans delivering care.

www.optko.io/wfm