Perioperative Services Transition

Frequently Asked Questions

Communications

Feedback on poor communication regarding changes that affect our team members lives/careers. As a dedicated staff member of many years, I have sacrificed a lot to provide my best for this organization and our patients and have continued to see lack of support from leadership reinforcing the reality that patient safety and staff concerns are not a priority to the organization

Thank you for sharing your concerns and for your many years of dedication to our patients and organization. We recognize that these changes impact our team and deeply appreciate the sacrifices you've made. Please know that patient safety remains a top priority, and we are adding OR time to ensure safe, high-quality care. These changes are necessary for Overlake's long-term sustainability. Since 2020, we've faced significant financial challenges, losing approximately $250 million. To continue serving our community with the exceptional care we're known for, we must become more efficient and grow. We value your commitment and will continue working to support both our patients and our team.

Will there be town halls scheduled at other times for people to attend, and can they be made available on Teams?

More town hall meetings will be scheduled during this rebid process. Teams meetings will be held to help ensure everyone has the opportunity to attend.

When will surgeons be notified of potential block changes?

The OR Business Manager and executive leaders are currently in the process of collaborating with our surgeon providers regarding block changes.

Departmental Changes & Training

Will SPU, SPA or URT be included in the reallocation and rebidding process?

No, these units are not included in the reallocation or rebidding process.

Will SPA continue to operate as it has been?

At this time, yes.

Will PCU also be part of the re-bid process?

Yes.

Will the block-times be extended later into the evening?

Yes.

Will IPS take back OR 1 and 2 from L+D and SPD to accommodate more surgeries?

Meetings with the stakeholders are taking place.

How will service lines be combined between OPS and IPS (ie. gyn, breast, etc.)?

Outpatient cases will fall under the appropriate service family in main surgery.

What will happen to the current coordinator positions?

Assignments, including the specialty coordinator position, will be reviewed and made at the conclusion of the rebidding process once schedules are finalized.

Is there an opportunity for a charge nurse position in either of those areas if you are a charge nurse coming from OPR?

Bidding will be for your FTE. The charge nurse role is an assignment. Once oriented to a new area, coming with past charge nurse experience, there may be opportunities for a charge nurse position.

Since both departments (IPS & OPS) do some different cases, will there be training provided?

Yes, expect to complete a skills self-assessment to assist your learning plan. A nurse educator role is posted and actively being recruited for. These changes will not take effect until March 9th.

Will IPS staff be appropriately trained to do cases that OPS used to do?

Yes, expect to complete a skills self-assessment to assist your learning plan.

Staffing & Scheduling

What do these changes mean for per-diem staff - are they included in the rebidding process? Are per-diem staff being eliminated?

Per diem staff are not included in the rebidding process as they do not hold an FTE or shift. Per diem staff will continue to pick up available shifts each scheduling period. There are no plans to eliminate per diem positions.

What is the process if an FTE nurse wants to switch to a per-diem position or vice versa?

To move between FTE and per diem status, a nurse must apply to an open vacancy and be selected via the recruitment process. The same applies to Surgical Techs that may wish to move between FTE and per diem status.

What will the hours of operation be for each department?

Main Surgery will continue to run 24/7 operations with block time expanding later into the evening.

What is the call schedule for each department? How often would we have to take call, and will weekend shifts be required?

Call will be required on a limited basis to cover for absences of our “Urgent Response Team”. This would encompass covering weekend call. The call schedule is posted every four weeks.

What is the call and holiday schedule for these departments?

Holiday assignments are made based on seniority and staff preferences submitted in the first quarter of the year. Main Surgery runs less rooms on holidays to try to provide as many staff as possible with the day off.

What happens to employees that just started here a few months ago?

All impacted employees will follow the same process regardless of when they are hired. The reallocation process for RNs follows the WSNA agreement and will be based on seniority. A similar seniority-based process will be followed for Surg Techs

Bidding Process

Are the number of FTEs in the rebid equivalent to the existing FTEs in all departments? Is there a chance staff could lose their positions or have their hours cut?

We do not expect a reduction in the FTE headcount as a result of this rebidding process and expect there will be roles for all existing staff to bid into. The new schedule will have a variety of FTEs, shifts (8, 10, 12 hours) and start times.

What is the plan for sharing the updated staffing/FTE grid for staff to review?

The Updated staffing plan was reviewed and approved at the 11/12/25 Staffing Committee meeting.

What schedules are being considered for bidding. ie: 8/10/12 hours only or will there be variable shifts available for each FTE?

There are a variety of 8, 10 and 12 hour shifts, start times, and FTE's available as part of the rebidding process.

When will the bidding process begin and how will it work? Will we need to make individual appointments to submit our selections?

We anticipate the bidding process to commence on November 18, 2025. It is anticipated to be a staggered process, with groupings split based on seniority and unit. The bidding will all be completed electronically utilizing Microsoft Forms.

Are we bidding for the FTE as well as shift? Are we able to bid for the schedule (days) we want?

Staff will be bidding for their FTE and shift length (i.e. 8, 10 or 12 hours). Staff will not be bidding for a set schedule (days). You will have the opportunity to add your preferred days off in the comments, but it is not a guarantee.

Who will manage the schedule assignments?

The schedule assignments will be made by Perioperative Leadership and HR.

Are you going to take into consideration everyone's life and commitments when determining schedules and do we have a say in what schedule we receive?

Our goal is to do this with as little impact to your personal life that we can.

What happens if your schedule is bid for and you can't work another because of health and family needs?

There will be many options of FTE and shift start times to choose from. You would be self-selecting not to work in perioperative services if you are not able to accept any of the options.

How are you determining the rebidding groups?

By seniority. RN service hours for RNs and total service hours for non-RN staff.

How is seniority calculated?

Seniority for RN's is based on the language in the collective bargaining agreement (CBA). It is the paid hours as well as unpaid low census hours since the most recent date of hire into a bargaining unit RN position. Refer to article 9 of the CBA. For Surgical Techs seniority is based on hours worked since date of hire.

If seniority is based on hours, not hire date, how is it equitable if I am out on leave for injury and losing seniority?

The definition of seniority is in the CBA section 9.1, Overlake will be using this definition in the reallocation process.

What does it mean that a skills assessment will be required as part of the rebidding process?

A self-assessment of your skills and comfortability in each surgical service line will be used to develop a personalized learning plan upon transition to Main Surgery. The length of training will be based on each individual's needs. The self-assessment questionnaire will be provided shortly after bid forms are sent out.

Other

Will wages change, and will this impact sign-on bonuses?

There will be no changes to wage rates, but overall compensation may change if staff bid into a higher or lower FTE than they currently hold.

Is there a possibility of a "float" pool scenario, for example- some nurses who are trained in both areas would come based on their current schedule and work in either PACU or PCU based on the needs of the day?

Under consideration.

For staff coming from OPR, will we have the ability to split shifts between both PACU and PCU?

Not at this time. Past experience will be considered for placement into PACU. Nurses will be notified in advance of submitting a bid which unit they are qualified to bid for. Opportunity to split shift will be assessed later.

Will there be any offers for senior nurses close to retirement to take instead of rebidding for an FTE?

All staff will be included in the bidding process. We have positions for all nurses.

How do you plan to support OPS team members during this transition change knowing we are feeling lack of support/answers and low morale

Being reallocated is a tremendous change for staff in OPR and OPS, however this change is impacting team members in all the perioperative services. Town Halls are scheduled to allow you time to voice your concerns to leadership and HR. Our goal is transparent communication going forward and answers will be provided when they are available. Please remember that Lyra/Employee assistance programs are available to you. More information can be found on the HR page in MyOverlake. We encourage you to speak with your manager, director, or HR business partner about your concerns.

How will this affect SPU? Will it be harder for SPU to get anesthesia time for patients not appropriate for conscious sedation?

The current process will remain the same for SPU adding cases to the main surgery schedule when adding outside of the SPU in IPS or WAGI designated block times.

Periop. Staffing Timeline