



How Hunterdon Center for Surgery **Solved** a 2-Year Staffing Deadlock



EXECUTIVE SUMMARY

The Facility Profile: Hunterdon Center for Surgery

Hunterdon Center for Surgery is a high-volume facility with 4 ORs and more than 60 surgeons, performing 6,000 surgeries a year.



In a post-COVID landscape where staffing shortages threatened to shut down rooms, Hunterdon partnered with Medely to transition from sporadic per diem support to a strategic, long-term assignment model.

For years, the ASC industry waited for the labor market to “return to normal.” But for Lisa York, executive director at Hunterdon Center for Surgery, the reality was far grimmer. As Lisa noted in [Becker’s ASC Review](#), she has carried open scrub technician positions for over two years, a vacancy that, in a traditional hiring model, suggests a permanent state of crisis.

“The workforce issue that I thought was temporary was the shortage of OR nurses and scrub techs. I thought it would improve after COVID-19, but it has not, and I have had two open positions for scrub technicians for over two years. It is tough to get help!”




Hunterdon Center for Surgery is a facility based in Flemington, New Jersey, home to 4 ORs, 60+ surgeons, and completing 6,000 surgeries annually.



THE CHALLENGE

For any high-volume ASC, the math of staffing has been binary: you either have a full surgical team, or you have a closed operating room. At Hunterdon Center for Surgery, the permanent reset of the labor market had moved from a theoretical industry trend to a daily operational threat.



 In an environment running 6,000 surgeries a year, there is no margin for empty rooms.

The inability to fill these roles created a domino effect of risk:

→ Director of Nursing Peggy Rush described the staffing shortage as a looming disaster. Without a reliable way to fill these roles, the center reached a breaking point where it simply could no longer function at full capacity.

→ Without a full surgical team for each room, the center faced the reality of running fewer than their four ORs, directly reducing their ability to serve their 60+ surgeons.

→ Canceled surgeries represent more than a lost day of billing; they represent a breach of trust with the community.



Peggy emphasized that telling a patient their surgery is canceled due to a lack of staff is unfavorable and forces that patient to take their procedure to a competitor.



From stop-gap to long-term stability

Hunterdon was first introduced to Medely in 2018 as a per-diem solution for additional shift coverage. However, as the labor market reached a permanent reset, Director of Nursing Peggy Rush recognized that traditional recruiting for surgical techs had become almost impossible. To protect its four ORs from a staffing disaster, Hunterdon evolved its strategy from filling daily gaps to securing assignments.

The results redefined the center's workforce:

- **Consistency that matches full-time staff:** Hunterdon has consistently staffed its facility with a surgical tech from Medely on a continuous assignment for nearly two years.
- **Seamless integration:** By moving beyond sporadic fills, they secured a professional who functions with the same clinical ownership as a full-time hire.

“The ones that we have now that have been with us long term, they function like our regular staff. The expectation we set for them when they first come in, they have the same commitment.”

— Lisa York



This shift transformed Medely from a per-diem vendor into a strategic partner, allowing Hunterdon to stabilize a critical two-year vacancy that traditional recruiting simply could not solve.



“We can’t function without [surgical techs], but it’s really tough to recruit for. It’s great that I’ve had a surgical tech from Medely for close to two years. And it’s great that he comes every day, just like the staff.”

— Peggy Rush

The surgeon trust factor

Peggy and Lisa noted that surgeons often dislike sporadic fill-ins and the need to “reinvent the wheel” with new faces daily. The time to train, onboard, and familiarize with new staff is a bottleneck for most surgeons.

However, Medely provides a simple answer to this. With favorites in place, Peggy can bring back familiar Medely pros again and again. “It’s nice because they now know us, and we don’t have to spend time in the morning orienting

them to our facility. So, I do like to reuse and bring back people who have already been here, for those reasons,” stated Rush.

By building a pool of trusted Medely professionals, Hunterdon ensures clinicians are already oriented, vetted, and trusted by the surgeons. Surgeons at Hunterdon have a high trust level because Medely allows for consistency that traditional agencies, often requiring up to six weeks to onboard, cannot match.

Protecting the bottom line

To a board of directors, agency spend can be viewed as a line-item expense to be minimized. At Hunterdon, however, the leadership team reframed Medely as revenue insurance. By quantifying the cost of an empty room versus the cost of a Medely professional, the financial justification became undeniable.

In a for-profit environment, a closed OR is the single greatest drain on profitability. Peggy Lisa highlighted the stark contrast between the investment in supplemental staffing and the catastrophic loss of a canceled case:

A standard two-hour surgical case represents approximately \$6,000 in reimbursement. Beyond the immediate loss, cancellations damage surgeon relationships and drive patients to competitors.

As Peggy noted, “The public wouldn’t be happy... they would go elsewhere.”

When weighed against the potential loss of \$3,000 per hour in revenue, the cost of a Medely professional is a marginal investment that protects the center’s throughput.

- At an average rate of \$77.36/hour, the total cost to staff a two-hour case via Medely is roughly \$155.
- By investing \$155 to secure a \$6,000 case, the center protects \$5,845 in gross revenue that would otherwise be lost.



“I still think for the majority of the cases, we are better off using Medely than not doing the case. Without them, we would have to close ORs.”

— Peggy Rush, Director of Nursing

REAL-WORLD IMPACT

The Next-Day Fracture Case

The true test of a staffing partner is the ability to handle a last-minute add-on. Hunterdon recently faced a scenario where a fracture case was added to the schedule at 2:00 PM for the following morning.

- The center’s full-time X-ray tech was already committed to other rooms. Without additional support, the case would have been delayed or canceled.
- By accessing the Medely platform and posting the shift to the “Favorites” list, the center secured a qualified professional almost instantly.
- Traditional staffing is often a weeks-long process of phone calls and credentialing. Medely provided a vetted solution in minutes, ensuring the case proceeded without a lapse in coverage.

A new standard for operational resilience

Lisa has managed staffing across various professional sectors and noted that the platform's simplicity sets a new industry benchmark for the modern ASC. In an era where the labor market has undergone a permanent reset, the facilities that thrive will be those that stop waiting for traditional hiring to recover and start embracing a tech-enabled, flexible workforce.

By partnering with Medely, Hunterdon didn't just find a temporary staffing fix; they built a sustainable ecosystem that protects their most valuable assets: OR uptime, surgeon trust, and patient care.

When asked what she would say to another ASC administrator struggling with staffing shortages, Lisa said, "I'd want to tell them that [Medely] is great and they could use you, but I also wouldn't want to give up my resource," she joked.

As Peggy Rush prepares for retirement, she leaves Hunterdon with a staffing strategy that is future-proof. With the transition to new leadership already underway, the center is no longer at the mercy of a broken labor market. Instead, they are equipped with a clean, hands-on solution that keeps their four ORs open, keeps their surgeons satisfied, and ensures their 6,000 annual patients receive the care they need without delay.



Struggling with staffing shortages at your facility or health system?
Medely can help.

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