

## XXXXX HOSPITAL NURSING STAFFING PLAN

XXXXX Hospital provides 24-hour care to patients who require XXXXX services. The staffing plan for the hospital is designed to meet the patients' needs based on those needs, and the specialized qualifications and competencies of the hospital staff available. This plan specifically addresses the Nursing staffing provided by the hospital to meet those needs.

The Chief Nursing Officer (CNO) for the XXXXX Hospital is the Assistant Administrator for Patient Care Services. She is responsible for determining the types and number of nursing personnel and staff necessary to provide nursing care for all areas of the hospital. She reports directly to the Vice President of XXXXX Services who is responsible for the operations of the hospital. The CNO participates with the leadership of the Governing Board, medical staff, and clinical areas in the planning, promoting, and conducting performance improvement activities. The CNO assures that there is adequate orientation, supervision and evaluation of clinical activities of the non-employee nursing personnel utilized by the hospital. She assures that the hospital has adopted, implemented and is enforcing the Professional Nurse Reporting and Peer Review Activities defined by the State of Texas Nurse Practice Act, and other appropriate legislation. The CNO assures that all non-employed nursing staff and all hospital nursing staff abide by the hospital's policies and procedures.

The XXXXX Hospital has developed a written policy regarding alleged verbal or physical abuse or harassment of hospital employees or contracted employees by other hospital employees or contracted personnel or by a health care provider who has clinical privileges at the hospital. The "Standards of Conduct" policy is discussed during the orientation process and is available to all employees and contracted staff on each unit/department. The "Sexual Harassment" policy also addresses this behavior. Any person who alleges that such abuse or harassment has occurred must contact their manager/supervisor and/or the Assistant Administrator for Patient Care Services in a timely manner to facilitate the investigation and resolution of the complaint. There is a toll-free Hotline that may also be utilized for this purpose.

The staffing plan for Nursing Services is designed to comply with all standards of the Texas Nurse Practice Act and Nursing Peer Review Act, of the Texas board of nurse Examiners. The Code of Ethics of various national nursing organizations have been reviewed and applied to this plan also. The plan is based on the following nursing principles:

- All nursing personnel have a valid and current license as applicable to the State Laws of Texas
- There is an adequate number of RNs, LVNs and other personnel to provide safe nursing care to the patients
- There is an immediate availability of an RN at all times for bedside care of a patient
- The RN supervises and evaluates nursing care for each patient

- The RN assigns the nursing care to other nursing personnel in accordance with the patient's needs and the specialized qualifications and competencies of the nursing staff available
- There is a current nursing plan of care developed and maintained by the nursing staff for each patient which addresses the patient's needs

An Advisory Committee has been established which is responsible for soliciting and receiving input from nurses on the development, on-going monitoring, and evaluation of the staffing plan. At least one third of the members of the Advisory Committee are RNs who spend at least 50% of their time doing patient care. The orthopedic and neurological patient care areas are represented on the committee through the RN participation. The Assistant Administrator of Patient Care who is responsible for the quality and risk management for the hospital, is also a member. The Advisory Committee meets on a quarterly basis or more often if a need or staffing concern is identified.

The staffing for each unit is based on several critical factors:

- patient characteristics and number of patients
- acuity level of the patients
- variability of patient care across the unit
- scope of services provided by each unit
- nursing staff competency, experience, and other pertinent factors

Mandatory overtime is the last resort for staffing the patient care areas. The nursing staff members sign up for on-call shift availability and are required to sign up for 24 hours every six weeks. The policy "Mandatory Overtime" describes the specifics of this process. Any mandatory overtime utilized is monitored and evaluated to assure that it was activated appropriately.

The staffing plan for each unit (Attachment A) establishes the minimal staffing levels for that unit. The adjustment of staff from shift to shift and with the variation of patient census and care needs is also established. These staffing levels are recalculated annually with the annual evaluation of the staffing plan.

The evaluation of the staffing plans is accomplished on several levels. The Assistant Administrator for Patient Care Services will utilize outcomes and nursing sensitive indicators as a means to begin to identify the adequacy of the staffing. The data is collected in such a manner as to allow the drill down to the unit specific level as needed. These indicators will also be useful in meeting the JCAHO Human Resources Staffing Standards for all direct and indirect caregivers. The XXXXX hospital has chosen the following five (5) indicators (Attachment B) for this purpose:

- Fall Rate
- Treatment plan Revision as patient care needs change
- Nursing hours per patient day
- Overtime
- Verified patient complaints related to staffing.

The Assistant Administrator will collect the data for these indicators and report them to the Advisory Committee on a quarterly basis. The Advisory Committee will also receive reports of the variance between the desired and actual staffing levels with an explanation for the variance. The minutes of these quarterly meetings will be communicated to the Board of Trustees through the appropriate channels.

The Advisory Committee will also review any nursing complaints or concerns regarding the nursing staffing of a unit/department. All nursing staff are educated during the orientation process concerning the good faith reporting of concerns without fear of retaliation, as well as use of the Safe Harbor peer review process. If the nursing staff feel a need to invoke Safe Harbor, they must notify their immediate supervisor and complete the appropriate forms as per the "Safe Harbor" policy. All concerns or complaints are to be reported to the Assistant Administrator of Patient Care Services who will forward them to the Advisory Committee on a quarterly basis. If there is a need for the Advisory Committee to review the concern/complaint or Safe Harbor activation prior to the next scheduled meeting, a called meeting will occur.

An annual evaluation of this written plan will be conducted. This evaluation will include the plan itself, the staffing levels defined in the plan, and the outcome and nursing sensitive indicator data collected through out the year. The evaluation of the plan will lead to revisions of the staffing levels discussed in this plan, as well as to the possible selection of different indicators for monitoring through the upcoming year. The evaluation of the plan and the supporting documents by the Advisory Committee will be documented in their minutes. This annual evaluation will also be reported through the appropriate channels to the Board of Trustees.

The staffing plan and supporting documentation must be retained for at least two (2) years. The indicator data utilized to meet the JCAHO Human Resources standards must be retained for at least three years.

**ATTACHMENT A**  
**STAFFING LEVELS FOR NURSING UNITS/DEPARTMENTS**

3<sup>rd</sup> Floor – Orthopedic Services

4<sup>th</sup> Floor – Neurological Services

**ATTACHMENT B**  
**STAFFING EFFECTIVENESS INDICATORS**

**FALL RATE:**

Numerator: The number of patient falls in a month

Denominator: The number of patient days in a month

Data Collection: Incident Reports

Indicator Calculations: Multiply by 1000

**TREATMENT PLAN REVISION:**

Numerator:

Denominator:

Data Collection:

Indicator Calculations:

**NURSING HOURS PER PATIENT DAY:**

Numerator: The number of nursing hours in a month

Denominator: The number of patient days in a month

Data Collection: Payroll

Indicator Calculations:

**OVERTIME:**

Numerator:

Denominator:

Data Collection:

Indicator Calculations:

**VERIFIED PT COMPLAINTS REGARDING STAFFING:**

Numerator: Number of verified complaints in a month regarding staffing

Denominator: None

Data Collection: Pt complaint/Grievance log

Indicator Calculations: None