

OMHC NURSE STAFFING PLAN

Statement of Purpose		
The Nursing Staffing Plan is designed to protect patients, support greater retention of Licensed Nurses, and promote evidence-based nurse staffing by establishing a mechanism whereby direct care nurses and hospital management can participate in a joint process regarding decisions about nurse staffing.		
Skill mix: Includes Registered Nurses, Licensed Practical Nurses, Nursing Assistant-Certified, Nursing Technicians and nursing staff trained as Emergency Medical Technician's (EMT)		
Level of experience: New LN's working during the orientation period will be scheduled with an experienced nurse working the same shift; this may be either another RN or experienced LPN. It is the responsibility of nursing administration to ensure the new LN has adequate back-up coverage which may include a nurse on-call.		
Specialized equipment: Are obtained from outside sources on an as needed basis		
Census: Maximum census 25 (acute & swing bed) and 2 observation patients Maximum LTC Swing Bed Residents: 22		
Average census: 14.8		
Breaks: Nursing Staff are encouraged to take their meal and rest breaks. Due to our typical volume, it is expected that the Nursing Staff will cover each other to ensure staff get their breaks. The LN's will cover each other but are not allowed to go on their breaks at the same time to ensure that there is coverage on the floor to care for the patients. The NAC's will cover each other but are not allowed to go on their breaks at the same time to ensure that there is coverage on the floor to care for the patients. During normal business hours, Nursing Administration may be available to relieve staff for their breaks.		
Planned/Unplanned Leave: When there is a planned or unplanned leave of absence of a nursing staff member, OMHC Nursing Administration will utilize part time staff and/or supplemental employees to fill the need for coverage. If part time and/or supplemental employees are unable or unwilling to cover for the leave of absence, OMHC Nursing Administration will work with Nurse Staffing Agencies to assist in finding appropriate coverage for the open shift(s).		
Short Staffing Situation: The staffing plan may need to be deviated from when there is a short staffing situation. In this case, Nursing Administration and/or the Charge Nurse will develop and implement a plan for the shift(s) in question for coverage that meet the immediate needs of the facility and patients'. This may include but not limited to increase NAC staffing, having a LN on-call, assigning staff to another unit upon arrival for scheduled shift and/or request ancillary departments assist with on-call. All overtime at OMHC is voluntary and any extra shifts that an employee picks up is of their own free will unless exceptions per RCW 70.41.720.		
Increase/Decrease Acuity or Census: In the event that OMHC is experiencing higher acuity AND increased census, Nursing Administration will work with all staff and/or Nurse Staffing Agencies to provide extra coverage for a specified amount of time or until the acuity or census decrease back to normal. In the event that OMHC experiences decreased acuity AND decreased census, Nursing Administration will not low census NAC staff but will not cover open shifts with the minimum number for each shift being 2 NAC's. For LN's, it would be determined based on an appropriate RN being on shift and/or on-call. A staff member may request voluntary low census but OMHC must have appropriate staff levels before this could occur and the staff member is to remain on-call in the event they are needed.		
Shift Based Staffing Plan:		
	North Wing	West Wing
Day shift 0600-1800	1 RN 1 NA-C	1 LN (RN, LPN or NT) 2 NA-C's
Night shift 1800-0600	1 RN 1 NA-C until 2200	1 LN (RN, LPN or NT) & rotates to acute care PRN 2 NA-C's (rotate to acute care PRN)

OMHC NURSE STAFFING PLAN