

Hospital Staffing Advisory Committee Meeting

Meeting Notes

Date	2/7/2024			
Meeting Topic	Hospital Staffing Matrix and Categories			
Note Taker	Holli Erdahl			
Attendees	Standing Attendees			
	WSHA		WSNA, SEIU, UFCW	
	<input checked="" type="checkbox"/>	Chelene Whiteaker	<input checked="" type="checkbox"/>	Cara Alderson
	<input checked="" type="checkbox"/>	Darcy Jaffe	<input checked="" type="checkbox"/>	David Keepnews
	<input checked="" type="checkbox"/>	Jason Hotchkiss	<input checked="" type="checkbox"/>	Duncan Camacho
	<input checked="" type="checkbox"/>	Jennifer Burkhardt	<input checked="" type="checkbox"/>	Maureen Hatton
	<input checked="" type="checkbox"/>	Keri Nasenbeny	<input type="checkbox"/>	Tamara Ottenbreit
	<input checked="" type="checkbox"/>	Renee Rassilyer Bomers	<input checked="" type="checkbox"/>	Vanessa Patricelli
	DOH		L&I	
	<input type="checkbox"/>	Christie Spice	<input checked="" type="checkbox"/>	Caitlin Gates
	<input checked="" type="checkbox"/>	Holli Erdahl	<input checked="" type="checkbox"/>	Lizzy Drown
	<input type="checkbox"/>	Ian Corbridge	<input checked="" type="checkbox"/>	Carl Backen
	<input checked="" type="checkbox"/>	Julie Tomaro		
	<input checked="" type="checkbox"/>	Kristina Buckley		
	<input checked="" type="checkbox"/>	Tiffani Buck		
	Alternates and Other Attendees			
	Dawn Marick – will be voting for Duncan		Jeannie Eylar	
	Jessica Hauffe		Laurie Robinson	
	Nancy Wiederhold		Tim Bock	
	Anthony Cantu – will be voting for Tamara		Barbara Friesen	
	Hanna Welander		Amy Doepken	
	Jacqueline Mossakowski		Kara Yates	
	Anthony Cantu – Tamara Ottenbreit		Ashlen Strong	
Bonnie Fryzlewicz		Elizabeth Gordon		
Gena Ahlawat		Michelle Curry		
Miriam Swartout		Nancy Wiederhold		
Trish				

Agenda Item	Notes
WELCOME & ROLE CALL	<ul style="list-style-type: none"> Attendance taken
LAND AND LABOR ACKNOWLEDGEMENT & SAFETY TOPIC	<ul style="list-style-type: none"> Safety Topic: Dog Greeting Etiquette Ask permission to approach – owner can say no

	<ul style="list-style-type: none"> • Let the dog approach • Pay attention
APPROVE PRIOR MEETING MINUTES	<ul style="list-style-type: none"> • Last month's minutes approved • December minutes approved
ACTION ITEM FOLLOW UP	<ul style="list-style-type: none"> • N/A
L&I MEAL AND REST BREAK POLICY UPDATE	<ul style="list-style-type: none"> • Focus on data accuracy, validity, and not manipulated or modified, free from coercion • Still reviewing feedback for Meal and Rest Break draft policies, and will solicit broader comment as soon as possible, more to come
VOTING: DOH HOSPITAL STAFFING MATRIX	<p>Voting:</p> <ul style="list-style-type: none"> • The inpatient unit matrix should include Budgeted Direct HPPD <ul style="list-style-type: none"> ○ Six 5s, six 4s • The inpatient unit matrix should include a column to capture patient census from 1 to the maximum census <ul style="list-style-type: none"> ○ Six 5s, six 4s • The inpatient unit matrix should include shift type (day/evening/nights) <ul style="list-style-type: none"> ○ Two 3s, six 5s, four 2s ○ <i>Discussion: flexibility on how shifts are listed is preferred, hospitals should define their own shift type</i> • The inpatient unit matrix should include the minimum number of RNs, LPNs and CNAs for each census level <ul style="list-style-type: none"> ○ One 1, five 2s, six 5s • The inpatient unit matrix should include the minimum number of UAPs for each census level <ul style="list-style-type: none"> ○ Six 1s, Six 5s • The inpatient unit matrix should include the maximum # of RNs, LPNs, and CNAs for each census level <ul style="list-style-type: none"> ○ Seven 0s five 1s • The inpatient unit matrix should include the number of HUCs for each census level <ul style="list-style-type: none"> ○ Six 0s, six 5s • The inpatient unit matrix should include the minimum direct HPPD for RNs at each census level <ul style="list-style-type: none"> ○ Six 0s, six 5s • The inpatient unit matrix should include the minimum direct HPPD for CNAs at each census level (Dawn's vote of 5 is listed right before in the chat) <ul style="list-style-type: none"> ○ Six 0s, six 5s • The inpatient unit matrix should include the minimum direct HPPD for UAPs at each census level <ul style="list-style-type: none"> ○ Six 0s, six 5s • The inpatient unit should include the maximum direct HPPD for RNs at each census level <ul style="list-style-type: none"> ○ Twelve 0s • The inpatient unit matrix should include the maximum direct HPPD for LPNs at each census level <ul style="list-style-type: none"> ○ Twelve 0s

- **The inpatient unit matrix should include the maximum direct HPPD for CNAs at each census level**
 - Twelve 0s
- **The inpatient unit matrix should include the total (combined for all staff types) direct patient care HPPD at each census level**
 - Five 1s, one 0, five 5s, one 4
- **The inpatient unit section should include an “Additional Care Team Members” checkbox list**
 - Twelve 4s
- **The inpatient unit section should include a “Factors Considered in the Development of the Unit Staffing Plan” checkbox list that allows the hospital to document factors considered as applicable (per unit)**
 - Six 1s, six 2s (desire for more discussion)
- **The outpatient clinic matrix should include average daily visits**
 - Six 5s, six 4s
- **The outpatient clinic matrix should include AM and PM shifts for each day of the week**
 - Four 4s, four 5s, two 2s, two 3s
- **The outpatient clinic matrix should include the number of anticipated visits during each shift**
 - Six 0s, three 5s, three 4s
- **The outpatient clinic matrix should include the minimum # of RNs, LPNs, and CNAs for each shift**
 - Six 5s, one 2, four 0s, one 1
- **The outpatient clinic matrix should include the minimum # of UAPs for each shift**
 - Six 5s, four 1s, one 0, one 2
- **The outpatient clinic matrix should include the maximum # of RNs, LPNs, and CNAs for each shift**
 - Seven 0s, five 2s
- **The outpatient clinic matrix should include the maximum # of UAPs for each shift**
 - Eight 0s, four 2s
- **The outpatient clinic section should include an “Additional Care Team Members” checkbox list**
 - Seven 4s one 2, two 3s
- **The outpatient clinic section should include a “Factors Considered in the Development of the Clinic Staffing Plan” checkbox list that allows the hospital to document factors considered as applicable**
 - Four 1s, eight 2s
- **The outpatient unit matrix should include average daily visits**
 - Six 4s, six 2s
- **The outpatient unit matrix should include hourly shift times**
 - Five 3s, six 2s
- **The outpatient unit matrix should include the # of anticipated visits for each shift time**
 - Six 2s, six 0s

	<ul style="list-style-type: none"> • The outpatient unit matrix should include the minimum # of RNs, LPNs, and CNAs for each shift <ul style="list-style-type: none"> ○ Five 1s, one 0, four 5s, two 4s • The outpatient unit matrix should include the minimum # of UAPs for each shift <ul style="list-style-type: none"> ○ five 5s, six 1s, one 4 • The outpatient unit matrix should include the maximum # of RNs, LPNs, and CNAs for each shift <ul style="list-style-type: none"> ○ Six 0s, six 1s • The outpatient unit matrix should include the maximum # of UAPs for each shift <ul style="list-style-type: none"> ○ Six 0s, six 1s • The outpatient unit section should include an “Additional Care Team Members” checkbox list <ul style="list-style-type: none"> ○ Six 4s, six 2s • The outpatient unit section should include a “Factors Considered in the Development of the Clinic Staffing Plan” checkbox list that allows the hospital to document factors considered as applicable <ul style="list-style-type: none"> ○ Twelve 2s • Discussion on minimum vs maximum numbers vs ranges <ul style="list-style-type: none"> ○ Needs to be flexible for different staffing models ○ Staffing model should be created to address flexibility, so minimums and maximums should be acceptable ○ Staffing models are an average, but things can change ○ The law allows for deviation when necessary, so minimum RNs should be fine, and staffing up for acuity would make sense ○ Explanation of variance is important, how will compliance measure the variability? ○ Concerns on how these numbers will impact 80% compliance
ALTERNATE COMMENT	<ul style="list-style-type: none"> • N/A
PUBLIC COMMENT	<ul style="list-style-type: none"> • Kara Yates – pediatric setting, patients on the unit will be awaiting discharge – nurses will take on extra care since more CNAs will not be added to cover the unit.

Action Items	Assignment	Deadline