

Prosser Memorial Health Staffing Committee Charter

7/1/2024



Table Of Contents

	Charter Version History & Hospital Information	4
1	Committee members	
1.1	Process for electing cochairs and their terms	
1.2	Roles, responsibilities, & process	
1.2.1	Number of members serving on committee	
1.2.2	Non-voting members	
1.2.3	Process to ensure adequate quorum and attendance	
1.2.4	Meeting rescheduling process	
1.2.5	Process for replacing members	
2	Committee meetings	
2.1	Schedule for monthly meetings	
2.1.1	Process for adding meetings	
2.2	Process for committee member to receive 30 days notice of meeting..	
3	Complaints process	
3.1	Process for reviewing, investigating, & resolving complaints.....	
3.1.1	Process for noting date received, contingent, final disposition of complaints, and corrective action plan where applicable	
3.2	Processes by which complaints will be resolved within 90 days of receipt, or longer with majority of committee approval	
3.3	Process ensuring the complainant receives a letter stating the outcome of the complaint	
3.4	Process for an employee, and a labor representative if requested by the employee, to attend committee meetings if they're involved in a complaint.....	
4	Committee review process	
4.1	Process for the hospital staffing committee to conduct quarterly reviews	

5 Committee documentation and records

5.1 Process for approving meeting documentation including meeting minutes, attendance, and actions taken

5.2 Policies for retention of meeting documentation, must be a minimum of three years and consistent with the hospital's document retention policies

6 Process for the hospital to provide the hospital staffing committee with information regarding patient complaints involving staffing made to the hospital through the patient grievance process

7 Process for how the information from the reports required under subsection (7) of RCW 70.41.420 will be used to inform the development and semiannual review of the staffing plan

8 Other

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Charter Version History

Version	Effective Date	Date Approved	Approved By	Revision Date (If applicable)	Revision Reason (If applicable)
1.0	7.1.2024	7.1.2024	M. Fuller, CNO (cochair) M. Hildebrant, RN (cochair) Staffing Committee	NA (Replaces charter implement prior to RCW revision).	Revision to comply with new guidance documents

Hospital Information

Name of Hospital	Prosser Memorial Hospital				
Hospital Phone #:	(509)786-2222				
Hospital Email:	mfuller@prosserhealth.org (CNO/COO) rmendoza@prosserhealth.org (Administrative Executive Assistant)				
<u>Hospital License #:</u>	HAC.FS.00000046				
Hospital Street Address	723 Memorial Street				
City/Town:	Prosser	State:	WA	Zip Code:	99350
Is this hospital license affiliated with more than one location?				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If "Yes" was selected, please provide the location name and address		NA			

1 Committee Members

1.1 A process for electing cochair and their terms

- 1.1.1 The SEIU Bargaining Unit** will designate four voting members biannually and one will be elected cochair by their members. (SEIU represents Nursing at PMH).
- 1.1.2 The AFCME Bargaining Unit** will designate four voting members biannually. (AFSCHME represents support staff at PMH).
- 1.1.3 The Hospital Administration** will designate eight voting members biannually and one will be elected cochair by their team. (The CNO and CFO will be standing members and the other six will be leaders of patient care areas or be responsible for ensuring the patient safety and quality care).

Membership Table

Name	Title	Date Term effective	Term Length
Merry Fuller	CNO -Cochair	1.31..2024	2 years
Maryann Hildebrandt	RN -SEIU Cochair	1.31.2024	2 years
Chris Huston	RNC -PACU - SEIU	1.31.2024	2 years
Rose Hildebrandt	RN – FBP - SEIU	1.31.2024	2 years
Amanda Benton	RN – Resource -SEIU	1.31.2024	2 years
Montessa Hendrix	MT/US – AC - AFCME	1.31.2024	2 years
Malissa Garcia	ST -OR - AFCME	1.31.2024	2 years
Perla Torres	OBT – FBP -AFCME	1.31.2024	2 years
Griselda Villalobos	EDT – ED - AFCME	1.31.2024	2 years
David Rollins	CFO - Admin	1.31.2024	2 years
Sasha Thomason	Dir Nursing Admin, Care Transitions, Employee Health	1.31.2024	2 years
Terra Palomarez	Dir AC and FBP	1.31.2024	2 years
Christi Doornink-Osborn	Dir ED and EMs	1.31.2024	2 years
Sara Dawson	Dir Surgical Services	1.31.2024	2 years
Marla Davis	Dir Wound & Infusion, Specialty Clinic, Clinical Triage	1.31.2024	2 years
Kristi Mellema	CQO/CCO	1.31.2024	2 years

1.2 Roles, responsibilities, and processes by which the hospital staffing committee functions.

1.2.1 How many members will serve on the committee: There will be 16 voting members on this committee, but all patient care staff are encouraged to attend and participate in the discussion of any agenda item.

1.2.2 Which patient care staff job classes will be represented on the committee as nonvoting members: All patient care staff job classes will be represented by voting members chosen by their bargaining unit.

1.2.3 Processes to ensure adequate quorum and ability of committee members to attend: Meetings will be scheduled no less than 30 days in advance and a virtual meeting option will be provided to facilitate participation. Email and text reminders will be utilized to promote participation.

1.2.4 Unanticipated surges in patient census/acuity may necessitate a meeting to be rescheduled without thirty days' notice. Should this happen, an interim meeting may be scheduled to address time sensitive concerns. The activities of an interim meeting will be reviewed and approved at the next regularly scheduled meeting.

1.2.5 Processes for replacing members who do not regularly attend: Should a voting member be unable or unwilling to regularly attend committee meetings they will be replaced using utilizing the same process as members are chosen annually. (See section 1.1).

2 Committee Meetings

2.1 Schedule for monthly meetings: The Staffing Committee will meet the fourth Wednesday of the month at 0730.

2.2 Process for adding meetings: Additional or rescheduled meetings will be facilitated by the cochairs. Communication will occur via email and/or text message. Members are encouraged to utilize their Outlook calendar to ensure timely reminders.

2.3 Process for ensuring committee members receive 30 days' notice of meetings: A recurring invitation to the Staffing Committee will be sent out annually for the entire year. Potential conflicts (holidays,

events, etc.) will be reviewed and addressed at the prior meeting, to allow for a schedule change that will accommodate a thirty-day notice.

3 Complaint Process

- 3.1 Processes for reviewing, investigating, and resolving complaints:** An online reporting form is available to all staff and in all locations via the hospitals intranet (SharePoint). Once submitted the complaint will be directed automatically to the CNO and SEIU cochair.
- 3.1.1 Process for noting the date received as well as initial, contingent, and final disposition of complaints and corrective action plan where applicable:** Submission of the complaint is timestamped by the online reporting form. A log of all complaints is maintained by the committee cochairs and is available for review by request and/or at any Staffing Committee meeting. The log will provide a summary of the complaint, investigative findings, and any corrective actions in response to the complaint.
- 3.1.2 Complaint archive:** Complaints and supporting documents will be archived in the Chief Nursing Officers office.
- 3.2 Processes by which complaints will be resolved within 90 days of receipt, or longer with a majority approval of the committee:** The complaint log will be available for review at every committee meeting. The status of all open complaints will be reviewed with discussion and action plan if there are obstacles for a timely resolution.
- 3.3 Process to ensure the complainant receives a letter stating the outcome of the complaint:** A letter will be submitted to the complainant within seven days after approval by the Staffing Committee that the issue has been resolved. The letter will be signed by both cochairs. The letter will be sent via USPS and/or email.
- 3.4 Process for an employee, and a labor representative if requested by the employee, to attend committee meetings if they're involved in a complaint:** An employee will be notified no less than seven days prior to a committee meeting of a complaint to be reviewed for which they are a part. The SEIU cochair will contact the employee to ensure they received the notification and facilitate labor representation should the employee desire this representation.

4 Committee Review Processes

4.1 Processes for the hospital staffing committee to conduct quarterly reviews.

Quality Metric	Review Frequency	Process
Total Patient Falls	Quarterly	A Hospital Staffing Committee Accountability Dashboard has been developed to provide a summary, analysis and action plan for quality metrics potentially impacted by clinical staffing. These metrics will be reviewed and revised as needed annually by the committee to ensure the metrics are meaningful. Additional
Patient Handling Injuries	Quarterly	
Hospital Acquired infections	Quarterly	
Total # of Staffing Alerts	Quarterly	
Breaks and Mealtimes	Quarterly	A summary report will be provided to the committee for review no less than quarterly.
Overtime Utilization	Quarterly	A summary report will be provided to the committee for review no less than quarterly.
<p>Additional quality work will be provided to the committee as need to facilitate committee education and input in patient safety and quality of care initiatives. These may include, but are not limited to the following:</p> <ul style="list-style-type: none"> • Patient Satisfaction Survey Data. • Root Cause Analysis summary reports • Critical events debrief summary reports. • Patient Care Score Card • Strategic Plan Scorecard • Human Resource annual reports • Financial reports • New Service Line summaries 		

5 Committee Documentation and Records

5.1 Process for approving meeting documentation including meeting minutes, attendance, and actions taken: Minutes of every meeting will be submitted to the cochairs after each meeting, and then reviewed and approved by the committee at the next meeting.

5.2 Policies for retention of meeting documentation must be a minimum of three years and consistent with the hospital's document retention policies: Meeting minutes and supporting documents will be available to all

employees on the hospital's intranet (SharePoint) and a hard copy will be available upon request from the Chief Nursing Officer. Documents will be retained a minimum of three years.

- 6 Process for the hospital to provide the hospital staffing committee with information regarding patient complaints involving staffing made to the hospital through the patient grievance process:** Patient complaints or adverse events that were identified to have been caused or impacted by inadequate staffing will be placed on the staffing complaint log and

- 7 Processes for how the information from the reports required under subsection (7) of RCW 70.41.420 will be used to inform the development and semiannual review of the staffing plan:** All reports required under subsection (7) of RCW 70.41.420 will be reviewed by the committee at the semiannual review of the staffing plan and prior to approval.

- 8 Other:** The hospital **Safe Patient Handling Committee (SPHC)** will be held in tandem with the Staff Committee at least quarterly. Although these are separate committees with distinct responsibilities, they impact the same staff and patients. No less than quarterly the SPHC will occur just prior to the Staffing Committee. The Staffing Committee will endeavor to support the work of the SPHC when ever possible.