SUBJECT: Nurse Staffing Matrix	REFERENCE# 14.1.013
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DEPARTMENT: Nursing (14)	
	EFFECTIVE: 02/2012
APPROVED BY: CNO, CEO, Staffing Committee	REVISED: 02/10/2022
	LAST REVIEWED: 02/2022

POLICY:

To ensure the adequate number of nursing personnel are available to perform nursing care to the patient/residents on a continuous basis, 24 hours a day, seven days a week. Nursing personnel monitors each patient's/resident's status and coordinates the provision of nursing care while assisting other professionals in implementing their plans of care. To accomplish this goal, the hospital provides a sufficient number of qualified nursing staff members to:

- Assess the patient's and/or resident's nursing needs;
- Plan and provide nursing care interventions;
- Prevent complications and promote improvement in the patient's comfort and wellness; and alert other care professionals to the patient's condition, as appropriate.

NURSING COVERAGE:

- RN, LPN and/or NAC coverage will be provided 24 hours per day.
- RN, LPN and/or NAC coverage will be based on minimum staffing requirements/current census.
- Sufficient staff to meet the nursing care needs of all patients/residents shall be assured. Volunteer on-call personnel shall be utilized on an as-needed basis to meet this requirement.
- When possible, nursing personnel shall be assigned duties consistent with experience, educational and/or training background.
- In times of need, nursing personnel shall be assigned other duties such as the role of NAC, UC, or other duties, as determined by charge RN or Nurse Management.

NURSING STAFF MATRIX:

- Emergency Room Registered Nurse Matrix:
  - 1-2 Registered Nurses for one ER Patient ESI-1 (until they are downgraded to lower ESI).
  - 1-Registered Nurse for one to two simultaneous ER Patients with ESI-2.
  - 1-Registered Nurse for one to five simultaneous ER Patients with ESI-3.
  - 1-Registered Nurse for one to six simultaneous ER Patients with ESI-4.
  - 1-Registered Nurse for one to seven simultaneous ER Patients with ESI-5.

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- <u>Acute Care (Observation, Inpatient, Swing Bed) Nursing Matrix:</u>
  - 1 Registered Nurse or LPN for one to six patients depending on their acuity. Census assignment to be determined by the Charge RN. An RN must perform any admission or initial assessments for the LPN.

- <u>Long-Term Swing Bed (LTSB) Nursing Matrix:</u>
  1 - Registered Nurse or LPN for one to sixteen residents (0800-2030 typical shift).
  1-2 Nurse Aide Certified for one to sixteen resident(s) on days.
  1-2 Nurse Aide Certified for one to sixteen residents on nights.

STAFF REQUIREMENTS:

A. MINIMAL facility nurse staffing during times of low patient census or limited staff availability:

   <u>0600 -1830:</u>

   2 - Registered Nurses (RN) or 1- Registered Nurse (RN) and 1 LPN
   1 - Nurse Assistant Certified (NAC)

   <u>1800 - 0630:</u>

   2 - Registered Nurses (RN) or 1- Registered Nurse (RN) and 1 LPN

B. The <u>typical</u> nursing staff for the facility will be:

   <u>0600 - 1830:</u>
   3 - Registered Nurses (RN) or 2 Registered Nurse (RN) and 1 LPN assigned Acute/ED
   3 - Nurse Assistant Certified (NAC)
   1 - Unit Clerk

   <u>0800 – 2030:</u>
   1 - Registered Nurse (RN) or 1 LPN assigned to Long Term Swing Bed Unit

   <u>1800 - 0630:</u>
   3 - Registered Nurses (RN) or 2 Registered Nurse (RN) and 1 LPN
   3 - Nurse Assistant Certified (NAC) (2 NAC's 0200-0600)
   1 - Unit Clerk

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C. <u>Additional Staff:</u> Staffing needs are the decision of the Chief Nursing Officer (CNO), Nurse Manager, or Charge Nurse. LPN scope of practice will always be maintained.

D. <u>Breaks:</u> Charge RN will ensure all nursing unit members will receive a paid 15 minute rest breaks for every 4 hours of work, as well as one uninterrupted 30 minutes meal break throughout an 8-12 hour shift. Break times to be verbally scheduled by team members. If census acuity needs are high, Charge RN will notify RN Manager or CNO promptly to request unit staff coverage while assigned members take meal breaks. If patient care needs prohibit time to take a meal break, employee will document the missed break via the 'Edit Log Book'. RN Management must be promptly made aware of unit assistance needs.

E. <u>Low Census Policy:</u> Low census is defined as a decline in patient care requirements resulting in temporary staff hour reduction. During periods of low census, the CNO or Nurse Manager will first ask for volunteers to take time off before determining and implementing the reduced staffing schedule required. In the event there are no volunteers, RN Management will endeavor to rotate low census equitably among nurses assigned to each area by shift, subject to competence, ability, and availability.

F. <u>On-Call Nurses:</u> Voluntary On-Call personnel will be utilized for additional staffing needs (ex: sick calls, inter-facility transports, or other staffing needs as determined by RN Management or Charge Nurse). On call hourly wage will be compensated per RN Union Contract language.

G. <u>Complaints:</u> Any staff member with matrix complaints or concerns is to document via facility electronic patient event submission application (available on all computer desktops). Select 'Nurse Staffing Complaint' header to describe the safety concern. The Nurse Staffing Committee will review and respond to any submissions.

H. <u>Nurse Aids:</u> Active Nurse Assistant Registered (NAR) employees are able to work and provide patient care pending state Nurse Assistant Certified (NAC).