



PeaceHealth  
Southwest Medical Center

TO: Nurse Staffing Coalition  
FROM: PeaceHealth Southwest Medical Center  
DATE: January 31, 2023  
CONTACT: Brandi Hess (360) 514-7944

The following is the comprehensive nurse staffing plan for PeaceHealth Southwest Medical Center, submitted to the Washington State Department of Health in accordance with Revised Code of Washington 70.41.420.



I, the undersigned with responsibility for PeaceHealth Southwest Medical Center, attest that the attached staffing plan and matrix was developed in accordance with RCW 70.41.420 for 2019 and includes all units covered under our hospital license under RCW 70.41. This plan was developed with consideration given to the following elements (please check):

- ✓ Census, including total numbers of patients on the unit on each shift and activity such as patient discharges, admissions, and transfers;
- ✓ Level of intensity of all patients and nature of the care to be delivered on each shift;
- ✓ Skill mix;
- ✓ Level of experience and specialty certification or training of nursing personnel providing care;
- ✓ The need for specialized or intensive equipment;
- ✓ The architecture and geography of the patient care unit, including but not limited to placement of patient rooms, treatment areas, nursing stations, medication preparation areas, and equipment;
- ✓ Staffing guidelines adopted or published by national nursing professional associations, specialty nursing organizations, and other health professional organizations;
- ✓ Availability of other personnel supporting nursing services on the patient care unit; and
- ✓ Strategies to enable registered nurses to take meal and rest breaks as required by law or the terms of an applicable collective bargaining agreement, if any, between the hospital and a representative of the nursing staff.

This staffing plan was adopted by the hospital on January 31, 2023.

Approved by

A handwritten signature in blue ink, appearing to read "Sean Gregory", written over a horizontal line.

Sean Gregory, Chief Executive, Columbia Network

**PEACEHEALTH SOUTHWEST MEDICAL CENTER  
NURSE STAFFING PLAN**

**PUBLICATION DATE:** January 31, 2023

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To define the nursing staffing plan for PeaceHealth Southwest Medical Center.

**NURSE STAFFING PLAN STATEMENT:**

1. PeaceHealth Southwest Medical Center (PHSW) has adopted the following Nurse Staffing Plan (“The Plan”) with initial and ongoing consideration given to the Nurse Staffing Committee (“The Committee”) recommendations.
2. The Plan is based on the individual and aggregate needs of patients as well as evidence relating to patient-care needs.
3. Primary responsibility of the Nurse Staffing Committee are guided by a charter and include:
  - a. Development and oversight of an annual patient care unit and shift-based nurse staffing plan, based on the needs of patients, to be used as the primary component of the staffing budget. Factors to be considered in the development of The Plan should include, but are not limited to:
    - i. Census, including total numbers of patients on the unit on each shift and activity such as patient discharges, admissions, and transfers;
    - ii. Level of intensity of all patients and nature of the care to be delivered on each shift;
    - iii. Skill mix;
    - iv. Level of experience and specialty certification or training of nursing personnel providing care;
    - v. The need for specialized or intensive equipment;
    - vi. The architecture and geography of the patient care unit, including but not limited to placement of patient rooms, treatment areas, nursing stations, medication preparation areas, and equipment;
    - vii. Staffing guidelines adopted or published by national nursing professional associations, specialty nursing organizations, and other health professional organizations;
    - viii. Availability of other personnel supporting nursing services on the unit; and,
    - ix. Strategies to enable registered nurses to take meal and rest breaks as required by law or the terms of an applicable collective bargaining agreement, if any, between the hospital and a representative of the nursing staff.
  - b. Semiannual review of The Plan against patient needs and known evidence-based staffing information, including the nursing sensitive quality indicators collected by the hospital.
  - c. Review, assessment, and response to staffing variations or concerns presented to the committee.

4. In addition to the factors listed in subsection (3)(a) of this section, hospital finances and resources must be taken into account in the development of The Plan.
5. The Plan must not diminish other standards contained in state or federal law and rules, or the terms of an applicable collective bargaining agreement, if any, between the hospital and a representative of the nursing staff.
  - a. Encourage nurses to provide feedback and input about The Plan to The Committee:
    - i. The Committee members solicit feedback and input from nurses on patient-care units throughout the hospital;
    - ii. Communications to nurses, through various forms of media, encourage frequent and detailed feedback and input to The Committee;
    - iii. Decisions made about The Plan primarily factor in The Committee's feedback and evaluation of the current plan; and,
    - iv. All safe-staffing requests or concerns made known to The Committee will be discussed during meetings and documented in the minutes.
  - b. Protect employees, patients or nursing staff that provide input to The Committee from retaliation:
    - i. Nurses are strongly encouraged to follow their chain of command as appropriate or utilize the Compliance Helpline for any suspicion of retaliation;
    - ii. Retaliation for reporting concerns about staffing are strictly prohibited; and,
    - iii. Nurses have the right to bypass the chain of command and make a report to an outside agency (e.g., WSNA or other appropriate organization) if they have a good faith belief of a violation of law and/or a substantial risk of harm to patients, whether or not the risk of harm is due to the failure of the facility or practitioner to conform to minimum professional standards.
  - c. Provide clear directives to nurses about to how to report concerns and how concerns are being addressed:
    - i. Periodic communications, including meeting minutes, will be sent via email to all nurses by The Committee facilitator.
  - d. Ensure that members are relieved of other work duties during Committee meetings:
    - i. Members need to plan ahead with making schedule requests and to coordinate Committee meetings with their unit manager in order to facilitate coverage for work duties during Committee meetings.
6. The Chief Nursing Officer (CNO) is responsible for:
  - a. Quality of clinical care delivered to patients, including that which is provided by nurses employed by the facility, as well as nurses working at the facility, but who are employed by another entity.
  - b. Development, implementation, and revision of policies and procedures that affect clinical care.
  - c. Development and allocation of the nursing services budget.
  - d. Development and evaluation of objectives and indicators for patient-care delivery.
  - e. Compliance with applicable state, federal, and local laws and regulations.
  - f. Operation of nursing services, including determining the types and numbers of nursing personnel and staff necessary to provide nursing care for all areas of the hospital.

- g. Participation with leadership from the governing body, medical staff, and clinical areas in planning, promoting, and conducting performance-improvement activities.
- h. Ensuring that the RN supervises and evaluates the nursing care for each patient and assigns the nursing care to other nursing personnel in accordance with the patient's needs and the specialized qualifications and competence of the nursing staff available.
- i. Ensuring that The Plan is reviewed at least semi-annually.

## 7. The Plan:

- a. Departmental Staffing Levels:
  - i. Take into consideration specialty organization guidelines for special patient populations (e.g., pediatric, perioperative, emergency).
  - ii. Take into consideration the qualifications, experience, and training of the nursing staff.
  - iii. Are based on the nursing assessment for the individual patients and in accordance with evidence-based safe nursing standards.
  - iv. Allow for flexibility of minimum staffing requirements based on patient-acuity variations in order to meet the needs of the patients.
  - v. When patient-care needs exceed direct patient-care staff resources, provide for use of additional resources, including, but not limited to use of the following:
    - o Dedicated charge nurses
    - o Supplemental staff
    - o Use of voluntary overtime
    - o On-call staff
    - o Nurse managers
    - o Chains of command
    - o The Staffing Office, to evaluate department staffing, locate available resources, and reallocate hospital-wide nurse staffing immediately.
- b. When setting staffing levels for each unit for each shift, the following will be taken into consideration:
  - i. Patient acuity characteristics and number of patients.
  - ii. Number of admissions, transfers, and discharges.
  - iii. Intensity and variability of patient care.
  - iv. Scope of services being provided.
  - v. Context within which care is provided, including environment, documentation requirements, architecture, geography, equipment, technology, and communicability of diagnosis (e.g., isolation status).
  - vi. Characteristics of clinical staff including culture, consistencies, tenure, educational preparation, physical and emotional ability, and experience.
  - vii. Fatigue-related risks.
  - viii. Number and competencies of clinical and non-clinical support staff.
  - ix. If the outcome of evaluating each of these points above results in the need for additional or fewer nursing-care hours than allocated by budget, the unit manager (or designee) will be responsible for evaluating and approving a variance to ensure safe staffing.
  - x. Trends and relationships with nurse-sensitive indicators will be identified, along with any feedback from The Committee to determine if a permanent change in

staffing processes should be made.

8. Staffing and Delivery of Care:

- a. A designated supervisory RN will be available 24/7 to provide/oversee emergency response when required.
- b. An RN will be assigned to every patient to supervise and evaluate nursing care, which includes assignment of care by other nursing services personnel.
- c. Each patient will have on record a plan of care addressing their individual needs.
- d. Any nursing staff reassigned to a unit they do not usually/routinely work on will only be assigned those tasks that they are competent to perform.
- e. Each nurse will evaluate their ability to provide nursing care before accepting any assignment.

Note: please refer to Article 6 "Floating" of Washington State Nurses Association (WSNA) agreement with PHSW.

- f. Extended shifts and multiple consecutive days of worked shifts are discouraged due to the potential for fatigue-related risks.

9. Use of Outcomes and Nursing Sensitive Indicators:

- a. The Committee will annually determine the nursing-sensitive outcomes measures to be evaluated.
- b. The data will be trended and analyzed and considered as a factor in revising The Plan.

10. Scheduling guideline considerations:

- a. Schedules should be built to provide planned staffing to meet the minimum staffing for the year to date (YTD) average daily census (refer to unit-specific staffing grids for staffing levels and skill mix).
- b. Actual average daily census (ADC) may vary from budgeted ADC; actual should be utilized when planning above schedules.

11. Denying and/or Holding on Admissions/Transfers to the Unit:

- a. The charge nurse is to notify the admin manager (or access center) immediately in the event a unit has determined that they cannot accept additional patients.
- b. The following actions will be taken:
  - i. Staffing office will supply additional resources when available.
  - ii. When resources are unavailable the charge nurse will notify the unit manager (or designee).

12. Meal and rest periods, as defined by WSNA and PHSW agreement, article 11 "Meal and Rest Periods":

- a. 11.3.1 RN's will be allowed unpaid 30-minute meal period added to each work shift as defined in 11.2.2 as follows:
  - 11.3.1.1 One such meal period in connection with each 6- or 8-hour work shift: or
  - 11.3.1.2 Two such meal periods in connection with each 10- or 12-hour work shift; or
  - 11.3.1.3 As agreed to by the RN and the Medical Center in connection with alternative work schedules permitted under 11.2.2, consistent with applicable law.
  - 11.3.1.4 If an RN works 3 or more hours longer than the scheduled duration of work shift of at least 8 hours, an additional meal period will be allowed.
  - 11.3.1.5 Waiver of a meal period may occur in accordance with applicable law.
  - 11.3.1.6 If an RN cannot be relieved from work during the meal period because of the nature of the RN's work, the RN will be paid for the time worked during the meal period.
  - 11.3.1.7 The Medical center will not post any position conditioned upon the waiver of a meal period permitted by applicable law.
- f. 11.3.2 There will be 15 minutes of rest for each 4-hour period of the work shift. Missed rest breaks shall be treated as additional time worked for pay purposes under this agreement.
  - 11.3.2.1 RN's who ask for these rest breaks and who cannot be relieved under any circumstances for all of their break time minutes during at least two shifts in a pay period, may refer the situation to the conference committee for review.
- h. Each unit has a plan to monitor and assess breaks and lunches. The committee will review trends related to missed rest breaks and lunches utilizing data from staffing concern forms and Kronos.



## PeaceHealth Southwest Medical Center Nursing Departments

- 2nd Floor Mother Joseph
- 4<sup>th</sup> Floor Cardiology Mother Joseph
- Acute Inpatient Rehab (3West)
- ADAPT Behavioral Health
- Anesthesia Pre-Op (PAS)
- Behavioral Health Consultation & Liaison
- Cardiac Clinic
- Cardiac Prep Recovery (CVO)
- Cardiac Rehab
- Cardiovascular ICU
- Care Management
- Cath Lab
- Clinical Documentation Integrity (CDI)
- CT Services/Radiology/Diagnostic Imaging
- Emergency
- Gastro Endo Lab
- Home Health
- Hospice House, Ray Hickey
- Hospice Southwest
- ICU
- IMCU
- Kearney Breast Center
- Labor & Delivery
- Medical 3 (3 North)
- Neonatal ICU/Peds
- Neurology T6
- Nursing Float Pool (Resource Team)
- Observation Unit
- Operating Room
- Pain Clinic
- Palliative Care
- Recovery Room (PACU)
- Same Day Services
- Short Stay Unit
- Surgical 7
- Surgical 8
- Transfer Center
- Urgent Care
- Vascular Lab (Vascular Access)
- Wound & Enterostomal (WOCN)
- Wound Healing Center



<b>Matrix Review Form for: 2nd Floor Mother Joseph</b>		<b>Date: 8/9/22</b>
<b>Topic</b>	<b>Discussion</b>	
<b>What's working well?</b>	M2 has an amazing team of dedicated nurses and we pride ourselves on our teamwork. While this is a very challenging department we also have excellent nursing staff that progresses patient care with heart and skill. We also have (as of very recently) 2 assistant nurse managers that both come from within the department and are very familiar with the patient population and associated department challenges. Staff further has responded favorable to the addition of several weekend RN positions and we also have seen numerous staff referring friends to join this awesome team! Further we have a very supportive clinical educator that is providing hands on support to everyone who needs support.	
<b>What concerns you the most?</b>	The department has seen quite a bit of turnover due to COVID and is now in the rebuilding phase. As a result the unit often works short and a large number of new staff is working on the unit - of those many are new grads. Therefore the ratio of new grads to experienced nurses is higher than usual (43% new grads) and is reflected in an increased time needed to complete tasks (i.e. due to having to review procedures for the first time, seek clarification on orders new to the nurse, etc.). This in turn increases the workload for the charge and assistant charge nurses as well. On a positive note, we have seen a large increase of staff due to very focused hiring efforts and we are seeing experienced nurses apply in higher numbers again.	
<b>Open Positions/ Staff Retention</b>	There were 28 open RN positions on the board when M2 leadership changed on 2/28 of this year. We have filled almost all of them (21) and then added ten more positions to reflect the increase in department size following COVID. We now have 17 total posted RN positions for both day and night shift. For 9 of those positions offers have been extended awaiting acceptance, and a 10th offer was extended and accepted with a fall start date. One position has an applicant with a scheduled interview.	
<b>Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i></b>	The review showed that staff have clocked 262 missed breaks and 15 missed lunches in the month of July. Barriers include difficulty identifying a perceived opportune time to take a break. We have opportunity to refocus on the importance to ensure requirements are followed and breaks are made a priority, as well as at times escalating barriers in real time. The challenging patient population and related workload can add difficulty to balance all tasks and not forget to also take breaks.	
<b>Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i></b>	10.40%	
<b>Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i></b>	Every day we have been outside of matrix on either day or night shift. We have had 2 day shifts at matrix.	

2nd Floor - 2020

Census	Days										Evenings					Evenings					Nights									
	6 am - 10 am					10 am - 2 pm					2 pm - 6 pm					6 pm - 10 pm					10 pm - 2 am					2 am - 6 am				
	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts
60	15.0	6.0	1.0	2.0	-	15.0	6.0	2.0	2.0	-	15.0	6.0	2.0	2.0	-	12.0	6.0	1.0	2.0	-	12.0	6.0	-	2.0	-	12.0	6.0	-	2.0	-
59	14.0	6.0	1.0	2.0	-	14.0	6.0	2.0	2.0	-	14.0	6.0	2.0	2.0	-	12.0	6.0	1.0	2.0	-	12.0	6.0	-	2.0	-	12.0	6.0	-	2.0	-
58	14.0	6.0	1.0	2.0	-	14.0	6.0	2.0	2.0	-	14.0	6.0	2.0	2.0	-	12.0	6.0	1.0	2.0	-	12.0	6.0	-	2.0	-	12.0	6.0	-	2.0	-
57	14.0	6.0	1.0	2.0	-	14.0	6.0	2.0	2.0	-	14.0	6.0	2.0	2.0	-	12.0	6.0	1.0	2.0	-	12.0	6.0	-	2.0	-	12.0	6.0	-	2.0	-
56	14.0	6.0	1.0	2.0	-	14.0	6.0	2.0	2.0	-	14.0	6.0	2.0	2.0	-	11.0	6.0	1.0	2.0	-	11.0	6.0	-	2.0	-	11.0	6.0	-	2.0	-
55	13.0	6.0	1.0	2.0	-	13.0	6.0	2.0	2.0	-	13.0	6.0	2.0	2.0	-	11.0	6.0	1.0	2.0	-	11.0	6.0	-	2.0	-	11.0	6.0	-	2.0	-
54	13.0	6.0	1.0	2.0	-	13.0	6.0	2.0	2.0	-	13.0	6.0	2.0	2.0	-	11.0	6.0	1.0	2.0	-	11.0	6.0	-	2.0	-	11.0	6.0	-	2.0	-
53	13.0	6.0	1.0	2.0	-	13.0	6.0	2.0	2.0	-	13.0	6.0	2.0	2.0	-	11.0	6.0	1.0	2.0	-	11.0	6.0	-	2.0	-	11.0	6.0	-	2.0	-
52	13.0	6.0	1.0	2.0	-	13.0	6.0	2.0	2.0	-	13.0	6.0	2.0	2.0	-	10.0	6.0	1.0	2.0	-	10.0	6.0	-	2.0	-	10.0	6.0	-	2.0	-
51	12.0	6.0	1.0	2.0	-	12.0	6.0	2.0	2.0	-	13.0	6.0	2.0	2.0	-	10.0	6.0	1.0	2.0	-	10.0	6.0	-	2.0	-	10.0	6.0	-	2.0	-
50	12.0	6.0	1.0	2.0	-	12.0	6.0	2.0	2.0	-	12.0	6.0	2.0	2.0	-	10.0	6.0	1.0	2.0	-	10.0	6.0	-	2.0	-	10.0	6.0	-	2.0	-
49	12.0	5.0	1.0	2.0	-	12.0	5.0	2.0	2.0	-	12.0	5.0	2.0	2.0	-	10.0	5.0	1.0	2.0	-	10.0	5.0	-	2.0	-	10.0	5.0	-	2.0	-
48	12.0	5.0	1.0	2.0	-	12.0	5.0	2.0	2.0	-	12.0	5.0	2.0	2.0	-	10.0	5.0	1.0	2.0	-	10.0	5.0	-	2.0	-	10.0	5.0	-	2.0	-
47	11.0	5.0	1.0	2.0	-	11.0	5.0	2.0	2.0	-	11.0	5.0	2.0	2.0	-	10.0	5.0	1.0	2.0	-	10.0	5.0	-	2.0	-	9.0	5.0	-	2.0	-
46	11.0	5.0	1.0	2.0	-	11.0	5.0	2.0	2.0	-	11.0	5.0	2.0	2.0	-	9.0	5.0	1.0	2.0	-	9.0	5.0	-	2.0	-	9.0	5.0	-	2.0	-
45	11.0	5.0	1.0	2.0	-	11.0	5.0	2.0	2.0	-	11.0	5.0	2.0	2.0	-	9.0	5.0	1.0	2.0	-	9.0	5.0	-	2.0	-	9.0	5.0	-	2.0	-
44	11.0	5.0	1.0	2.0	-	11.0	5.0	2.0	2.0	-	11.0	5.0	2.0	2.0	-	9.0	5.0	1.0	2.0	-	9.0	5.0	-	2.0	-	8.0	5.0	-	2.0	-
43	10.0	5.0	1.0	1.0	-	11.0	5.0	2.0	1.0	-	11.0	5.0	2.0	1.0	-	9.0	5.0	1.0	2.0	-	9.0	5.0	-	2.0	-	8.0	5.0	-	2.0	-
42	10.0	5.0	1.0	1.0	-	10.0	5.0	2.0	1.0	-	10.0	5.0	2.0	1.0	-	9.0	5.0	1.0	2.0	-	9.0	5.0	-	2.0	-	8.0	5.0	-	2.0	-
41	10.0	5.0	1.0	1.0	-	10.0	5.0	2.0	1.0	-	10.0	5.0	2.0	1.0	-	8.0	5.0	1.0	2.0	-	8.0	5.0	-	2.0	-	8.0	5.0	-	2.0	-
40	10.0	5.0	1.0	1.0	-	10.0	5.0	2.0	1.0	-	10.0	5.0	2.0	1.0	-	8.0	5.0	1.0	1.0	-	8.0	5.0	-	1.0	-	8.0	5.0	-	1.0	-
39	10.0	4.0	1.0	1.0	-	10.0	4.0	2.0	1.0	-	10.0	4.0	2.0	1.0	-	8.0	4.0	1.0	1.0	-	8.0	4.0	-	1.0	-	8.0	4.0	-	1.0	-
38	9.0	4.0	1.0	1.0	-	9.0	4.0	2.0	1.0	-	9.0	4.0	2.0	1.0	-	8.0	4.0	1.0	1.0	-	8.0	4.0	-	1.0	-	7.0	4.0	-	1.0	-
37	9.0	4.0	1.0	1.0	-	9.0	4.0	2.0	1.0	-	9.0	4.0	2.0	1.0	-	8.0	4.0	1.0	1.0	-	8.0	4.0	-	1.0	-	7.0	4.0	-	1.0	-
36	9.0	4.0	1.0	1.0	-	9.0	4.0	2.0	1.0	-	9.0	4.0	2.0	1.0	-	7.0	4.0	1.0	1.0	-	7.0	4.0	-	1.0	-	7.0	4.0	-	1.0	-
35	9.0	4.0	1.0	1.0	-	9.0	4.0	2.0	1.0	-	9.0	4.0	2.0	1.0	-	7.0	4.0	1.0	1.0	-	7.0	4.0	-	1.0	-	7.0	4.0	-	1.0	-
34	8.0	4.0	1.0	1.0	-	8.0	4.0	1.0	1.0	-	8.0	4.0	1.0	1.0	-	7.0	4.0	-	1.0	-	7.0	4.0	-	1.0	-	7.0	4.0	-	1.0	-
33	8.0	4.0	1.0	1.0	-	8.0	4.0	1.0	1.0	-	8.0	4.0	1.0	1.0	-	7.0	4.0	-	1.0	-	7.0	4.0	-	1.0	-	7.0	3.0	-	1.0	-
32	8.0	3.0	1.0	1.0	-	8.0	4.0	1.0	1.0	-	8.0	4.0	1.0	1.0	-	7.0	4.0	-	1.0	-	7.0	4.0	-	1.0	-	6.0	3.0	-	1.0	-
31	8.0	3.0	1.0	1.0	-	8.0	3.0	1.0	1.0	-	8.0	3.0	1.0	1.0	-	6.0	4.0	-	1.0	-	6.0	4.0	-	1.0	-	6.0	3.0	-	1.0	-
30	7.0	3.0	1.0	1.0	-	8.0	3.0	1.0	1.0	-	8.0	3.0	1.0	1.0	-	6.0	3.0	-	1.0	-	6.0	3.0	-	1.0	-	6.0	3.0	-	1.0	-
29	7.0	3.0	1.0	1.0	-	7.0	3.0	1.0	1.0	-	7.0	3.0	1.0	1.0	-	6.0	3.0	-	1.0	-	6.0	3.0	-	1.0	-	6.0	3.0	-	1.0	-
28	7.0	3.0	1.0	1.0	-	7.0	3.0	1.0	1.0	-	7.0	3.0	1.0	1.0	-	6.0	3.0	-	1.0	-	6.0	3.0	-	1.0	-	6.0	3.0	-	1.0	-
27	6.0	3.0	1.0	1.0	-	7.0	3.0	1.0	1.0	-	7.0	3.0	1.0	1.0	-	6.0	3.0	-	1.0	-	5.0	3.0	-	1.0	-	5.0	3.0	-	1.0	-
26	6.0	3.0	1.0	1.0	-	6.0	3.0	1.0	1.0	-	6.0	3.0	1.0	1.0	-	5.0	3.0	-	1.0	-	5.0	3.0	-	1.0	-	5.0	3.0	-	1.0	-

25	6.0	2.0	1.0	1.0	-	6.0	3.0	1.0	1.0	-	6.0	3.0	1.0	1.0	-	5.0	3.0	-	1.0	-	5.0	3.0	-	1.0	-	5.0	2.0	-	1.0	-
24	5.0	2.0	1.0	1.0	-	6.0	3.0	1.0	1.0	-	6.0	3.0	1.0	1.0	-	5.0	3.0	-	1.0	-	5.0	3.0	-	1.0	-	4.0	2.0	-	1.0	-
23	5.0	2.0	1.0	1.0	-	6.0	2.0	1.0	1.0	-	6.0	2.0	1.0	1.0	-	5.0	3.0	-	1.0	-	4.0	3.0	-	1.0	-	4.0	2.0	-	1.0	-
22	5.0	2.0	1.0	1.0	-	5.0	2.0	1.0	1.0	-	6.0	2.0	1.0	1.0	-	5.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-
21	5.0	2.0	1.0	1.0	-	5.0	2.0	1.0	1.0	-	5.0	2.0	1.0	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-
20	4.0	2.0	1.0	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-

If census is below 20, contact Director

19	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	
18	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	
17	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	
16	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	
15	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	
14	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	
13	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	
12	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	
11	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	
10	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	-
9	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	-
8	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	-
7	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	-
6	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	-
5	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	1.0	-	1.0	-
4	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	1.0	-	1.0	-
3	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	1.0	-	1.0	-
2	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	1.0	-	1.0	-
1	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	1.0	-	1.0	-

Matrix Review Form for: 4th Floor Cardiology		Date: September 13, 2022
Topic	Discussion	
What's working well?	Support of executive leadership for continuation of CES 3 and incentive shifts. CNA wage increase with more applicants accepting offers. When hospital staffing is adequate having a second charge RN that does not have patients is very helpful to staff. Addition of ANM to provide more support at night. Hiring of resident RNs. More RNs wanting to be preceptors.	
What concerns you the most?	High turnover rate of both RNs and CNAs making it difficult to fully staff unit leading to burnout. RNs opting to reduce hours. Loss of preceptors to critical care intern program or ED. Multiple open positions. More experienced staff have retired or through natural progression have gone to critical care or ER nursing leading to higher percentage of less experienced staff.	
Open Positions/ Staff Retention	Currently 8 RNs and 2 CNAs in orientation. 7 RNs and 1 CNA not started. Open/unfilled positions- 4 Day RN, 4 Night RN, 1 Day CNA, 6 Night CNA, 3 PTS positions that have been open for 8-12 months. Loss of 17 employees in July- 9 RNs moved into critical care in July.	20
Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i>	August- 18 missed lunches, 224 missed breaks. In July 26 % of missed breaks were new grads within 6 months off orientation.	
Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i>	218.83 hours incidental OT. CES3= 607hrs or 50 shifts. 35 CNA incentive shifts.	
Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i>	August Day RNs 48% Night shift RNs 68% Day CNAs 68% Night CNAs 71%	



If census is below 20, contact Director

19	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-
18	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-
17	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	2.0	2.0	-	-	1.0	2.0	2.0	-	-	1.0	2.0	2.0	-	-	1.0
16	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	2.0	2.0	-	-	1.0	3.0	2.0	-	-	1.0	2.0	2.0	-	-	1.0
15	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	2.0	1.0	-	-	1.0	2.0	1.0	-	-	1.0	2.0	1.0	-	-	1.0
14	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	2.0	1.0	-	-	1.0	2.0	1.0	-	-	1.0	2.0	1.0	-	-	1.0
13	3.0	1.0	-	-	1.0	3.0	1.0	-	-	1.0	3.0	1.0	-	-	1.0	2.0	1.0	-	-	1.0	2.0	1.0	-	-	1.0	2.0	1.0	-	-	1.0
12	2.0	1.0	-	-	1.0	2.0	1.0	-	-	1.0	2.0	1.0	-	-	1.0	2.0	1.0	-	-	1.0	2.0	1.0	-	-	1.0	2.0	1.0	-	-	1.0
11	2.0	1.0	-	-	1.0	2.0	1.0	-	-	1.0	2.0	1.0	-	-	1.0	2.0	1.0	-	-	1.0	2.0	1.0	-	-	1.0	2.0	1.0	-	-	1.0
10	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	-	1.0	2.0	1.0	-	-	1.0	2.0	1.0	-	-	1.0
9	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	-	1.0	2.0	1.0	-	-	1.0	2.0	1.0	-	-	1.0
8	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	-	1.0	2.0	1.0	-	-	1.0	2.0	1.0	-	-	1.0
7	2.0	-	-	1.0	-	2.0	-	-	1.0	-	2.0	-	-	1.0	-	2.0	-	-	-	1.0	2.0	-	-	-	1.0	2.0	-	-	-	1.0
6	2.0	-	-	1.0	-	2.0	-	-	1.0	-	2.0	-	-	1.0	-	2.0	-	-	-	1.0	2.0	-	-	-	1.0	2.0	-	-	-	1.0
5	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0
4	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0
3	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0
2	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0
1	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0

Effective 10 12 2021

Matrix Review Form for: 3West IPR		Date: 12/13/22
Topic	Discussion	
<b>What's working well?</b>	Executive Leadership supported addition of contract staff to help cover open positions and LOA. Prior to the month of November, ADC of unit was 11. There has been an increase in support for breaking staff when we are low census'd which is greatly appreciated from staff, however there is still opportunity for support	
<b>What concerns you the most?</b>	Most recently, for noc shift, not getting a 2nd RN during times of lower census and on weekends, as this is in our matrix.	
<b>Open Positions/ Staff Retention</b>	Open Positions- Days: 0.9 RN (backfilled w/ traveler), 0.6 RN *currenty Interim ANM staff position was not backfilled (0.6 FTE), CNAs 2, 0.9, Nights fully staffed- however 2 RNs currently on LOA (backfilled w/ traveler but contract ended early and did not submit for new traveler) Staff Retention- In the past 6 months, 1 CNA transition to CM for increased pay, 1 RN transition to MJ2 for M/S exeperience, PTS transitioned to noc shift CNA position	
<b>Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i></b>	30% of shifts report missed breaks. All but one missed breaks were on NOC reported not having support from staffing to take all breaks. 1 day shift break was missed and this was related to late in the day RRT for that RN pt.	
<b>Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i></b>	90% of shifts had incremental OT	
<b>Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i></b>	On Day shift we were short 0% of hours with 29% of shifts being short some hours and 19% of shift being over some hours. (The great majority of short hours regard PTS open position this past month.) On NOC we were over 0.5% hours with 12% of shift short some hours and 16% over some shifts.	

<b>Matrix Review Form for: ADAPT Adult Patial Hospitalization Program</b>		<b>Date: 3/8/22</b>
<b>Topic</b>	<b>Discussion</b>	
<b>What's working well?</b>	We currently have charge nurse positions in our Adult Partial Hospitalization Program (ADAPT). They hold important responsibilities in the unite that only they can perform including responsibilities in CareConnect. Stephanie Edmonds and Joann Walsh work in a multidisciplinary team to support patient's psychiatric needs.	
<b>What concerns you the most?</b>	<b>No concerns at this time.</b>	
<b>Open Positions/ Staff Retention</b>	0.8 LICSW position open and posted 0.0 Relief LICSW Open and Posted	
<b>Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i></b>	ADAPT Missed Breaks 8 out of 50 = 16% ADAPT Missed Lunches 0	
<b>Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i></b>	3.54% on average between two nurse positions	
<b>Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i></b>	One day staffed out of matrix – March 1 by .34 FTE 9% (ADAPT)	



Staffing Matrix for ADAPT FY21 *Revised*

Census	Target Hours	Potential Staff (not required)	When to consider Admin hours in staffing
≤ 5 Patients	16 (shorten program)	1 CRN/ 1 Other	
6-7 Patients	20	1 CRN/ 1.5 Other	
8 Patients	24	1 CRN/ 2 Other	
9 Patients	24	1 CRN/ 2 Other w/ LC	<i>Plus admin hours = 30.</i>
10 Patients	29	1 CRN/ 2-2.5 Other w/ LC	<i>Plus admin hours = 35.</i>
11-13 Patients	35	1 CRN/ 3-3.5 Other w/ LC	<i>Plus admin hours = 41.</i>
14 Patients	42	1 CRN/ 3-4 Other	<i>Plus admin hours = 48.</i>
<b>15-16 Patients</b>	<b>46</b>	<b>1 CRN/ 4-4.5 Other</b>	<i>Plus admin hours = 52.</i>
17-22 Patients	56	1 CRN / 4-5 Other <i>Second parallel program required</i>	<i>Plus admin hours = 62.</i>

\*Other includes PAR, RN, Occupational Therapists, CD Counselor, and/or Social Work/MH Professionals

Core Staffing (3-4 Staff @ 14 patients) includes 1 CRN, 1 RN, 1 OT, 1 CD Counselor, or 1 LICSW, and/or 1 Front Desk (or other disciplines if these disciplines are not available).

**Safety is our number 1 priority. The staffing matrix is a *guideline*. The staffing needs are to be assessed every 4 hours. Contact Teresa or Oscar when there are staffing questions or concerns.**

Updated: 03/05/2022

Matrix Review Form for: Anesthesia Clinic		Date: October 11, 2022
Topic	Discussion	
<b>What's working well?</b>	Department is fully staffed.	
<b>What concerns you the most?</b>	Many staff nearing age of retirement. We are working to ensure all staff are trained in all aspects of the Anesthesia Clinic for continuity when retirements take place.	
<b>Open Positions/ Staff Retention</b>	The department is fully staffed with RN positions at this time.	
<b>Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i></b>	FY23 Pay Period 06: 1 missed lunches and 3 missed breaks(0.49%) FY 23PP07 0 missed lunches and 0 missed breaks (0%). Missed breaks/lunches are infrequent in the Anesthesia Clinic.	
<b>Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i></b>	FY23 Pay Period 06: 1 missed lunches and 3 missed breaks(0.49%) FY 23PP07 0 missed lunches and 0 missed breaks (0%)	
<b>Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i></b>	Unable to be out of matrix due to the flow of the unit. We can only call or see one patient at a time.	

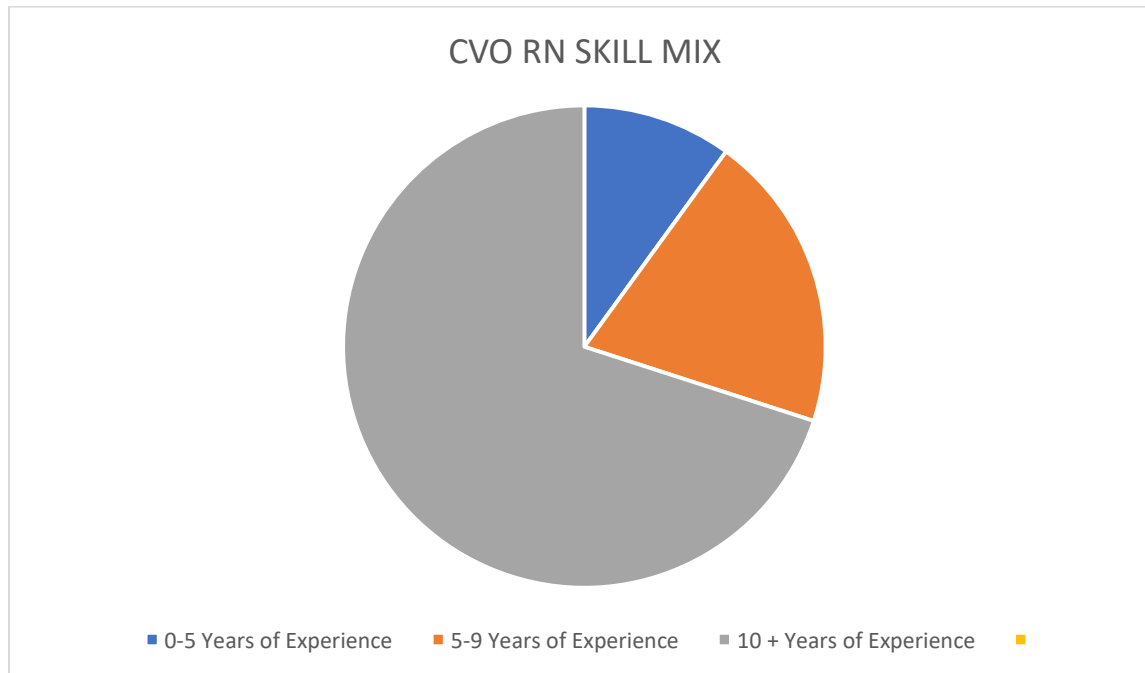
<b>Matrix Review Form for: Consultation and Liaison Services</b>		<b>Date: 3/8/2022</b>
<b>Topic</b>	<b>Discussion</b>	
<b>What's working well?</b>	We have one nurse position in our Psychiatric Consultation and Liaison Service (C&L). Stephanie Roise-Yamashita works in a multidisciplinary team with psychiatrists, psychologists, and social workers to support the mental health needs of PeaceHealth patients. The liaison service provided by Stephanie supports the patient's continuity of care by, for example, connecting with the patient, family and other natural and community supports to our physicians and helps to identify the best possible treatment plan. Stephanie's unique expertise is vital to supporting the acute mental health needs of the patients we serve	
<b>What concerns you the most?</b>	No concerns at this time.	
<b>Open Positions/ Staff Retention</b>	0.8 LICSW position open and posted 0.6 LICSW position open and posted 0.0 Relief LICSW Open and Posted	
<b>Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i></b>	C&L Missed Breaks 0 out of 20 = 0% C&L Missed Lunches 0	
<b>Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i></b>	2%	
<b>Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i></b>	One day out of 29 out of matrix – 3%	

Matrix Review Form for: Cardiology Clinic		Date: 2/8/22
Topic	Discussion	
<b>What's working well?</b>	We have a great RN team, who are dedicated to the work they provider to our patients and community. All positions are filled. We see cardiac outpatients including CHF, MI, Open heart, TAVR, Mitraclips, Chest Pain and hypertension patients.	
<b>What concerns you the most?</b>	No concerns	
<b>Open Positions/ Staff Retention</b>	We currently have no open positions. We have 5.0 FTE's, we follow the WSNA contract when filling RN positions, RN WSNA Seniority 80% 5-10 years, 20% 20-25 years.	
<b>Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i></b>	None	
<b>Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i></b>	1.0 hour in cardiology. For less then .1% of OT. We have had a couple of RN's pick up extra shifts on the weekends to support Employee Health this past month.	
<b>Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i></b>	none	

Matrix Review Form for: Cardiac Prep Recovery Unit 2230 Date: February 8, 2022	
Topic	Discussion
What's working well?	We are fortunate to have enough staff to work within our Matrix. In addition, open positions are filled quickly by experienced in-house applicants.
What concerns you the most?	Lack of space in the CPRU to accommodate the increasing volumes and lack of in-house beds to place our patients post procedure. This results in increased incremental overtime due to holding patients.
Open Positions/ Staff Retention	Open Positions: 1 0.625 FTE RN position (Just Filled) Staff Retention: In the last 6 months 1 RN retired after nearly 20 years with PeaceHealth, and 1 reduced to relief, then resigned secondary to the vaccine mandate.
Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i>	Missed Breaks 8= 1.8% secondary to patient acuity. Missed lunches 2= 0.9% secondary to patient acuity and missing lunch within 5 hours of their shifts.
Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i>	Incremental overtime in the past 30 days= 13.25 hrs / 1.84%. This OT is result of the lack of bed availability to admit patients to post procedure, or patients not ready to be discharge home.
Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i>	Staffing in the Cardiac Prep Recovery Unit has been out of matrix 0% of time in the last 30 days.

Cardiac Prep Recovery Unit 2200

SHIFT	HOURS OF OPERATION 0600-1930 M-F (NO WEEKENDS)			
	RN	CNA	MT	CRN
0600	5	1	1	1
0700	4 (8)	1 (2)	1	1
0800	0 (8)	1 (3)	1	1
0900	1 (10)	3	1	1
Total	10 4-12hr/6-10hr	3 2-12hr/1-8hr	1	1



Matrix Review Form for: PHSW Cardiopulmonary Rehab		Date: 3/8/2022
Topic	Discussion	
What's working well?	Support from Director and Executive team and our strong department team	
What concerns you the most?	Ancillary support services such as EVS and Supply Chain disruptions.	
Open Positions/ Staff Retention	0.9 Exercise physiologist, PRN Exercise Physiologist, 1.0 Admin Specialist III	
Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i>	0.01% Breaks and lunch built into schedule	
Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i>	0.00%	
Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i>	0%	

<b>Matrix Review Form for: CVICU</b>		<b>Date: 7/12/22</b>
<b>Topic</b>	<b>Discussion</b>	
<b>What's working well?</b>	Unit based council growth, development of new staff, team work on the unit, ICU'r Strength, Critical Conversations	
<b>What concerns you the most?</b>	Staffing and skill mix	
<b>Open Positions/ Staff Retention</b>	8 0.9 FTE night shift positions open (there are also 5 positons filled with fellows/residnets who have not started yet) 5 0.9 and 2 0.6 FTE day shift postions not filled. These were taken down due to low staffing on nights.	
<b>Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i></b>	CVICU had 326 missed breaks and 105 missed lunches 57% missed break at least 1 break and 17% missed a lunch	
<b>Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i></b>	CVICU 78 hours of OT (6.5%)	
<b>Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i></b>	76.7% of days out of Matrix, this is mainly due to low staffing or floating PTS.	



CVICU - 2nd PTS 1.12.21 Mon-Fri

Census	Days										Evenings								Nights								
	630am - 1030 am					1030am - 230pm					230pm - 630pm				630pm - 1030pm				1030pm - 230am				230am - 630am				
	RN	FLEX	PTS	CRN - No Pts	CRN - with Pts	RN	FLEX	PTS	CRN - No Pts	CRN - with Pts	RN	FLEX	PTS	CRN - No Pts	CRN - with Pts	RN	FLEX	PTS	CRN - No Pts	RN	FLEX	PTS	CRN - No Pts	RN	FLEX	PTS	CRN - No Pts
24	12.0	1.0	1.0	1.0	0.0	12.0	1.0	2.0	1.0	0.0	12.0	1.0	2.0	1.0	0.0	12.0	1.0	2.0	1.0	12.0	1.0	1.0	1.0	12.0	1.0	1.0	1.0
23	12.0	1.0	1.0	1.0	0.0	12.0	1.0	2.0	1.0	0.0	12.0	1.0	2.0	1.0	0.0	12.0	1.0	2.0	1.0	12.0	1.0	1.0	1.0	12.0	1.0	1.0	1.0
22	11.0	1.0	1.0	1.0	0.0	11.0	1.0	2.0	1.0	0.0	11.0	1.0	2.0	1.0	0.0	11.0	1.0	2.0	1.0	11.0	1.0	1.0	1.0	11.0	1.0	1.0	1.0
21	11.0	1.0	1.0	1.0	0.0	11.0	1.0	2.0	1.0	0.0	11.0	1.0	2.0	1.0	0.0	11.0	1.0	2.0	1.0	11.0	1.0	1.0	1.0	11.0	1.0	1.0	1.0
20	10.0	1.0	1.0	1.0	0.0	10.0	1.0	2.0	1.0	0.0	10.0	1.0	2.0	1.0	0.0	10.0	1.0	2.0	1.0	10.0	1.0	1.0	1.0	10.0	1.0	1.0	1.0
19	10.0	1.0	1.0	1.0	0.0	10.0	1.0	2.0	1.0	0.0	10.0	1.0	2.0	1.0	0.0	10.0	1.0	2.0	1.0	10.0	1.0	1.0	1.0	10.0	1.0	1.0	1.0
18	9.0	1.0	1.0	1.0	0.0	9.0	1.0	2.0	1.0	0.0	9.0	1.0	2.0	1.0	0.0	9.0	1.0	2.0	1.0	9.0	1.0	1.0	1.0	9.0	1.0	1.0	1.0
17	9.0	1.0	1.0	1.0	0.0	9.0	1.0	2.0	1.0	0.0	9.0	1.0	2.0	1.0	0.0	9.0	1.0	2.0	1.0	9.0	1.0	1.0	1.0	9.0	1.0	1.0	1.0
16	8.0	1.0	1.0	1.0	0.0	8.0	1.0	2.0	1.0	0.0	8.0	1.0	2.0	1.0	0.0	8.0	1.0	2.0	1.0	8.0	1.0	1.0	1.0	8.0	1.0	1.0	1.0
15	8.0	0.0	1.0	1.0	0.0	8.0	0.0	2.0	1.0	0.0	8.0	0.0	2.0	1.0	0.0	8.0	0.0	2.0	1.0	8.0	0.0	1.0	1.0	8.0	0.0	1.0	1.0
14	7.0	0.0	1.0	1.0	0.0	7.0	0.0	2.0	1.0	0.0	7.0	0.0	2.0	1.0	0.0	7.0	0.0	2.0	1.0	7.0	0.0	1.0	1.0	7.0	0.0	1.0	1.0
13	7.0	0.0	1.0	1.0	0.0	7.0	0.0	2.0	1.0	0.0	7.0	0.0	2.0	1.0	0.0	7.0	0.0	2.0	1.0	7.0	0.0	1.0	1.0	7.0	0.0	1.0	1.0
12	6.0	0.0	1.0	1.0	0.0	6.0	0.0	2.0	1.0	0.0	6.0	0.0	2.0	1.0	0.0	6.0	0.0	2.0	1.0	6.0	0.0	1.0	1.0	6.0	0.0	1.0	1.0
11	6.0	0.0	1.0	1.0	0.0	6.0	0.0	2.0	1.0	0.0	6.0	0.0	2.0	1.0	0.0	6.0	0.0	2.0	1.0	6.0	0.0	0.0	1.0	6.0	0.0	0.0	1.0
10	5.0	0.0	0.0	1.0	0.0	5.0	0.0	1.0	1.0	0.0	5.0	0.0	1.0	1.0	0.0	5.0	0.0	1.0	1.0	5.0	0.0	0.0	1.0	5.0	0.0	0.0	1.0
9	5.0	0.0	0.0	1.0	0.0	5.0	0.0	1.0	1.0	0.0	5.0	0.0	1.0	1.0	0.0	5.0	0.0	1.0	1.0	5.0	0.0	0.0	1.0	5.0	0.0	0.0	1.0
8	4.0	0.0	0.0	1.0	0.0	4.0	0.0	1.0	1.0	0.0	4.0	0.0	1.0	1.0	0.0	4.0	0.0	1.0	1.0	4.0	0.0	0.0	1.0	4.0	0.0	0.0	1.0
7	4.0	0.0	0.0	1.0	0.0	4.0	0.0	1.0	1.0	0.0	4.0	0.0	1.0	1.0	0.0	4.0	0.0	1.0	1.0	4.0	0.0	0.0	1.0	4.0	0.0	0.0	1.0
6	3.0	0.0	0.0	1.0	0.0	3.0	0.0	1.0	1.0	0.0	3.0	0.0	1.0	1.0	0.0	3.0	0.0	1.0	1.0	3.0	0.0	0.0	1.0	3.0	0.0	0.0	1.0
5	3.0	0.0	0.0	1.0	0.0	3.0	0.0	1.0	1.0	0.0	3.0	0.0	1.0	1.0	0.0	3.0	0.0	1.0	1.0	3.0	0.0	0.0	1.0	3.0	0.0	0.0	1.0
4	2.0	0.0	0.0	1.0	0.0	2.0	0.0	1.0	1.0	0.0	2.0	0.0	1.0	1.0	0.0	2.0	0.0	1.0	1.0	2.0	0.0	0.0	1.0	2.0	0.0	0.0	1.0
3	2.0	0.0	0.0	1.0	0.0	2.0	0.0	1.0	1.0	0.0	2.0	0.0	1.0	1.0	0.0	2.0	0.0	1.0	1.0	2.0	0.0	0.0	1.0	2.0	0.0	0.0	1.0
2	1.0	0.0	0.0	1.0	0.0	1.0	0.0	1.0	1.0	0.0	1.0	0.0	1.0	1.0	0.0	1.0	0.0	1.0	1.0	1.0	0.0	0.0	1.0	1.0	0.0	0.0	1.0
1	1.0	0.0	0.0	1.0	0.0	1.0	0.0	1.0	1.0	0.0	1.0	0.0	1.0	1.0	0.0	1.0	0.0	1.0	1.0	1.0	0.0	0.0	1.0	1.0	0.0	0.0	1.0

CVICU - 7.1.20 Sat-Sun

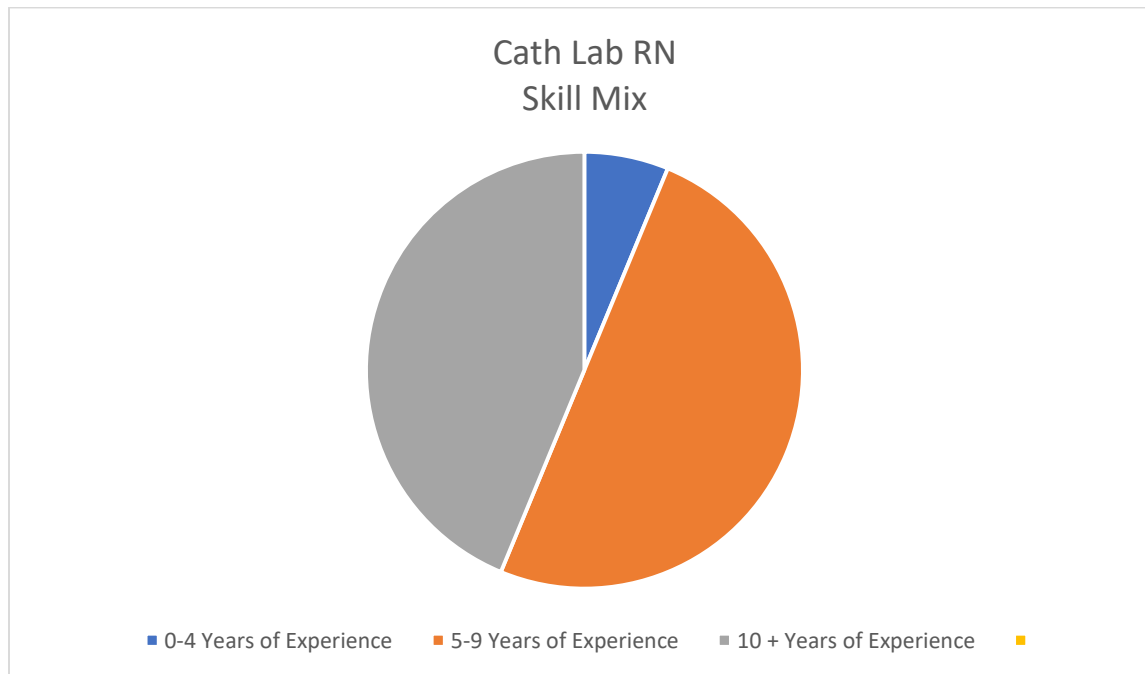
TARGET HPPD

Census	Days										Evenings								Nights								
	630am - 1030 am					1030am - 230pm					230pm - 630pm				630pm - 1030pm				1030pm - 230am				230am - 630am				
	RN	FLEX	PTS	CRN - No Pts	CRN - with Pts	RN	FLEX	PTS	CRN - No Pts	CRN - with Pts	RN	FLEX	PTS	CRN - No Pts	CRN - with Pts	RN	FLEX	PTS	CRN - No Pts	RN	FLEX	PTS	CRN - No Pts	RN	FLEX	PTS	CRN - No Pts
24	12.0	1.0	1.0	1.0	0.0	12.0	1.0	1.0	1.0	0.0	12.0	1.0	1.0	1.0	0.0	12.0	1.0	1.0	1.0	12.0	1.0	1.0	1.0	12.0	1.0	1.0	1.0
23	12.0	1.0	1.0	1.0	0.0	12.0	1.0	1.0	1.0	0.0	12.0	1.0	1.0	1.0	0.0	12.0	1.0	1.0	1.0	12.0	1.0	1.0	1.0	12.0	1.0	1.0	1.0
22	11.0	1.0	1.0	1.0	0.0	11.0	1.0	1.0	1.0	0.0	11.0	1.0	1.0	1.0	0.0	11.0	1.0	1.0	1.0	11.0	1.0	1.0	1.0	11.0	1.0	1.0	1.0
21	11.0	1.0	1.0	1.0	0.0	11.0	1.0	1.0	1.0	0.0	11.0	1.0	1.0	1.0	0.0	11.0	1.0	1.0	1.0	11.0	1.0	1.0	1.0	11.0	1.0	1.0	1.0
20	10.0	1.0	1.0	1.0	0.0	10.0	1.0	1.0	1.0	0.0	10.0	1.0	1.0	1.0	0.0	10.0	1.0	1.0	1.0	10.0	1.0	1.0	1.0	10.0	1.0	1.0	1.0
19	10.0	1.0	1.0	1.0	0.0	10.0	1.0	1.0	1.0	0.0	10.0	1.0	1.0	1.0	0.0	10.0	1.0	1.0	1.0	10.0	1.0	1.0	1.0	10.0	1.0	1.0	1.0
18	9.0	1.0	1.0	1.0	0.0	9.0	1.0	1.0	1.0	0.0	9.0	1.0	1.0	1.0	0.0	9.0	1.0	1.0	1.0	9.0	1.0	1.0	1.0	9.0	1.0	1.0	1.0
17	9.0	1.0	1.0	1.0	0.0	9.0	1.0	1.0	1.0	0.0	9.0	1.0	1.0	1.0	0.0	9.0	1.0	1.0	1.0	9.0	1.0	1.0	1.0	9.0	1.0	1.0	1.0
16	8.0	1.0	1.0	1.0	0.0	8.0	1.0	1.0	1.0	0.0	8.0	1.0	1.0	1.0	0.0	8.0	1.0	1.0	1.0	8.0	1.0	1.0	1.0	8.0	1.0	1.0	1.0
15	8.0	0.0	1.0	1.0	0.0	8.0	0.0	1.0	1.0	0.0	8.0	0.0	1.0	1.0	0.0	8.0	0.0	1.0	1.0	8.0	0.0	1.0	1.0	8.0	0.0	1.0	1.0
14	7.0	0.0	1.0	1.0	0.0	7.0	0.0	1.0	1.0	0.0	7.0	0.0	1.0	1.0	0.0	7.0	0.0	1.0	1.0	7.0	0.0	1.0	1.0	7.0	0.0	1.0	1.0
13	7.0	0.0	1.0	1.0	0.0	7.0	0.0	1.0	1.0	0.0	7.0	0.0	1.0	1.0	0.0	7.0	0.0	1.0	1.0	7.0	0.0	1.0	1.0	7.0	0.0	1.0	1.0
12	6.0	0.0	1.0	1.0	0.0	6.0	0.0	1.0	1.0	0.0	6.0	0.0	1.0	1.0	0.0	6.0	0.0	1.0	1.0	6.0	0.0	1.0	1.0	6.0	0.0	1.0	1.0
11	6.0	0.0	1.0	1.0	0.0	6.0	0.0	1.0	1.0	0.0	6.0	0.0	1.0	1.0	0.0	6.0	0.0	1.0	1.0	6.0	0.0	0.0	1.0	6.0	0.0	0.0	1.0
10	5.0	0.0	0.0	1.0	0.0	5.0	0.0	0.0	1.0	0.0	5.0	0.0	0.0	1.0	0.0	5.0	0.0	0.0	1.0	5.0	0.0	0.0	1.0	5.0	0.0	0.0	1.0
9	5.0	0.0	0.0	1.0	0.0	5.0	0.0	0.0	1.0	0.0	5.0	0.0	0.0	1.0	0.0	5.0	0.0	0.0	1.0	5.0	0.0	0.0	1.0	5.0	0.0	0.0	1.0
8	4.0	0.0	0.0	1.0	0.0	4.0	0.0	0.0	1.0	0.0	4.0	0.0	0.0	1.0	0.0	4.0	0.0	0.0	1.0	4.0	0.0	0.0	1.0	4.0	0.0	0.0	1.0
7	4.0	0.0	0.0	1.0	0.0	4.0	0.0	0.0	1.0	0.0	4.0	0.0	0.0	1.0	0.0	4.0	0.0	0.0	1.0	4.0	0.0	0.0	1.0	4.0	0.0	0.0	1.0
6	3.0	0.0	0.0	1.0	0.0	3.0	0.0	0.0	1.0	0.0	3.0	0.0	0.0	1.0	0.0	3.0	0.0	0.0	1.0	3.0	0.0	0.0	1.0	3.0	0.0	0.0	1.0
5	3.0	0.0	0.0	1.0	0.0	3.0	0.0	0.0	1.0	0.0	3.0	0.0	0.0	1.0	0.0	3.0	0.0	0.0	1.0	3.0	0.0	0.0	1.0	3.0	0.0	0.0	1.0
4	2.0	0.0	0.0	1.0	0.0	2.0	0.0	0.0	1.0	0.0	2.0	0.0	0.0	1.0	0.0	2.0	0.0	0.0	1.0	2.0	0.0	0.0	1.0	2.0	0.0	0.0	1.0
3	2.0	0.0	0.0	1.0	0.0	2.0	0.0	0.0	1.0	0.0	2.0	0.0	0.0	1.0	0.0	2.0	0.0	0.0	1.0	2.0	0.0	0.0	1.0	2.0	0.0	0.0	1.0
2	1.0	0.0	0.0	1.0	0.0	1.0	0.0	0.0	1.0	0.0	1.0	0.0	0.0	1.0	0.0	1.0	0.0	0.0	1.0	1.0	0.0	0.0	1.0	1.0	0.0	0.0	1.0
1	1.0	0.0	0.0	1.0	0.0	1.0	0.0	0.0	1.0	0.0	1.0	0.0	0.0	1.0	0.0	1.0	0.0	0.0	1.0	1.0	0.0	0.0	1.0	1.0	0.0	0.0	1.0

Matrix Review Form for: Cath Lab 2255 Date: February 8, 2022	
Topic	Discussion
What's working well?	Executive Leadership approving replacement FTE's and sign-on bonuses for critical to fill positions.
What concerns you the most?	Senior staff reducing hours, hard to on-board new hires. Difficult to fill open positions due to experience requirement. Difficult to compete with Cath Lab traveler wages.
Open Positions/ Staff Retention	<b>Open Positions:</b> 3 -1.0 FTE RN positions, 2 - 1.0 FTE RT positions. <b>Staff Retention:</b> In the past 6 months I have had 1 RN reduce from 0.5 FTE to Relief to allow more time to explore new nursing opportunities, 1 RN reduce from 1.0 FTE to 0.5 FTE to open an Urgent Care Center, 1 RN 1.0 FTE transfer to Vascular Access after 9 months in the Cath Lab, and 1 RN 1.0 FTE left to work in Industry. We lost 1 Cath Lab RN secondary to the vaccine mandate.
Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i>	The Cath Lab staff have <b>missed 35 breaks out of 1040 break opportunities: 3.37%</b> They have <b>missed 28 lunches out of 520: 5.38%</b> Missed breaks and lunches are the result of procedures running long, or not finishing within 5 hours of their shift start time. If the staff do not get their lunch break within 5 hours of their clock in they clock a missed lunch even if they get a lunch break later in the day.
Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i>	<b>Incremental overtime in the past 30 days is 7.4% or 59.25 hours out of 800.</b> There are 4 Cath Lab team members on call after 1730 M-F. The call team stays on the clock to finish cases resulting in incremental overtime.
Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i>	The Cath Lab has been out of matrix <b>0%</b> of the time in the last 30 days. We do not perform cases without adequate staffing.

CATH LAB 2255

STAFF MIX	HOURS OF OPERATION 0700-1730 (5 10HR DAYS)				1730-0700 M-F 0700-0700 Sat/Sun	
	RN	RN OR RTR LEAD	RTR	CVT	RN	RTR
6 LABS	9	1	11	4	2	2
TOTAL	25				4	



<b>Matrix Review Form for: CDI</b>		<b>Date: 12/13/2022</b>
<b>Topic</b>	<b>Discussion</b>	
<b>What's working well?</b>	CDI department staffing increased from 7 CDI to 8 allowing for greater flexibility for PTO scheduling. Allotting one 8 hour shift per month for CDI Education.	
<b>What concerns you the most?</b>	The number of CDI staff members are determined by the number of discharges per year. The increased census does not allow for CDI to keep up with the work flow and some cases do not receive a concurrent CDI review. This can affect the financial income and quality data for SWMC.	
<b>Open Positions/ Staff Retention</b>	In the past year we have not had any CDI resign from their position. We have had one CDI out for extended medical leave. It is our hope that they will recover and return if they so desire. In the interim we have had an agency CDI fill the position. A requisition was sent on 12/7/2022 requesting approval to replace the full time position.	
<b>Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i></b>	CDI team members are salary and work remotely from home. They do not perform direct patient care. In addition they are allowed to take breaks and lunches whenever they choose to do so. Work hours are flexible with the expectation of starting no later than 8:00 am. or notify team of a late start time. Hours are very flexible and staff are allowed to flex their time around appointments or other breaks in time during the day with the goal to work 8 hours per day. 0 percent	
<b>Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i></b>	CDI staff are exempt (salary) and do not punch a time clock. 0 percent.	
<b>Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i></b>	Scheduled staff days = 139 with 8 unplanned absences = 5.75 % staffing out of matrix.	

Matrix Review Form for: Diagnostic Imaging ( CT / Ultrasound Procedures)		Date: July 12, 2022
Topic	Discussion	
What's working well?	Having 3 RN's scheduled per day has helped greatly reduce incremental overtime and missed breaks/lunches. In addition, having the DI RN's join the Cardiac Prep Recovery team has allowed me to provide back up nursing support when needed by floating an available RN to DI from the CPRU to help when cases are double booked, or to offer breaks, lunches when needed.	
What concerns you the most?	Having only 3 RN's scheduled per day leaves the department vulnerable and at risk of rescheduling patients secondary to sick calls etc.	
Open Positions/ Staff Retention	Currently no Open RN positions for CT/US	
Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i>	Missed Breaks / Lunches for past 30 days: (6/1-6/30/22) 4 missed breaks, 0 missed lunches of 1320 break periods = 0.3% The DI RN's miss breaks when there are multiple procedures scheduled back to back, and if there are only 2 RN's scheduled secondary to sick calls / PTO.	
Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i>	Incremental Overtime for past 30 days: 3 hours of 660 worked hours = 0.45%	
Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i>	CT/US RN's cannot perform procedures without appropriate staffing. Minimum of 2 RNs are needed for all sedation cases, only 1 is needed for Ultrasound procedures.	

Matrix Review Form for: Emergency Department		Date: 06/14/2022
Topic	Discussion	
<b>What's working well?</b>	Leadrship support to the staff and continued recognition. Opening new positions to try and help with staffing challenges and current travelers to help with challenges.	
<b>What concerns you the most?</b>	Staffing challenges with onboarding current staff and the lack of applicants coming in for experienced RN's	
<b>Open Positions/ Staff Retention</b>	We have 34 open positions in the ED currently. We have 5 interns coming off orientation in July, 6 more coming off in October and 8 more scheduled to start July. We have 9 new experienced RN's that are either in orientation or starting in July. We are working hard to try and retain current staffing with continued support, recognition and listening to needs. we have lost 11 nurses this years to travel nurses and 26 nurses total in the last year for various reasons.	
<b>Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i></b>	232.25 hours of missed breaks/Lunches in the last 30 days equals 2.2%. Float RNs are only being able to focus on lunches for staff.	
<b>Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i></b>	252.75 hours of excess of shift equal 2.34%. We have also had 454 hours of overtime total and 431 hours of rest between shifts.	
<b>Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i></b>	Unable to obtain accurate data.	

Rev 06.09.2022	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	1	2	3	4	5	6
<b>PIT</b>																								
PIT Leader RN	0	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	0	0	0	0	0	0	0
Triage RN	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2
Action RN	0	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	0	0	0	0	0	0	0
PTS	0	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	0	0	0	0	0	0	0
LPN/RN	0	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	0	0	0	0	0	0	0
Triage/PIT ED Tech	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Triage/PIT Float RN	0	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	0	0	0	0	0	0	0
<b>Reassessment</b>																								
RN	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2
ED Tech	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
PTS	0	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	0	0	0	0	0	0	0
EMS Charge RN	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
<b>Main</b>																								
Charge RN	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
RN	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12
ED Tech	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4
Unit Cordinator	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
PTS	0	0	0	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	0	0	0	0	0
Float RN	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2
ACA RN	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
ACA Tech	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
<b>Totals</b>																								
RN Assignments	21	25	25	25	25	25	25	25	25	25	25	25	25	25	25	25	25	21	21	21	21	21	21	21
EDT Assignments	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7
PTS Assignments	0	2	2	3	3	3	3	3	3	3	3	3	3	3	3	3	3	1	1	0	0	0	0	0



Rev 04.20.2022	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	1	2	3	4	5	6	
<b>CHARGE RN</b>																									
<b>EMS Charge RN</b>																									
<b>Triage RN 1</b>																									
<b>Triage RN 2</b>																									
<b>Triage/PIT Tech</b>																									
<b>PTS</b>																									
<b>LPN</b>																									
<b>PIT Leader</b>																									
<b>Action RN 1</b>																									
<b>Action RN 2</b>																									
<b>ED Tech/CNA (w/PIT leader)</b>																									
<b>Triage/PIT Float RN</b>																									
<b>Unit Coordinator</b>																									
<b>Unit Coordinator</b>																									
<b>Main</b>	<b>0600 MD:</b>				<b>0700 MD:</b>				<b>1400 MD:</b>				<b>1500 MD:</b>				<b>2200 MD:</b>				<b>2300 MD:</b>				
20, 21, 30, F																									
25, 27, 35, C																									
26, 36, A, B																									
28, 31, 33, D																									
29, 32, 34, E																									
Main Float RN																									
Main ED Tech 1																									
Main ED Tech 2																									
<b>EDW</b>					<b>1000 MD:</b>				<b>1500 MD:</b>				<b>1700 MD:</b>												
1, 2, 7, 8																									
3, 4, 5, C																									
9, 10, 11, 12																									
16, 17, 18, 19																									
14, 15, A, B																									
EDW Float RN																									
EDW Tech 1																									
EDW Tech 2																									
<b>ACA</b>																									
<b>ACA RN</b>																									
<b>ACA Tech</b>																									
<b>EDE</b>	<b>0800 MD:</b>								<b>1600 MD:</b>																
43, 44, 45, (49)																									
46, 47, 48, (50)																									
49, 50, 51, G																									
EDE Float RN																									
EDE Tech																									
RN Assignments	14	14	15	15	23	23	23	23	23	23	23	23	23	23	23	23	23	19	19	15	15	13	13	13	13
EDT Assignments	5	5	6	6	8	8	8	8	8	8	8	8	8	8	8	8	8	7	7	6	6	4	4	4	4
Projected Volume	29	32	39	46	50	59	63	67	68	67	68	68	69	68	67	60	54	47	41	36	32	30	28	27	

Rev 04.20.2022	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	1	2	3	4	5	6
CHARGE RN																								
EMS Charge RN																								
Triage RN 1																								
Triage RN 2																								
Triage/PIT Tech																								
PTS																								
LPN																								
PIT Leader																								
Action RN 1																								
Action RN 2																								
ED Tech/CNA (w/PIT leader)																								
Triage/PIT Float RN																								
Unit Coordinator																								
Unit Coordinator																								
Main	0600 MD:				0700 MD:				1400 MD:				1500 MD:				2200 MD:				2300 MD:			
20, 30, F, C2																								
21, 22, A, A2																								
25, 27, 35, C																								
26, 36, 37, B																								
28, 31, 33, D																								
29, 32, 34, E																								
Main Float RN																								
Main ED Tech 1																								
Main ED Tech 2																								
EDW					1000 MD:				1500 MD:				1700 MD:											
9, 10, 11, 12																								
16, 17, 18, 19																								
14, 15																								
EDW Float RN																								
EDW Tech 1																								
EDW Tech 2																								
Sub-Wait																								
Sub-Wait RN																								
Sub-Wait RN																								
Sub-Wait RN																								
Sub-Wait Tech																								
Sub-Wait Tech																								
ACA																								
ACA RN																								
ACA Tech																								
EDE	0800 MD:								1600 MD:															
43, 44, 45, (49)																								
46, 47, 48, (50)																								
49, 50, 51, G																								
EDE Float RN																								
EDE Tech																								
RN Assignments	14	14	15	15	23	23	23	23	23	23	23	23	23	23	23	23	19	19	15	15	13	13	13	13
EDT Assignments	5	5	6	6	8	8	8	8	8	8	8	8	8	8	8	8	7	7	6	6	4	4	4	4
Projected Sum	29	32	39	46	53	59	63	67	68	67	68	68	69	68	67	60	54	47	41	36	32	30	28	27

Rev 04.20.2022	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	1	2	3	4	5	6
CHARGE RN																								
EMS Charge RN																								
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Action RN 1																								
Action RN 2																								
ED Tech/CNA (w/PIT leader)																								
Triage/PIT Float RN																								
Unit Coordinator																								
Unit Coordinator																								
Main	0600 MD:				0700 MD:				1400 MD:				1500 MD:				2200 MD:				2300 MD:			
20, 30, F, C2																								
21, 22, A, A2																								
25, 27, 35, C																								
26, 36, 37, B																								
28, 31, 33, D																								
29, 32, 34, E																								
Main Float RN																								
Main ED Tech 1																								
Main ED Tech 2																								
EDW					1000 MD:				1500 MD:				1700 MD:											
9, 10, 11, 12																								
16, 17, 18, 19																								
7, 14, 15, C																								
EDW Float RN																								
EDW Tech 1																								
EDW Tech 2																								
Sub-Wait																								
Sub-Wait RN																								
Sub-Wait RN																								
Sub-Wait RN																								
Sub-Wait Tech																								
Sub-Wait Tech																								
ACA																								
ACA RN																								
ACA Tech																								
EDE	0800 MD:								1600 MD:															
43, 44, 45, (49)																								
46, 47, 48, (50)																								
49, 50, 51, G																								
EDE Float RN																								
EDE Tech																								
RN Assignments	14	14	15	15	23	23	23	23	23	23	23	23	23	23	23	23	19	19	15	15	13	13	13	13
EDT Assignments	5	5	6	6	8	8	8	8	8	8	8	8	8	8	8	8	7	7	6	6	4	4	4	4
Projected Volumes	29	32	39	46	53	59	63	67	68	67	68	68	69	68	67	60	54	47	41	36	32	30	28	27

<b>Matrix Review Form for: Gastro Endo</b>		<b>Date: 9/13/2022</b>
<b>Topic</b>	<b>Discussion</b>	
<b>What's working well?</b>	Fast track for OP screening endoscopy, able to fill all positions	
<b>What concerns you the most?</b>	Continue with the volumes as we are losing 1 GI provider	
<b>Open Positions/ Staff Retention</b>	1 per diem RN - interviewing this week	
<b>Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i></b>	Missed Lunches - 4.5 hours of missed lunches (9) out of 2249 hrs resulting in less than 1%, Missed breaks for a total of 4.5 hours (18) out of a total of 2249 resulting in less than 1%.	
<b>Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i></b>	Incremental OT was 11.5 hrs out of 2249 hours, resulting in less than 1%	
<b>Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i></b>	0 shifts out of matrix as we have to close rooms if we are unable to staff	

<b>Matrix Review Form for: Home Health--Columbia Network</b>		<b>Date: 10/11/2022</b>
<b>Topic</b>	<b>Discussion</b>	
<b>What's working well?</b>	Strong executive leadership support for providing FTEs, travelers, and new system-level onboarding. Pod structure in place to provide higher level of staff support. Increase in qualified candidates in recent months.	
<b>What concerns you the most?</b>	Difficulty recruiting and retaining LPNs and per diem staff. Difficulty finding nurses with prior home health or other relevant experience .	
<b>Open Positions/ Staff Retention</b>	Open Positions: 6 RN (2 replacements), 5 LPN (2 replacements) Staff Retention: Past 6 mo., 1 LPN transitioned from FTE to per diem position, 1 RN left to take a traveler position out of state, 1 RN transferred to a different department in PH	
<b>Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i></b>	1% missed meals 1% missed breaks	
<b>Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i></b>	109.5 hours total. Most of this is due to CES shifts.	
<b>Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i></b>	Staffing based on caseload and productivity expectation of 4.6 points/8 hr shift vs. 23 points in 1 week.	

Matrix Review Form for: RHHH		Date: 11/8/2022
Topic	Discussion	
<b>What's working well?</b>	Staff, for the most part, are feeling supported. Care at RHHH is excellent. Working more as a team. Intake and Clerical helping more with paperwork. Support from the home program when short staffed. Stronger relationship with our home program.	
<b>What concerns you the most?</b>	Need help with filling positions. Cannot fill house if we have no nurses.	
<b>Open Positions/ Staff Retention</b>	4: PER DIEM POSITIONS OPEN; 1 0.8 EVENING SHIFT;	
<b>Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i></b>	Total days of RN's with punches: 286 and total missed lunches: 13. 5% Missed Breaks: 26 breaks.	
<b>Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i></b>	2109 regular hours worked and 91.5 hours of OT for nurses.	
<b>Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i></b>	Days: two times 1 nurse under; Evenings: 2 times 1 nurse under; NOCS: 8 times (attempted to staff up when acuity put us over 20). No takers.	

<b>Matrix Review Form for: Hospice Medicare Certified</b>		<b>Date: 10/11/2022</b>
<b>Topic</b>	<b>Discussion</b>	
<b>What's working well?</b>	<p>Census numbers are to an all time high in Hospice at about 350. WE have been able to remain open by adjusting caseloads as needed and able to do so by reducing visits per week (Medicare requires only 1 visit by RN every 14 days). Supplemented with LPNS who now work days and evenings, as well as NOC's. 2 travel nurses are helping with additional visits. Increasing CNA's for 'vision' of patients in the home. Addition of Intellatriage actual RN Hospice answering service able to handle about 50% of calls never having to reach RN's. Restructure of night shift RN's On Call role to hourly has drawn more attention to the position and one person hired after being open more than a year. Only working call at night. No more days or weekends. Quality scores are coming up! Many amazing nurses onboarded this year but still positions open. Happy we can now return to meetings in person as many of our new staff don't know the rest of our team. Incentives assisted with getting through this period of growth, but now attempting to work with using incentive only for emergencies.</p>	
<b>What concerns you the most?</b>	<p>We want to ensure our staff satisfaction and engagement as well as longevity. If we onboard 2 but lose 2 we cannot get anywhere. WE want to do all that we can to keep staff feeling satisfied and engaged and HERE: Plan: Managers checking in with each RN weekly. Quality care and evening shift coverage are main concerns as well.</p>	
<b>Open Positions/ Staff Retention</b>	<p>RN: Night RN 0.6, 1 RN -0.8 Evening Float, 4 RN 1.0, RN Per Diem 2, 2 RN 0.8 GIP, 2 1.0 Evening,</p>	
<b>Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i></b>	<p>Missed Meals: Number of Days Meals taken: 822 # of Days meals missed: 15 Percentage of misses Meals: 1% Percentage attested: 79% Missed Breaks: Number of breaks that could be taken: 1644 # of missed breaks: 32 Percentage of missed breaks: 1.9%</p>	
<b>Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i></b>	<p>Number of hours of OT: 583 hours total OT in RN wages for month of Sept. Out of 8175.5 total hours: 7.13% OT hours worked.</p>	
<b>Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i></b>	<p>Staffing is different in Hospice every day, every shift: Days on weekdays: Census / 12 -14 = 29 RN's per day.</p>	

Matrix Review Form for: ICU		Date: 7/12/22
Topic	Discussion	
<b>What's working well?</b>	Unit based council growth, development of new staff, team work on the unit, ICU'r Strength, Critical Conversations	
<b>What concerns you the most?</b>	Staffing and skill mix	
<b>Open Positions/ Staff Retention</b>	12 0.9 FTE night shift positions open (there are also 8 positons filled with fellows/residnets who have not started yet) 4 0.9 and 3 0.6 FTE day shift postions not filled. These were taken down due to low staffing on nights.	
<b>Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i></b>	In the last 30 days (June 1 - June 30) there were 44 missed lunches and 262 missed breaks 59% missed at least 1 break. 9% missed a meal.	
<b>Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i></b>	ICU 64 hours of incremental overtime (5%)	
<b>Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i></b>	100% of days out of Matrix, this is mainly due to low staffing or floating PTS.	



Census	Days												Evenings												Nights											
	630am - 1030 am						1030am - 230pm						230pm - 630pm						630pm - 1030pm						1030pm - 230am				230am - 630am							
	RN	RRT	PTS	Flex RN	CRN - No Pts	CRN - with Pts	RN	RRT	PTS	Flex RN	CRN - No Pts	CRN - with Pts	RN	RRT	PTS	Flex RN	CRN - No Pts	CRN - with Pts	RN	RRT	PTS	Flex RN	CRN - No Pts	CRN - with Pts	RN	RRT	PTS	Flex RN	CRN - No Pts	CRN - with Pts	RN	RRT	PTS	Flex RN	CRN - No Pts	CRN - with Pts
24	12.0	1.0	1.0	1.0	1.0	0.0	12.0	1.0	2.0	1.0	1.0	0.0	12.0	1.0	2.0	1.0	1.0	0.0	12.0	1.0	2.0	1.0	1.0	0.0	12.0	1.0	1.0	1.0	1.0	0.0	12.0	1.0	1.0	1.0	1.0	0.0
23	12.0	1.0	1.0	1.0	1.0	0.0	12.0	1.0	2.0	1.0	1.0	0.0	12.0	1.0	2.0	1.0	1.0	0.0	12.0	1.0	2.0	1.0	1.0	0.0	12.0	1.0	1.0	1.0	1.0	0.0	12.0	1.0	1.0	1.0	1.0	0.0
22	11.0	1.0	1.0	1.0	1.0	0.0	11.0	1.0	2.0	1.0	1.0	0.0	11.0	1.0	2.0	1.0	1.0	0.0	11.0	1.0	2.0	1.0	1.0	0.0	11.0	1.0	1.0	1.0	1.0	0.0	11.0	1.0	1.0	1.0	1.0	0.0
21	11.0	1.0	1.0	1.0	1.0	0.0	11.0	1.0	2.0	1.0	1.0	0.0	11.0	1.0	2.0	1.0	1.0	0.0	11.0	1.0	2.0	1.0	1.0	0.0	11.0	1.0	1.0	1.0	1.0	0.0	11.0	1.0	1.0	1.0	1.0	0.0
20	10.0	1.0	1.0	1.0	1.0	0.0	10.0	1.0	2.0	1.0	1.0	0.0	10.0	1.0	2.0	1.0	1.0	0.0	10.0	1.0	2.0	1.0	1.0	0.0	10.0	1.0	1.0	1.0	1.0	0.0	10.0	1.0	1.0	1.0	1.0	0.0
19	10.0	1.0	1.0	1.0	1.0	0.0	10.0	1.0	2.0	1.0	1.0	0.0	10.0	1.0	2.0	1.0	1.0	0.0	10.0	1.0	2.0	1.0	1.0	0.0	10.0	1.0	1.0	1.0	1.0	0.0	10.0	1.0	1.0	1.0	1.0	0.0
18	9.0	1.0	1.0	1.0	1.0	0.0	9.0	1.0	2.0	1.0	1.0	0.0	9.0	1.0	2.0	1.0	1.0	0.0	9.0	1.0	2.0	1.0	1.0	0.0	9.0	1.0	1.0	1.0	1.0	0.0	9.0	1.0	1.0	1.0	1.0	0.0
17	9.0	1.0	1.0	1.0	1.0	0.0	9.0	1.0	2.0	1.0	1.0	0.0	9.0	1.0	2.0	1.0	1.0	0.0	9.0	1.0	2.0	1.0	1.0	0.0	9.0	1.0	1.0	1.0	1.0	0.0	9.0	1.0	1.0	1.0	1.0	0.0
16	8.0	1.0	1.0	1.0	1.0	0.0	8.0	1.0	2.0	1.0	1.0	0.0	8.0	1.0	2.0	1.0	1.0	0.0	8.0	1.0	2.0	1.0	1.0	0.0	8.0	1.0	1.0	1.0	1.0	0.0	8.0	1.0	1.0	1.0	1.0	0.0
15	8.0	1.0	1.0	1.0	1.0	0.0	8.0	1.0	2.0	1.0	1.0	0.0	8.0	1.0	2.0	1.0	1.0	0.0	8.0	1.0	2.0	1.0	1.0	0.0	8.0	1.0	1.0	1.0	1.0	0.0	8.0	1.0	1.0	1.0	1.0	0.0
14	7.0	1.0	1.0	0.0	1.0	0.0	7.0	1.0	2.0	0.0	1.0	0.0	7.0	1.0	2.0	0.0	1.0	0.0	7.0	1.0	2.0	0.0	1.0	0.0	7.0	1.0	1.0	0.0	1.0	0.0	7.0	1.0	1.0	0.0	1.0	0.0
13	7.0	1.0	1.0	0.0	1.0	0.0	7.0	1.0	2.0	0.0	1.0	0.0	7.0	1.0	2.0	0.0	1.0	0.0	7.0	1.0	2.0	0.0	1.0	0.0	7.0	1.0	1.0	0.0	1.0	0.0	7.0	1.0	1.0	0.0	1.0	0.0
12	6.0	1.0	1.0	0.0	1.0	0.0	6.0	1.0	2.0	0.0	1.0	0.0	6.0	1.0	2.0	0.0	1.0	0.0	6.0	1.0	2.0	0.0	1.0	0.0	6.0	1.0	1.0	0.0	1.0	0.0	6.0	1.0	1.0	0.0	1.0	0.0
11	5.0	1.0	1.0	0.0	1.0	0.0	5.0	1.0	2.0	0.0	1.0	0.0	5.0	1.0	2.0	0.0	1.0	0.0	5.0	1.0	2.0	0.0	1.0	0.0	5.0	1.0	1.0	0.0	1.0	0.0	5.0	1.0	1.0	0.0	1.0	0.0
10	5.0	1.0	0.0	0.0	1.0	0.0	5.0	1.0	1.0	0.0	1.0	0.0	5.0	1.0	1.0	0.0	1.0	0.0	5.0	1.0	1.0	0.0	1.0	0.0	5.0	1.0	0.0	0.0	1.0	0.0	5.0	1.0	0.0	0.0	1.0	0.0
9	4.0	1.0	0.0	0.0	1.0	0.0	4.0	1.0	1.0	0.0	1.0	0.0	4.0	1.0	1.0	0.0	1.0	0.0	4.0	1.0	1.0	0.0	1.0	0.0	4.0	1.0	0.0	0.0	1.0	0.0	4.0	1.0	0.0	0.0	1.0	0.0
8	4.0	1.0	0.0	0.0	1.0	0.0	4.0	1.0	1.0	0.0	1.0	0.0	4.0	1.0	1.0	0.0	1.0	0.0	4.0	1.0	1.0	0.0	1.0	0.0	4.0	1.0	0.0	0.0	1.0	0.0	4.0	1.0	0.0	0.0	1.0	0.0
7	3.0	1.0	0.0	0.0	1.0	0.0	3.0	1.0	1.0	0.0	1.0	0.0	3.0	1.0	1.0	0.0	1.0	0.0	3.0	1.0	1.0	0.0	1.0	0.0	3.0	1.0	0.0	0.0	1.0	0.0	3.0	1.0	0.0	0.0	1.0	0.0
6	3.0	1.0	0.0	0.0	1.0	0.0	3.0	1.0	1.0	0.0	1.0	0.0	3.0	1.0	1.0	0.0	1.0	0.0	3.0	1.0	1.0	0.0	1.0	0.0	3.0	1.0	0.0	0.0	1.0	0.0	3.0	1.0	0.0	0.0	1.0	0.0
5	2.0	1.0	0.0	0.0	1.0	0.0	2.0	1.0	1.0	0.0	1.0	0.0	2.0	1.0	1.0	0.0	1.0	0.0	2.0	1.0	1.0	0.0	1.0	0.0	2.0	1.0	0.0	0.0	1.0	0.0	2.0	1.0	0.0	0.0	1.0	0.0
4	2.0	1.0	0.0	0.0	1.0	0.0	2.0	1.0	1.0	0.0	1.0	0.0	2.0	1.0	1.0	0.0	1.0	0.0	2.0	1.0	1.0	0.0	1.0	0.0	2.0	1.0	0.0	0.0	1.0	0.0	2.0	1.0	0.0	0.0	1.0	0.0
3	1.0	1.0	0.0	0.0	1.0	0.0	1.0	1.0	1.0	0.0	1.0	0.0	1.0	1.0	1.0	0.0	1.0	0.0	1.0	1.0	1.0	0.0	1.0	0.0	1.0	1.0	0.0	0.0	1.0	0.0	1.0	1.0	0.0	0.0	1.0	0.0
2	1.0	1.0	0.0	0.0	1.0	0.0	1.0	1.0	1.0	0.0	1.0	0.0	1.0	1.0	1.0	0.0	1.0	0.0	1.0	1.0	1.0	0.0	1.0	0.0	1.0	1.0	0.0	0.0	1.0	0.0	1.0	1.0	0.0	0.0	1.0	0.0
1	0.0	1.0	0.0	0.0	1.0	0.0	0.0	1.0	1.0	1.0	0.0	0.0	1.0	1.0	1.0	0.0	0.0	0.0	0.0	1.0	1.0	1.0	0.0	0.0	0.0	0.0	1.0	0.0	0.0	1.0	0.0	0.0	0.0	1.0	0.0	

Effective 3.29.21 Mon-Fri

ICU - 2000

Census	Days												Evenings												Nights											
	630am - 1030 am						1030am - 230pm						230pm - 630pm						630pm - 1030pm						1030pm - 230am				230am - 630am							
	RN	RRT	PTS	Flex RN	CRN - No Pts	CRN - with Pts	RN	RRT	PTS	Flex RN	CRN - No Pts	CRN - with Pts	RN	RRT	PTS	Flex RN	CRN - No Pts	CRN - with Pts	RN	RRT	PTS	Flex RN	CRN - No Pts	CRN - with Pts	RN	RRT	PTS	Flex RN	CRN - No Pts	CRN - with Pts	RN	RRT	PTS	Flex RN	CRN - No Pts	CRN - with Pts
24	12.0	1.0	1.0	1.0	1.0	0.0	12.0	1.0	1.0	1.0	1.0	0.0	12.0	1.0	1.0	1.0	1.0	0.0	12.0	1.0	1.0	1.0	1.0	0.0	12.0	1.0	1.0	1.0	1.0	0.0	12.0	1.0	1.0	1.0	1.0	0.0
23	12.0	1.0	1.0	1.0	1.0	0.0	12.0	1.0	1.0	1.0	1.0	0.0	12.0	1.0	1.0	1.0	1.0	0.0	12.0	1.0	1.0	1.0	1.0	0.0	12.0	1.0	1.0	1.0	1.0	0.0	12.0	1.0	1.0	1.0	1.0	0.0
22	11.0	1.0	1.0	1.0	1.0	0.0	11.0	1.0	1.0	1.0	1.0	0.0	11.0	1.0	1.0	1.0	1.0	0.0	11.0	1.0	1.0	1.0	1.0	0.0	11.0	1.0	1.0	1.0	1.0	0.0	11.0	1.0	1.0	1.0	1.0	0.0
21	11.0	1.0	1.0	1.0	1.0	0.0	11.0	1.0	1.0	1.0	1.0	0.0	11.0	1.0	1.0	1.0	1.0	0.0	11.0	1.0	1.0	1.0	1.0	0.0	11.0	1.0	1.0	1.0	1.0	0.0	11.0	1.0	1.0	1.0	1.0	0.0
20	10.0	1.0	1.0	1.0	1.0	0.0	10.0	1.0	1.0	1.0	1.0	0.0	10.0	1.0	1.0	1.0	1.0	0.0	10.0	1.0	1.0	1.0	1.0	0.0	10.0	1.0	1.0	1.0	1.0	0.0	10.0	1.0	1.0	1.0	1.0	0.0
19	10.0	1.0	1.0	1.0	1.0	0.0	10.0	1.0	1.0	1.0	1.0	0.0	10.0	1.0	1.0	1.0	1.0	0.0	10.0	1.0	1.0	1.0	1.0	0.0	10.0	1.0	1.0	1.0	1.0	0.0	10.0	1.0	1.0	1.0	1.0	0.0
18	9.0	1.0	1.0	1.0	1.0	0.0	9.0	1.0	1.0	1.0	1.0	0.0	9.0	1.0	1.0	1.0	1.0	0.0	9.0	1.0	1.0	1.0	1.0	0.0	9.0	1.0	1.0	1.0	1.0	0.0	9.0	1.0	1.0	1.0	1.0	0.0
17	9.0	1.0	1.0	1.0	1.0	0.0	9.0	1.0	1.0	1.0	1.0	0.0	9.0	1.0	1.0	1.0	1.0	0.0	9.0	1.0	1.0	1.0	1.0	0.0	9.0	1.0	1.0	1.0	1.0	0.0	9.0	1.0	1.0	1.0	1.0	0.0
16	8.0	1.0	1.0	1.0	1.0	0.0	8.0	1.0	1.0	1.0	1.0	0.0	8.0	1.0	1.0	1.0	1.0	0.0	8.0	1.0	1.0	1.0	1.0	0.0	8.0	1.0	1.0	1.0	1.0	0.0	8.0	1.0	1.0	1.0	1.0	0.0
15	8.0	1.0	1.0	1.0	1.0	0.0	8.0	1.0	1.0	1.0	1.0	0.0	8.0	1.0	1.0	1.0	1.0	0.0	8.0	1.0	1.0	1.0	1.0	0.0	8.0	1.0	1.0	1.0	1.0	0.0	8.0	1.0	1.0	1.0	1.0	0.0
14	7.0	1.0	1.0	0.0	1.0	0.0	7.0	1.0	1.0	0.0	1.0	0.0	7.0	1.0	1.0	0.0	1.0	0.0	7.0	1.0	1.0	0.0	1.0	0.0	7.0	1.0	1.0	0.0	1.0	0.0	7.0	1.0	1.0	0.0	1.0	0.0
13	7.0	1.0	1.0	0.0	1.0	0.0	7.0	1.0	1.0	0.0	1.0	0.0	7.0	1.0	1.0	0.0	1.0	0.0	7.0	1.0	1.0	0.0	1.0	0.0	7.0	1.0	1.0	0.0	1.0	0.0	7.0	1.0	1.0	0.0	1.0	0.0
12	6.0	1.0	1.0	0.0	1.0	0.0	6.0	1.0	1.0	0.0	1.0	0.0	6.0	1.0	1.0	0.0	1.0	0.0	6.0	1.0	1.0	0.0	1.0	0.0	6.0	1.0	1.0	0.0	1.0	0.0	6.0	1.0	1.0	0.0	1.0	0.0
11	5.0	1.0	1.0	0.0	1.0	0.0	5.0	1.0	1.0	0.0	1.0	0.0	5.0	1.0	1.0	0.0	1.0	0.0	5.0	1.0	1.0	0.0	1.0	0.0	5.0	1.0	1.0	0.0	1.0	0.0	5.0	1.0	1.0	0.0	1.0	0.0
10	5.0	1.0	0.0	0.0	1.0	0.0	5.0	1.0	0.0	0.0	1.0	0.0	5.0	1.0	0.0	0.0	1.0	0.0	5.0	1.0	0.0	0.0	1.0	0.0	5.0	1.0	0.0	0.0	1.0	0.0	5.0	1.0	0.0	0.0	1.0	0.0
9	4.0	1.0	0.0	0.0	1.0	0.0	4.0	1.0	0.0	0.0	1.0	0.0	4.0	1.0	0.0	0.0	1.0	0.0	4.0	1.0	0.0	0.0	1.0	0.0	4.0	1.0	0.0	0.0	1.0	0.0	4.0	1.0	0.0	0.0	1.0	0.0
8	4.0	1.0	0.0	0.0	1.0	0.0	4.0	1.0	0.0	0.0	1.0	0.0	4.0	1.0	0.0	0.0	1.0	0.0	4.0	1.0	0.0	0.0	1.0	0.0	4.0	1.0	0.0	0.0	1.0	0.0	4.0	1.0	0.0	0.0	1.0	0.0
7	3.0	1.0	0.0	0.0	1.0	0.0	3.0	1.0	0.0	0.0	1.0	0.0	3.0	1.0	0.0	0.0	1.0	0.0	3.0	1.0	0.0	0.0	1.0	0.0	3.0	1.0	0.0	0.0	1.0	0.0	3.0	1.0	0.0	0.0	1.0	0.0
6	3.0	1.0	0.0	0.0	1.0	0.0	3.0	1.0	0.0	0.0	1.0	0.0	3.0	1.0	0.0	0.0	1.0	0.0	3.0	1.0	0.0	0.0	1.0	0.0	3.0	1.0	0.0	0.0	1.0	0.0	3.0	1.0	0.0	0.0	1.0	0.0
5	2.0	1.0	0.0	0.0	1.0	0.0	2.0	1.0	0.0	0.0	1.0	0.0	2.0	1.0	0.0	0.0	1.0	0.0	2.0	1.0	0.0	0.0	1.0	0.0	2.0	1.0	0.0	0.0	1.0	0.0	2.0	1.0	0.0	0.0	1.0	0.0
4	2.0	1.0	0.0	0.0	1.0	0.0	2.0	1.0	0.0	0.0	1.0	0.0	2.0	1.0	0.0	0.0	1.0	0.0	2.0	1.0	0.0	0.0	1.0	0.0	2.0	1.0	0.0	0.0	1.0	0.0	2.0	1.0	0.0	0.0	1.0	0.0
3	1.0	1.0	0.0	0.0	1.0	0.0	1.0	1.0	0.0	0.0	1.0	0.0	1.0	1.0	0.0	0.0	1.0	0.0	1.0	1.0	0.0	0.0	1.0	0.0	1.0	1.0	0.0	0.0	1.0	0.0	1.0	1.0	0.0	0.0	1.0	0.0
2	1.0	1.0	0.0	0.0	1.0	0.0	1.0	1.0	0.0	0.0	1.0	0.0	1.0	1.0	0.0	0.0	1.0	0.0	1.0	1.0	0.0	0.0	1.0	0.0	1.0	1.0	0.0	0.0	1.0	0.0	1.0	1.0	0.0	0.0	1.0	0.0
1	0.0	1.0	0.0	0.0	1.0	0.0	0.0	1.0	0.0	0.0	1.0	0.0	0.0	1.0	0.0	0.0	1.0	0.0	0.0	1.0	0.0	0.0	1.0	0.0	0.0	1.0	0.0	0.0	0.0	1.0	0.0	0.0	1.0	0.0	0.0	

Effective 7.1.20 Sat-Sun

<b>Matrix Review Form for: IMCU</b>		<b>Date: 07/12/2022</b>
Topic	Discussion	
<b>What's working well?</b>	The current matrix hasn't truly been put into practice considering the mix of patient acuity on the unit. The matrix appears to be appropriate with the 3:1 ratio for RNs. With improved staffing, we should be able to achieve these ratios, keep charge nurses free of a patient assignment, and have adequate CNA coverage to keep them close to the 8:1 ratio.	
<b>What concerns you the most?</b>	Currently, lack of adequate nursing staff is creating a major barrier to us being able to achieve appropriate nurse-to-patient ratios.	
<b>Open Positions/ Staff Retention</b>	RN Days: 3 F/T, 1 PD. (2 F/T positions occupied by RN residents) RN Nights: 6 F/T, 2 PD (3 F/T positions occupied by Residents/Fellows) CNA Days: 2 F/T CNA Nights: 1 F/T, 1 P/D (both pending new hires) PTS: 1 F/T (PD position created and filled) Retention: Focus has been on supporting and assisting staff on the unit. Frequently, management has been working shifts on the unit to augment staffing levels. Turnover has been minimal in the last few months. One caregiver has resigned to start RN school. Another has reduced to PD for school as well. Fast turnaround on new applicants to get them offers and hired ASAP.	
<b>Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i></b>	Missed Breaks: 26.5 hours (0.6%) and Missed Lunches: 4 hours (0.09% of total nursing hours worked). Barriers for missed breaks/lunches have been predominantly due to sudden changes in acuity in IMCU as well as staffing challenges (short staffing).	
<b>Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i></b>	Incremental OT: 83.5 hours excess of shift OT.	
<b>Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i></b>	IMCU has not met it's staffing matrix as of yet. It is 100% out of matrix for staffing.	

IMCU 2080

Census	Days										Evenings					Evenings					Nights									
	6 am - 10 am					10 am - 2 pm					2 pm - 6 pm					6 pm - 10 pm					10 pm - 2 am					2 am - 6 am				
	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts
31	10.0	4.0	1.0	1.0	-	10.0	4.0	1.0	1.0	-	10.0	4.0	1.0	1.0	-	8.0	3.0	-	1.0	-	8.0	3.0	-	1.0	-	8.0	3.0	-	1.0	-
30	9.0	4.0	1.0	1.0	-	9.0	4.0	1.0	1.0	-	9.0	4.0	1.0	1.0	-	8.0	3.0	-	1.0	-	8.0	3.0	-	1.0	-	8.0	3.0	-	1.0	-
29	9.0	4.0	1.0	1.0	-	9.0	4.0	1.0	1.0	-	9.0	4.0	1.0	1.0	-	8.0	3.0	-	1.0	-	8.0	3.0	-	1.0	-	8.0	3.0	-	1.0	-
28	9.0	3.0	1.0	1.0	-	9.0	3.0	1.0	1.0	-	9.0	3.0	1.0	1.0	-	8.0	3.0	-	1.0	-	8.0	3.0	-	1.0	-	8.0	3.0	-	1.0	-
27	9.0	3.0	1.0	1.0	-	9.0	3.0	1.0	1.0	-	9.0	3.0	1.0	1.0	-	7.0	3.0	-	1.0	-	7.0	3.0	-	1.0	-	7.0	3.0	-	1.0	-
26	8.0	3.0	1.0	1.0	-	8.0	3.0	1.0	1.0	-	8.0	3.0	1.0	1.0	-	7.0	3.0	-	1.0	-	7.0	3.0	-	1.0	-	7.0	3.0	-	1.0	-
25	8.0	3.0	1.0	1.0	-	8.0	3.0	1.0	1.0	-	8.0	3.0	1.0	1.0	-	7.0	3.0	-	1.0	-	7.0	3.0	-	1.0	-	7.0	3.0	-	1.0	-
24	7.0	3.0	1.0	1.0	-	7.0	3.0	1.0	1.0	-	7.0	3.0	1.0	1.0	-	6.0	3.0	-	1.0	-	6.0	3.0	-	1.0	-	6.0	3.0	-	1.0	-
23	7.0	3.0	1.0	1.0	-	7.0	3.0	1.0	1.0	-	7.0	3.0	1.0	1.0	-	6.0	3.0	-	1.0	-	6.0	3.0	-	1.0	-	6.0	3.0	-	1.0	-
22	7.0	2.0	1.0	1.0	-	7.0	2.0	1.0	1.0	-	7.0	3.0	1.0	1.0	-	6.0	2.0	-	1.0	-	6.0	2.0	-	1.0	-	6.0	2.0	-	1.0	-
21	6.0	2.0	1.0	1.0	-	6.0	2.0	1.0	1.0	-	6.0	2.0	1.0	1.0	-	6.0	2.0	-	1.0	-	6.0	2.0	-	1.0	-	6.0	2.0	-	1.0	-
20	6.0	2.0	1.0	1.0	-	6.0	2.0	1.0	1.0	-	6.0	2.0	1.0	1.0	-	6.0	2.0	-	1.0	-	6.0	2.0	-	1.0	-	5.0	2.0	-	1.0	-
19	6.0	2.0	1.0	1.0	-	6.0	2.0	1.0	1.0	-	6.0	2.0	1.0	1.0	-	5.0	2.0	-	1.0	-	5.0	2.0	-	1.0	-	5.0	2.0	-	1.0	-
18	5.0	2.0	1.0	1.0	-	5.0	2.0	1.0	1.0	-	5.0	2.0	1.0	1.0	-	5.0	2.0	-	1.0	-	5.0	2.0	-	1.0	-	5.0	2.0	-	1.0	-
17	5.0	2.0	1.0	1.0	-	5.0	2.0	1.0	1.0	-	5.0	2.0	1.0	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-
16	5.0	2.0	1.0	1.0	-	5.0	2.0	1.0	1.0	-	5.0	1.5	-	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	1.0	-	1.0	-
15	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	1.5	-	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	1.0	-	1.0	-
14	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	1.0	-	1.0	-	4.0	1.0	-	1.0	-	4.0	1.0	-	1.0	-
13	4.0	1.0	-	1.0	-	4.0	1.0	-	1.0	-	4.0	1.0	-	1.0	-	4.0	1.0	-	1.0	-	4.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-
12	4.0	1.0	-	1.0	-	4.0	1.0	-	1.0	-	4.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-
11	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-
10	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	-	-	1.0	-	3.0	-	-	1.0	-

If census is below 10, contact Director

9	3.0	-	-	1.0	-	3.0	-	-	1.0	-	3.0	-	-	1.0	-	3.0	-	-	1.0	-	3.0	-	-	1.0	-	3.0	-	-	1.0	-
8	2.0	-	-	1.0	-	2.0	-	-	1.0	-	2.0	-	-	1.0	-	2.0	-	-	1.0	-	2.0	-	-	1.0	-	2.0	-	-	1.0	-
7	2.0	-	-	1.0	-	2.0	-	-	1.0	-	2.0	-	-	1.0	-	2.0	-	-	1.0	-	2.0	-	-	1.0	-	2.0	-	-	1.0	-
6	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0
5	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0
4	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0
3	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-
2	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-
1	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-

Effective 7/1/20

Matrix Review Form for: Kearney Breast Center		Date: June 14, 2022
Topic	Discussion	
What's working well?	Everything is working well.	
What concerns you the most?	No back-up coverage when the RN is out sick or on vacation	
Open Positions/ Staff Retention	None	
Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i>	None-She is salary so she can take her breaks and meal when needed	
Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i>	No OT	
Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i>	NA	

<b>Matrix Review Form for: Labor and Delivery</b> <span style="float: right;"><b>Date: March 8, 2022</b></span>	
Topic	Discussion
<b>What's working well?</b>	Executive leadership has supported our staffing needs and provided additional FTEs to bring on agency to cover open positions and training. We have a internship program that feeds our open positions. We have new ANM's that are eager to meet the needs of the staff and patients. We have great patient comments and 94% in likely to recommend from the patient satisfaction scores.
<b>What concerns you the most?</b>	Continued shortages due to unforeseen LOAs, resignations, retirements. Staff tired of ongoing training/orientation and backup of agency staff not having all skills to work in the dpartment. (some do not do mother baby care so our staff need to work more mother baby than labor). Lack of applicants available for open positions. Natioanal shortage for trained perinatal nurses and surgical techs.
<b>Open Positions/ Staff Retention</b>	RN: OPEN: Six 0.9 FTE night shift opening with sign on bonuses. One applicant within the last 3 months. OB Techs: One .75 FTE dayshift. Travelers: OPEN: three 0.9 dayshift and six 0.9 on nights to cover transitions from open positions, Internships: Have 3 residents completing internship by May 30th. Have 5 fellows completing internship by August 30th. Have 2 fellows completing residency by September 30th. Onboarding 4 0.9 FTE fellows in April for completion in 1 year. Positions not posted yet due to not able to allow movement from nights to days. Approx 2.4 FTE
<b>Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i></b>	Lunches missed were 15 = .08% Breaks missed were ) 25 = .01% Barriers: short staffing, staff requesting to delay taking breaks when able to provide
<b>Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i></b>	Total overtime is 462.2 hours = 4% (298.75 hours of call back.)
<b>Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i></b>	<b>The department was staffed out of matrix 24% in the last 30 days. (short staffed 14 shifts)</b>

Cost Center Name and Number: Triage\_L&D - 2310 FY20 Budgeted Avg Daily Deliveries 5.3279

Nursing Ratios			Days																				Evenings				Nights				Total Variable HPPD	Fixed Staff (in Hours)						Total HPPD
D	E	N	630 - 1030				1030 - 1430				1430 - 1830				1830 - 2230				2230 - 230				230 - 630				APT	LRN	Ed/Or	PEd	OBT	CM	RNN	Total HPPD				
			Census	RN	T/F RN	CN	OBT	RN	T/F RN	CN	OBT	RN	T/F RN	CN	OBT	RN	T/F RN	CN	OBT	RN	T/F RN	CN	OBT	RN	T/F RN	CN	OBT											
1: 1.1	1: 1.1	1: 1.1	20	19.0	2.0	0.5	3.00	19.0	2.0	0.5	3.00	19.0	2.0	0.5	3.00	19.0	2.0	0.5	3.00	19.0	2.0	0.5	3.00	19.0	2.0	0.5	3.00	29.40	6.86	22.86	18.10	5.00	5.71	11.42	17.10	33.75		
1: 1.1	1: 1.1	1: 1.1	19	18.0	2.0	0.5	3.00	18.0	2.0	0.5	3.00	18.0	2.0	0.5	3.00	18.0	2.0	0.5	3.00	18.0	2.0	0.5	3.00	18.0	2.0	0.5	3.00	29.68	6.86	22.86	18.10	5.00	5.71	11.42	17.10	34.27		
1: 1.1	1: 1.1	1: 1.1	18	17.0	2.0	0.5	3.00	17.0	2.0	0.5	3.00	17.0	2.0	0.5	3.00	17.0	2.0	0.5	3.00	17.0	2.0	0.5	3.00	17.0	2.0	0.5	3.00	30.00	6.86	22.86	18.10	5.00	5.71	11.42	17.10	34.84		
1: 1.1	1: 1.1	1: 1.1	17	16.0	2.0	0.5	3.00	16.0	2.0	0.5	3.00	16.0	2.0	0.5	3.00	16.0	2.0	0.5	3.00	16.0	2.0	0.5	3.00	16.0	2.0	0.5	3.00	30.35	6.86	22.86	18.10	5.00	5.71	11.42	17.10	35.47		
1: 1.1	1: 1.1	1: 1.1	16	15.0	2.0	0.5	3.00	15.0	2.0	0.5	3.00	15.0	2.0	0.5	3.00	15.0	2.0	0.5	3.00	15.0	2.0	0.5	3.00	15.0	2.0	0.5	3.00	30.75	6.86	22.86	18.10	5.00	5.71	11.42	17.10	36.19		
1: 1.1	1: 1.1	1: 1.1	15	14.0	2.0	0.5	3.00	14.0	2.0	0.5	3.00	14.0	2.0	0.5	3.00	14.0	2.0	0.5	2.00	14.0	2.0	0.5	2.00	14.0	2.0	0.5	2.00	30.40	6.86	22.86	18.10	5.00	5.71	11.42	17.10	36.20		
1: 1.1	1: 1.1	1: 1.1	14	13.0	2.0	0.5	3.00	13.0	2.0	0.5	3.00	13.0	2.0	0.5	2.00	13.0	2.0	0.5	2.00	13.0	2.0	0.5	2.00	13.0	2.0	0.5	2.00	30.86	6.86	22.86	18.10	5.00	5.71	11.42	17.10	37.07		
1: 1.1	1: 1.1	1: 1.1	13	12.0	2.0	0.5	3.00	12.0	2.0	0.5	2.00	12.0	2.0	0.5	2.00	12.0	2.0	0.5	2.00	12.0	2.0	0.5	2.00	12.0	2.0	0.5	2.00	30.77	6.86	22.86	18.10	5.00	5.71	11.42	17.10	37.47		
1: 1.1	1: 1.1	1: 1.1	12	11.0	2.0	0.5	2.00	11.0	2.0	0.5	2.00	11.0	2.0	0.5	2.00	11.0	2.0	0.5	2.00	11.0	2.0	0.5	2.00	11.0	2.0	0.5	2.00	31.00	6.86	22.86	18.10	5.00	5.71	11.42	17.10	38.25		
1: 1.1	1: 1.1	1: 1.1	11	10.0	2.0	0.5	2.00	10.0	2.0	0.5	2.00	10.0	2.0	0.5	2.00	10.0	2.0	0.5	2.00	10.0	2.0	0.5	2.00	10.0	2.0	0.5	2.00	31.64	6.86	22.86	18.10	5.00	5.71	11.42	17.10	39.55		
1: 1.1	1: 1.1	1: 1.1	10	9.0	2.0	0.5	2.00	9.0	2.0	0.5	2.00	9.0	2.0	0.5	2.00	9.0	2.0	0.5	2.00	9.0	2.0	0.5	2.00	9.0	2.0	0.5	2.00	32.40	6.86	22.86	18.10	5.00	5.71	11.42	17.10	41.10		
1: 1	1: 1	1: 1	9	9.0	2.0	0.5	2.00	9.0	2.0	0.5	2.00	9.0	2.0	0.5	2.00	9.0	2.0	0.5	2.00	9.0	2.0	0.5	2.00	9.0	2.0	0.5	2.00	36.00	6.86	22.86	18.10	5.00	5.71	11.42	17.10	45.67		
1: 1	1: 1	1: 1	8	8.0	2.0	0.5	2.00	8.0	2.0	0.5	2.00	8.0	2.0	0.5	2.00	8.0	2.0	0.5	2.00	8.0	2.0	0.5	2.00	8.0	2.0	0.5	2.00	37.50	6.86	22.86	18.10	5.00	5.71	11.42	17.10	48.38		
1: 1	1: 1	1: 1	7	7.0	2.0	0.5	2.00	7.0	2.0	0.5	2.00	7.0	2.0	0.5	2.00	7.0	2.0	0.5	2.00	7.0	2.0	0.5	2.00	7.0	2.0	0.5	2.00	39.43	6.86	22.86	18.10	5.00	5.71	11.42	17.10	51.86		
1: 1	1: 1	1: 1	6	6.0	2.0	0.5	2.00	6.0	2.0	0.5	2.00	6.0	2.0	0.5	2.00	6.0	2.0	0.5	2.00	6.0	2.0	0.5	2.00	6.0	2.0	0.5	2.00	42.00	6.86	22.86	18.10	5.00	5.71	11.42	17.10	56.51		
1: 1	1: 1	1: 1	5	5.0	2.0	0.5	2.00	5.0	2.0	0.5	2.00	5.0	2.0	0.5	2.00	5.0	2.0	0.5	2.00	5.0	2.0	0.5	2.00	5.0	2.0	0.5	2.00	45.60	6.86	22.86	18.10	5.00	5.71	11.42	17.10	63.01		
1: 1	1: 1	1: 1	4	4.0	2.0	0.5	2.00	4.0	2.0	0.5	2.00	4.0	2.0	0.5	2.00	4.0	2.0	0.5	2.00	4.0	2.0	0.5	2.00	4.0	2.0	0.5	2.00	51.00	6.86	22.86	18.10	5.00	5.71	11.42	17.10	72.76		
1: 1	1: 1	1: 1	3	3.0	1.0	0.5	2.00	3.0	1.0	0.5	2.00	3.0	1.0	0.5	2.00	3.0	1.0	0.5	2.00	3.0	1.0	0.5	2.00	3.0	1.0	0.5	2.00	52.00	6.86	22.86	18.10	5.00	5.71	11.42	17.10	81.02		
1: 0.7	1: 0.7	1: 0.7	2	3.0	1.0	0.5	2.00	3.0	1.0	0.5	2.00	3.0	1.0	0.5	2.00	3.0	1.0	0.5	2.00	3.0	1.0	0.5	2.00	3.0	1.0	0.5	2.00	78.00	6.86	22.86	18.10	5.00	5.71	11.42	17.10	121.52		
1: 0.5	1: 0.5	1: 0.5	1	2.0	1.0	0.5	2.00	2.0	1.0	0.5	2.00	2.0	1.0	0.5	2.00	2.0	1.0	0.5	2.00	2.0	1.0	0.5	2.00	2.0	1.0	0.5	2.00	132.00	6.86	22.86	18.10	5.00	5.71	11.42	17.10	219.05		
1: 0	1: 0	1: 0	0	2.0	1.0	0.5	2.00	2.0	1.0	0.5	2.00	2.0	1.0	0.5	2.00	2.0	1.0	0.5	2.00	2.0	1.0	0.5	2.00	2.0	1.0	0.5	2.00	132.00	6.86	22.86	18.10	5.00	5.71	11.42	17.10	219.05		

12/27/2013 OBT - Changed 3.25 to 3.0, and 2.25 to 2.0

Ed/Or 18.10 << Update annually with FTE divisor (2080 or 2085.7)

3.16 << Update BR60 and BR62 annually for # education hours div

<b>Matrix Review Form for: 3North</b>		<b>Date: 1/11/2022</b>
Topic	Discussion	
<b>What's working well?</b>	Teamwork has been amazing on 3N. Caregivers have maintained a positive attitude and continually go above and beyond to take care of our patients. We are filling our positions, have a full NOC CNA group and have hired some amazing experienced nurses that have hit the ground running. We have an active UBC, and they are working on ways to keep staff engaged and ways to improve patient satisfaction scores.	
<b>What concerns you the most?</b>	Caregivers becoming ill is a huge concern. Sick calls place a strain on staffing and daily uncertainty. Keeping our staff safe by using all appropriate PPE is a big focus of the unit. Keeping staff from getting burnt out is also a concern. As a management team, Darcy and I are trying to be supportive and help on the floor whenever needed.	
<b>Open Positions/ Staff Retention</b>	Open Positions: Day shift; 3 RN positions 1-0.9, 1-0.75, and 1-0.6, 2 CNA positions, both 0.9.      NOC shift: 1 RN position, 0.9.      Staff Retention: Since the reopening of 3N in September we have had 2 RNs take positions on other units (1-SSU, 1-PT weekends T7) and 1 RN moved out of the area, 1 to COVID vaccine requirements, and 1 decided acute care nursing was not a good fit for her. We have also lost 2 CNAs, 1 moved out of the area and 1 to COVID vaccine requirements.	
<b>Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i></b>	7 missed lunches, 1.2% of total lunches and 170 missed breaks, 10.0% of total 15 minute breaks, for the past 2 pay periods (28 days). Barriers include short staffing, new RNs working to gain experience with time management, travel nurses, not escalating missing breaks.	
<b>Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i></b>	90.75 hours of incremental overtime for the past 2 pay periods (28 days), 2% of total hours worked.	
<b>Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i></b>	for the month of December 3N was staffed out of matrix 56 out of 62 shifts, 90%.	



3 North - 2102

Census	Days										Evenings					Evenings					Nights														
	6 am - 10 am					10 am - 2 pm					2 pm - 6 pm					6 pm - 10 pm					10 pm - 2 am					2 am - 6 am									
	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts
33	8.0	4.0	-	1.0	-	8.0	4.0	1.0	1.0	-	8.0	4.0	1.0	1.0	-	6.0	3.0	1.0	1.0	-	6.0	3.0	-	1.0	-	6.0	3.0	-	1.0	-	6.0	3.0	-	1.0	-
32	8.0	4.0	-	1.0	-	8.0	4.0	1.0	1.0	-	8.0	4.0	1.0	1.0	-	6.0	3.0	1.0	1.0	-	6.0	3.0	-	1.0	-	6.0	3.0	-	1.0	-	6.0	3.0	-	1.0	-
31	7.0	3.0	-	1.0	-	7.0	3.0	1.0	1.0	-	7.0	3.0	1.0	1.0	-	6.0	3.0	1.0	1.0	-	6.0	3.0	-	1.0	-	6.0	3.0	-	1.0	-	6.0	3.0	-	1.0	-
30	7.0	3.0	-	1.0	-	7.0	3.0	1.0	1.0	-	7.0	3.0	1.0	1.0	-	6.0	3.0	1.0	1.0	-	6.0	3.0	-	1.0	-	6.0	3.0	-	1.0	-	6.0	3.0	-	1.0	-
29	7.0	3.0	-	1.0	-	7.0	3.0	1.0	1.0	-	7.0	3.0	1.0	1.0	-	6.0	3.0	1.0	1.0	-	6.0	3.0	-	1.0	-	6.0	3.0	-	1.0	-	6.0	3.0	-	1.0	-
28	7.0	3.0	-	1.0	-	7.0	3.0	1.0	1.0	-	7.0	3.0	1.0	1.0	-	6.0	3.0	1.0	1.0	-	6.0	3.0	-	1.0	-	6.0	3.0	-	1.0	-	6.0	3.0	-	1.0	-
27	6.0	3.0	-	1.0	-	6.0	3.0	1.0	1.0	-	6.0	3.0	1.0	1.0	-	5.0	3.0	1.0	1.0	-	5.0	3.0	-	1.0	-	5.0	3.0	-	1.0	-	5.0	3.0	-	1.0	-
26	6.0	3.0	-	1.0	-	6.0	3.0	1.0	1.0	-	6.0	3.0	1.0	1.0	-	5.0	3.0	1.0	1.0	-	5.0	3.0	-	1.0	-	5.0	3.0	-	1.0	-	5.0	3.0	-	1.0	-
25	6.0	3.0	-	1.0	-	6.0	3.0	1.0	1.0	-	6.0	3.0	1.0	1.0	-	5.0	3.0	1.0	1.0	-	5.0	3.0	-	1.0	-	5.0	3.0	-	1.0	-	5.0	3.0	-	1.0	-
24	6.0	3.0	-	1.0	-	6.0	3.0	1.0	1.0	-	6.0	3.0	1.0	1.0	-	5.0	3.0	1.0	1.0	-	5.0	3.0	-	1.0	-	5.0	3.0	-	1.0	-	5.0	2.0	-	1.0	-
23	5.0	3.0	-	1.0	-	5.0	3.0	1.0	1.0	-	5.0	3.0	1.0	1.0	-	4.0	3.0	1.0	1.0	-	4.0	3.0	-	1.0	-	4.0	3.0	-	1.0	-	4.0	3.0	-	1.0	-
22	5.0	3.0	-	1.0	-	5.0	3.0	1.0	1.0	-	5.0	3.0	1.0	1.0	-	4.0	3.0	1.0	1.0	-	4.0	3.0	-	1.0	-	4.0	3.0	-	1.0	-	4.0	3.0	-	1.0	-
21	5.0	2.0	-	1.0	-	5.0	2.0	1.0	1.0	-	5.0	2.0	1.0	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-
20	5.0	2.0	-	1.0	-	5.0	2.0	1.0	1.0	-	5.0	2.0	1.0	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-
19	4.0	2.0	-	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-
18	4.0	2.0	-	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-
17	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-
16	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	1.5	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-
15	4.0	1.0	-	1.0	-	4.0	1.0	-	1.0	-	4.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-
14	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-
13	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-
12	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-
11	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	-	-	1.0	-	2.0	-	-	1.0	-
10	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	-	-	1.0	-	2.0	-	-	1.0	-

If census is **below** 10, contact Director

9	1.0	-	-	1.0	-	1.0	-	-	-	1.0	2.0	-	-	1.0	-	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	-	-	-	1.0	-	
8	1.0	-	-	1.0	-	1.0	-	-	-	1.0	2.0	-	-	1.0	-	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	-	-	-	1.0	-	
7	1.0	-	-	1.0	-	1.0	-	-	-	1.0	2.0	-	-	1.0	-	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	-	-	-	1.0	-	
6	1.0	-	-	1.0	-	1.0	-	-	-	1.0	2.0	-	-	1.0	-	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	-	-	-	1.0	-	
5	1.0	-	1.0	-	-	1.0	-	-	1.0	-	1.0	-	1.0	-	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	-	1.0	-	-	1.0	-
4	1.0	-	1.0	-	-	1.0	-	-	1.0	-	1.0	-	1.0	-	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	-	1.0	-	-	1.0	-
3	1.0	-	1.0	-	-	1.0	-	-	1.0	-	1.0	-	1.0	-	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	-	1.0	-	-	1.0	-
2	1.0	-	1.0	-	-	1.0	-	-	1.0	-	1.0	-	1.0	-	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	-	1.0	-	-	1.0	-
1	1.0	-	1.0	-	-	1.0	-	-	1.0	-	1.0	-	1.0	-	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	-	1.0	-	-	1.0	-

Effective 7/1/20

<b>Matrix Review Form for: [NICU/Peds]</b>		<b>Date: [3/8/2022]</b>
<b>Topic</b>	<b>Discussion</b>	
<b>What's working well?</b>	Caregivers have appreciated the CES 3 shifts being added. This has helped fill some of the staffing gaps during high census time and sick calls. We have 3 travelers to help fill current LOAs and vacant positions. We are receiving applicants and hiring is in process. The sign on bonuses have helped hire more staff for NICU and Peds Resource Team. We are training caregivers to resuscitation nurse and charge nurse roles so that we have more flexibility with staffing and RNs are working to their highest level. We have 2 Admin Asst. which have provided vital unit support during our time of high census.	
<b>What concerns you the most?</b>	Worry about staff burnout when they are working extra shifts. Hope that staff can find a way to have worklife balance. We are training several people to the resus and higher level of care patients and hope this is a win with them as they learn new skills/knowledge and not a stressor.	
<b>Open Positions/ Staff Retention</b>	<p><b>NICU Nights</b>- .25 FTE. Vacant positions. New Hires 1.9FTE &amp; .75 FTE (returning caregiver). Start end of May 2022. 3- .9 FTE on LOA <span style="float: right;"><b>NICU</b></span></p> <p><b>Days</b>- 2-.9 FTE vacated recently. 1- .9 FTE awaiting approval.</p> <p><b>Staff Retention</b>- In the past 6 months, 3 RNs on nights vacated their positions, 1 RN retired, 1 RN left to work at another area hospital, 1 RN vacated their per diem position to care for family in another state. 2 of the positions have been filled. 2 RNs on days vacated their positions. 1 RN did not return from their maternity LOA and 1 RN left to care for family in another state.</p> <p><b>Peds Days/Nights</b>- Position control recently updated. Open positions 3.0 days and 2.7 FTE nights. Recently hired 2- .9 FTE nights and 1- .75FTE for nights. 1 RN starts end of March. 2 RNs currently in training on nights. 1 RN transferred to days.</p> <p><b>Staff Retention</b> -2 RNs vacated position on nights due to medical condition.</p>	
<b>Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i></b>	<p>Missed Breaks - NICU 5.0 hours, Peds 0</p> <p>Missed Lunch - NICU 10, Peds- 2</p>	
<b>Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i></b>	<p>Overtime total- NICU 439 hours (140 hours OT), added CES3 shifts, sick calls, LOAs and high census.</p> <p>Overtime total -Peds 1.25 hours. Unit not open due to staffing and high census in NICU.</p> <p>Mandatory call - NICU 228 hours</p> <p>Call back - NICU 98.5 hours</p>	
<b>Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i></b>	<p>Days- 53% over matrix, .03% under matrix</p> <p>Nights- 53% over matrix, .03% under matrix</p> <p>Training, census high, higher acuity patients requiring 2:1 assignments and 1:1 assignments.</p>	

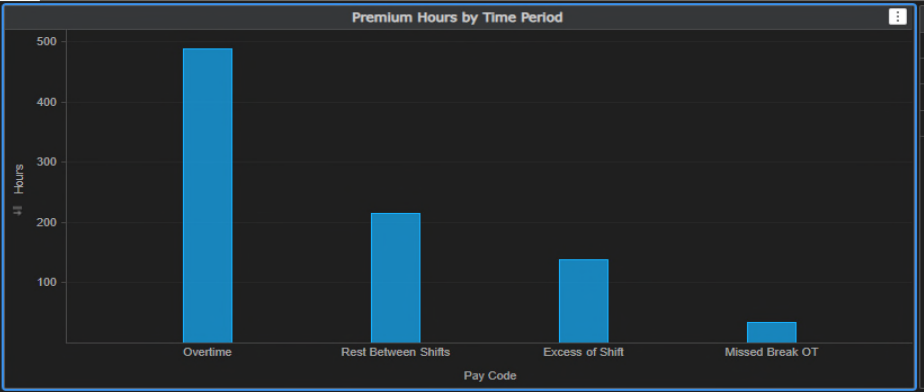
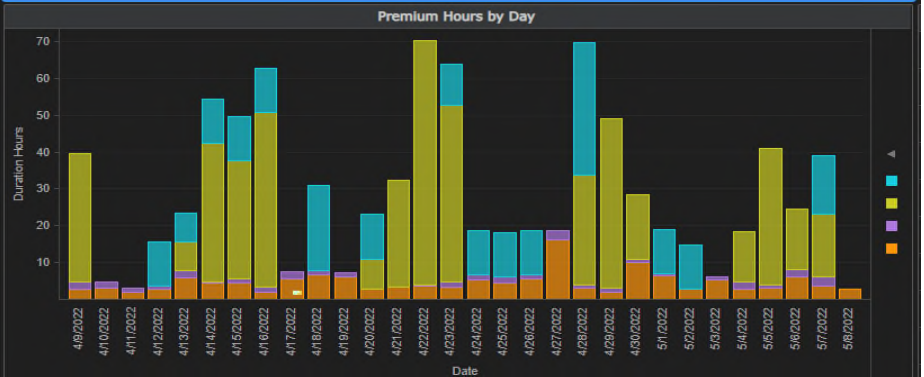
Nursing Ratios			Days						Evenings						Nights						Fixed Staff (in Hours)					
D	E	N	Census	630 - 1030			1030 - 1430			1430 - 1830			1830 - 2230			2230 - 230			230 - 630			Total Variable HPPD	Ed/Or	Mgr/Sup	OBT	Total HPPD
				RN	OBT	CN	RN	OBT	CN	RN	OBT	CN	RN	OBT	CN	RN	OBT	CN	RN	OBT	CN					
1: 2.4	1: 2.4	1: 2.4	26	11.0	1.0	1.0	11.0	1.0	1.0	11.0	1.0	1.0	11.0	1.0	1.0	11.0	1.0	1.0	12.00	10.22	5.71	8.00	12.92			
1: 2.5	1: 2.5	1: 2.5	25	10.0	1.0	1.0	10.0	1.0	1.0	10.0	1.0	1.0	10.0	1.0	1.0	10.0	1.0	1.0	11.52	10.22	5.71	8.00	12.48			
1: 2.4	1: 2.4	1: 2.4	24	10.0	1.0	1.0	10.0	1.0	1.0	10.0	0.0	1.0	10.0	0.0	1.0	10.0	0.0	1.0	11.33	10.22	5.71	8.00	12.33			
1: 2.3	1: 2.3	1: 2.3	23	10.0	1.0	1.0	10.0	1.0	1.0	10.0	0.0	1.0	10.0	0.0	1.0	10.0	0.0	1.0	11.83	10.22	5.71	8.00	12.87			
1: 2.4	1: 2.4	1: 2.4	22	9.0	1.0	1.0	9.0	1.0	1.0	9.0	0.0	1.0	9.0	0.0	1.0	9.0	0.0	1.0	11.27	10.22	5.71	8.00	12.36			
1: 2.3	1: 2.3	1: 2.3	21	9.0	1.0	1.0	9.0	1.0	1.0	9.0	0.0	1.0	9.0	0.0	1.0	9.0	0.0	1.0	11.81	10.22	5.71	8.00	12.95			
1: 2.2	1: 2.2	1: 2.2	20	9.0	1.0	1.0	9.0	1.0	1.0	9.0	0.0	1.0	9.0	0.0	1.0	9.0	0.0	1.0	12.40	10.22	5.71	8.00	13.60			
1: 2.4	1: 2.4	1: 2.4	19	8.0	1.0	1.0	8.0	1.0	1.0	8.0	0.0	1.0	8.0	0.0	1.0	8.0	0.0	1.0	11.79	10.22	5.71	8.00	13.05			
1: 2.3	1: 2.3	1: 2.3	18	8.0	1.0	1.0	8.0	1.0	1.0	8.0	0.0	1.0	8.0	0.0	1.0	8.0	0.0	1.0	12.44	10.22	5.71	8.00	13.77			
1: 2.4	1: 2.4	1: 2.4	17	7.0	1.0	1.0	7.0	1.0	1.0	7.0	0.0	1.0	7.0	0.0	1.0	7.0	0.0	1.0	11.76	10.22	5.71	8.00	13.17			
1: 2.3	1: 2.3	1: 2.3	16	7.0	1.0	1.0	7.0	1.0	1.0	7.0	0.0	1.0	7.0	0.0	1.0	7.0	0.0	1.0	12.50	10.22	5.71	8.00	14.00			
1: 2.1	1: 2.1	1: 2.1	15	7.0	1.0	1.0	7.0	1.0	1.0	7.0	0.0	1.0	7.0	0.0	1.0	7.0	0.0	1.0	13.33	10.22	5.71	8.00	14.93			
1: 2.3	1: 2.3	1: 2.3	14	6.0	1.0	1.0	6.0	1.0	1.0	6.0	0.0	1.0	6.0	0.0	1.0	6.0	0.0	1.0	12.57	10.22	5.71	8.00	14.28			
1: 2.2	1: 2.2	1: 2.2	13	6.0	1.0	1.0	6.0	1.0	1.0	6.0	0.0	1.0	6.0	0.0	1.0	6.0	0.0	1.0	13.54	10.22	5.71	8.00	15.38			
1: 2.4	1: 2.4	1: 2.4	12	5.0	1.0	1.0	5.0	1.0	1.0	5.0	0.0	1.0	5.0	0.0	1.0	5.0	0.0	1.0	12.67	10.22	5.71	8.00	14.66			
1: 2.2	1: 2.2	1: 2.2	11	5.0	1.0	1.0	5.0	1.0	1.0	5.0	0.0	1.0	5.0	0.0	1.0	5.0	0.0	1.0	13.82	10.22	5.71	8.00	15.99			
1: 2	1: 2	1: 2	10	5.0	1.0	1.0	5.0	1.0	1.0	5.0	0.0	1.0	5.0	0.0	1.0	5.0	0.0	1.0	15.20	10.22	5.71	8.00	17.59			
1: 2.3	1: 2.3	1: 2.3	9	4.0	1.0	1.0	4.0	1.0	1.0	4.0	0.0	1.0	4.0	0.0	1.0	4.0	0.0	1.0	14.22	10.22	5.71	8.00	16.88			
1: 2	1: 2	1: 2	8	4.0	1.0	1.0	4.0	1.0	1.0	4.0	0.0	1.0	4.0	0.0	1.0	4.0	0.0	1.0	16.00	10.22	5.71	8.00	18.99			
1: 2.3	1: 2.3	1: 2.3	7	3.0	1.0	1.0	3.0	1.0	1.0	3.0	0.0	1.0	3.0	0.0	1.0	3.0	0.0	1.0	14.86	10.22	5.71	8.00	18.28			
1: 2	1: 2	1: 2	6	3.0	1.0	1.0	3.0	0.0	1.0	3.0	0.0	1.0	3.0	0.0	1.0	3.0	0.0	1.0	16.67	10.22	5.71	8.00	20.65			
1: 1.7	1: 1.7	1: 1.7	5	3.0	1.0	1.0	3.0	0.0	1.0	3.0	0.0	1.0	3.0	0.0	1.0	3.0	0.0	1.0	20.00	10.22	5.71	8.00	24.79			
1: 2	1: 2	1: 2	4	2.0	1.0	1.0	2.0	0.0	1.0	2.0	0.0	1.0	2.0	0.0	1.0	2.0	0.0	1.0	19.00	10.22	5.71	8.00	24.98			
1: 1.5	1: 1.5	1: 1.5	3	2.0	1.0	1.0	2.0	0.0	1.0	2.0	0.0	1.0	2.0	0.0	1.0	2.0	0.0	1.0	25.33	10.22	5.71	8.00	33.31			
1: 1	1: 1	1: 1	2	2.0	0.0	1.0	2.0	0.0	1.0	2.0	0.0	1.0	2.0	0.0	1.0	2.0	0.0	1.0	36.00	10.22	5.71	8.00	47.96			
1: 0.5	1: 0.5	1: 0.5	1	2.0	0.0	1.0	2.0	0.0	1.0	2.0	0.0	1.0	2.0	0.0	1.0	2.0	0.0	1.0	72.00	10.22	5.71	8.00	95.93			

Ed/Or 10.22 MGR left as is OBT left as is

1.79

Budget Patient Days 2,727  
 Div by 365 365  
 Bud Census rounded to nearest integer 7.0

\*Flex Grid updated to support new WHPUOS of 15.8 in October FY14

Matrix Review Form for: Tower 6		Date: 5/10/22																				
Topic	Discussion																					
What's working well?	Staff feel like teamwork has improved greatly over the last year, they have no hesitation asking each other for help, knowing they will get the help they need when they need it. CES3 is also much appreciated, staff feel that their time is valued.																					
What concerns you the most?	Staff want to work on retention. It is very hard to have turnover, they feel that it has improved but want to do better. We also need to improve our stroke education documentation and documentation of our core measures. Another issue we are working on is the brief neuro check. About a year ago the brief neuro check documentation changed from the glasgow coma scale, abbreviated NIHSS, and pupils to GCS, focused neuro assessment, and pupils. THIS change was related to nurses needing to do neuro checks but not certified in the NIHSS scale which makes sense. Thier concern is that it is difficult to see a change numerically for newer nurses who may not be as skilled in detecting subtle changes. This concern has been escalated to our stroke coordinator and we are investigating alternatives within our team through our shared governance team.																					
Open Positions/ Staff Retention	1 0.6 NOC RN & 1 0.9 NOC RN; 1 0.6 CNA DAY & 1 0.9 CNA NOC																					
Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i>	<div style="display: flex; justify-content: space-between;"> <div style="width: 65%;">  <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th>Pay Code</th> <th>Hours</th> </tr> </thead> <tbody> <tr> <td>Overtime</td> <td>488.50</td> </tr> <tr> <td>Rest Between Shifts</td> <td>214.25</td> </tr> <tr> <td>Excess of Shift</td> <td>137.75</td> </tr> <tr> <td>Missed Break OT</td> <td>34.75</td> </tr> </tbody> </table> </div> <div style="width: 30%; border: 1px solid black; padding: 5px;"> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Pay Code</th> <th>Hours</th> </tr> </thead> <tbody> <tr> <td>Overtime</td> <td>488.50</td> </tr> <tr> <td>Rest Between Shifts</td> <td>214.25</td> </tr> <tr> <td>Excess of Shift</td> <td>137.75</td> </tr> <tr> <td>Missed Break OT</td> <td>34.75</td> </tr> </tbody> </table> </div> </div>		Pay Code	Hours	Overtime	488.50	Rest Between Shifts	214.25	Excess of Shift	137.75	Missed Break OT	34.75	Pay Code	Hours	Overtime	488.50	Rest Between Shifts	214.25	Excess of Shift	137.75	Missed Break OT	34.75
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Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i>																						
Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">Day RN</td> <td style="width: 25%;">Day CNA</td> <td style="width: 25%;">Night RN</td> <td style="width: 25%;">Night CNA</td> </tr> <tr> <td style="text-align: center;">3/30</td> <td style="text-align: center;">6/30</td> <td style="text-align: center;">0/30</td> <td style="text-align: center;">8/30</td> </tr> </table>		Day RN	Day CNA	Night RN	Night CNA	3/30	6/30	0/30	8/30												
Day RN	Day CNA	Night RN	Night CNA																			
3/30	6/30	0/30	8/30																			

Neuro T6 - 2160

Census	Days										Evenings					Evenings					Nights									
	630am - 1030 am					1030am - 230pm					230pm - 630pm					630pm - 1030pm					1030pm - 230am					230am - 630am				
	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts
32	8.0	4.0	1.0	1.0	-	8.0	4.0	1.0	1.0	-	8.0	4.0	1.0	1.0	-	7.0	4.0	-	1.0	-	7.0	4.0	-	1.0	-	7.0	4.0	-	1.0	-
31	8.0	4.0	1.0	1.0	-	8.0	4.0	1.0	1.0	-	8.0	4.0	1.0	1.0	-	7.0	4.0	-	1.0	-	7.0	4.0	-	1.0	-	7.0	4.0	-	1.0	-
30	8.0	4.0	1.0	1.0	-	8.0	4.0	1.0	1.0	-	8.0	4.0	1.0	1.0	-	6.0	4.0	-	1.0	-	6.0	4.0	-	1.0	-	6.0	3.0	-	1.0	-
29	8.0	4.0	-	1.0	-	8.0	4.0	1.0	1.0	-	8.0	4.0	1.0	1.0	-	6.0	4.0	1.0	1.0	-	6.0	4.0	-	1.0	-	6.0	3.0	-	1.0	-
28	7.0	4.0	-	1.0	-	7.0	4.0	1.0	1.0	-	7.0	4.0	1.0	1.0	-	6.0	4.0	1.0	1.0	-	6.0	4.0	-	1.0	-	6.0	3.0	-	1.0	-
27	7.0	4.0	-	1.0	-	7.0	4.0	1.0	1.0	-	7.0	4.0	1.0	1.0	-	6.0	4.0	1.0	1.0	-	6.0	4.0	-	1.0	-	6.0	3.0	-	1.0	-
26	6.0	3.0	-	1.0	-	6.0	3.0	1.0	1.0	-	6.0	3.0	1.0	1.0	-	6.0	3.0	1.0	1.0	-	6.0	3.0	-	1.0	-	6.0	3.0	-	1.0	-
25	6.0	3.0	-	1.0	-	6.0	3.0	1.0	1.0	-	6.0	3.0	1.0	1.0	-	5.0	3.0	1.0	1.0	-	5.0	3.0	-	1.0	-	5.0	3.0	-	1.0	-
24	6.0	3.0	-	1.0	-	6.0	3.0	1.0	1.0	-	6.0	3.0	1.0	1.0	-	5.0	3.0	1.0	1.0	-	5.0	3.0	-	1.0	-	5.0	3.0	-	1.0	-
23	6.0	3.0	-	1.0	-	6.0	3.0	1.0	1.0	-	6.0	3.0	1.0	1.0	-	5.0	3.0	1.0	1.0	-	5.0	3.0	-	1.0	-	5.0	3.0	-	1.0	-
22	5.0	3.0	-	1.0	-	5.0	3.0	1.0	1.0	-	5.0	3.0	1.0	1.0	-	5.0	3.0	1.0	1.0	-	5.0	3.0	-	1.0	-	5.0	3.0	-	1.0	-
21	5.0	3.0	-	1.0	-	5.0	3.0	1.0	1.0	-	5.0	3.0	1.0	1.0	-	4.0	3.0	1.0	1.0	-	4.0	3.0	-	1.0	-	4.0	3.0	-	1.0	-
20	5.0	3.0	-	1.0	-	5.0	3.0	1.0	1.0	-	5.0	3.0	1.0	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-
19	4.0	2.0	-	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-
18	4.0	2.0	-	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-
17	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-
16	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-
15	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-
14	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-
13	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-
12	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-
11	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-
10	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-

If census is below 10, contact Director

9	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-
8	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-
7	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-
6	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-
5	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0
4	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0
3	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0
2	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0
1	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0

<b>Matrix Review Form for: Nursing Float Pool</b>		<b>Date: 5/10/2022</b>
<b>Topic</b>	<b>Discussion</b>	
<b>What's working well?</b>	We have had excellent support from our Executive Leadership team regarding recruitment for both Nurses and CNA staff. Our Talent Acquisition partners have also aided in attempting multiple modalities to recruit new talent.	
<b>What concerns you the most?</b>	With our recruitment efforts and now also including increased Residency RNs for onboarding, we are struggling to keep up with the demand for Preceptors. We are also still having difficulty in recruiting CNA for the Resource Team. Many staff over the past year have either decreased their FTE status or resigned completely.	
<b>Open Positions/ Staff Retention</b>	RN Days-14 FT FTE, 2 PT FTE and 1 Relief (includes Residency RN positions) RN NOC-14 FT FTE, 7 PT FTE and 3 Relief (includes Residency RN positions) CNA Days-18 FT FTE, 8 PT FTE and 1 Relief CNA NOC-15 FT FTE, 3 PT FTE and 1 Relief Telesitter 1 PT FTE, 1 Relief Staffing Coordinator-Fully staffed	
<b>Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i></b>	Missed breaks/lunches 4/4-1-4/30/22 = 31 hr Total hours worked, including OT 11,208.50 Missed breaks/lunch percentage 4.43%	
<b>Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i></b>	Overtime and Excess of shift total= 754.50 this includes CES3 shifts that would have put the Caregiver into OT	
<b>Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i></b>	33/56 shifts were staffed below our goal of 12 RNs Days /11 RNs NOC per shift which equates to 59% 53/56 shifts were staffed below our goal of 15 CNA's Days/12 CNA's NOC per shift which equates to 94%	

<b>Matrix Review Form for: Observation</b>		<b>Date: 12/13/2022</b>
<b>Topic</b>	<b>Discussion</b>	
<b>What's working well?</b>	Teamwork on the unit is unbeatable. The whole team treats all all patients on the unit as their own, and support their fellow caregivers in every aspect of their ability. The staff are always looking to the ED for admits to keep keep the flow of patients going to help their colleagues in the ED and to keep their census up.	
<b>What concerns you the most?</b>	Keeping the unit staffed, being able to ensure the staff feel supported and have the opportunity to take their breaks.	
<b>Open Positions/ Staff Retention</b>	OBS currently has 3 open NOC RN positions and 3 open day RN positions along with 2 day CNA and 3 NOC CNA positions. Retention has been a challenge, we have lost 3 RNs from PHSW to other local facilities, 2 RNs moved departments within PeaceHealth, 2 RNs moved out of the area.	
<b>Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i></b>	17.5 hours of missed breaks. 2 missed lunches, 71 missed breaks. Barriers include staffing challenges and the unavailability of a caregiver available to cover breaks when there are only 2 caregivers on the unit. Also, late dishcharges and admits on day shift make getting rest breaks a challenge.	
<b>Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i></b>	56 hours, mostly attributed to charge nurses taking patient group and staying to give report at the end of their shift.	
<b>Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i></b>	For the month of November 3 shifts out of 60 were staffed within matrix.	

OBS UNIT

Census	Days										Evenings					Evenings					Nights									
	6am - 10am					10am - 2pm					2 pm - 6 pm					6 pm - 10 pm					10pm - 2am					2am - 6am				
	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts
26	7.0	2.0	1.0	1.0		7.0	2.0	1.0	1.0		7.0	2.0	1.0	1.0		7.0	2.0	1.0	1.0		7.0	2.0		1.0		7.0	2.0		1.0	
25	7.0	2.0	1.0	1.0		7.0	2.0	1.0	1.0		7.0	2.0	1.0	1.0		7.0	2.0	1.0	1.0		7.0	2.0		1.0		7.0	2.0		1.0	
24	6.0	2.0	1.0	1.0		6.0	2.0	1.0	1.0		6.0	2.0	1.0	1.0		6.0	2.0	1.0	1.0		6.0	2.0		1.0		6.0	2.0		1.0	
23	6.0	2.0	1.0	1.0		6.0	2.0	1.0	1.0		6.0	2.0	1.0	1.0		6.0	2.0	1.0	1.0		6.0	2.0		1.0		6.0	2.0		1.0	
22	6.0	2.0	1.0	1.0		6.0	2.0	1.0	1.0		6.0	2.0	1.0	1.0		6.0	2.0	1.0	1.0		6.0	2.0		1.0		6.0	2.0		1.0	
21	6.0	2.0	1.0	1.0		6.0	2.0	1.0	1.0		6.0	2.0	1.0	1.0		6.0	2.0	1.0	1.0		6.0	2.0		1.0		6.0	2.0		1.0	
20	5.0	2.0	1.0	1.0		5.0	2.0	1.0	1.0		5.0	2.0	1.0	1.0		5.0	2.0	1.0	1.0		5.0	2.0		1.0		5.0	2.0		1.0	
19	5.0	2.0	1.0	1.0		5.0	2.0	1.0	1.0		5.0	2.0	1.0	1.0		5.0	2.0	1.0	1.0		5.0	2.0		1.0		5.0	2.0		1.0	
18	5.0	2.0	1.0	1.0		5.0	2.0	1.0	1.0		5.0	2.0	1.0	1.0		5.0	2.0	1.0	1.0		5.0	2.0		1.0		5.0	2.0		1.0	
17	5.0	2.0	1.0	1.0		5.0	2.0	1.0	1.0		5.0	2.0	1.0	1.0		5.0	2.0	1.0	1.0		5.0	2.0		1.0		5.0	2.0		1.0	
16	4.0	2.0	1.0	1.0		4.0	2.0	1.0	1.0		4.0	2.0	1.0	1.0		4.0	2.0	1.0	1.0		4.0	2.0		1.0		4.0	2.0		1.0	
15	4.0	2.0	1.0	1.0		4.0	2.0	1.0	1.0		4.0	2.0	1.0	1.0		4.0	2.0	1.0	1.0		4.0	2.0		1.0		4.0	2.0		1.0	
14	4.0	2.0	1.0	1.0		4.0	2.0	1.0	1.0		4.0	2.0	1.0	1.0		4.0	2.0	1.0	1.0		4.0	2.0		1.0		4.0	2.0		1.0	
13	4.0	2.0	1.0	1.0		4.0	2.0	1.0	1.0		4.0	2.0	1.0	1.0		4.0	2.0	1.0	1.0		4.0	2.0		1.0		4.0	2.0		1.0	
12	3.0	1.0	-	1.0		3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-
11	3.0	1.0	-	1.0		3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-
10	3.0	1.0	-	1.0		3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-
9	3.0	1.0	-	1.0		2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-
8	2.0	1.0	-	1.0		1.0	1.0	-	1.0	-	1.0	1.0	-	1.0	-	1.0	1.0	-	1.0	-	1.0	1.0	-	1.0	-	1.0	1.0	-	1.0	-
7	2.0	1.0	-	1.0		1.0	1.0	-	1.0	-	1.0	1.0	-	1.0	-	1.0	1.0	-	1.0	-	1.0	1.0	-	1.0	-	1.0	1.0	-	1.0	-
6	2.0	-	-	1.0		1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-
5	2.0	-	-	1.0		1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-
4	1.0	-	-	1.0		1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-
3	1.0	-	-	1.0		1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-
2	1.0	-	-	1.0		1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-
1	1.0	-	-	1.0		1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-



<b>Matrix Review Form for: Surgery</b>		<b>Date: November 8th, 2022</b>
<b>Topic</b>	<b>Discussion</b>	
<b>What's working well?</b>	We have had steady leadership in the department for the past 11 months. We have a great team that works very cohesively together. Upper Leadership has been very accomidating allowing us to retain Travelers to help with our staffing gaps.	
<b>What concerns you the most?</b>	Staffing concerns me- While we have been busy hiring both RNs and Surgical Technologists (STs) we are still fairly dependent on travelers and our per diem staff as our surgery volume increases. We are actively hiring, however a barrier we have is our robust orientation program, with an experienced RNs it can take between 3-4 months to get them signed off on orientation. A new RN takes between 6-8 months.	
<b>Open Positions/ Staff Retention</b>	RNs- 3 Full time openings and 1 PRN. Since January we have hired 11 RNs, 5 RN Interns and 6 STs. We currently have 2 RN travelers and a request for 1 additional Weekend/Night charge RN. We have 3 RNs and 5 RN interns on orientation, we have have 2 STs on orientation. In the past 6 months we have had 2 RNs staff leave. 1 transferred to a different department, another retired. In the past 6 months we have had 1 ST leave as she stepped down from her PRN role due to having a baby.	
<b>Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i></b>	For the entire department: Total paid hours 13,821. Missed Lunches 11, less then 1% of total hours, Missed Breaks 39, less then 1% of total hours. Often breaks and lunches are missed when staff are called in and staffing is limited due to emergent surgery. Total joint procedures that run over their planned length cause those assigned to the scrub role to miss their break as relief is not provided due to infection prevention and continuity of care. We also have 1 traveler tech reeadly declining breaks, then staying late and clocking out no break and missed lunch this has been addressed.	
<b>Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i></b>	For the entire department: Total paid hours 13,821. Incremental OT 163.5 hours, less then 1% of total hours. Some staff have call that starts at the end of their shift. Those that are kept after their shift because they are on call show as incremental OT.	
<b>Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i></b>	Our unit does not have a matrix. We staff based off the surgery block schedule and ultimately the surgery schedule. As the block schedule provides frame work as to what surgeons can schedule when. Every surgery case has a minimum of 1 RN, the RN does the ciruclating role, depending on skill set the RN may also scrub a procedure, in that case the room would have 2 RNs assigned to the one pateint. We run a set number of rooms each day depending on anesthesia availability. Support staff: We have 4-5 ORAs scheduled daily, and 3-5 Anesthesia Assistants scheduled daily, 1 unit coordinator and 3-5 EVS staff daily. All roles are vital to providing safe and efficent care to the surgery patients.	

Matrix Review Form for: Interventional Pain Clinic		Date: 2/8/2022
Topic	Discussion	
<b>What's working well?</b>	When we have four RNs, 3 for procedures all day (1 sedation RN and 2 PRE/POST RNS) and 1 float. This RN gives breaks, is available to help if it gets busy or a difficult situation, and also deals with Triage calls.	
<b>What concerns you the most?</b>	Sick calls are the hardest for us. We do have a Relief RN (who is great with scheduling shifts), but she is not available a lot of the times for Sick calls. It makes it hard at that point, because then our Lead RN has to step in when she can, amongst admin stuff, patients of her own at times, etc. We also have a Stim/Pump RN. She is very specialized. When she was out for Covid, the Lead RN was the only one who could kind of do her duties. Need to train a replacement for when things happen. Float Pool is not able to help us out majority of the time.	
<b>Open Positions/ Staff Retention</b>	Open positions: NONE Staff Retention: We hired our last new RN hire last year in March/April. We have a couple (3 RNs) who plan on retiring in the next 3 years or so.	
<b>Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i></b>	We have had no missed breaks in the last 30 days.	
<b>Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i></b>	No Overtime	
<b>Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i></b>	From 1/3 - today (2/8), we have been right on for our RN staff (4 a day). We have had 2 PM shifts that needed an RN to LC (3%) and 1 PM shift that they worked with 3 RNs (1.5%). We LC RNs as appropriate if one of our Providers is off/vacation or in OR. Usually, we will staff 2 RNs to help with Triage, inbasket, phones, etc. RNs will work with 3 RNs if an RN is on vacation and we do not have coverage but it is not ideal.	

# Interventional Pain Clinic

## PeaceHealth Southwest Interventional Pain Clinic Daily Staffing

**Wednesday, January 5, 2022**

Sabrina to diabetes 745-1615  Maria PM appt, leaving at 1600. Amber to room last Platt if needed.						<b>Scheduled</b>	<b>Actual</b>
						BJP 7	
						ANA 7	
						27	
						0	
						0	
						2	
						<b>Total</b>	<b>43</b>
CLINIC				Procedures		Support	
BJP	11	Maria MA	0800	Procedure			
ANA	4	Amber MA	0745	Jean	0730	Rebecca PAR	OFF
LMW	12	Sherri MA	0745	Pre & Post		Ashley PAR	0730
SLS	OFF			Leisa	0800	Carine PAR	0830
				Linda	0730	Lisa RC	0815
Implant		Wendy RN	0800	Float/Triage RN		Theresa RC	0730
Pump	2	Susanna		Ellie	0800	Becca RC	0800
				Phones/Triage MA			
Lead	Susanna	RN	0800				

<b>Matrix Review Form for: Palliative Care</b>		<b>Date: 10/11/2022</b>
<b>Topic</b>	<b>Discussion</b>	
<b>What's working well?</b>	We have added an ED RN and a PD positions for inpatient and team lead RN and 2 PD RN plus a RN in Cowlitz county for outpatient this year due to Palliative Care leadership supporting our growth and development. We are moving to a more comprehensive palliative care model, having RN's work at the highest level of their scope in assessment and education. The PC team consists of NP, RN and MSW for comprehensive model.	
<b>What concerns you the most?</b>	We have a high referral census, we are stretched to meet the needs so there is concern for burnout and moral distress. As we are bringing on new staff, there is heavy need for precepting so the staff is working on how to spread the load to prevent burnout. PC is being asked to see pt's earlier in the stay by hospital leadership and to absorb Cowlitz lack of MD provider in that community, to be effective we will need more staff. We are in discussion on more FTE's, including NP's and RN's both in Vancouver and Longview. A PC chaplain is also being discussed.	
<b>Open Positions/ Staff Retention</b>	Open positions: none currently, Staff retention: no one had left, we have added to staff and have had PD staff transition from 4 floor to PC only. One hospice RN transfer to PC.	
<b>Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i></b>	1 missed break/2 missed meals in last 30 days by nurses = .02%. IP team missed lunch, due to high referral rate, orientation and family care conference, scheduled.	
<b>Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i></b>	PC overtime was 16.00- IP Ot is 0.75 and OP is 25.25. We have a team member who is covering hospice oncall position too, her OT hours was 75 hours.	
<b>Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i></b>	No staffing matrix. In last 30 days only scheduled PTO and sick time has PC out of full staffing. IP has 3 FTE RN's plus 2 PD RN's for coverage. OP has 1 FTE and (2).8 FTE RN's plus 2 PD's for coverage. The number of patients seen daily fluctuates with new consults, FU visits and telephone support visits.	

Matrix Review Form for: Recovery Room		Date: November 8, 2022
Topic	Discussion	
<b>What's working well?</b>	PACU has great teamwork and collaborates well with other departments.	
<b>What concerns you the most?</b>	PACU has been holding many patients who are awaiting bed placement which can be dissatisfying to both staff and patients.	
<b>Open Positions/ Staff Retention</b>	1 full time day shift position to fully staff the unit.	
<b>Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i></b>	FY23PP7: <1% missed breaks/lunches    FY23PP8: <1% missed breaks/lunches	
<b>Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i></b>	15 hours total (<1%)	
<b>Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i></b>	Unable to be staffed out of matrix. If we do not have enough staff, we slow the flow from OR.	

Matrix Review Form for: Same Day Surgery		Date: October 11, 2022
Topic	Discussion	
<b>What's working well?</b>	Department is fully staffed. Newly formed Shared Governance began in October.	
<b>What concerns you the most?</b>	Newly formed night shift is tenuous with staffing and anticipate frequent turnover from night shift to day shift.	
<b>Open Positions/ Staff Retention</b>	Same Day has one full time night shift RN position open at this time.	
<b>Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i></b>	FY23 Pay Period 06: 2 missed lunche and 19 missed breaks. (1.05%). FY23 Pay Period 07: 1 missed lunch and 11 missed breaks (0.73%)	
<b>Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i></b>	FY23 Pay Period 06: 2 missed lunche and 19 missed breaks. (1.05%). FY23 Pay Period 07: 1 missed lunch and 11 missed breaks (0.73%)	
<b>Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i></b>	Unable to be out of matrix due to the flow of the unit. If we are staffed out of matrix, we slow the flow of the Operating Room by delaying admissions or slow the flow of PACU by delaying acceptance of post-op patients.	

Matrix Review Form for: Short Stay Unit		Date: 9/13/2022
Topic	Discussion	
<b>What's working well?</b>	Fast track for OP screening endoscopy, able to fill all positions	
<b>What concerns you the most?</b>	Continue with the volumes as we are losing 1 GI provider	
<b>Open Positions/ Staff Retention</b>	2 per diem RN	
<b>Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i></b>	Missed Lunches - 0, Missed breaks a total of 1.5 hours (6) resulting in less than 1%. Total hours worked 2285	
<b>Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i></b>	Incremental OT was 2.25 hrs out of 2285, resulting in less than 1%	
<b>Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i></b>	2 shifts out of matrix	

<b>Matrix Review Form for: Surgical 7      Date: 5/10/22</b>	
<b>Topic</b>	<b>Discussion</b>
<b>What's working well?</b>	Teamwork, every staff member I speak with always mentions this as one of our units strengths. Several staff mention the charge nurses are helpful and available for questions. Leadership support in adding agency to help fill RN staffing gaps during COVID.
<b>What concerns you the most?</b>	Lack of CNA applicants and ability to quickly onboard. The flow for RN applicants has improved and we have a good residency program. Some of these new graduates have not had adequate clinical experieance due to COVID and may require more training. My concern is to not frustrate them so we can retain them and decrease turn over. Lastly staff burn out and impact of COVID on overall health, physicial, emotional and mental.
<b>Open Positions/ Staff Retention</b>	Open positions on days: RN: .50 flex , 2 .60 CNA positions. Nights : RN.90, 2 CNA .60 and .90 Retention: Day shift: RN 0-5 years : 44%, 5-10 years 24%, 10-20 years 20%, 20 years plus 12% years: 80%, 5-10 years, 14%, 10-15 years 0%, 15-20 years, 6%, 20 years plus 0%
<b>Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i></b>	Past 30 days: Missed breaks 37 (5%), missed lunches 8 (2%). Barrriers: escalation to charge nurse or manager, not utilizing the buddy system, difficulty in handing over to another nurse, influx of patients or activity. Mostly the last 15 minute break.
<b>Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i></b>	Overtime was 557 hours (6%)
<b>Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i></b>	Staffing out of matrix was primarily due to lack of CNA's and pulling of PTS to fill those gaps. Day shift out of matrix 21 out of 30 days ( only 2 were RN related). Night shift out of matrix 12 out of 30 days ( only 1 related to RN holes). I do want to call out how well the staff work together to fill the gaps including RN's working as CNA's.



Census	Days										Evenings					Evenings					Nights								
	6 am - 10 am					10 am - 2 pm					2 pm - 6 pm					6 pm - 10 pm					10 pm - 2 am					2 am - 6 am			
	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts
32	8.0	4.0	-	1.0	-	8.0	4.0	1.0	1.0	-	8.0	4.0	1.0	1.0	-	6.0	3.0	1.0	1.0	-	6.0	3.0	-	1.0	-	6.0	3.0	-	1.0
31	7.0	4.0	-	1.0	-	7.0	4.0	1.0	1.0	-	7.0	4.0	1.0	1.0	-	6.0	3.0	1.0	1.0	-	6.0	3.0	-	1.0	-	6.0	3.0	-	1.0
30	7.0	4.0	-	1.0	-	7.0	4.0	1.0	1.0	-	7.0	4.0	1.0	1.0	-	6.0	3.0	1.0	1.0	-	6.0	3.0	-	1.0	-	6.0	3.0	-	1.0
29	7.0	4.0	-	1.0	-	7.0	4.0	1.0	1.0	-	7.0	4.0	1.0	1.0	-	5.0	3.0	1.0	1.0	-	5.0	3.0	-	1.0	-	5.0	3.0	-	1.0
28	6.0	4.0	-	1.0	-	6.0	4.0	1.0	1.0	-	6.0	4.0	1.0	1.0	-	5.0	3.0	1.0	1.0	-	5.0	3.0	-	1.0	-	5.0	3.0	-	1.0
27	6.0	4.0	-	1.0	-	6.0	4.0	1.0	1.0	-	6.0	3.0	1.0	1.0	-	5.0	3.0	1.0	1.0	-	5.0	3.0	-	1.0	-	5.0	3.0	-	1.0
26	6.0	3.0	-	1.0	-	6.0	3.0	1.0	1.0	-	6.0	3.0	1.0	1.0	-	5.0	3.0	1.0	1.0	-	5.0	3.0	-	1.0	-	5.0	3.0	-	1.0
25	6.0	3.0	-	1.0	-	6.0	3.0	1.0	1.0	-	6.0	2.0	1.0	1.0	-	5.0	3.0	1.0	1.0	-	5.0	3.0	-	1.0	-	5.0	2.0	-	1.0
24	6.0	3.0	-	1.0	-	6.0	3.0	1.0	1.0	-	5.0	2.0	1.0	1.0	-	4.0	3.0	1.0	1.0	-	4.0	3.0	-	1.0	-	4.0	2.0	-	1.0
23	5.0	3.0	-	1.0	-	5.0	3.0	1.0	1.0	-	5.0	2.0	1.0	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0
22	5.0	2.0	-	1.0	-	5.0	2.0	1.0	1.0	-	5.0	2.0	1.0	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0
21	4.0	2.0	-	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0
20	4.0	2.0	-	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0
19	4.0	2.0	-	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	1.0	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0
18	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0
17	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0
16	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	2.0	2.0	-	1.0
15	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	2.0	2.0	-	1.0
14	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	2.0	2.0	-	1.0
13	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	2.0	2.0	-	1.0	-	2.0	2.0	-	1.0	-	2.0	2.0	-	1.0
12	2.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0
11	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0
10	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0

If census is below 10, contact Director

9	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	1.0
8	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	1.0
7	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	1.0
6	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	1.0
5	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	1.0	-
4	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	1.0	-
3	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	1.0	-
2	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	1.0	-
1	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	1.0	-

Effective October 2, 2020

<b>Matrix Review Form for: Tower 8</b>		<b>Date: 8-9-22</b>
<b>Topic</b>	<b>Discussion</b>	
<b>What's working well?</b>	Being a fully staffed unit, staff working together to complete tasks, staff morale.	
<b>What concerns you the most?</b>	Retention of staff. Being part of a team, staff know they can be floated to assist other units as needed. Staff are not always super excited to float but understand the need to assist other units.	
<b>Open Positions/ Staff Retention</b>	We currently have only 2 open RN positions (pending Nurse Resident's accepting) on day shift. We have no open NOC RN positions. We have lost 9 RNs since the beginning of the year (Jan. 2022), 4 of those RNs moved to another department (ED & L&D).	
<b>Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i></b>	115 missed breaks: based on 9,728 hours worked that would be 1.1% of hours worked. lunches: based on 9,728 hours worked that would be 4.5 hours or 0.04% of hours worked.	9 missed
<b>Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i></b>	Incremental OT: 182.5 hours or 1.8%.	
<b>Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i></b>	Day shift 10/30 shifts or 33% of the time. shifts or 66% of the time.	Night shift 20/30

Census	Days										Evenings					Evenings					Nights									
	6am - 10am					10am - 2pm					2 pm - 6 pm					6 pm - 10 pm					10pm - 2am					2am - 6am				
	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts	RN	CNA	PTS / US	CRN- No Pts	CRN w/ Pts
30	7.0	4.0	-	1.0	-	7.0	4.0	1.0	1.0	-	7.0	4.0	1.0	1.0	-	6.0	3.0	1.0	1.0	-	6.0	3.0	-	1.0	-	6.0	3.0	-	1.0	-
29	7.0	4.0	-	1.0	-	7.0	4.0	1.0	1.0	-	7.0	4.0	1.0	1.0	-	6.0	3.0	1.0	1.0	-	6.0	3.0	-	1.0	-	6.0	3.0	-	1.0	-
28	7.0	3.0	-	1.0	-	7.0	3.0	1.0	1.0	-	7.0	3.0	1.0	1.0	-	6.0	3.0	1.0	1.0	-	6.0	3.0	-	1.0	-	6.0	3.0	-	1.0	-
27	6.0	3.0	-	1.0	-	6.0	3.0	1.0	1.0	-	6.0	3.0	1.0	1.0	-	6.0	3.0	1.0	1.0	-	6.0	3.0	-	1.0	-	6.0	3.0	-	1.0	-
26	6.0	3.0	-	1.0	-	6.0	3.0	1.0	1.0	-	6.0	3.0	1.0	1.0	-	5.0	3.0	1.0	1.0	-	5.0	3.0	-	1.0	-	5.0	3.0	-	1.0	-
25	6.0	3.0	-	1.0	-	6.0	4.0	1.0	1.0	-	6.0	4.0	1.0	1.0	-	5.0	3.0	1.0	1.0	-	5.0	3.0	-	1.0	-	5.0	2.0	-	1.0	-
24	6.0	3.0	-	1.0	-	6.0	3.0	1.0	1.0	-	5.0	3.0	1.0	1.0	-	5.0	2.0	1.0	1.0	-	5.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-
23	5.0	3.0	-	1.0	-	5.0	3.0	1.0	1.0	-	5.0	3.0	1.0	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-
22	5.0	3.0	-	1.0	-	5.0	3.0	1.0	1.0	-	5.0	3.0	1.0	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-
21	5.0	3.0	-	1.0	-	5.0	3.0	1.0	1.0	-	4.0	3.0	1.0	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-
20	5.0	2.0	-	1.0	-	5.0	2.0	1.0	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-
19	4.0	2.0	-	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-
18	4.0	2.0	-	1.0	-	4.0	2.0	1.0	1.0	-	4.0	2.0	1.0	1.0	-	3.0	2.0	1.0	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-
17	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-
16	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	4.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-
15	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-
14	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-
13	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	3.0	2.0	-	1.0	-	2.0	2.0	-	1.0	-	2.0	2.0	-	1.0	-	2.0	1.0	-	1.0	-
12	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	3.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	2.0	-	1.0	-	2.0	1.0	-	1.0	-
11	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-
10	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-	2.0	1.0	-	1.0	-

If census is below 10. contact Director

9	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0
8	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0
7	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0
6	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0	1.0	-	-	-	1.0
5	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-
4	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-
3	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-
2	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-
1	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-	1.0	-	-	1.0	-

Effective 7.1.2020

Matrix Review Form for: PH Transfer Center Columbia Network		Date: 1/11/2022
Topic	Discussion	
<b>What's working well?</b>	Since taking over as manager in mid-September. We've had a lot of changes including a new transfer center module in epic and Interqual, working on transitioning to a new call schedule system, and a rebid occurred in November to allow for structural staffing changes. These staffing changes will allow for safer coverage at night with 2 RNs being on 24/7. The staff has really stepped up and taken well to the new transfer module. I feel like all these changes have been difficult but that we are headed in the right direction.	
<b>What concerns you the most?</b>	The need for my staff to work so much extra while we hire and train new hires. It seems like it's been a long time since the transfer center has been fully staffed and I am concerned about burn out.	
<b>Open Positions/ Staff Retention</b>	We had just become fully staffed for full and part time FTE (people still in training though) effective 1/16/2022 but found out 1/4/2022, 1 newly hired night shift RN will not be staying, so I will be down 1 0.9 night shift RN. I've already put in a requisition to replace that RN. I also have 2 relief positions to post and fill, but I am wanting to get my 0.9 FTE hires fully trained before I hire reliefs. We do not have a large enough staff to train more than 2 people at a time.	
<b>Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i></b>	4.6% missed breaks -(23-primarily 4.6% night shift) 1.8% missed lunches (3)	
<b>Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i></b>	108.5 OT hours (5.4% of our total hours) for month of December, unable to breakdown how much was incremental	
<b>Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i></b>	Our department doesn't have a matrix- Prior to 1/2/2022 our staffing schedule had a staggered approach. 2 RNs 0700-1930, 1 RN 0900-2130, 1 RN 1400-0230, and 1 RN 1900-0730. We were fully staffed 99.5% of the time in the last 30 days this was done with heavy use of our relief/PD staff and CES3 incentive shifts. Effective 1/2/2022 the new staffing schedule is 2 RNs 0700-1930, 1 RN 1000-2230, and 2 RNs 1900-0730.	

<b>Matrix Review Form for: Vascular Access</b>		<b>Date: 4/12/22</b>
<b>Topic</b>	<b>Discussion</b>	
<b>What's working well?</b>	Growth of vascular access team has been able to support the needs of the patients and bedside RNs. Decreased delays in patient care with faster response times, and less pokes to patients from failed PIV attempts. Quicker response times to central line care. Properly staffed to select best vascular access device that is appropriate for patient.	
<b>What concerns you the most?</b>	Gaps between 10 hr shifts and 12 hr shifts during peak times.	
<b>Open Positions/ Staff Retention</b>	Staff retention - Three caregivers lost from vaccine requirement.	
<b>Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i></b>	8 Missed breaks =1% , 3 missed lunches = 1%	
<b>Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i></b>	78.75 hrs OT in the last 30 days	
<b>Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i></b>	5 days = 16%	

Matrix Review Form for: WOCN		Date: 4/12/2022
Topic	Discussion	
What's working well?	We recently hired a third WOCN Alison. We have new education that we are providing our direct care RNs/CNAs, we are working towards being more visible and accessible for 1:1 teaching at the bedside which will improve our quality of care for patients and nurses, we are also trying to improve the workflow and proficiency by putting together wound carts for supplies that are needed at the time of care. Their chart note is now streamlined to improve the their charting, Alison is working with the EPIC team to optimise their use of EPIC so they can create and inpatient wound ostomy list so they do not have to use an external document to track their patients.	
What concerns you the most?	Their biggest concern is being able to improve their timeliness of care. i.e. from when a consult is entered to the time they see the patient. They believe that creating a more time efficient environment will improve the time of consult to being seen. The acuity and complexity of our wound care has increased, now that covid restrictions have been decreased we have seen a large influx of patients that were not seen for nonemergent and elective surgeries, therefor even though our census is a little lower the complexity of our patients has increased.	
Open Positions/ Staff Retention	None; we lost one RN to the vaccine mandate	
Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i>	0 missed breaks and lunches	
Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i>	0.03%	
Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i>	0%	

Matrix Review Form for: Wound Clinic		Date: 4/12/2022
Topic	Discussion	
<b>What's working well?</b>	Addition of LPN	
<b>What concerns you the most?</b>	Upcoming staff LOA, having new staff trained prior to the LOA, PTO requests.	
<b>Open Positions/ Staff Retention</b>	Currently have 2 open positions. RN-1 LPN-1	
<b>Missed Breaks/Lunches (for past 30 days- If staff is missing breaks/lunches, please provide barriers) <i>(Please show as a percent)</i></b>	0.02%	
<b>Incremental Overtime (for past 30 days) <i>(Please show as a percent)</i></b>	1.80%	
<b>Staffing Out of Matrix (how often in past 30 days) <i>(Please show as a percent)</i></b>	2.40%	

		Monday-11	Tuesday-12	Wednesday-13	Thursday-14	Friday-15
AM clinic	MD/NP/DPM	Carrasco	Carrasco	Carrasco	Forsythe	Forsythe
	Case Mgr	Amy	Teresa	Sara	Sara	Amy
	Intake	Kathy	Katie	Teresa	Katie	Katie
	Discharge	Rachel	Rachel	Cody	Rachel	Kristina
AM clinic	MD/NP/DPM	Shuell	Dykstra	Shuell	Dykstra	Shuell
	Case Mgr	Teresa	Amy	Kim	Kathy	Kathy
	Intake	Dee	Kathy/Dee	Amy	Lisa	Cody
	Discharge	Kristina	Cody	Rachel	Kim	Rachel
AM clinic	MD/NP/DPM	x	Shuell-Ostomy	x	Shuell	x
	Case Mgr	x	Alison	x	Teresa	x
	Intake	x	x	x	T/C	x
	Discharge	x	x	x	Cody	x
	Float-MA/Nurse Visit	x	x	x	x	x
	Float	Sara/*Kim	x	Katie/Dee	x	Sara/Kim
	CMT	Sara/Kim	Kathy/Dee	Katie/Dee	x	Sara/Kim
	HBO support- RN	Sara	Kathy	Amy	Lisa	Sara
PM Clinic	MD/NP/DPM	Carrasco	Carrasco	Carrasco	Dykstra	Forsythe
	Case Mgr	Kathy	Dee	Teresa	Katie	Sara
	Intake	Sara	Kathy	Amy	Lisa	Cody
	Discharge	Rachel	Cody	Rachel	Cody	Kristina
PM Clinic	MD/NP/DPM	Dykstra	Dykstra	Shuell	Forsythe	Shuell
	Case Mgr	Dee	Katie	Katie	Sara	Kim
	Intake	Kim	Teresa/Amy	Dee	Teresa	Katie
	Discharge	Kristina	Rachel	Cody	Rachel	Rachel
PM Clinic	MD/NP/DPM	Shuell-Manor Care	Shuell-ADMIN	x	Shuell	x
	Case Mgr	x	x	x	Kim	x
	Intake	x	x	x	K/K	x
	Discharge	x	x	x	Kathy	x
	Float-MA/Nurse Visit	x	x	x	x	x
	Float	*Amy/Teresa	x	*Sara/Kim	x	*Amy/Kathy
	CMT	Amy/Teresa	Teresa/Amy	Sara/kim	x	Amy /Kathy
	HBO support -RN	Amy @4	Kathy @4	Sara @4	Sara @4	Amy @4
	HBO TECH	Robin/Kristina	Kristina	Kristina	Kristina	Robin/Kristina
	Front office	Sue	Sue	Sue	Sue	Sue
	Referral Coord. Lead	Marisa	Marisa	Marisa	Marisa	Marisa
	PAR-Clinic Support	x	x	x	x	x
	Ostomy	x	Alison	x	x	x
	OFF	Cody/Katie	Sara/Kim/Robin	Kathy/Robin	Amy/Dee/Robin	Dee/Teresa
	* denotes nurse visit RN. Subject to change. Do not make changes to assignments without notifying Lisa first.					