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The following is the nurse staffing plan for **Providence St Joseph Hospital**, submitted to the Washington State Department of Health in accordance with Revised Code of Washington 70.41.420.



Providence St. Joseph's Hospital
Chewelah, WA

Nurse Staffing Plan Attestation Form 2023

I, the undersigned, with responsibility for Providence St. Joseph's Hospital, attest that the attached staffing plans and matrixes were developed in accordance with RCW 70.41.420 for the year 2023 and includes all units covered under our hospital license under RCW 70.41. These plans were developed with consideration given to the following elements:


- 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 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.



Signature



Printed Name



Date



Providence St. Joseph’s Hospital 2023 Acute Care Unit Staffing Plan

Last revised: 10/27/2022

Unit Overview

The Providence St. Joseph’s Hospital (PSJH) Acute Care Unit (ACU) is a 19 medical bed unit that serves the community and outlying communities of Chewelah, WA. Six rooms are private rooms and the rest are double occupancy.

The average daily census is 8.

The most common health disparities seen at this hospital are:

- Chronic heart failure
- COPD
- Acute and chronic renal injury
- Transitional care/swing bed for orthopedic rehabilitation, speech therapy and occupational therapy needs and long-term IV antibiotic patients

Current Support Services Available to the Unit: Physical/Occupational therapy, respiratory therapy, care coordination services, pharmacy, speech therapy and a wound care RN that is scheduled two days a week.

Core Staffing

Currently there is a Unit Secretary from the hours of 0630-1900 five days a week.

Between the hours of 0700 and 1930 the current staffing parameters are as such:

Patients	RNs	NA-Cs	Unit Secretary-Mon-Fri
1-3	1	1	1
4-5	1	1	1
6-7	2	1	1
8-9	2	1	1
10-11	2	2	1
12-15	3	2	1

This staffing matrix can change due to increase in patient acuity and patient safety needs such as 1:1 observation patient and is used primarily as a guideline.

During the hours of 1900-0730 the current staffing parameters are as such:

Patients	RNs	NA-Cs
1-6	2	1
7-9	2	1
10-11	2	2
12-15	3	2



This staffing matrix can change due to increase in patient acuity and patient safety needs such as 1:1 observation patient and is used primarily as a guideline.

Function on the Unit

The primary functions of the RN include full head to toe assessments each shift, IV medication maintenance and assessment, blood glucose management that does not involve IV insulin treatment, wound and ostomy care that does not involve the needs of a certified wound nurse, enteral feedings, ongoing focused assessments involved within the scope of the RN and ordered by the prescribing physician.

When in the rare occasion that a patient's health status declines to the care needs beyond the ACU level of care, the patient will be transferred per physician order to a higher acuity facility. Additional support is available from licensed assistive personnel such as NA-Cs when the necessity of census and patient acuity prove necessary. Also, occupational therapy, physical therapy, pharmacists that are on site during regular working hours, the administrative supervisor, the clinical nurse manager. Clinical nurse manager is available by phone 24 hours a day.

Additional duties expected by night shift RNs are as follows and can be delegated within the scope of the individual delegated to:

Scheduling of staff and assigning next shift patient assignments with stewardship of the facility in mind.

Restocking of supplies in patient rooms; Ensuring that patient rooms are kept clean, trash emptied, and soiled linens removed from patient rooms.

Current licensure requirements are an active Washington State RN license, ACLS, and BLS certification through AHA.

All NA-Cs, including unit secretaries are required to have an active state license and current BLS certification.

Orientation

Orientation time for the unit is based on the judgment of management, skill set, and experience of the individual meeting the minimal requirement necessary to provide enough orientation to the unit. Educational services and Clinical Informatics provide initial computer EHR training and skill signoff requirements within that orientation period. The individual orienting to the unit will be assigned a daily preceptor that currently proves competency in the daily functions of the position and has shown competent to orient and provide additional resources to the orientee as needed.

Breaks

Distribution of rest periods and meal breaks are done so amongst the unit team at periods that do not interrupt patient care. The administrative supervisor is available to assist staff during the day in attaining breaks as needed.



Planned and Unplanned Leave

The PSJH ACU utilizes a system for planned time off that is based on first come, first served.

Unplanned leave coverage is offered in the following order:

- All FTE (Full Time Equivalent) RNs NA-Cs, from lowest FTE to highest FTE, that will not incur overtime pay of the shift if accepted
- Supplemental RNs and/or NA-Cs
- FTE RNs or NA-Cs that will incur overtime pay
- Agency RNs
- Administrative Supervisors
- Contracted travel RNs

Providence St. Joseph's Hospital 2023 Emergency Department Staffing Plan

Last revised: 10/27/2022

Unit Overview

The Providence St. Joseph's Hospital (PSJH) Emergency Department (ED) is a five bed, Level IV Trauma Center serving the town of Chewelah, Washington and surrounding area. The average daily census is 15, and the most common patient types are:

- The elderly with chronic cardiac and pulmonary conditions
- Orthopedic injuries related to outdoor recreational activities
- Traumas related to motor vehicle accidents
- Those with behavioral and physical symptoms related to chemical abuse
- Pediatric patients with common pediatric ailments
- Mental health needs

The PSJH ED has 2 trauma bays, on-site diagnostic imaging and laboratory services, and a helipad.

Core Staffing

The PSJH ED currently staffs:

- One Physician 24 hours a day, 7 days a week
- One RN (Registered Nurse) and one Nursing Assistant - Certified (NAC) 24 hours a day, 7 days a week. Shifts are 12 hours 30 minutes long, from 0700 to 1930, and 1900 to 0730
- One RN 1000-2230 7 days a week

We are currently unable to staff two RNs at all times per the Emergency Nurses Association's recommendations due to the extremely low average daily census. For additional support the RN can utilize the Administrative Supervisor 24 hours/7days a week.



New RNs are required to have an extended orientation to ensure they're prepared for the wide variety of situations they may face with limited resources in our rural setting.

The primary functions of the ED RN include triage, assessment, and all other clinical patient care duties as assigned. Additional duties at night include patient registration, as there is no registration staff available at night.

Licensure and certification requirements for the ED RN include:

- An active RN license
- Basic Life Support Certification
- Advanced Cardiovascular Life Support Certification
- Pediatric Advanced Life Support Certification
- Trauma Nurse Core Course Certification
- Neonatal Resuscitation Program Certification

ED RNs are also offered regular, ongoing educational opportunities including skills fairs, conferences, and courses specific to the ED.

Breaks

The Administrative Supervisor helps to cover breaks for the ED RN from 0700 to 1900 and 1900 to 0700.

Planned and Unplanned Leave

The PSJH ED utilizes a self-scheduling system for planned time off that is based on first come, first served. The ED staff are respectful and considerate of each other's needs and schedule accordingly.

Unplanned leave coverage is offered in the following order:

- All FTE (Full Time Equivalent) RNs, from lowest FTE to highest FTE, that will not incur overtime pay if the shift is accepted
- FTE RNs that will incur overtime pay
- Supplemental RNs
- Agency RNs
- Administrative Supervisors



Providence St. Joseph's Hospital 2023 Outpatient Services Department Staffing Plan

Last revised: 10/27/2022

Unit Overview

The Providence St. Joseph's Hospital (PSJH) Outpatient Services Department is a small outpatient procedural suite serving the town of Chewelah, Washington and surrounding area. The average daily census is five, but patient load varies from day to day depending on scheduled procedures. The most common procedure types are:

- Outpatient IV infusions
- Port flushes, PICC line care
- Foley Catheter changes
- YAG laser capsulotomies

The PSJH Outpatient Services department has one endoscopy room and one YAG laser room. The department also has two outpatient infusion rooms with two beds each. These beds are occasionally used by the Emergency Department and Acute Care Unit as overflow rooms. A Phase I recovery room is also available that is occasionally used as an outpatient procedure room.

Core Staffing

Minimum staffing for the department is one Outpatient Services RN (Registered Nurse) between the hours of 0800 and 1600, Monday through Friday, except for holidays. This RN is expected to handle simple procedures not requiring additional staffing and same-day outpatients, such as dressing changes and outpatient infusions. Additional staffing for scheduled procedures can include:

- One RN for YAG laser procedures.

Staffing for scheduled procedures varies depending on the number of scheduled procedures and how they are staggered throughout the day.

The primary functions of the Outpatient Services RN includes preparing patients for their infusions, preparing patients for YAG procedures, discharging, making pre-op phone calls, helping stock supplies, scheduling infusions, posting charges, cleaning, room turnover, and various secretarial duties due to there not being a department unit secretary.

The Department Manager, Assistant Nurse Manager (ANM) or designee schedules staff, manages time cards, manages department supplies, monitors staff documentation, ensures staff are receiving their breaks, manages department low census schedule.

Licensure and certification requirements for the Outpatient Services RNs include:

- An active RN license
- Basic Life Support Certification
- Advanced Cardiovascular Life Support Certification
- Pediatric Advanced Life Support Certification



Additional resources available to help support the department in the event of inadequate staffing are supplemental positions shared with Providence Mount Carmel Hospital Surgical Services.

Breaks

During scheduled Infusion or procedure days the RN will take breaks at designated times in conjunction with the schedule. When scheduling procedures, the RN is responsible for making sure outpatient infusions or procedures are not scheduled in designated break time slots. RN will reach out to Manager or ANM for assistance to get breaks if needed.

Planned and Unplanned Leave

A completed vacation request form is required for all time off requests. Requests are honored on a first come first served basis. Only one RN may take time off at any given time. Coverage for planned and unplanned leave is first offered to the RN with the most accumulated low census time.

Low Census

The PSJH Outpatient Services department occasionally experiences periods of low census. When this happens, the Manager, ANM or designee will send anybody currently over their FTE (Full Time Equivalent) home first. After that, the Charge Nurse will consult the low census tracking sheet and send home the RN with the least amount of accumulated low census time.