



## **Yuma District Hospital Master Nurse Staffing Plan**

### **PURPOSE**

To fulfill the standards required by Colorado House Bill 22-1401, Nursing Leadership has reviewed the Colorado Nurse Practice Act, Conditions of Participation in Medicare, and the Yuma District Hospital Mission, Vision, and Values to define nursing care at Yuma District Hospital. Nursing care at Yuma District Hospital involves an interdisciplinary team consisting of nursing staff members, providers, case managers, therapy services, ancillary personnel, lab, radiology, dietary, and environmental services.

### **DEFINITIONS**

ACLS	Advanced Cardiovascular Life Support
BLS	Basic Life Support
CNA	Certified Nursing Assistant
DPCS	Director of Patient Care Services
ED	Emergency Department
LPN	Licensed Practical Nurse
PALS	Pediatric Advanced Life Support
PCU	Patient Care Unit
RN	Registered Nurse
TNCC	Trauma Nursing Core Curriculum

### **POLICY**

Nursing services provide planned, comprehensive, therapeutic, safe, and consistent nursing care performing those acts that are identified by the nursing profession as proper to the practice of nursing and are authorized by the Colorado State Board of Nursing to include the supervision and instruction of professional and non-professional personnel associated with nursing functions.

Nursing practice is organized under the direction of the Director of Patient Care Services (DPCS). The DPCS is a Registered Nurse (RN) qualified by advanced education and management experience. The DPCS directs nursing services and establishes guidelines for the delivery of nursing care, treatment, and services. The DPCS directs the implementation of nursing policies and procedures, nursing standards, and nurse staffing plans. The DPCS will ensure that all nursing staff have the qualifications, competencies, and experience necessary to deliver the care assigned to them in accordance with professional standards of practice and hospital policy and procedures.

### **SCOPE**

Please see the following policies:

- ER Nursing Coverage-CoP 6030-004
- Master Staffing Plan-CoP 6011-024

At Yuma District Hospital, nursing care as defined by Nursing Leadership is provided to patients in the following areas:

- Patient Care Unit
- Emergency Department

## **STAFFING PLANS, CURRENT BED CAPACITY AND DEPARTMENT ORIENTATION**

- Baseline number of staffed beds for Yuma District Hospital is 11.
- The ED and PCU will each have a master nurse-staffing plan, which provides continuous registered nurse coverage, for distribution of nursing and auxiliary personnel, and for forecasting future staffing needs.
- State Operations Manual Appendix W Regulations for the Critical Access Hospital will be followed. 485.631 (a)(5) states a registered nurse, clinical nurse specialist or licensed practical nurse is on duty whenever the CAH has one or more inpatients. 485.618 There must be sufficient medical and nursing personnel to respond to the emergency medical needs and care of the patient population being served.
- The master nurse staffing plan is based on the various types of patients cared for in each department, the nursing skill mix needed in that department, any specialized qualifications, and the level of competency necessary for nursing staff to ensure the department is adequately staffed to meet the safety and healthcare needs of the patients.
- Each approved master nurse-staffing plan is shared with all frontline nurses for that department annually, upon hire and whenever requested by a staff member.
- The Nurse Staffing Committee will consist of a minimum of 60% frontline clinical nursing staff in addition to auxiliary personnel and nursing leadership. A designated leader will be appointed to oversee workplace violence prevention and reduction efforts.

Name of Member	Role in the Facility
Erin Hill, RN	House Coordinator PCU/ER (clinical staff)
Amber Wade, RN	Staff Nurse PCU/ER (clinical staff)
Deb Wilkins, RN	House Coordinator PCU/ER (clinical staff)
Nicole Dickson, RN	Staff Nurse PCU/ER (clinical staff)
Alison Hisam, RN	Director Patient Care Services
Matt Ione	Vice President of Operations
Safety Officer	Workplace Violence

- The committee must meet at least quarterly.
- The Nurse Staffing Committee will provide oversight, feedback, and approval of the master nurse-staffing plan. Agreement of 60% of the staffing committee is required.
- The Nurse Staffing Committee will engage in strategies that promote the health, safety, and welfare of the hospital's employees and patients.
- All master nurse staffing plans as well as revisions to existing nurse staffing plans are monitored, reviewed, revised, and approved by the committee, DPCS and the Board of Directors initially and then annually thereafter.

- Quarterly, the hospital will prepare a report to evaluate the staffing plan. This report is reviewed by the staffing committee. The following staff sensitive indicators will be utilized to identify staffing and its relation to patient outcomes.
  - a. Fall Rate
  - b. Nursing hours per patient day
  - c. Pressure ulcer rate
  - d. HAC's (hospital acquired condition)
  - e. Turnover rate
  - f. Vacancy rate
  - g. Overtime rates
  - h. Contract labor FTE's per unit
- If the results of a staffing plan review indicate the plan has not resulted in adequate staffing, and/or the healthcare needs of a patient have not been met, the staffing plan shall be modified through the Nurse Staffing Committee.
- Meeting minutes from the Nurse Staffing Committee will be made available to clinical nursing staff upon request.
- Any feedback or concerns from providers, clinical nursing staff, nurse aides, and EMS providers can be made to any member of the Nurse Staffing Committee, to the departmental nursing leadership, the DPCS, or the CEO either in-person, in writing, or anonymously at any time regardless of when the current staffing plan was approved. Staff can also submit staffing concerns directly to CDPHE via their online complaint form: <https://cdphe.colorado.gov/health-facilities/file-a-complaint/health-facilities-complaint-contacts>
- The feedback or concerns will be given to the Nurse Staffing Committee for consideration and resolution. The Nurse Staffing Committee will respond back to the person bringing forth the feedback or concern their response and decision.

## **Nursing Administration**

- Staffing Plan
  - Nursing administration is provided 24-hours a day seven-days per week via the DPCS and House Coordinators.
  - A minimum of one House Coordinator is scheduled 24-hours a day seven-days a week.
- Orientation
  - Orientation to the roles of DPCS or House Coordinator is based on previous nursing leadership experience and can vary in length. Skills checklists are completed prior to the new employee being taken off orientation.
- Specialized Qualifications
  - Specialized certifications required for House Coordinators include BLS, ACLS, TNCC, and PALS.

## **Emergency Department**

- Staffing Plan
  - The ED will only be staffed when a patient is in the department. With its location directly next to the PCU, staff from the PCU can be present immediately upon a patient's arrival to the ED.
  - When there is a patient in the ED, a minimum of one (1) Registered Nurse will float from the PCU to the ED to provide care for the patient.
  - Dependent on patient load and acuity of the ED patients, an additional Staff RN or on call RN may be needed to assist with this care.
- Orientation
  - Orientation is based on previous nursing experience and will vary in length. Orientation will be a minimum of two weeks for an experienced ED RN and can be up to 90 days for a new graduate RN to include both clinical and didactic instruction. Skills checklists are completed prior to the new employee being taken off orientation.
- Specialized Qualifications
  - In addition to the initial orientation as described above, specialized skills checklists are completed annually during the Nursing Skills Fair once the employee is off orientation.
  - Specialized certifications required for RNs include BLS, ACLS, PALS, and TNCC.

## **Medical-Surgical (PCU) Department**

- Staffing Plan
  - The PCU shall always be staffed by a House Coordinator, RN working a 12-hour shift, 24 hours/day, 7 days a week.
  - Remaining minimum staff shall be two additional staff members working each 12-hour shift with the House Coordinator. This may be a combination of Staff Nurse and CNA or two Staff Nurses. The Staff Nurses may be RN or LPN.
  - If there are only two licensed nurses working the shift and the third staff member is a CNA, then a third RN/LPN will be on call for the entirety of that shift for emergencies, heavy patient load, high acuity patients or at any time the House Coordinator feels the need to have assistance to assure all patients are properly cared for.
- Orientation
  - Orientation is based on previous nursing experience and will vary in length. Orientation will be a minimum of two weeks for an experienced Med-Surg RN, LPN, or CNA and can be up to 90 days for a new graduate RN, LPN, or CNA. Skills checklists will be completed prior to the new employee being taken off orientation.
- Specialized Qualifications

- In addition to the initial orientation as described above, specialized skills checklists are completed annually during the Nursing Skills Fair once the employee is off orientation.
- Specialized certifications required for RNS include BLS and PALS and ACLS.
- Specialized certifications required for LPNs include BLS and IV Certification.
- Specialized certifications required for CNAs include BLS.

### **Daily Staffing Evaluation**

- Nursing leadership daily evaluates current patient volume, expected discharges and admissions.
- Alternative staffing plans are made on an as needed basis to address patient census needs of the organization.

### **CDPHE Reporting Requirements**

- Initially and annually thereafter, an approved nurse-staffing plan will be submitted to CDPHE.
- Annually, the hospital will submit an annual report containing the detail quarterly evaluation of the staffing plan by the committee.
- Initially, the hospital will report the baseline number of beds that can be staffed.
- After September 1, 2022, the hospital will notify CDPHE if the hospital ability to meet staffed-bed capacity falls below 80% between 7-14 days. Included in this notification is a plan to be able to return to 80% capacity within 30 days or request a waiver due to hardship.

### **Approvals:**

Sept. 2022 – Board approval of Master Nurse Staffing Plan  
8/28/2023 – Committee reviewed and approved plan  
Sept. 2023 – Board approval of Master Nurse Staffing Plan  
11/19/2024 – Committee reviewed and approved plan  
March 2025 – Board approval of Master Nurse Staffing Plan  
4/18/2025 – CDPHE Approved Staffing Plan  
6/16/2025 – Committee reviewed and approved plan