

Spring Mountain Treatment Center
 7000 W. Spring Mountain Rd
 Las Vegas NV 89117
 702-873-2400

Staffing Committee Composition: CNO, CEO, Nurse Manager, House Supervisors, RNs, MHTs, Staffing Coordinators

Committee Meeting Frequency: The committee meets quarterly, although some members of the staffing committee may meet more frequently if required.

Committee Activities:

- a) Nomination, appointment and acceptance of committee members, carried by the body of RNs and MHTs who make up the larger body of committee membership
- b) Focus on patient safety along with patient and staff satisfaction
- c) FTE Staffing Grid and Staffing for Acuity protocols reviewed
- d) Object to Work Assignment – Review Process: Refusals and/or objections to staff assignments are a standing agenda items. To date there are no refusals and/or objections to an assignment. In consideration of allocating patients to staff; the individual needs of the patient and the experience of the staff is also considered.
- e) Units are adequately staffed – implemented a float RN for peak admission times to facilitate patient flow
- f) Annual Review of Staffing Plan – the staffing plan is reviewed regularly, and approved by the committee members
- g) CNO attends shift report along with other nurse leaders and the lead MHT
- h) Difficult to treat patients are reviewed during report and brainstorming occurs to develop interventions aimed at reducing risk for both staff and other patients
- i) All nurses RNs and MHTs are cross-trained on various units to demonstrate competency with the continuum of care for diverse age-groups
- j) Patient satisfaction scores were reported during staff meetings in order to recognize where improvements have been made
- k) Customer focus - staff and employees that provided exceptional patient care or contributed to improvements in how the unit improved the patient experience were recognized
- l) Calendar was created for each quarter to plan for RN, MHT, mentor and nurse leadership meetings
- m) Resource utilization – staff were recognized for their ideas on improving productivity and workflow
- n) Opportunities to recognize employees who own problems and solve them were created and acknowledged
- o) RNs, MHTs and House Supervisor participate/oversee visitation to improve safety and the visitation experience
- p) Corporate has accessible RN recruiters if required
- q) A PRN pool is active and provides staff to the units for difficult treatment requirements

Committee Efficacy:

Routine topics include nursing satisfaction, quality indicators (falls, medication variances, and patient assignments, cross-training). The electronic scheduling system has been successful as it tracks vacancies and the scheduler can see a 'snapshot' of the schedule in order to maintain staffing levels. Recruitment goals were met as evidenced by all vacancies filled. The PRN pool supplies staff for acuity and vacation. Nursing leadership is on staff 24/7.

Patient Safety: The hospital-wide shift report occurs with CNO, Nurse Managers, RNs, Lead Mental Health Technician (MHT). Shift report is distributed to senior leadership, clinical services staff, nursing leadership, case managers and discharge planners twice in 24 hours. Included in the report are staffing requirements, treatment interventions and strategies for complex patients and high-risk concerns. Additionally, multidisciplinary meetings are held quarterly with discussions specific to patient safety, managing the milieu and staffing for acuity for complex patient needs.

The RN mentoring program has proven successful in providing a comprehensive training guide for new hire RNs. Input from mentors, mentees and nurse leadership was provided for the handbook. The training guide allows the mentor and mentee to review specific performance and teaching opportunities within explicit timelines.

The entire Nurse Leadership team participates in an onboarding process for new hire RNs and unlicensed personnel. When a supervisor is assigned a new hire staff; ideally the supervisor will complete all phases of onboarding including the 90-day evaluation and through to the annual evaluation for the employee. The mentoring process is a crucial adjunct to the mentoring program and staff retention.

A career ladder packet and handbook was developed to offer opportunities for growth and development for MHT staff. Through the implementation of the program, several staff were promoted. Promotions are a staff satisfier as well as a tool for solidifying retention.

The Hospital was able to identify and trend high admission and discharge days; as a result a float RN was implemented at peak admission times. This has proven successful in easing the work load for the frontline RNs in a time-efficient method. The House Supervisor is also strategic with respect to timeframes as they provide assistance to both the Intake department and the nursing department ensuring an efficient flow of admissions patients.

Signature of Responsible Party:

Norma Ferris, CNO

Date: 12/12/19

Troy Mire, CEO

Date: 12/13/19

SPRING MOUNTAIN TREATMENT CENTER POLICY & PROCEDURE

Title: Nurse Staffing Committee	Issued By: Leadership
	Date Issued: 12/13
Policy No.: LD.007	Date Reviewed/Revised: 5/19

I. Scope:

The Nurse Staffing Committee policy applies to all acute care nursing personnel and Mental Health Technicians (MHTs) that provide direct patient care, nursing leadership, and senior management. Oversight for quality of care related to nurse staffing is provided by the hospital governing board.

II. Purpose:

The purpose of the Nurse Staffing Committee is to recommend a staffing plan that promotes safe and effective patient care, supports retention of registered nurses/MHTs, and promotes adequate staffing of registered nurses and other nursing personnel.

The hospital recognizes quality and safe patient care is the first and primary concern of all staff, and this mutually shared goal is best served by having hospital management and employees working together to examine the most effective and efficient means of providing quality patient care. This policy provides the structure for meeting that end.

III. Definitions:

Nurse Staffing Committee: A standing committee established by the facility in accordance with the law to ensure the provision of safe patient care and adequate nurse/MHT staffing.

Nurse Staffing Plan: A detailed written plan that, in accordance with applicable state law defines the staffing plan for each nursing unit and shift based on patient care needs, appropriate skill mix of registered nurses and other nursing personnel, layout of the unit, and national standards or recommendations on staffing.

Unit: "Unit" mean a component within a health care facility for providing patient care per NRS 449.2418. SMTC has defined the units as: Youth and Adult.

IV. Policy:

- A. The hospital shall comply with all lawful staffing guidelines and evaluate effectiveness of staffing based on well-established and recognized criteria.

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B. The facility maintains a Nurse Staffing Committee as a standing committee of the hospital. The Nurse Staffing Committee has as its primary consideration the provision of safe patient care and adequate staffing of registered nurses and other nursing personnel

C. The Nurse Staffing Committee will:

1. Consist of not less than one-half of the total regular members of the staffing committee from the licensed nursing staff and Mental Health Technicians who are providing direct patient care at the hospital.
2. One member of each unit of the hospital who is a licensed nurse who provides direct patient care on that unit and one alternate, and who are presented and accepted by the body of RNs.
3. One member representing each unit of the hospital who is Mental Health Technician who provides direct patient care on that unit and one alternate, and who are presented and accepted by the body of MHTs.
4. Nominations and Acceptance of each Nurse Staffing Committee member will take place during an open interdisciplinary meeting with RNs and MHTs over a period of two meetings on individual days. Acceptance of the nominations will occur and be published after the final meeting, and not any longer that one week. The Nurse Staffing Committee will formally review and memorialize the results of the proclamation and acceptance in the next scheduled Committee Meeting.
5. Develop and recommend to the hospital's governing body a staffing plan that is based on the needs of each patient care unit/service line and shift, and on evidence relating to patient care needs;
6. Review, assess, and respond to staffing concerns expressed to the committee;
7. Identify the nurse-sensitive outcome measures the Nurse Staffing Committee will use to evaluate the effectiveness of the official nurse services staffing plan;
8. Submit to the system's governing body, at least annually a report on nurse staffing and patient care outcomes, including the committee's evaluation of the effectiveness of the official nursing services staffing plan and aggregate variations between the staffing plan and actual staffing; and
9. Submit reports to State entities in accordance with governing regulations.
10. Evaluate the effectiveness of the official Nurse Staffing Plan in relation to patient needs, nursing-sensitive quality indicators, nurse/MHT satisfaction

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measures collected by the system, and evidence-based nurse staffing standards.

D. The hospital will:

Use the official Nurse Staffing Plan:

1. As a component in setting the nursing staffing budget; and
2. To guide the facility in assigning nurses; and
3. Make readily available to RNs/MHTs on each patient care unit at the beginning of each shift the staffing levels for that unit and shift.

E. The Nurse Staffing Plan will:

1. Reflect current standards established by private accreditation organizations, NSR 449.2423, governmental entities, national nursing professional organizations, and other health professional organizations;
2. Set forth the number, skill mix and classification of licensed nurses required in each unit in the health care facility;
3. Set staffing levels for patient care units required on specified shifts that are:
 - a) based on multiple nurse and patient considerations (including appropriate skill mix of registered nurses and other nursing personnel, and patient care needs);
 - b) determined by the nursing assessment and in accordance with evidence-based safe nursing standards; and
 - c) based on patient classification system per state requirement.
4. Include a method for adjusting the staffing plan for each patient care unit to provide staffing flexibility to meet patient needs;
5. Include a contingency plan when patient care needs unexpectedly exceed direct patient care staff resources;
6. Take into account the experience of the clinical and non-clinical support staff with whom the nurses collaborate, supervise or otherwise delegate assignments;
7. Provide a description of the types of patients who are treated in each unit, including, without limitation, the type of care required by the patients;
8. Provide a description of the activities in each unit, including, without limitation, discharges, transfers and admissions;
9. Provide a description of the size and geography of each unit;
10. Provide a description of any specialized equipment and technology available for each unit; and
11. Consider foreseeable changes in the size or function of each unit; and includes a process for periodic quality evaluation to determine whether the staffing plan is appropriately and accurately reflecting patient needs over

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time and provide sufficient flexibility to allow for adjustments based upon changes in a unit of the health care facility.

12. Be signed by each member of the staffing committee of the hospital established pursuant to NSR 449.242, to indicate that the member has received a copy of the written policy and the staffing plan and, if applicable, actively participated in the development of the written policy and the staffing plan; and include a place where a member of the staffing committee may note any objections to the written policy of the staffing plan.

V. Procedure:

- A. Under the direction of the Chief Nursing Officer, the facility will establish a Nurse Staffing Committee comprised of at least 50% registered nurses and one MHT who:

1. provide direct patient care during at least 50% of their work time;
2. are recommended by their peers/manager.
3. are representative of the types of nursing services provided by the system.

- B. Membership:

CEO, East Unit RN and alternate RN. Adult Unit RN and alternate RN. East Unit MHT and alternate MHT. Adult Unit Unit MHT and alternate MHT. CNO; HR Director and one Nurse Manager.

- C. The Chief Nursing Officer (CNO) is a voting member of the Nurse Staffing Committee. The CNO's participation on the standing Nurse Staffing Committee ensures that minimum staffing levels are determined by nursing assessment and in accordance with evidence-based safe nursing standards.

D Membership may include a registered nurse from infection control as well as nursing leadership team members. It is the responsibility of the hospital nurse executive to recruit and assign members to these leadership positions on the Nurse Staffing Committee.

- E Ad Hoc members may include a representative from education, human resources, and the financial department.

- F The committee meets at least quarterly for maintenance, review, and update of the nurse staffing plan.

- G Participation on the Nurse Staffing Committee by an employee as a committee member is part of the employee's work time, and the facility compensates members for that time accordingly. The facility relieves a committee member of other work

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duties during committee meetings. Members of the Nurse Staffing Committee will receive compensation for committee time in accordance with facility policy.

H Nurses/MHTs are to be encouraged to provide input to the committee relating to staffing concerns. Furthermore, RNs/MHTs who provide input to the committee are protected from retaliation: The facility may not suspend, terminate, or otherwise discipline or discriminate against a nurse who provides input to the committee.

I The Nurse Staffing Committee develops or adopts tools that predict nursing care requirements of individual patients.

J The Nurse Staffing Committee provides an annual report detailing the staffing plan and its execution.

K The Nurse Staffing Committee establishes a mechanism for reporting its evaluation of the actual staffing plan and the plan's effectiveness to the Governing Body, and for providing the written data for the annual report regarding nurse staffing to the required State entities. The facility Chief Nursing Officer is responsible for submitting the report.

L The Nurse Staffing Committee will assess staffing effectiveness by analyzing a minimum of two (2) clinical/service indicators and a minimum of two (2) human resources screening indicators. The Nurse Staffing Committee shall agree on designated indicators. Nurse Staffing Committee members will develop procedures to collect valid and reliable data as well as processes for submitting recommendations to management relating to topics within the purview of the Staffing Committee.

M The Nurse Staffing Committee agrees to handle disputes in a democratic manner through consensus discussion.

N A medical facility must not retaliate or discriminate unfairly against an employee who refuses an assignment (NRS. 449.205).

O Other considerations the Nurse Staffing Committee may review and discuss include:

1. Methods of improving patient care;
2. Methods of reducing the cost of providing high quality patient care;
3. Issues related to the patient acuity/intensity classification system and staffing guidelines.
4. Issues related to the hospital's utilization of per diem employees;
5. Issues related to floating, including orientation requirements for partner units;

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6. Issues related to nursing recruitment and retention;
7. Measures to be taken to decrease or eliminate the need for the use of mandatory overtime in accordance with pertaining State regulations.

VI. References:

- A. Senate Bill (SB) 362
- B. SB482
- C. NRS 449.241; 449.242 1; 449.2421; 449.2423; 449.2428

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APPROVAL – SIGNATURE PAGE

Chief Nursing Officer

Date

Chief Executive Officer

Date

Medical Director

Date

Chair – Governing Board

Date