

Hospital Staffing Advisory Committee Meeting

Minute Notes

Date	1/5/2024			
Meeting Topic	Hospital Staffing Matrix and Categories			
Note Taker	Holli Erdahl			
Attendees	Standing Attendees			
	WSHA		WSNA, SEIU, UFCW	
	<input checked="" type="checkbox"/>	Chelene Whiteaker	<input type="checkbox"/>	Cara Alderson
	<input checked="" type="checkbox"/>	Darcy Jaffe	<input checked="" type="checkbox"/>	David Keepnews
	<input checked="" type="checkbox"/>	Jason Hotchkiss	<input checked="" type="checkbox"/>	Duncan Camacho
	<input checked="" type="checkbox"/>	Jennifer Burkhardt	<input checked="" type="checkbox"/>	Anthony Cantu
	<input type="checkbox"/>	Keri Nasenbeny	<input checked="" type="checkbox"/>	Tamara Ottenbreit
	<input checked="" type="checkbox"/>	Renee Rassilyer-Bomers	<input checked="" type="checkbox"/>	Vanessa Patricelli
	DOH		L&I	
	<input type="checkbox"/>	Christie Spice	<input checked="" type="checkbox"/>	Caitlin Gates
	<input checked="" type="checkbox"/>	Holli Erdahl	<input checked="" type="checkbox"/>	Lizzy Drown
	<input type="checkbox"/>	Ian Corbridge	<input checked="" type="checkbox"/>	Carl Backen
	<input checked="" type="checkbox"/>	Julie Tomaro		
	<input checked="" type="checkbox"/>	Kristina Buckley		
	<input checked="" type="checkbox"/>	Tiffani Buck		
	Alternates and Other Attendees			
	Bonnie Fryzlewicz as alternate for Keri		Kirk Harper	
	Dino Johnson as alternate for Renee		Krista Touros	
	Saba Tilahun as alternate for Cara		Lindsey Grad	
	Aisling Kerins		Sara Gering	
	Amy Doepken		Toni Swenson	
	Angela Naylor			
	Ashlen Strong			
Colleen Spitz				
Dawn Marick				
Hanna Welander				
Jackie Mossakowski				
Jamie Estabrook				
Kara Yates				
Kelsey McCauley				

Agenda Item	Notes
Welcome and Roll Call	<ul style="list-style-type: none"> • Attendance taken

<p>Land and Labor Acknowledgement and Safety Topic</p>	<ul style="list-style-type: none"> • Candle safety • Before lighting, be mindful of the condition of the candle • Make sure the weight distribution is appropriate and candle wick length is not too long • Make sure the candle is in a heat-resistant candle holder • Scented candles – please be sure the scent won’t negatively impact others • Be aware of the surroundings, do not leave candles unattended • Keep away from pets and children
<p>Approve Prior Meeting Minutes</p>	<ul style="list-style-type: none"> • “Average number of patients per day could be useful, hours per patient day is harder to determine” will clarify this in the minutes, set to approve
<p>Action Item Follow Up</p>	<ul style="list-style-type: none"> • Alternates roles during meetings – will not be delivering feedback unless acting in place of primary member, there will be a time set before the public comment section for any feedback from alternates • Appointment of new committee member confirmed
<p>DOH Draft Basic Form- Hospital Staffing Matrix and Categories</p>	<ul style="list-style-type: none"> • Looking for initial reactions to matrix, not looking to vote until future meeting <p>Inpatient Staffing Matrix</p> <ul style="list-style-type: none"> • Licensed Beds/Operational Beds <ul style="list-style-type: none"> ○ Is it helpful to include Licensed Beds as well as Operational/Staffed Beds? ○ Staffed beds vs maximum beds ○ Licensed beds are not necessarily set by unit, maximum beds are generally more accurate • Budgeted Hours Per Patient Day <ul style="list-style-type: none"> ○ The intention of this uniform form is so the public can understand, Will the public understand hours per patient day? ○ A glossary of defined words (like in RI staffing forms) would be very helpful. ○ Will need to be able to distinguish how hours per patient day are determined ○ Hours are not often divided by role, and it may be difficult to separate. There are numerous members who prefer to have a combined number including all roles ○ HPPD is not a well understood term, need to take back to hospitals to discuss ○ Do we want a standardized formula for how to report HPPD on staffing form, or would we require that each hospital provides their own formula? ○ Concerns that different formulas for HPPD would affect ability for public comprehensive ○ What does HPPD add to the matrix that is not already present on the form? If we cannot list HPPD by specialty, what does the data offer? • Shifts <ul style="list-style-type: none"> ○ The intention is to allow hospitals to add additional lines for more shifts to accurately reflect their staffing model

	<ul style="list-style-type: none"> ○ Shift type or listed hours: preferably one or the other used for simplicity ○ Would it make sense to use Day and Night to categorize census time? Should we capture weekends? ○ Formatting – is it possible to have a vertical and horizontal version for census? <p>Break</p> <ul style="list-style-type: none"> ● Types of staff to be included in the Matrix <ul style="list-style-type: none"> “UAP is defined in WAC as individuals trained to function in an assistive role to nurses in the provision of patient care, as delegated by and under the supervision of the registered nurse. Typical activities performed by unlicensed assistive personnel include but are not limited to: Taking vital signs; bathing, feeding, or dressing patients; assisting patient with transfer, ambulation, or toileting. Definition includes: Nursing assistants; orderlies; patient care technicians/assistants; and graduate nurses (not yet licensed) who have completed unit orientation. Definition excludes: Unit secretaries or clerks; monitor technicians; therapy assistants; student nurses fulfilling educational requirements; and sitters who are not providing typical UAP activities.” ○ Still considering a checklist for critical support staff to be included on the form ○ Will need to have flexibility for positions that don’t require licenses but are staffed by licensed professionals ○ Should HUCs be separately listed from CNA? ○ Will this be used for compliance purposes moving forward? We should address the spirit of the law before deciding on what to include in the staffing matrix. ○ Enforcement pieces of the bill – let’s review those and discuss them succinctly in next meeting ○ The goal is for consistency across using forms, enforcements are about following the plan once it is implemented, not about what is excluded from the plan (Caitlin Gates L&I) ● Additional Care Team Members chart <ul style="list-style-type: none"> ○ Rather than a checkbox, would this chart be effective to include? ○ Could include roles like IV therapy and other supports that work across multiple units ● Factors Considered in the Development of the Unit Staffing Plan <ul style="list-style-type: none"> ○ Option to select which factors were considered as well as describe the way in which these factors were utilized ○ Allowing hospitals to add more information allows for visibility on what is listed in the law to consider ○ Could we possibly try having this filled out <p>Will send out what we have reviewed today, please feel free to send feedback or information as drafting continues</p>
<p>Public Comment</p>	<ul style="list-style-type: none"> ● Alternates: any comments? Not at this time ● Public comment: No public comments.

Action Items	Assignment	Deadline
Get feedback from peers on HPPD	Committee members	Next meeting
Further discuss and define HPPD	All	Next meeting
Review enforcement expectations of the bill for discussion	DOH	Next meeting