

Ocean Beach Hospital Staffing Committee Charter

7/1/2024



OCEAN BEACH
HOSPITAL
& MEDICAL CLINICS

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8 Other

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Charter Version History

Version	Effective Date	Date Approved	Approved By	Revision Date (If applicable)	Revision Reason (If applicable)
1.0	7/1/2024	6/17/2024	Hospital Staffing Committee	8/21/2024	Did not meet all required regulation
1.1	7/1/2024			8/26/2024	Did not meet all required regulaton

Hospital Information

Name of Hospital	Ocean Beach Hospital				
Hospital Phone #:	360.642.3181				
Hospital Email:	bsharkey@oceanbeachhospital.com				
<u>Hospital License #:</u>	00000079				
Hospital Street Address	174 First Ave N/PO Box H				
City/Town:	Ilwaco	State:	WA	Zip Code:	98624
Is this hospital license affiliated with more than one location?				<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If "Yes" was selected, please provide the location name and address					

1 Committee Members

1.1 Process for electing cochairs and their terms

1.1.1 Co-chairs will be nominated by the Hospital Staffing Committee members

1.1.2 Each Co-chair will have a two-year limit

Membership Table

Name	Title	Date Term effective	Term Length
Beth Certain	Acute Care Staff RN, Co-chair	7/1/2024	2 years
Jaala Langley	Clinical Nurse Manager, Acute Care, Co-chair	7/1/2024	2 years
Marcey Frame	Cardio/pulmonary RN	7/1/2024	1 year
Jennifer Fremstad	Perioperative RN	7/1/2024	1 year
Luz Greenfield	Acute Care CNA	7/1/2024	1 year
Kimberly Bennett	ED CNA	7/1/2024	1 year
Brenda Sharkey	CNO	7/1/2024	Until no longer in the position
Eric Volk	CFO	7/1/2024	Until no longer in the position
Will Williams	Clinical Nurse Manager, ED	7/1/2024	Until no longer in the position
Loris Cook	Assistant Perioperative Nurse Manager	7/1/2024	Until no longer in the position

1.2 Roles, responsibilities, and processes by which the hospital staffing committee functions.

1.2.1 A total of ten (10) voting members will sit on the committee however other staff members are welcome join the meetings as non-voting members.

1.2.2 50% of the voting members will be comprised of nursing staff (RNs and CNAs) who are non-supervisory and non-managerial. They will be selected by their union.

1.2.3 50% of the voting members will be determined by the hospital administration and will include the CFO, CNO and unit managers.

1.2.4 The following departments are represented by the voting members:

- 1.2.4.1 Acute Care
- 1.2.4.2 Emergency Department
- 1.2.4.3 Perioperative Services
- 1.2.4.4 Cardiopulmonary
- 1.2.4.5 Administration

1.2.5 Additional staffing relief will be provided if necessary to ensure committee members are able to attend meetings. Participation by a staff member shall be on scheduled work time and compensated at the appropriate rate of pay. Members will be relieved of other work duties during meetings. It is understood that the meeting schedule may require that members attend on scheduled day off. In these situations, the staff member will be paid for scheduled meetings. Meetings will be held using Teams platform to decrease travel time for staff members on their day off.

1.2.6 All members are expected to attend at least 75 percent of the meetings held each year. Staff committee members who can no longer meet the attendance expectation may be removed from the committee and a replacement will be voted in by union members. It is the expectation of the Hospital Staffing Committee that all members will participate actively, including reading required materials, come prepared to meetings, and engage in respectful dialogue.

2 Committee Meetings

2.1 The Hospital Staffing Committee meetings will be scheduled at 7:15 am the 4th Thursday of each month. Members will be notified 30 days in advance of changes to the schedule.

2.2 Any member can request an additional meeting by notifying a Co-chair.

2.3 It is the responsibility of the Co-chairs to send out meeting notices 30 days in advance.

3 Complaint Process

3.1 Processes for reviewing, investigating, and resolving complaints.

- 3.1.1 Staff members are to fillout a staffing concern form anytime they were unable to take a break or they feel staffing was out of compliance with the staffing plan or staffing numbers did not meet the needs of the patient census.
 - 3.1.2 The employee sends the form to the manager who reviews/investgates the cause.
 - 3.1.3 Manager brings the form and investigation to the next committee meeting
 - 3.1.4 Committee members discus the incident and next steps/corrective action if needed
 - 3.1.5 Excel spreadsheet is kept for noting the date received as well as initial, contingent, and final disposition of complaints and corrective action plan where applicable.
- 3.2 All complaints will be resolved within 90 days of receipt, or if longer with a majority approval of the committee.
 - 3.3 A co-chair will ensure the complainant receives an email stating the outcome of the complaint.
 - 3.4 An employee, and a labor representative may request to attend committee meetings if they're involved in a complaint. The employee will be notified by a co-chair of the meeting date, time and will receive a Teams meeting invitation.

4 Committee Review Processes

- 4.1 Processes for the hospital staffing committee to conduct quarterly reviews.

Quality Metric	Review Frequency	Process
Staff turnover rates	Quarterly	HR will provide the information January, April, July, December
New hire turnover rates during first year of employment	Quarterly	HR will provide the information January, April, July, December
Anonymized aggregate exit interview data	Annual	HR will provide the information January of each year
Hospital plans regarding workforce development	Annual	HR and Educator will provide the information February of each year committee members input

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5 Committee Documentation and Records

5.1 Process for approving meeting documentation including meeting minutes, attendance, and actions taken.

5.1.1 There will be a note taker at the meetings

5.2 Retention of meeting documentation will be a minimum of three years.

5.3 Meeting agendas will be distributed to all committee members at least one week in advance of each meeting.

5.4 The minutes of each meeting will be distributed to all committee members with each meeting agenda, with approval of the minutes as a standing agenda item for each meeting.

5.5 A master copy of all agendas and meeting minutes from the Hospital Staffing committee will be maintained and available for all staff to review.

6 Process for the hospital to provide the hospital staffing committee with information regarding patient complaints involving staffing made to the hospital through the patient grievance process.

6.1 The Risk Manager will provide any patient complaint related to staffing for the committee to review

6.2 The committee will review the complaint and develop an action plan if needed

7 The Hospital Staffing Committee will review all staffing variations to the staffing plan. The data will be analyzed for trends such as a particular nursing department, day of the week, or shift which will then be used to inform the development and semiannual review of the staffing plan.

8 The committee will develop the annual patient care unit and shift based hospital staffing plan.

8.1 In the development of the staffing plan, the committee will consider patient acuity, level of experience and training of staff, compliance

with the collective bargaining agreements (CBAs), state and federal regulations.

- 8.2 Create written policies and procedures for orientation and demonstrate competence in clinical areas.
- 8.3 The committee will draft an annual staffing plan by a majority vote (50%+1).
- 8.4 The draft annual staffing plan will be delivered to the hospital Chief Executive Officer (CEO) for consideration by July 1 of each year (starting in 2024).
- 8.5 If the CEO request changes, the committee will review the CEO's feedback.
- 8.6 The committee will vote on a revised staffing plan per 8.3.
- 8.7 Once the staffing plan has been approved by the committee and CEO it will be submitted to Department of Health by January 1 of each year (starting in 2025).