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12AM EST

Owner Bill Bryant: Chief

Nursing Officer

Policy Area Committee

Charter

## **Hospital Staffing Committee Charter**

# **Purpose (Mission)**

The purpose of the Hospital Staffing Committee is to follow RCW 70.41.420 and the Hospital Staffing Law (SB 5236) as proscribed by the State of Washington. This includes the establishment of a hospital staffing committee in collaboration with hospital administration. The responsibility of this committee is to produce the hospitals annual hospital staffing plan, to submit this plan for approval to hospital Administration, and to receive and review and resolve complaints/concerns related to staffing.

## **Scope of Responsibility**

- Develop and maintain the annual patient care unit and shift-based hospital staffing plan that will be used as the primary component of the staffing budget
- Review and approve the staffing plans on a semi-annual basis
- Review, assess, and respond to staffing variations or concerns presented to the committee via investigation of only factual information.
- Consider hospital finances and resources in development of the nurse staffing plan
- Produce the annual hospital staffing plan in collaboration with administration representation.
- Develop a process to examine and respond to data submitted under section 4(a), (b), & (c) of the RCW.
- Determine if a specific complaint pertaining to staffing in the Event Portal is resolved, or dismissed if unsubstantiated via investigation process involving Quality Assurance Review.
- The hospital staffing committee has the authority to investigate and respond to any staffing concern made by an employee, visitor, or patient via due process prescribed by Quality Assurance.

## **Composition (Membership)**

ET Sponsor: CNO/ CFO (CEO may periodically attend as a non-voting member)

Chair: As elected by the committee

Vice-Chair: As elected by the committee

Scribe: As elected by the committee

Membership: Quality Director, MSU Manager, Periop Manager, ER Manager, OR Manager; Staff representative elected by peers from: MSU RN, OB RN, Periop RN, OR RN, ER RN, NAC from MSU, NAC from ER

Length of term: 12 months with ability to be renominated for consecutive terms

## **Meeting Details**

Frequency: Monthly- (At least 10 annually) This meeting is not intended to create unreasonable burdens on critical access hospitals under 42 U.S.C. Sec. 1395i-4. Critical access hospitals may develop flexible approaches to accomplish the requirements of this section that may include but are not limited to having hospital staffing committees work by video conference, telephone, or email.

Voting quorum definition: At least 50% members of front line staff to managers present (there cannot be more managers than staff when voting occurs).

Attendance requirements: 80% annually. If members fail to attend (3) consecutive meetings or fails to attend the 60% requirement, they **may** automatically be removed from the committee.

# **Record Keeping (Deliverables)**

Agenda: Brought to each meeting and will include redacted complaints needing review

Minutes Retention: Assigned as prescribed by WHMC policy, previous minutes approved at the next Committee meeting, approved minutes uploaded to Policystat for retention

Reports: Updates will be given to ET when needed by CNO, CFO, or Committee Chair

Storage location: Policy Stat minutes to be retained for a minimum of 3 years.

DOH requirement: Send staffing plans when changes occur and annually to nursestaffing@doh.wa.gov

### **Duties:**

Membership Selection: Leaders appointed; Nursing staff voted in by peers and accepted after confirmation by HR to have not had any negative actions for the previous 12months. Vacated positions of leaders will be reappointed within 60 days. Vacated staff positions will be presented to department peers for new selection within 60 days.

I. Roles/ Responsibilities/ and Processes

A. The committee shall produce the hospital's annual hospital staffing plan.

B. The committee shall propose by a 50 percent plus one vote a draft of the hospital's annual staffing plan which must be delivered to the hospital's chief executive officer or their designee by July 1, 2024, and annually thereafter.

Each hospital shall post, in a public area on each patient care unit, the staffing plan and the staffing schedule for that shift on that unit, as well as the relevant clinical staffing for that shift. The staffing plan and current staffing levels must also be made available to patients and visitors upon request. The hospital must also post in a public area on each patient care unit any corrective action plan relevant to that patient care unit as required.

#### II. Process for reviewing staff complaints:

A nursing staff may report to the hospital staffing committee any variations where the nursing staff assignment in a patient care unit is not in accordance with the adopted staffing plan and may make a complaint to the committee based on the variations by placing an event in the Healthcare SafetyZone Portal. All complaints should be entered into the event portal.

Shift-to-shift adjustments in staffing levels required by the plan may be made by the appropriate hospital personnel overseeing patient care operations. If nursing staff on a patient care unit objects to a shift-to-shift adjustment, the nursing staff may submit the complaint to the hospital staffing committee.

### III. Process for review of patient complaints involving staffing:

All complaints will be acknowledged within 7 days of issuance and will be reviewed at the next scheduled committee meeting.

Hospital staffing committee will examine and respond to data submitted for review, including determination if a specific complaint is resolved or dismissed based on unsubstantiated data. This will be a standing agenda item at each meeting. All written complaints submitted to the hospital staffing committee will be reviewed by the staffing committee, regardless of what format the complainant uses to submit the complaint.

Staff submitting a complaint will receive a letter either in electronic format or paper format stating the decision of the committee after review.

### IV. Process for resolving complaints:

A formal request for explanation and plan for correction will be required for department leaders who fail to adhere to guidelines of staffing committee. Plans of correction will be reviewed during committee meetings and voted on for acceptance or denial. Denial of a proposed plan will be sent to Executive Leadership for followup with leader on Plan and new corrective action recommendation.

In the event of an unforeseeable emergent circumstance lasting for 15 days or more, the hospital incident command chief shall report within 30 days to the chair of the hospital staffing committee an assessment of the staffing needs arising from the unforeseeable emergent circumstance and

the hospital's plan to address those identified staffing needs. Upon receipt of the report, the hospital staffing committee shall convene to develop a contingency staffing plan to address the needs arising from the unforeseeable emergent circumstance. The hospital's deviation from its staffing plan may not be in effect for more than 90 days without the review of the hospital staffing committee. Within 90 days of an initial deviation under this section the hospital must report to the Department of Health the basis for the deviation and must report to the Department again once the deviation under this section is no longer in effect.

V. Quarterly Data reviews: (Turnover rates, new hire turnover rates in first year, Interdepartmental Transfers, Exit Interview Information)

An agenda item for each Quarter, Data as determined necessary by the committee to assess efficiency of staffing plans will be reviewed.

VI. Process for Data review to guide annual decision making of committee

At annual reviews of the staffing plan, a thorough review of Quarterly data and trends will be reviewed and discussed to assist in guiding decisions for any required updates. Any changes or updates will be submitted as part of a revised plan for approval by CEO and after approval will be submitted to Department of Health as an updated staffing plan.

### **Attachments**

Hospital Staffing Meeting December 2023.pdf

Nurse Staffing Concern - Final.docx

RCW and House bill.pdf

### **Approval Signatures**

Step Description	Approver	Date
	Bill Bryant: Chief Nursing Officer	12/27/2023, 11:48AM EST