PFI-0678. Name: F.F. Thompson Hospital

Pursuant with New York State Public Health Law (NYS PHL) section 2805-t, F.F. Thompson Hospital convened a safe staffing committee to address the requirements of the law. The committee is comprised bedside clinical staff and leadership, including the CFO and CNO. The committee convened on August 9, 2021 and met monthly until the staffing plan was approved. Clinical nurses within each clinical unit were identified by their peers to participate in the Safe Staffing Committee. They, along with their Director, developed a staffing plan unique to their unit's needs and available benchmarks and evidence-based guidelines. These plans were submitted to the committee for review. The initial staffing plan was approved on June 13, 2022 and implemented January 1st 2023. The committee continues to meet at least 6 times per year plan to address grievances and any proposed changes to the staffing plan are reviewed and voted upon, in accordance with the regulation, and adjustments made as necessary.

Considerations for the staffing plan included: case mix, geography, acuity of the patient, skill mix of the nursing staff, and the support staff needed to ensure safe patient care. Registered Nurses (RNs) direct patient care supported predominantly by Patient Care Technicians (PCTs). Care rendered by LPNs or PCTs is under the direct supervision of the RN in accordance with NYS regulations.

Grievance Process

The safe staffing committee will continue to meet at least 6 times per year. The adverse event reporting system includes an event type for staffing concerns. All staffing concerns will be reported through the event reporting system and will be reviewed by the safe staffing committee on a monthly basis with next steps and feedback provided to the staff member or members raising the concern.

Medical Surgical Units

There are 3 medical surgical units each managing a population of patients with diverse medical diagnosis, including, but not limited to: stroke, COPD, CHF, Diabetes Mellitus, pneumonia, acute and chronic kidney disease, cardiac conditions, and patients awaiting placement. In addition, surgical patients, including, but not limited to: orthopedics, general surgery, vascular surgery, GYN, neurological (spine) surgery, and urologic surgery.

Observation unit

The observation unit manages a population of patients requiring up to 23-hours of care. Care is rendered by RNs with PCT support.

Critical Care

The intensive care unit is a purpose built 12 bedded unit. Nursing care is rendered by RNs supported by PCTs. The intensive care unit manages high acuity medical and surgical patients. The nurse to patient ratio supports a minimum of 12 hours of care per patient day for ICU level patients. There is no intermediate care unit at F.F. Thompson. The nurse to patient ratio may be adjusted in circumstances where the patient mix includes intermediate care or medical surgical patients waiting to transfer to a medical surgical unit.

Mother Baby

The birthing center model of care is LDRP, with a level 1 nursery. Care is rendered by RNs with support from LPN/Scrub technicians. The staffing model was developed using national guidelines and review of the patient acuity and various roles RNs fulfill in the LDRP model. The birthing center operating room has the same minimum staffing as the main operating room for scheduled and emergent c-sections.

Emergency Medicine

The emergency department manages patients according to the ESI levels 1-5 and national guidelines. The staffing plan considers the ebb and flow of patient census during the day with additional staffing support during the middle of the day when census is highest. Care is rendered by registered nurses supported by emergency care technicians.

Operating Room

The operating room staffing is based on AORN guidelines and is depicted per room. There are 6 operating rooms in the main OR suite and one OR in the birthing center. Each room has a minimum of one RN circulator, one scrub (RN/LPN or certified scrub tech) and an RNFA or other first assist (Physician Assistant, Nurse Practitioner, Midwife** or surgeon) depending on the type of surgery and complexity of the case.

On call coverage for the operating room is from 11.30p-7a Monday through Friday and for 24 hours at weekends and holidays. The same ratio of one RN circulator, one scrub (RN/LPN/Certified Scrub technologist) and one OR aide. An RNFA is on call during these hours as needed for specific types of surgery.

Surgical Care Center

The surgical care center encompasses pre anesthesia, phase I (PACU) and phase II. The staffing matrix is based on the level of care rendered and the acuity of the patients. National guidelines are used to drive staffing decisions in this area. There are staggered start and stop times for RN's based on operating room volume at any given hour of the day. The goal of the staffing plan is to have 3 Nurses available for pre operative patients, 3 nurses for phase 1 recovery and 3 nurses in phase II recovery. The nurses are all cross trained to all areas and there is flexibility within the day to meet patient needs. On call support is provided from 11.30p-7a and for 24 hours at weekends and holidays.

Ambulatory Procedures unit.

The unit has pre and post procedure areas as well as 4 procedure rooms for endoscopies and colonoscopies. One room can be used for minor procedures. Staffing is arranged according to the number of procedural rooms in operation at any given time. Each procedure room is staffed with 3 RN's (1 pre-procedure, one procedural nurse and one post procedure nurse) and 2 Gastroenterology technicians (one in the scope room and one in the procedure room). To facilitate patient-flow, a patient care technician is schedule to assist. To allow for maximum flexibility for acuity and volume, all staff are cross-trained to pre, post and procedural areas.

Diagnostic Imaging

The diagnostic imaging nursing team supports all diagnostic imaging modalities where nursing care is required (i.e., interventional radiology, computerized tomography, nuclear medicine, ultrasound, magnetic resonance imaging and X-ray) for both inpatients and outpatients. All nurses are cross trained to all procedures and phases of care, to ensure maximum flexibility to meet the patient population.

Acute Care Surgical Services

The acute care surgical services clinic supports the outpatient non operative functions of the general surgeons. Staffing is flexible and based on the number of providers present in the clinic on any given day. The clinic is open Monday through Friday 8am to 4:30pm.

Marilyn Sands Outpatient Clinic (MSOC)

The MSOC clinic is a multispecialty clinic serving patients with pulmonary and gastrointestinal disorders. Staffing is flexible based on the number of providers present in the clinic on any given day. The clinic is open Monday through Friday 8am to 4:30pm.

Service Line	Unit	Unit Type	Bed Capacity	Minimum Staffing/Shift	RN	LPN	РСТ	Unit Secreta ry	Unit Support Staff
Medical/ Surgical	2 West	Medical Surgical	21	7a-7:30p	5	0	3	1*	
				7p-7:30a	3	0	3	1* (until 11p)	
Medical/ Surgical	3 East	Medical Surgical	21	7a-7:30p	5	0	3	1*	
				7p-7:30a	3	0	3	1* (until 11p)	
Medical/ Surgical	3 West	Medical Surgical	21	7a-7:30p	5	0	3	1*	
				7p-7:30a	3	0	3	1* (until 11p)	
Medical/ Surgical	Observation	Medical Surgical Observation	12	7a-7:30p	2	0	1	1	
				7p-7:30a	2	0	1	0	
Critical Care	Critical Care	Intensive Care	12	7a-7:30p 7p-7:30a	6 6	0	1	1 0	1 RT 1 RT
Mother Baby	Birthing Center	LDRP with	12	7a-7:30p	3	1 LPN or 1 PCT/Scrub tech			+ RN on call
		Level 1 nursery		7p-7:30a	3	1 LPN or 1 PCT/Scrub tech			+RN on call
Emergency Medicine	ED	Emergency	24	7a-11:30a	5	0	4	0	
				11:30a-12 MN	7	0	5	0	

			12MN-7a	5	0	3	0	
Operating Department	OR	Operating Room PER ROOM	7a-3:30p	1	1 (RN, LPN or Certifie d Scrub Tech)	.5	0	1 RNFA as required
		PER ROOM	3:30p-11:30p	1	1 (RN, LPN or Certifie d Scrub Tech)	.5	0	1 RNFA as required
		PER ROOM	11:30p-7a and weekends/hol idays ON CALL ONLY	1	1 (RN, LPN or Certifie d Scrub Tech)	.5	0	1 RNFA as required
Surgical Center	SCC/PACU	Pre & Post	6a-7:30a	3	0	0	1	
		Anesthesia	7:30a-8a	5	0	2	1	
			8a-2:30p	9	0	2	1	
			2:30p-7:30p	2	0	0	0	
			7:30p-8p	2	0	0	0	
			8p-11:30p	1	0	0	0	
			11:30p-7a weekdays and weekends/hol idays ON CALL ONLY	1	0	0	0	
Ambulatory Procedures Unit	APU	Endoscopy/ colonoscopy PER ROOM	7a-3:30p	3	2 GI Tech	1	1	
			3:30p-7a weekdays and weekends/hol idays ON CALL ONLY	1	1	0	0	
Diagnostic Imaging	DI	Diagnostic Imaging	7a-3:30p	5	0	0	1	
			3:30p-7p	2	0	0	0	
			7p-7a weekdays and weekends/hol iday – ON CALL ONLY	1	0	0	0	
Acute Care Surgical Services	ACSS	Outpatient Clinic	8a-4:30p	1	0	1	1	
Marilyn Sands Outpatient Clinic	MSOC	Outpatient Clinic	8a-4:30p	0	1	1	2	

Each unit will publicly post staffing plan by shift on their unit. Compliance with the plan will be reviewed monthly and clinical quality data will be reviewed quarterly at the safe staffing committee. All data requirements will be submitted to the Department of Health in accordance with the regulations.

**Birthing center only