# INPATIENT STAFFING MATRIX

		DAY SHI	FT: 7:30 a - 8 p		
Census	0 - 6	*7- 12		13 - 20**	21 - 25**
	1 RN	2 RN or		2 RN +	3 RN
	1 PCT	1 RN/1LPN*		1 RN/LPN	1 LPN
		2 PCT *		2 PCT	2 PCT
	Charge RN	Charge RN		Charge RN**	Charge RN**
		Cancel 1 staff member if cenus <10		Cancel 1 staff member if cenus <14	
		EVENING S	HIFT: 9:30 a - 10	0 p	
<u>Census</u>	<u>0 - 16</u>	<u>17 - 25</u>			
	0 PCT/Clerk			1 PCT/Clerk - M-F 3pm - 11pm Sat/Sun - 9:30am - 10pm	
		NIGHT SH	IFT: 7:30 p – 8	a	
<u>Census</u>	<u>*0 - 12</u>	<u>13 -16</u>	<u> 17 - 20</u>	<u>21 – 25***</u>	
	2 RN or	2 RN or	2 RN	2 RN	
	1 RN/LPN*	1RN / 1 LPN	1 LPN	1 RN/LPN	
	*1 PCT	2 PCTs	2 PCT	2 PCT/1PCT (10p-8a)***	

<sup>\*</sup> Float- or Cancellation when census < '

#### Nursing Supervisors, please consider CENSUS and ACUITY of the patients and consider the following when adjusting staffing:

- Devices/Drips/Telemetry, L.V.A.D. PATIENTS, Cardizem Drip: 1.25 patients
- COVID Isolation 1.25 Patients
- Delirium, Severe Agitation: 1.25
- Safety: sitter 1:1 (Additional PCT, Security or ancillary staff member)
- Consult with Nurse Managers and or Charge RN regarding potential admissions and / or discharges.
- The Lead RN / Charge RN counts as staff, when utilized to cover an assignment.
- Lead RN Charge RN ED Manager to assist Covering meal breaks for staff
- Inpatient and ED Manager will assist as needed with procedures during periods of high acuity or high census.
- Utilize On-Call Nurse as LAST resort NOT first call when additional staff needed.
- \*When census Peaks consider adding a PCT /clerk. As Per Manager's discretion Charge and Lead RN to take assignments
- The staffing Matrix is a guide for Nurse Managers and Nursing Supervisors.

This Staffing Matrix is a guide to help with staffing decisions. It is subject to change as per the Managers' discretion Revised May 2022

<sup>\*\*</sup>Charge RN assume a light assignment as needed to accommodate acuity needs

<sup>\*\*\*</sup> Night census 25 Consider adding PCT if high acutity

# **EMERGENCY DEPT. STAFFING MATRIX**

DAY SHIFT: 2 RNs 7:30am-8pm

PCT 7am-7:30pm

EVENING SHIFT: Clerk/Tech 9:30am-10pm

RN 12pm-12am (Memorial Day to Labor Day)

NIGHT SHIFT: 2 RN 7:30pm-8am

LPN or PCT 7:30pm-8am (Memorial Day to Labor Day)

#### 12pm to 12am Summer ED RN becomes Lead RN during off-season

Nursing Supervisors, please consider the following regarding ED staffing:

Lead RN should be counted as staff when they are needed to take an assignment.
LEAD RN schedule: 12 pm to 12 am

- Consider and offer the following when there is an ED Call-out: Floating cross-trained staff from another department. Swapping shifts with staff scheduled for another day. Ask staff members to split shifts if they are not able to cover an entire twelve hours.
- The Inpatient Charge RN and ED Manager(s) are expected to assist as needed during high acuity and increased census M F 7:30am-4pm (check the supervisor's book to determine if they are scheduled and alert them ASAP).
- On-Call Nurse should be utilized as **LAST** resort NOT first call when additional staff are needed. Occasionally, we may not have staff to cover based on above matrix. It is our goal but not always possible based on staffing availability and increases/ decreases in census and/or acuity.
- Meal Breaks are assigned for all staff members

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# **AMBULATORY SURGERY STAFFING MATRIX**

### **Orthopedics:**

Pre Op 1 RN

Intra-Op 1 Circulator RN 1 Surgical Tech

Recovery 1 RN 1 PCT

### Pain Management:

Pre Op 1 RN

Intra-Op 1 Circulator RN 1 Surgical Tech

Recovery 1 RN 1 PCT

## Neurology & Gastroenterology: (fast paced)

Pre Op 2 RN

Intra-Op 1 Circulator RN 1 Surgical Tech

Recovery 1 RN 1 PCT

- OR Coordinator acts as the Circulator RN as needed.
- Manager of Ancillary Services is available for assistance as required.