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Las Vegas, NV 89102
Phone: (702) 383-2000



Mason VanHouweling
Chief Executive Officer

**NRS 449/SB362
2021**

STAFFING COMMITTEE SUMMARY REPORT

Hospital Name: University Medical Center of Southern Nevada

Address: 1800 W. Charleston Blvd.

City: Las Vegas State: Nevada

Zip Code: 89102

Telephone: 702-383-3864

Staffing Committee Established: Yes -12/09

Committee Composition: See attached membership list – meets NRS 449 regulations

Committee Meeting Frequency: Council meets at a minimum of quarterly – scheduled on 3rd Monday monthly.

Committee Activities/Efficacy:

Meetings were held monthly (exception June and July) via electronic WebEx format and all discussion items displayed on screen for all to see. Quarterly NRS requirement met.

- Annual review of Staffing Plan and Staffing Council Policies completed to ensure all NRS 449/SB362 requirements are met. All members indicated by signature that they reviewed and whether they agree or disagree per regulations.
- Nomination and Electronic balloting of new members held in November 2021, as per election requirements of NRS 449 and UMC established process. New members are replacing staff that withdrew membership due to various reasons-see attached election process.
- ADO forms reviewed and recommendations for additional elements to be added to hybrid –partial online and partial paper. Final document under review for launch in 2022. Rubric for severity scoring and trend reports also updated to reflect all items on revised ADO form, launching with form in January 2022.
- Electronic education module assigned to all Nurses and C.N.A.'s discussing elements of NRS 449/SB 362 referring to written policies regarding refusal or objection to a work assignment and ADO process at UMC and the Revised hybrid form completion process for launch in January 2022.
- ADO Trending Reports reviewed – CY 2021 common themes were related to unit volume, impact of frequency and volume of admissions, discharges and transfers (ADT), staff sick calls, FMLA use, COVID exposures. Turnover rates remain static and ADO reports have not increased year over year.
- Staffing FTE adjustments and additional organizational processes implemented in response to Pandemic and trend reports. For example – organizational merit and COLA salary increases as well as Mercer Market Salary review so as to remain competitive. Critical Care & Med Surg salary range increase and other specialty adjustments made. Retention bonuses distributed, Major recruitment plan in place with external recruitment firm (NSI) with major focus on filling vacant positions, using recruitment bonuses as well as referral bonus with relocation support. Providing crisis incentive rates on top of hourly, overtime and differential rates. Implementing Central Resource pool and use of technology for staff scheduling, dynamic productivity and competency based assignment. We continue travel contracted staff to assist with volume and acuity demands during Pandemic.
- ADO Review and Memo responses up to date, written response sent to each employee and kept on file on intranet for all ADO's. All Staffing Council work posted on UMC Intranet for staff access, review & transparency.
- UMC Patient Care Advisory Committee per SEIU contract did not convene for nursing matters this year.
- State assigned 5 Star Rating remains in place.

Attached: Staffing Council Policy – I-191, Staffing Plan, Nomination & Election Process, Member List, Minutes from Quarterly meetings.

Responsible Party: Cathleen Hamel MS, RN Director Prof Practice/Shared Governance & Pathway to Excellence. **Report prepared and submitted:** December 2, 2021

Staffing Council Membership

Council Member
Chair - Deb Fox RN UMC CNO
Co- Chair- Elizabeth Bolhouse RN - PEDS/SEIU Chief Steward
Facilitator - Cathy Hamel RN Director Professional Practice
Staff Membership Elected
Medical Surgical Nurse - Janecein Amadi RN
Medical Surgical C.N.A. - Angela Wright C.N.A.
Medical Surgical Alternate - Patricia Cooley C.N.A.
Critical Care Nurse - Michael Donaldson RN
Critical Care C.N.A. - Marietta Miller C.N.A.
Critical Care Alternate - Encar Williams (DeBorja) C.N.A.
Maternal Child Nurse - Tania Taylor RN
Maternal Child C.N.A. - Karrie Williams C.N.A.
Maternal Child Alternate - Nadine Jackson- Dancy C.N.A
Periop Services Nurse - Rowena Bengson RN
Periop Services C.N.A. - Mary Zuniga C.N.A.
Periop Services Alternate - Nicole Plaza RN
Ambulatory Services Nurse - Lisa Renfro RN
Ambulatory Services C.N.A. - Autumn Miles C.N.A
Ambulatory Services Alternate - Anthony Wiggs RN
Nursing Other Nurse - Carol James RN
Nursing Other Alternate - Pam Waltrip RN
Staff Membership
Periop- Annette Wilson C.N.A. - Grandfathered from Previous Council Membership
PEDS ED - Ann Burrell RN - Guest invitee interested in Council
Appointed Membership
Nursing Other - William Schoonmaker RN - Clinical Manager Clinical Operations Center, PPC
Med Surg - Roshele Ward RN - Clinical Manager 5 South
Critical Care - Maryann Fondrisi RN Clinical Manager IMC 3 South
Critical Care- Nancy (Nikki) Legaspina RN -Clinical Manager SICU
Maternal Child - Rebecca Thomas RN Clinical Manager Perinatal
Ambulatory Care - Rick Kraske RN Manager Blue Diamond Quick Care



Staffing Council (Nursing)

Owner: Director Professional Practice

Sponsor/Group: Nursing

Details: Adequate Staffing. Quality Patient Care

Planning: Review 10/2021

1.0) Policy Number: I-191

2.0) Effective Date: Effective 12/09, Revised & reviewed 9/14, 10/17, 10/18, 6/19

3.0) Responsible Department: All Nursing Departments.

4.0) Subject: Staffing Council (Nursing)

5.0) Category: Staffing

6.0) Purpose: The hospital administration and staff recognize the importance of adequate staffing in providing the highest quality of patient care. To that end, the hospital shall comply with all lawful staffing guidelines and evaluate effectiveness of staffing based on well-established and recognized criteria. The hospital recognizes that quality and safe patient care is the first and primary concern of all staff, and that this mutually shared goal is best served by having hospital management and employees working together to examine the most effective and efficient means of providing quality patient care. There will not be retaliation or discrimination unfairly for anyone refusing or objecting to an assignment.

7.0) Scope: At UMC the Staffing Council, as established by the University Medical Center and Service Employees International Union Agreement, functions as the Nursing Staffing Committee to meet the intent of NRS 449. In addition, The Patient Care Advisory Committee will convene as necessary to review any concerns identified related to patient care needing SEIU & Nursing joint review.

8.0) Policy: The Staffing Council as established in accordance with NRS449:

- Memberships shall be compromised of no more than one-half appointed by hospital administration and not less than one-half of the total regular members from the licensed nursing staff and certified nursing assistants who are providing direct patient care at the hospital. The members must consist of one member

representing each unit of the hospital who is a licensed nurse, one member who is a certified nursing assistant, and one alternate member who is a licensed nurse or certified nursing assistant. All direct patient care members must be elected and if a vacancy occurs a new or alternate member must be elected in the same manner, allowing at least 3 days for voting.

- Unit is defined as divisional section of the organization: Medical Surgical, Critical Care, Maternal Child, Perioperative Services, Ambulatory Care and Nursing-Other.
- Include the Chief Nursing Officer as one of the management representatives
- Chief Nursing Officer and Chief Nursing Steward will Co-Chair Staffing Council
- Meet at least quarterly
- Members will receive regular straight time, hourly compensation for their time spent in Staffing Council meetings

The Staffing Plan Matrix must include by law, NRS 449;

- A detailed written plan setting forth the number, skill mix.
- Classification of licensed nurses required in each unit (nursing).
- Take into account the experience of the clinical and non-clinical support staff with whom the nurses collaborate, supervise or otherwise delegate assignments.
- UMC to ensure each unit is staffed in accordance with the Staffing Plan.
- A documented staffing plan must provide sufficient flexibility to allow for adjustments based upon changes in the unit.
- A process for staff to refuse a work assignment or accept an assignment despite an objection.

The Staffing Plan as written in the individual Unit –Department Manual Profile must include by law, NRS 449:

- A description of the types of patients who are treated in each unit, including, without limitation, the type of care required by the patients.
- A description of the activities in each unit, including, without limitation, discharges, transfers and admissions.
- A description of the size and geography of each unit.
- A description of any specialized equipment and technology available for each unit; and
- Any foreseeable changes in the size or function of each unit.

Procedures The council shall establish guidelines under which it will function. The following shall include, but not be limited to:

- Method of recording, maintaining, distributing and approving minutes.
- Distribution method of meeting agenda in advance of the scheduled meeting.
- Length, frequency, and scheduling of meetings.
- Methods to support the nomination and election of Direct Patient Care membership
- Procedure for responding to employee(s) who bring forth issues before the committee.
- Identification of oppositions (chairperson, secretary, etc...), method of selecting individuals to fill these positions and the term of assignment.
- Decisions are made using consensus.

- Method of reporting findings and recommendations to the Labor/Management Committee, the Union, employees, and Administration when indicated.
- Any joint recommendations arrived at shall be promptly forwarded to the administrative council.
- Review Refusal of Work Assignment and Assignment Despite Objection forms.
- Efficacy of education related to Policy I-191 Staffing Council and Assignment Despite Objection / Refusal of Assignment form, including administration, management, licensed nurses and CNAs.

Other considerations the council may recommend for review at the Patient Advisory Committee as established by the UMC/SEIU Agreement may include the following objectives:

- To work toward the improvement of patient care and to recommend ways and means to improve patient care.
- To review patient care standards relating to staffing.
- To develop a method of classifying patients according to acuity of illness.
- To address problems and concerns relating to staffing and workloads.
- Review and discuss methods of reducing the cost of providing high quality patient care.
- To discuss other concerns of mutual interest as they relate to patient care.

REFUSAL OF WORK ASSIGNMENT:

1. A licensed nurse or Certified Nursing Assistant (CNA) refusing an assignment will communicate specific conditions concerning the request in the following manner:
 - a. Will report to his/ her immediate supervisor or person in charge, in writing, that he/she does not possess the knowledge, skill or experience to comply with an assignment to provide nursing services to a patient as defined in NRS 449.205, Section 1, Subsection 1(b), as verified by documentation in the education and/or personnel file of the licensed nurse or CNA – concerning his/her competence to provide various nursing services to the patient, unless the refusal constitutes unprofessional conduct as set forth in NRS 632 or any regulations adopted pursuant thereto (see attached form).
 - b. Will provide notice, prior to accepting an assignment, to the immediate supervisor or person in charge of the licensed nurse or CNA prior to accepting an assignment within 30 minutes of the start of the shift.
 - c. If a licensed nurse or CNA is assigned a position or task for which he/she feels unqualified or unsuited, he/she should immediately express such concerns to the immediate supervisor or person in charge.
 - d. The immediate supervisor or person in charge will assess options and then seek to remedy the situation or relieve the licensed nurse or CNA from their work assignment.
 - e. If no possible alternatives are identified, the immediate supervisor, or person in charge will contact his/her immediate supervisor on duty.
 - f. The nursing supervisor will review the written request and attempt to resolve the situation using available resources he/she determines appropriate.
 - g. Documentation of the "Refusal to Work Assignment" will be submitted to the Staffing Council for review and scoring of substantiated or unsubstantiated, and

reviewed for trends by reviewing number of Refusal to Work Assignment forms filed by a licensed nurse or CNA.

- h. If the nursing supervisor fails to approve the request without proposing a remedy, or a remedy is proposed but inadequate or untimely, the licensed nurse or CNA can file a formal complaint with the Health Division within 45 business days from the date of refusal, if the licensed nurse or CNA feel, in good faith, the refusal meets the condition of the written policy for refusal of assignment.

ASSIGNMENT DISPUTE OBJECTION:

1. A licensed nurse or CNA may file an objection to a work assignment if it violates any provision of NRS 449.241 to 449.2421 concerning the establishment and requirements of a staffing council and a staffing plan.
 - a. Licensed nurse or CNA will report to his/her immediate supervisor or person in charge, in writing; the reason(s) for objecting to a work assignment
 - b. The immediate supervisor will assess options and then seek to remedy the situation.
 - c. If no possible alternatives are identified, the immediate supervisor, or person in charge will contact his/her immediate supervisor on duty.
 - d. The nursing supervisor will review the written request and attempt to resolve the situation using available resources he/she determines appropriate.
 - e. If the licensed nurse/CNA is dissatisfied with the decision of the supervisor, the licensed nurse/CNA may initiate an Assignment Objection or Refusal form prior to the end of the shift, but still accept the work assignment, despite the objection.
 - f. The facility should respond to the objection as soon as practicable, but no later than calendar 45 days after receiving the objection.
 - g. The objection will be submitted to the Staffing Council, reviewed, and scored as substantiated or unsubstantiated, and reviewed for trends by reviewing number of Objections to Work Assignment forms filed by a licensed nurse or CNA.
 - h. The Staffing Council will provide a response to the licensed nurse/CNA regarding an explanation of how UMC addressed the concern.

PROCEDURE FOR ADO / REFUSAL OF ASSIGNMENT FORM:

1. ADO / Refusal of Assignment form will be available in a designated place on each unit or department.
2. Each licensed nurse or CNA will complete a separate form.
3. Name, title, signature, date and time will be required at each level in the chain of command with response at each level within 5 business days.
4. After form has been reviewed by Chief Nursing Officer, it will be placed on agenda for next Staffing Council meeting.
5. Completed form will be reviewed by Staffing Council within calendar 45 days.
6. Form will be marked 'Substantiated' or 'Unsubstantiated'.
7. Feedback will be given to the original claimant; claimant will have opportunity to address the conclusions of the Staffing Council at the next meeting by requesting their name be placed on agenda.
8. The number of substantiated and unsubstantiated forms will be reported quarterly at the Staffing Council and reviewed for trends, system issues, and recommendations for change.
9. SEIU and UMC Nursing will maintain individual logs including employee name, form number, department, date and time. Logs will be maintained for two years.

10. Logs will be submitted to this council as needed.
11. For tracking purposes, only original forms (no copies) will be reviewed by the Staffing Council. Do NOT duplicate.

REPORTING:

- The Chief Nursing Officer will ensure that a written report is prepared concerning the establishment of the staffing council, the activities and progress of the staffing council and a determination of the efficacy of the staffing council.
- The CNO or designee shall submit the report to the Nevada Hospital Association on or before December 15th.
- Nevada Hospital Association is currently assisting annually with the collection and forwarding of the annual reports on or before December 31st of each even numbered year to the Director of the Legislative Counsel Bureau for transmission to the next regular session of the legislature and in odd numbered years to the Legislative Committee on Health Care.
- All records are maintained for a minimum of two years

9.0) References:

University Medical Center & Service Employees International Union Agreement, Article 34
NRS Chapter 449 Section 2-13

Pursuant to NRS 449.242, each member of the staffing council by signing this document indicates the member has received a copy of the written Staffing Council & ADO/Refusal of Assignment Policy I-191 and has actively participated in the development of this written policy.

April Williams
Patricia Williams
Cheryl Wright RN
Risalefinski
Debra Joy, Chairperson
Terrell
Michael J. Miller (Lyon Med / Surg Alternate)
W. J. Du - Adult ED
Ann Phommavong RN @ South (Bill Schrammacker)
Harley Anderson - Cardiology
M. P. M. (Michael P. Mearns)
Maryann Fondrissi
Harley (Nikki) Lagarina - Pediatric
Christine Williams - CNA
Jennifer Christensen RN
Rebecca Thompson RN
Mary Y. Smith CNA
Nicole Diaz, RN perip services
Elizabeth Bolhouse - P&U - co-chair
Rebecca Thomas - RNCOB - Rebecca Thomas Perinatal
Marietta Miller - CNA
Carol James RN CM
Caitlin Hanel
R. Park Richard Kluske
Paula Wagoner
Paula Wagoner CNA
Maureen Bell CNA
Janet Thomas RN
Alison RN
Christine J. M. 10/28/21
U. B. Piche IPS O'S
Chris Mearns
DAK

Staffing Council Nomination & Election Guideline
2021

- Election to be conducted to fulfill NRS 449, UMC Policy I 191 and Staffing Council Charter.
- Self-Nomination form to be emailed to all nurses and CNA's in Ambulatory Clinics and discussed in huddles. Instructions provided to submit self-nomination by emailing both the CNO, Staffing Council Chair, and SEIU Chief Nursing Steward, Staffing Council Co-Chair, and include name and which area you wish to represent. Nomination period will be October 18, 2021 – November 1, 2021.
- Nominations will be gathered and verified and draft ballot developed. Verification that all categories are represented for voting. If not all filled, nominations will be reopened for those specific areas only with a one -week deadline to complete full ballot. (November 2 – November 5, 2021 if needed)
- Draft electronic ballot will be validated by Chair & Co-Chair to ensure all nominees included and proper layout. (Ballot prep & review November 2 - November 5, 2021)
- Electronic ballot application to serve as ballot. Voting Period is three days per NRS. Council has chosen Wednesday November 10, Thursday November 11, Friday November 12, 2021. The nominees per area will be arranged alphabetically by last name. Voting is restricted to your assigned nursing department with instructions to vote for one from the category you represent.
- Member will be elected by majority vote in both nurse, CNA and alternate categories.
- Election results will be validated by Chair & Co-Chair and announced via Memo, email, huddle, personal contact of members, CNO video. Staffing council notification will also be completed – Monday November 15, 2021
- Staffing council meeting invite will be updated with all newly elected members.
- Nominations and election will be conducted for any vacancies as they occur in the future.

**SHARED LEADERSHIP STAFFING COUNCIL MEETING
MINUTES
January 25, 2021**

TOPIC	DISCUSSION	CONCLUSION	FOLLOW-UP
COUNCIL MEMBERSHIP ATTENDEES VIA WEB-EX DUE TO COVID-19			
Staff: Co-Chair: Elizabeth Bolhouse, SEIU Chief Nursing Steward/PICU RN Surgical Services: Mary Zuniga, CNA Case Management: Carol James RN Quick Cares: Christine Gal RN, Blue Diamond Lisa Renfro RN, Centennial Medical Surgical: Janacein Amadi, 4 South RN (Excused) Maternal Child: Tania Taylor, Perinatal RN, (Excused) Management: Deb Fox, ACNO Roshele Ward, 5 South Manager Rebecca Thomas, Perinatal Manager Richard Kraski, Blue Diamond Quick Care Manager Harley Anderson, EKG/EEG Manager Cathleen Hamell RN, Clin. Director Prof. Practice (Non-Voting) William Schoonmaker RN, 2 South Manager (Excused) Valarie Burnett, PICU Manager (Excused)			
CALL MEETING TO ORDER AT 1338.			

TOPIC	DISCUSSION	CONCLUSION	FOLLOW-UP
Review/Approval of Minutes	December 2020 Minutes reviewed.	Minutes approved.	None at this time.
Welcome & Introductions	Welcome to all attendees. Quorum achieved: 50% composition of staff and management. Web Ex participation due to Covid-19.	*Quorum achieved.	None at this time.
Old Business	A. First Generation Rubric to be maintained for now. Second generation rubric designed to capture reasons in narratives for the filing of the ADO's but unsuccessful. Deb Fox and Cathy Hamell plan to introduce a third-generation rubric in next month's meeting for Council to review as categories and level of severity remain a rubric refinement concern.	Discard second-generation rubric. Use First Generation. Await development of third generation rubric.	Follow up next month.
New Business	None		Re-assess next month.
ADO Review & Scoring @1348	<u>ADO SCORING</u>		
First Generation Rubric	A. ADO# Jan001: 5 South CNA, Days, 8/1/20 Reason: Inadequate RN/patient ratio, insufficient support staff, threat to my health/safety, other: Patient care safety. Rubric Score: 4, Substantiated, severity low. <u>SUBSTANTIATED</u>		Follow trend reports. Follow up next month.
	B. ADO# Jan002: 5 South RN, Days, 8/1/20 Reason: Inadequate RN/patient ratio, insufficient support staff, other: Patient care safety. Rubric Score: 4, Substantiated, severity low. <u>SUBSTANTIATED</u>		
	C. ADO# Jan003: 5 South CNA, Days, 8/1/20 Reason: Inadequate RN/patient ratio, insufficient support staff, threat to my health/safety, other: Patient care safety. Rubric Score: 4, Substantiated, severity low. <u>SUBSTANTIATED</u>		

TOPIC	DISCUSSION	CONCLUSION	FOLLOW-UP
	D. ADO# Jan004: 5 South, CNA, Days, 8/1/20 Reason: Inadequate RN/patient ratio, insufficient support staff, threat to my health/safety, other: Patient care safety. <u>SUBSTANTIATED</u> E. ADO# Jan005: 5 South, RN, Days, 8/10/20 Reason: Inadequate RN/patient ratio, insufficient support staff, other: insufficient staff due to high acuity impacting patient care. Rubric Score: 3, Substantiated, severity low <u>SUBSTANTIATED</u> F. ADO# Jan006: 3 South, RN, Days, 8/24/20 Reason: Charge RN unable to perform Charge duties, Inadequate RN/patient ratio, insufficient support staff/missed breaks/meal period/threat to my safety. Rubric Score: 5, Substantiated, severity low. <u>SUBSTANTIATED</u> G. ADO#6: Trauma ED, Charge RN, Nights, 9/21/20 Reason: Charge RN unable to perform Charge duties, Inadequate RN/patient ratio, insufficient support staff. Rubric Score: 6, Substantiated, severity low. <u>SUBSTANTIATED</u> H. ADO#16: Burn Care RN, Nights, 10-6-20 Reason: Insufficient support staff, missed meal/rest breaks. Rubric Score: 3, Substantiated, severity low. <u>SUBSTANTIATED</u> *8 ADO's scored this meeting: * Existing Rubric: 8/8 substantiated.		
Items to forward to Congress	January council minutes.	Minutes to be forwarded	None

TOPIC	DISCUSSION	CONCLUSION	FOLLOW-UP
MEETING ADJOURNED:	Meeting adjourned around 1534 pm. Next meeting – February 22, 2021 1:30-3:30pm, via Web-EX		

Submitted by: Elizabeth Bolhouse JD, BSN, RN
Chair: Deb Fox, CNO

Recorder: Elizabeth Bolhouse

**SHARED LEADERSHIP STAFFING COUNCIL MEETING
MINUTES
April 19, 2021**

TOPIC	DISCUSSION	CONCLUSION	FOLLOW-UP
COUNCIL MEMBERSHIP ATTENDEES VIA WEB-EX DUE TO COVID-19 Staff: Co-Chair: Elizabeth Bolhouse, SEIU Chief Nursing Steward/PICU RN Ambulatory/Quick Cares: Lisa Renfro RN Case Management: Carol James RN Medical-Surgical: Janecein Amadi RN, Mary Bengson RN Surgical Services: Rowena Bengson RN, Nicole Plaza RN. Maternal Child Attendee: Ann Burrell RN Management: Debra Fox, CNO Cathleen Hamell RN, Clin. Director Prof. Practice Rebecca Thomas RN, Perinatal Manager Richard Kraske RN, Blue Diamond Off Site Location Roshelle Ward, 5 South Manager Nancy "Nikki" Legaspina, SICU Manager (left at 1422)			
CALL MEETING TO ORDER AT 1334.			

TOPIC	DISCUSSION	CONCLUSION	FOLLOW-UP
Review/Approval of Minutes	March 2021 Minutes reviewed.	Minutes approved @1336.	None at this time.
Welcome & Introductions Welcome to all attendees. Quorum achieved: Staff with greater than 50% composition of staff and management. Web Ex participation due to Covid-19. Old Business Respiratory Therapy System Issue ADO follow rescheduled to May 2021 meeting. Rubric revision still in progress. Sub-committee volunteers sought. Deb Fox would like the rubric to cross-reference patient impact, MERTS, PSNs, Staffing Sheet as currently the RN/CNA narrative is the primary source of information for scoring. NRS 449 requires publicly reported data. Perinatal Manager, Rebecca Thomas, CNO Debra Fox, Director of Professional Practice, Cathleen Hamel, and PICU Weekend Charge RN/SEIU Chief Nursing Steward for UMC, Liz Bolhouse, volunteer to work on rubric draft to present to Safe Staffing Council for input/approval. (Post Meeting Note: Ann Burrell, Peds ER Charge RN, volunteered after the meeting to join the revision effort.). Follow up on changing Staffing Council to include interprofessional groups was not addressed this month. New Business CNO Staffing Summits start this evening, 4/19, to discuss the reimplementation date of mandatory over-time for RNs and CNAs. Safe Staffing Council to receive update next month on status of staffing/mandatory OT use in Nursing. ADO Review & Scoring @1355 (Existing Rubric only) <u>ADO SCORING</u> A. ADO# 2921: MICU, RN, Night Shift, 12/31/20 Reason: Inadequate RN/patient ratio/patient acuity, Outside current competency. Existing Rubric Score: 9, substantiated, moderate severity. <u>SUBSTANTIATED</u> B. ADO# 2869: Burn Care Unit, RN, Nights, 12/31//20 Reason: Charge RN unable to perform duties; Insufficient support staff.			None at this time. Follow up next month. Follow up next month. Follow up next month. Follow up next month.

TOPIC	DISCUSSION	CONCLUSION	FOLLOW-UP
	Existing Rubric Score: 7, substantiated, low severity. <u>SUBSTANTIATED</u> C. ADO# 2870: Burn Care Unit, RN, Nights, 12/31//20 Reason: Inadequate RN/patient ratio/patient acuity. Existing Rubric Score: 7, substantiated, low severity. <u>SUBSTANTIATED</u> D. ADO# 2874: Burn Care Unit, RN, Nights, 12/31//20 Reason: Charge RN unable to perform duties; Inadequate RN/patient ratio; missed meal/rest breaks. Existing Rubric Score: 7, substantiated, low severity. <u>SUBSTANTIATED</u> E. ADO# 32: 3 South, RN, Nights, 11/15//20 Reason: Charge RN unable to perform duties; Inadequate RN/patient ratio; Insufficient support staff.; Equipment missing. Existing Rubric Score: 12, substantiated, moderate severity. <u>SUBSTANTIATED</u> F. ADO#42: 3 South, RN, Nights, 11/15//20 Reason: Charge RN unable to perform duties; Inadequate RN/patient ratio; Insufficient support staff.; missed meal/rest breaks. Existing Rubric Score: 12, substantiated, moderate severity. <u>SUBSTANTIATED</u> G. ADO#45: 3 South, RN, Nights, 11/15//20 Reason: Inadequate RN/patient ratio; Insufficient support staff. Existing Rubric Score: 12, substantiated, moderate severity. <u>SUBSTANTIATED</u> H. ADO#47: 3 South, RN, Nights, 11/15//20 Reason: Charge RN unable to perform duties; Inadequate RN/patient ratio; Insufficient support staff; missed meal/rest breaks. Existing Rubric Score: 12, substantiated, moderate severity. <u>SUBSTANTIATED</u> I. ADO#48: 3 South, RN, Nights, 11/15//20 Reason: Inadequate RN/patient ratio; Insufficient support staff; missed meal/rest breaks; mandatory overtime.		

TOPIC	DISCUSSION	CONCLUSION	FOLLOW-UP
	Existing Rubric Score: 12, substantiated, moderate severity. <u>SUBSTANTIATED</u> J. ADO#46: 3 South, CNA, Nights, 11/16//20 Reason: Inadequate RN/patient ratio; missed meal/rest breaks. Existing Rubric Score: 5, substantiated, severity low. <u>SUBSTANTIATED</u> K. ADO#52: 3 South, RN, Days, 11/17/20 Reason: Charge RN unable to perform duties; Inadequate RN/patient ratio; Insufficient support staff. Existing Rubric Score: 14, substantiated, severity moderate. <u>SUBSTANTIATED</u> L. ADO#49: 3 South, RN, Days, 11/17/20 Reason: Outside scope/competency; Inadequate RN/patient ratio; Insufficient support staff; serious threat to my and patient safety, missed meal/rest breaks; system failure. Existing Rubric Score: 14, substantiated, severity moderate. <u>SUBSTANTIATED</u> * 12 ADO's scored this meeting: * Existing Rubric: 12/12 substantiated.		
Items to forward to Congress	April Council minutes.	Minutes to be forwarded	None
MEETING ADJOURNED:	Meeting adjourned around 1523 pm. Next meeting – May 17, 2021 1:30-3:30pm, via Web-EX		

Submitted by: Elizabeth Bolhouse JD, BSN, RN
Chair: Deb Fox, CNO

Recorder: Elizabeth Bolhouse

**SHARED LEADERSHIP STAFFING COUNCIL MEETING
MINUTES
August 16, 2021**

TOPIC	DISCUSSION	CONCLUSION	FOLLOW-UP
COUNCIL MEMBERSHIP ATTENDEES VIA WEB-EX DUE TO COVID-19 <u>Staff:</u> Co-Chair: Elizabeth Bolhouse, SEIU Chief Nursing Steward/PICU RN Ambulatory/Quick Cares: Lisa Renfro RN Case Management: Carol James RN Surgical Services: Mary Lunaga RN, Maternal Child: Tania Taylor RN Medical-Surgical: Janecein Amadi RN, Mary Bengson RN <u>Attendee:</u> Ann Burrell, Peds ER <u>Management:</u> Debra Fox, CNO Cathleen Hamell RN, Clin. Director Prof. Practice Rebecca Thomas RN, Perinatal Manager Richard Kraske RN, Blue Diamond Off Site Location			
CALL MEETING TO ORDER AT 1337.			

TOPIC	DISCUSSION	CONCLUSION	FOLLOW-UP
Review/Approval of Minutes	May 2021 Minutes reviewed.	Minutes approved @1339.	None at this time.
Welcome & Introductions Welcome to all attendees. Quorum achieved: Staff with greater than 50% composition of staff and management. Web Ex participation due to Covid-19. This meeting meets NRS third quarter meeting requirement as June meeting cancelled due to UMC cyber-attack. July meeting cancelled due to Census Capacity. Old Business ADO Form/Rubric revision recommendations. Review of Proposed new ADO form. Sub-group of Council met to revise form and pull valuable data from other healthcare group reporting tools to incorporate into our own. California Nurses Association has key instructions on their form to guide completion of each section. UMC electronic form may not have space to include the greater detail instructions but UMC will strive to include a printed reference form in the ADO binder on each unit. Rich Kraske mentioned new form is improved yet still main campus focused. Deb offered to share outpatient focused forms and Council voiced desire to review at next meeting. Council voted to trial new ADO form and will work on roll-out/staff education plan at next Council meeting. New Scoring Rubric to be revised. Scoring ranges to be adjusted. "Reason for ADO" category score appears generous. "Workload intensity" appears not generous enough and "Skill mix" scoring category needs clarification of score determination. Will discuss proposals for change at next council, 9/20/21. New Business Ambulatory Services and Maternal Child have upcoming election to replace vacant Safe Staffing Council seats. Ambulatory has an RN/LPN or CNA Alternate opening and a CNA opening. Maternal Child has a CNA opening. Self-nomination period will start 8/23/21. If no nominations, will re-open nominations from 9-7 through 9/13/21. Voting will occur over three days as per NRS. The three days will be Wednesday, Thursday and Friday (9/15, 9/16, and 9/17). Voting will occur only within each assigned division This election process was motioned for approval by Liz Bolhouse and confirmed via a second affirmation by Carol James. Once election done the new members will sign the Safe Staffing council policy to comply with NRS 449.			None at this time. Follow up 9/2021 Follow up next month. Follow up next month.

TOPIC	DISCUSSION	CONCLUSION	FOLLOW-UP
ADO Review & Scoring @1443 (Rubric with revision date: 7/17/17)	<u>ADO SCORING</u> A. ADO#3112: SICU, RN, PM Shift, 2/26/21 Reason: Inadequate RN/patient ratio/patient acuity, outside level of competency. Rubric Score: Did not score/RN refused mitigation offer of changing assignment. <u>NOT SCORED: Mitigation Declined.</u> B. ADO# 0095: 1400 CNA, Day Shift, 3/25/21 Reason: Inadequate RN/patient ratio/patient acuity, insufficient support staff, other: always assigned 1401-1409. Rubric Score: 0. <u>UNSUBSTANTIATED</u> C. ADO# 2756: 2 South, RN, PM Shift, 4/21/21 Reason: Charge RN unable to perform duties Rubric Score: 8 <u>SUBSTANTIATED</u> D. ADO# 2762: 2 South, RN, PM Shift, 4/21/21 Reason: Charge RN unable to perform duties Rubric Score: 8 <u>SUBSTANTIATED</u> E. ADO# 2757: 2 South, RN, PM Shift, 4/21/21 Reason: Charge RN unable to perform duties Rubric Score: 8 <u>SUBSTANTIATED</u> F. ADO# 2763: 2 South, RN, PM Shift, 4/21/21 Reason: Charge RN unable to perform duties Rubric Score: 8 <u>SUBSTANTIATED</u> G. ADO# 2761: 2 South, RN, PM Shift, 4/21/21 Reason: Charge RN unable to perform duties, insufficient support staff Rubric Score: 8 <u>SUBSTANTIATED</u>		

TOPIC	DISCUSSION	CONCLUSION	FOLLOW-UP
	* 7 ADO's scored this meeting: * 5 Substantiated. * 1 Unsubstantiated * 1 Not Scored as Mitigation declined.		
Items to forward to Congress	August Council minutes.	Minutes to be forwarded	None
Discussion			
MEETING ADJOURNED:	Meeting adjourned around 1530 pm. Next meeting – September, 20, 2021 1:30-3:30pm, via Web-EX		

Submitted by: Elizabeth Bolhouse JD, BSN, RN
 Chair: Deb Fox, CNO

Recorder: Elizabeth Bolhouse

**SHARED LEADERSHIP STAFFING COUNCIL MEETING
MINUTES
October 18, 2021**

TOPIC	DISCUSSION	CONCLUSION	FOLLOW-UP
COUNCIL MEMBERSHIP ATTENDEES VIA WEB-EX DUE TO COVID-19 <u>Staff:</u> Co-Chair: Elizabeth Bolhouse, SEIU Chief Nursing Steward/PICU RN <u>Ambulatory/Quick Cares:</u> Lisa Renfro RN <u>Surgical Services:</u> Rowena Bengson RN, Mary Zuniga CNA <u>Maternal Child:</u> Tania Taylor RN <u>Medical-Surgical:</u> Janecein Amadi RN <u>Management:</u> Debra Fox, CNO Cathleen Hamell RN, Clin. Director Prof. Practice Rebecca Thomas RN, Perinatal Manager			
CALL MEETING TO ORDER AT 1334.			

TOPIC	DISCUSSION	CONCLUSION	FOLLOW-UP
Review/Approval of Minutes	September 20, 2021 Minutes reviewed. Motion to approve by Tania Taylor and Rebecca Thomas.	Minutes approved @1334.	None at this time.
Welcome & Introductions Old Business New Business ADO Review & Scoring @1447 (Rubric with revision date: 7/17/17)	Welcome to all attendees. Quorum achieved: Staff with greater than 50% composition of staff and management. Web Ex participation due to Covid-19. ADO Form/Rubric revision: IT will need till December to upload to Intranet due to IT workload. Plan to do training in December and upload form for use in January 2022 to start new rubric comparison with new quarter data. Election Update: Third attempt for elections will be November 10, November 11, and November 12 with election results hopefully to be announced at next Safe Staffing Council meeting on 11/15/21. Unable to secure nominations for Ambulatory CNA or alternate RN/CNA and unable to obtain Maternal Child CNA nomination. (Of note: Pediatrics is the only Maternal Child department that has CNA staff.). Maternal Child Alternate Nadine wants to stay alternate. Lisa Renfro states off-sites having shared governance meeting this week and she will encourage staff to run for election. Deb Fox states if this third election is unsuccessfully Council will need to address/record plan going forward to document attempt at NRS 449 compliance. New Safe Staffing Council meeting time will be 2:30-4:30 pm going forward. <u>ADO SCORING:</u> Scoring August ADOs at Council with two remaining from July. A. ADO#2924: MICU RN, Day Shift, 7/26/21 Reason: Inadequate RN/patient ratio/patient acuity. Rubric Score:5, severity low. <u>SUBSTANTIATED</u> B. ADO#148: 5 South RN, Day Shift, Reason: Inadequate RN/patient ratio, Insufficient support staff. Rubric Score: 3, severity low. <u>SUBSTANTIATED</u>		None at this time. Follow up 10/2021 Follow up next month.

TOPIC	DISCUSSION	CONCLUSION	FOLLOW-UP
	C. ADO#:160: PICU, Days RN Reason: Charge RN unable to perform charge duties, Inadequate RN/patient ratio, Insufficient support staff. Rubric Score: 6, severity low. <u>SUBSTANTIATED</u> D. ADO#02395: Adult ED RN, PM shift, 8/10/21 Reason: Inadequate RN/patient ratio, Insufficient support staff, missing equipment, missed meal/rest breaks. Rubric Score: 14, severity moderate. <u>SUBSTANTIATED</u> E. ADO#153: Adult ED RN, PM shift, 8/15/21 Reason: Inadequate RN/patient ratio, missing equipment, serious threat to RN safety, missed meal/rest breaks. Rubric Score: 14, severity moderate. <u>SUBSTANTIATED</u> F. ADO#152: Adult ED RN, PM shift, 8/15/21 Reason: Inadequate RN/patient ratio, missing equipment, serious threat to RN safety, missed meal/rest breaks. Rubric Score: 14, severity moderate. <u>SUBSTANTIATED</u> G. ADO#158: Adult ED RN, PM shift, 8/15/21 Reason: Inadequate RN/patient ratio, missing equipment, Serious threat to RN safety, missed meal/rest breaks. Rubric Score: 14, severity moderate. <u>SUBSTANTIATED</u> H. ADO#159: Adult ED RN, PM shift, 8/15/21 Reason: Inadequate RN/patient ratio, Insufficient support staff, missing equipment, missed meal/rest breaks. Rubric Score: 14, severity moderate. <u>SUBSTANTIATED</u> I. ADO#155: Adult ED RN, PM shift, 8/15/21 Reason: Inadequate RN/patient ratio, missing equipment, Serious threat to RN safety, missed meal/rest breaks.		

TOPIC	DISCUSSION	CONCLUSION	FOLLOW-UP
	Rubric Score: 14, severity moderate. <u>SUBSTANTIATED</u> J. ADO#154: Adult ED RN, PM shift, 8/15/21 Reason: Inadequate RN/patient ratio, missing equipment, missed meal/rest breaks. Rubric Score: 14, severity moderate. <u>SUBSTANTIATED</u> K. ADO#151: Adult ED RN, PM shift, 8/15/21 Reason: Inadequate RN/patient ratio, missing equipment, serious threat to RN safety, missed meal/rest breaks. Rubric Score: 14, severity moderate. <u>SUBSTANTIATED</u> L. ADO#150: Adult ED RN, PM shift, 8/15/21 Reason: Inadequate RN/patient ratio, missing equipment, missed meal/rest breaks. Rubric Score: 14, severity moderate. <u>SUBSTANTIATED</u> M. ADO#00124: CDS Overflow Unit, PM shift, 7/25/21 (CVCU Charge RN) Reason: Charge RN unable to do duties. Rubric Score: 7, severity low. <u>SUBSTANTIATED</u> * 13 ADO's scored this meeting: * 13 Substantiated. * 0 Unsubstantiated.		
Items to forward to Congress	October Council minutes.	Minutes to be forwarded	None
MEETING ADJOURNED:	Meeting adjourned around 1625 pm. Next meeting – November 15, 2021 2:30-4:30pm, via Web-EX		

Submitted by: Elizabeth Bolhouse JD, BSN, RN
Chair: Deb Fox, CNO

Recorder: Elizabeth Bolhouse