2023 State Staffing Committee Summary Report

Sunrise Hospital & Medical Center | Sunrise Children's Hospital

3186 S. Maryland Parkway Las Vegas, NV 89109

Staffing Committee Established: Yes

Committee Composition:

Administration/Leadership Staffing Committee Membership:

- Chief Nursing Officer (CNO)
- Assistant CNO (ACNO) Adult Hospital
- ACNO Children's Hospital
- Hospital Nursing Directors

Committee Members:

- Include RNs and Patient Care Technicians (PCT)s from our five (4) designated service lines:
  - Adult Medical-Surgical (including Rehabilitation and Outpatient Observation)
  - Surgical and Diagnostic Services
  - Women's and Children's Services
  - Emergency Department / Critical Care

Guest(s):
Nursing Director(s) as requested

Staff Participants		
Jacqueline Likert, RN (MICU) ED/Critical Care	Nimsie Moscoso, PCT (MOU) Medical-Surgical/Rehab	Terese Elliot, RN (MIU) Women's & Children's
Jacob Montes, PCT (MICU) ED/Critical Care	Robert Petersen, RN (PACU) Surgical Services	Kisha Krieg, PCT (CICU) Women's & Children's
Haidee Bersamin, RN (MOU) Medical-Surgical/Rehab	Sonia Lopez, PCT (Pre-Op) Surgical Services	Stephanie Bouschet (AED) ED/Critical Care
Leadership Participants		
Michelle Bookout CNO, Admin	Sarah Blazwich Director, Critical Care	Sharon Quarantello (Secretary) Manager, MIU
Bonnie Kuckenbecker (Chair) ACNO, Admin	Kristen Coy Manager, Surgical Services	
Magdalena Alvarez Director, Medical-Surgical	Karen Hale Director, Womens & Childrens	

Committee Meeting Frequency: The staffing committee meets quarterly. Dates are established for the year and relayed during the initial meeting following elections.

Committee Activity:

- Discussed mission, vision and values of Sunrise. In addition, mission moments were shared of how our staff are making a difference in the lives of the patients we serve.
- Review of Policy NSG.001 Staffing Committee Charter
- Review of Policy ORG.2401 Nursing Services Staffing Plan
    - Approved with no changes
- 2022 RN vacancy rate – 28% with 465 open RN positions
    - 4Q2023- 18%
    - 1Q2023- 17.5%
    - 2Q2023- 13.8%
    - 3Q2023- 11.8% with 89 open RN positions

- Discussed and considered the number of refusals and objections to work assignments, reviewing concerns and examining possible trends.
    - 4Q 2022 – total 129
    - 1Q 2023 – total 342
    - 2Q 2023 – total 211
    - 3Q 2023 – total 8
- Discussed growth of the organization:
    - 32-bed satellite unit to support overflow
    - Established formal throughput committee meets monthly

Committee Efficacy:

The State Staffing Committee at Sunrise has been instrumental bringing forth challenges identified in each respective service line. In January we notified all RN's and PCT's of the upcoming elections and purpose of the State Staffing Committee. Staff were given 1-week to provide their input on department elections. Final selections were made via web-based survey. The Nominee Consent to Serve states, *"We believe that those who are closest to patient care are the best participants in how to improve health care outcome and the practice environment."* The staffing committees' purpose is to collaborate and promote a safe and healing environment for patients, staff and families; setting the platform for commitment and participation.

With a successful election process, our representatives were identified for Adult Medical Surgical, Surgical and Diagnostic Services, Women's and Children's Services and Emergency Department/Critical Care Services. The representatives were active participants who gave a voice to Crisis Standards of Care, staffing alternatives, teamwork and staff engagement.

All meetings began with the hospital mission and an opportunity to share mission moments connecting all back to purpose. As a standing agenda item, ADO's were discussed including action items to support the RN vacancy rate. ADO trends consisted of the following:

- Staffing out of ratio
- Exceeding hospital capacity requiring inpatient staff to float to the ED or satellite care areas to care for hold patients
- Significant vacancy gap and challenge recruiting to Level IV NICU

Aggressive action steps were taken to close the vacancy gap. Below is a summary:

- Alternate Models of Care – the LPN model was implemented in a total of 2 Med/Surg Units
- Nurse Extern support –a total of 160 Nurse Externs throughout all 4 service lines
- Aggressive recruitment of new graduate nurses via mixer style recruitment events – onboarded a total of 398 new graduate nurses (total 463 RN hired)

In addition, Sunrise supported implementing Point of Care Testing for all Patient Care Technicians as a means to alleviate workload burden of the RN. This was extremely successful for both parties.

Finally, to receive an overall understanding of the staffing objective, the minutes of the staffing Committee remain as a standing agenda item. This discussion provided cohesiveness to the staffing topics and helped to bridge the gap in understanding the correlation of staffing challenges and successes. Nursing leadership focused diligently on staff retention by conducting quarterly roaming Town Halls, CNO/ACNO Coffee-Pop Ups, Nurse Executive Rounds, and monthly Walk in Your Worlds. As a result of our Recruitment and Retention efforts, we saw a significant drop in the number of ADOs received in 3Q23; going from 342 in 1Q23 down to only 8 in 3Q23. Last minutes relayed a reduction in overall RN vacancy rate to 11.8% and <49 open positions. In addition, overall nursing engagement has increased from 65% in 2022 to 69% in 2023.

Signature of Responsible Party(s):

Magdalena Alvarez		12/8/23
Print Name (Management)	Signature	Date

Stephanie Bouschet		12/8/23
Print Name (Bedside Staff RN/PCT)	Signature	Date

SUNRISE HOSPITAL & MEDICAL CENTER / SUNRISE CHILDREN'S HOSPITAL	**NSG.001** **Staffing Committee Charter**
Last Reviewed: (11/2013); 11/2014; 11/2016; 12/2017; 11/2018; 01/2019; 12/2019; 11/2020; 09/2021; 01/2023	**Replaces Policy Dated:** 11/2013; 11/2014; 11/2016; 12/2017; 11/2018; 01/2019; 12/2019; 11/2020; 09/2021
HCA Effective Date: N/A	**Approved by BOT:** 11/2014; 11/2016; 01/2018; 02/2019; 12/2019; 11/2020; 11/2021; 02/2023
Submitted by: Senior Nursing Leadership	**Page 1 of 3**

PURPOSE
Provide guidelines, define activities, and responsibilities of the Staffing Committee

SCOPE
All nursing personnel and administration

POLICY
A. Staffing Committee has been formed to address issues and concerns of Registered Nurse (RN) staff and Patient Care Technicians (PCT) who provide direct nursing care and management of Sunrise Hospital & Medical Center | Sunrise Children's Hospital (SHMC|SCH).

Staffing Committee
A. Nevada Revised Statutes (**NRS) 449.242 Establishment of staffing committee by certain hospitals in larger counties; membership; duty to develop documented staffing plan; duty to consider certain requests; quarterly meetings; reporting to Legislature.**
B. Each hospital located in a county whose population is 100,000 or more and which is licensed to have greater than (>) 70 beds shall establish a staffing committee to develop a written policy as required pursuant to NRS 449.2423 , and a documented staffing plan as required pursuant to NRS 449.2421.

Service Line(s)/Units as defined by NRS 449.2418
A. See: ORG.2401 Nursing Services Staffing Plan
B. Identified as:
   1. Adult Medical-Surgical (including Rehabilitation and Outpatient Observation)
   2. Surgical and Diagnostic Services
   3. Women's and Children's Services
   4. Emergency Department / Critical Care

Staffing Committee
A. Must consist of:
   1. Not less than (<) one-half (1/2) of the total regular members of the staffing committee from the licensed RN staff and PCTs who are providing direct patient care at hospital.
B. Members described in this paragraph must consist of,
   1. One (1) member representing each service line of the hospital who is a licensed RN who provides direct patient care on that service line, elected by the licensed RN staff who provide direct patient care on the service line that the member will represent.
   2. One (1) member representing each service line of the hospital who is a PCT

who provides direct patient care on that service line, elected by the PCTs who provide direct patient care on the service line that the member will represent.

C. **NRS 449.2418 "Unit" defined.**
   1. "Unit" means a component within a health care facility for providing patient care.
      a. Added to NRS by 2009, 2024

D. **NRS 449.2421 Certain health care facilities in larger counties required to make available to Division written policy that allows refusal of or objection to work assignments and documented staffing plan; requirements of staffing plan and flexibility for adjustments.**

E. As a condition of licensing, a health care facility located in a county whose population is 100,000 or more and which is licensed to have greater than (>) 70 beds shall make available to the Division a written policy adopted pursuant to NRS 449.2423, a documented staffing plan and a written certification that the written policy and the documented staffing plan are adequate to meet the needs of the patients of the health care facility.

F. If the health care facility is a hospital, the written policy and the documented staffing plan must:
   1. Be signed by each member of the staffing committee of the hospital established pursuant to NRS 449.242, to indicate that the member has received a copy of the written policy and the staffing plan and, if applicable, actively participated in the development of the written policy and the staffing plan; and
   2. Include a place where a member of the staffing committee may note any objections to the written policy or the staffing plan.

G. Members as represented by like units per **Service Line** to include:
   1. One (1) member representing each service line of the hospital who is a RN who provides direct patient care on that service line elected by the RN staff who provide direct patient care on the service line that the member will represent.
   2. One (1) member representing each service line of the hospital who is a PCT who provides direct patient care on that service line, elected by the PCT who provide direct patient care on the service line that the member will represent.
   3. Not less than (<) one-half of the total regular members of the staffing committee appointed by the administration of the hospital.
   4. One (1) alternate member representing each service line of the hospital who is a RN or PCT who provides direct patient care on that service line, elected by the RN staff and PCTs who provide direct patient care on the service line that the member represents.

H. Each time a new staffing committee is formed, the administration of the hospital shall hold an election to select the members as described above.

I. Each RN and PCT who provides direct patient care at the hospital must be allowed at least three (3) days to vote for:
   1. Regular member described above who will represent his or her service line and profession; ***and***
   2. Alternate member who will represent his or her service line.

J. If a vacancy occurs in a position on the Staffing Committee a new regular or alternate member, as applicable, must be elected in the same manner as their predecessor.
   1. Staffing Committee vacancy due to:
      a. Less than (<) 50% meeting attendance
      b. Left the organization

c. Change of position and no longer eligible

K. Meeting occur quarterly and include:
1. New policies published and / or reviewed
a. Each member receives a copy of the staffing plan
b. Each member can actively participate in the development of staffing plan
c. Each member may object to proposed plan
i. Objection(s) and approvals are noted in the meeting minutes.

L. Meeting minutes can be found on:
1. Sunrise Intranet ~ Departments ~ Chief Nursing Officer [CNO] ~ Shared Documents ~ Staffing Committee Meetings ~ Minutes ~ Year

M. See: COP.0524 Objection to Work Assignment (ADO)
See: COP.0531 Refusal of Work Assignment

N. Education on NRS 449.242 via HealthStream is provided at New Employee Orientation and annually