

	THE CORPORATION OF HALDIMAND COUNTY		Approved per:	Administrator
	Grandview Lodge			
Department:	Nursing	Subject:	Staffing Plan for Nursing and Personal Care Services	
Effective Date:	July 2011	Policy #:	12-1.3	
Last Revised:	October 2023	Author:	DON	
Last Reviewed:	October 2023	Authority:	Administrator	
Review / Revision History				

TEMPORARY AMENDMENT

Resident Support Aide (RSA) Addition – Temporary staffing change to provide relief during staffing shortages.

Please note: RSA may not be booked in addition to a full staffing compliment as indicated on page 5.

POLICY

It is the goal of Grandview Lodge to continually strive to maintain adequate and appropriate Nursing and Personal Support Services in the Home in accordance with O. Reg 246/22 (35). Annual reviews of the Plan are required and mandatory, and the results shall guide the Home in future decision-making.

PURPOSE

This guideline was developed to identify and describe staffing and workload practices that foster healthy work environments resulting in better outcomes for Nursing and Personal Support Services and the Residents they care for.

The purpose of the Staffing Plan:

- Outline normal staffing mix that is consistent with Resident’s assessed care and safety needs.
- Set out the organization and scheduling of staff shifts when staffing shortages occur.
- Promote continuity of care by minimizing the number of different Staff members who provide Nursing and Personal Support Services to each Resident.
- Provide a contingency plan for Nursing and personal care staffing to address situations.
- Provide guidance for Registered Staff who are in charge of the Home, as well as the Scheduler when attempting to replace Nursing and Personal Support Staff.

PROCEDURE

All Registered Staff in the Home are to be educated on the call-in process, when replacing sick-calls, according to the collective agreements in the Home. This is to be done by the Scheduler on an on-going basis for current Registered Staff, and recorded on Haldimand County Training Record Log Sheets. All new Registered Staff in the Home are to be educated on the call-in process during the orientation phase of employment. All Staff are to sign-off on their orientation checklist once they have received this education and are able to demonstrate their knowledge regarding the call-in process.

All Registered Staff are to review the Charge Nurse Manual found in the Charge Nurse room to familiarize themselves with the roles and responsibilities surrounding the Charge Nurse role.

All Registered Staff in the Home are expected to support each other during times of staffing shortages. This includes circulating throughout the Home and assisting other Registered Staff to complete their duties and ensuring Residents' health and safety. On-going and consistent communication with the Charge Nurse in the Home is mandatory.

Charge Nurses in the Home are to ensure the white board and daily assignment sheet in the employee entrance hallway is continually updated and clearly indicates the name of the Charge Nurse on duty in the Home for ALL shifts in a 24-hour period.

During staffing shortages, and whenever necessary, the Charge Nurse is responsible for consistent and on-going communication with the Director of Nursing or Associate Director of Nursing who will guide and assist where necessary. This communication may be an email for non-urgent updates and should be a telephone call for urgent issues or when there is no RN in the building.

REVIEWING AND UPDATING STAFFING PLAN

The Grandview Lodge Director of Nursing, in collaboration with the Leadership team and Registered Staff, will review this Policy, Procedure, and Plan annually.

STAFFING PLAN PROCEDURE

No RN (Registered Nurse) :

- 1) All attempts are to be made to replace the RN during the affected shift at regular time.
- 2) Call-out RN at regular time starting with part-time and then casual based on seniority.
- 3) If unable to replace at straight time, call-out for overtime starting with Full-time RN, then Part time RN
- 4) If unable to fill the vacancy with RN at overtime, call staffing agency for RN.
- 5) If unable to replace the RN at this point call-out to the RPNs using steps 2 and 3.
Do not call staffing agency for an RPN to act as Charge nurse.
- 6) If unable to replace shift with RPN, the most senior RPN in the building will assume the role of Charge Nurse in the Home on top of their current assignment. The RPN must have at all times, in his/her possession, the Charge Nurse Manual. All staff, in all departments, must be made aware there is no RN in the building, and provided with the name and location of the RPN who is in charge. This is to be done using the white board in the employee entrance hallway. This board must be current and accurate at all times. All staff, in all departments, must report any and all issues/concerns to the RPN in charge.
- 7) The Charge nurse on the previous shift of the vacant RN shift, must inform the Director of Nursing or Associate Director of Nursing (or in their absences, the Administrator) by phone of the shortage as soon as they are aware and will be available phone for the duration of the time where there is no RN in the building.

Shortage of RPN:

- 1) All attempts are to be made to replace the RPN during the affected shift at regular time.
- 2) Call-out RPN at regular time starting with part-time and then casual employees based on seniority.
- 3) If unable to replace at regular time, call-out RPN for overtime starting with Full-time RPN the Part-time RPN.
- 4) If unable to fill the vacancy with RPN at overtime, call RN to fill RPN vacancy at Regular time only starting with Part-time and then casual based on seniority.
- 5) If no RPN or RN available, call staffing agency for an RPN.
- 6) If no agency available, the RAI Coordinator or QA Nurse will fill in the vacant position if Monday to Friday day shift only (0700-1500).
- 7) If it is an evening, night, or weekend, the Charge Nurse will cover the vacant Home Area.
- 8) If no Charge Nurse, the RPN assigned to the adjacent Home Area of the vacant RPN shift will assume responsibility for both Home Areas. Extenuating circumstances and workload may change this assignment, and collaboration with all Registered Staff is to take place to determine high priority needs at the time. All Registered Staff in the Home are expected to assist the Home Area, which is not staffed with a Registered Staff member. All Staff are to work together to ensure optimum care and safety for all Residents. Communication between all Registered Staff in the Home is mandatory throughout the shift. Delegation of care and tasks is to take place when necessary.
- 9) It is mandatory that the Director of Nursing or Associate Director of Nursing (or in their absences, the Administrator) be made aware of the situation so that they are available to assist and guide where needed.

Shortage of Registered Staff on Night Shift:

- Night shift requires six (6) Staff in the building at all times between 2200hrs and 0600hrs, with two (2) of these Staff being Registered Staff.
- Over-time is automatically approved to ensure there are at least two (2) Registered Staff members on night shift.
- The Charge Nurse shall have in his/her possession, the Charge Nurse Manual throughout the entire shift.
- Communication between all Staff throughout the Night shift is mandatory.
- It is mandatory that the Director of Nursing or Associate Director of Nursing (or in their absences, the Administrator) be made aware of the situation by phone so that they are available to assist and guide where needed.

PSW Staffing:

A Home Area will not be considered "working short" should they have four (4) 8-hour PSWs on a DAY shift, and three (3) 8-hour PSWs on EVENING shift. An RSA will be called to work on the Home Area where there is a PSW vacancy, prior to calling staffing agency.

In order to maintain adequate PSW coverage for all shifts, all Home Areas need to have all staff in attendance. See REGULAR AND NORMAL STAFFING PLAN below.

- 1) **When a Home Area has two (2) vacant 8-hour shifts**, the Charge Nurse will direct the most junior staff member on that shift in any Home Area to change their assignment to fill the vacancy. Both these Home Areas will work with a compliment of four (4) 8-hour DAY shifts and three (3) 8-hour EVENING shifts.
- 2) **If a Home area still has two (2) PSW vacancies**, call-out **all** PSW vacancies for a full shift at regular time starting with part-time, then casual based on seniority.
- 3) If no one available, call-out **one (1)** PSW vacancy for full shift at over-time starting with full-time, then part-time based on seniority.
- 4) If no full shift PSWs, use any staff that offered partial shifts at Regular time based on seniority.
- 5) If no full shift PSWs, use any staff that offered partial shifts at Over-time based on seniority.
- 6) If still no PSWs, call-out RSAs.
- 7) If no PSW or RSA, call out to staffing agency.

******If there are two (2) vacant 6-2 shifts, the Charge Nurse will call the 7-3 PSWs to come in for 6-2******

******For Night shift, over-time is automatically approved to ensure there is at least one (1) PSW on each Home area AND one (1) PSW float which totals five (5) PSWs total.******

Night Shift Shortage of Less Than Six (6) Staff in the Home:

After all attempts, including overtime, to replace vacant shift (this includes PSW, RPN, RN, RSA, agency), the Charge Nurse will call the maintenance pager and inform the on-call staff member that they are required to attend work.

REGULAR AND NORMAL STAFFING PLAN:

(This can be found as a reference for all Registered Staff in the Charge Nurse Manual and are laminated for use as a quick reference in all Resident Home Areas)

Please note: these staffing levels are for **each** Home Area, unless specified otherwise below.

Day Shift: (Monday to Sunday):

One (1) Registered Practical Nurse (0700- 1500)

Three (3) 8-hour PSW (0600-1400)

Two (2) 8-hour PSW (0700-1500)

Evening Shift: (Monday to Sunday):

One (1) Registered Practical Nurse (1500- 2300)

One (1) 8-hour PSW (1200-2000)

Two (2) 8-hour PSW (1400-2200)

One (1) 8-hour PSW (1500-2300)

Night Shift: (Monday to Sunday):

One (1) Registered Practical Nurse for HV/BV (2300- 0700)

One (1) Registered Practical Nurse for CV/MV (2300- 0700)

One (1) 8-hour PSW (2200- 0600)

*Two (2) 8-hour PSW floats (HV/BV & CV/MV) (2200-0600)

Charge Nurse:

One (1) Registered Nurse for each shift (0700-1900/1900-0700 or 0700-1500/1500-2300/2300-0700)

******Please remember, it is MANDATORY that six (6) Staff be in the building on ALL Night shifts – NO EXCEPTIONS. Overtime is automatically authorized to ensure this requirement.******

This Policy, Procedure and Staffing Plan has been reviewed by the Administrator, General Manager of Community Services and Resident and Family Councils.

REVIEW/ REVISION HISTORY			
NAME	Review/ Revision Date		Details
	Date		
Director of Nursing	Date	January 2013	Revised
Director of Nursing	Date	April 2014	Reviewed
Director of Nursing	Date	May 2015	Reviewed/Revised
Director of Nursing	Date	May 2016	Reviewed/Revised
Director of Nursing	Date	May 2018	Reviewed/Revised
Director of Nursing	Date	April 2020	Reviewed/Revised
Director of Nursing	Date	October 2020	Revised
Director of Nursing	Date	January 2022	Reviewed/Revised
DON – Kim Eros ADON – Charlotte Hutchinson	Date	July 2023	Reviewed/Revised
DON – Debbie Marks ADON – Charlotte Hutchinson	Date	October 2023	Reviewed/Revised