



Putting the  
Pieces Together

## On-Call and Replacement Staff

Providence Health & Services, Oregon

Presented by

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February 2, 2017



## About Us

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### Eight Acute Care Facilities In Oregon :

- Providence St Vincent Medical Center (Magnet)
- Providence Portland Medical Center (Magnet)
- Providence Willamette Falls Medical Center
- Providence Milwaukie Hospital
- Providence Newberg Hospital
- Providence Hood River Medical Center(Critical Access)
- Providence Seaside Hospital (Critical Access)
- Providence Medford Medical Center

# The Letter of the Law



## OAR 333-510-0125 Replacement Nurse Staffing Requirements

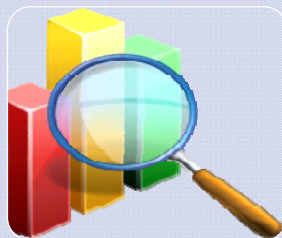
- Hospital maintains and posts/publishes a list of on-call replacements for vacancies & unexpected shortages. List must:
  - Provide sufficient replacements on a regular basis
  - Be available to the person responsible for obtaining replacements
  - On-call lists are defined in OAR 333-510-0002 and can include off-duty staff, nurse staffing agencies, and others
- When developing the list hospital needs to explore all reasonable options and document these efforts
- When a hospital learns of the need for replacements the hospital must make every reasonable effort to secure voluntary replacements before requiring overtime. Hospitals must document efforts to secure voluntary replacements. Reasonable efforts include, but are not limited to:
  - Seeking replacements when the vacancy became known; and
  - Contacting all available resources on the on-call list



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Availability






Visibility



Documentation

## The Providence Experience

		
<p style="text-align: center;"><b><u>Availability</u></b></p> <p style="text-align: center;">Centralized model for daily staffing</p> <p style="text-align: center;">Replacement staff includes Providence FTE and on call staff, Share Care, Agency (Cross Country MSP)</p>	<p style="text-align: center;"><b><u>Visibility</u></b></p> <p style="text-align: center;">Global view allows us to place agency strategically</p> <p style="text-align: center;">Common Software</p> <p style="text-align: center;">Visibility Into Staffing Software</p>	<p style="text-align: center;"><b><u>Documentation</u></b></p> <p style="text-align: center;">SLA</p> <p style="text-align: center;">Legal Compliance</p> <p style="text-align: center;">Regular Audits</p>

## What's Working?

### Audit at PSVMC - ED

### Audit at PSH – House Wide

- In both cases we were able to demonstrate how all available resources were called to fill vacancies
- Leaders in the Staffing Office perform audits to make sure all staff are called to fill vacancies
- Cross Country collaborative partnership with their efforts recorded in Shiftwise

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## Challenges and Solutions



Challenges	Solutions
<ul style="list-style-type: none"> <li>• Some Charge Nurses/House Supervisors want to make the calls themselves and those calls do not get documented in Kronos</li> <li>• Assuring all resources are accessed, including Share Care, outside agency, on-call and FTE staff not currently working</li> <li>• Staff become frustrated because they receive multiple recruitment texts/calls</li> </ul>	<ul style="list-style-type: none"> <li>• Asking for Nurse Leader support in making sure all caregivers understand the requirements for demonstration of compliance with the law</li> <li>• Developed algorithms based on hospital contracts. Close collaboration with Cross Country</li> <li>• Encourage Nurse Leaders to leave recruitment to the staffing coordinators</li> </ul>

## Advice for Others and Lessons Learned



- Do not use paper for any record keeping, use electronic only
- Support for a single “source of truth” that is electronic
- Ensure that all caregivers understand their role with the staffing law

## Plan for Sustainment

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- Texting out of scheduling/staffing software.
  - This will assist staffing coordinators in making sure all available resources not currently working receive a recruitment message

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Questions?

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## Contact Information

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