

Saint Mary's

Unit Staffing Plan/Nursing Scope of Service

Patient Population & Nursing Scope of Service

The Pediatric Unit provides comprehensive care for children, newborn to adolescent, with a wide variety of medical or surgical conditions requiring assessment treatment, or monitoring. Patients with complex medical conditions, surgical needs and/or pediatric oncology needs are cared for in this unit. There is a collaborative relationship among the interdisciplinary team that delivers quality health care. This unit cares for patients of all cultures. Patients over the age of 19 will be admitted to the Pediatric Unit on a case by case basis, making sure the patient is an appropriate fit for the pediatric unit and staff skill set

- Total Beds: 8
- Primary Nursing Services Provided Include but are not Limited to:
 - ☒ Assessment of the child
 - ☒ Development of a plan of care to support the ill child in collaboration with a pediatrician or family medicine provider.
 - ☒ Respiratory and nutritional support of the child
 - ☒ IV hydration, IV antibiotics, blood administration, chemotherapy administration
- Services Not Provided
 - ☒ Patients requiring an Intensive Care Unit
 - ☒ Ventilator support
 - ☒ Titration of vasoactive drugs

Leadership of Unit

- Director
- Unit Manager
- Clinical Shift Supervisor
- Unit Educator

Professional Standards

- Qualifications and Competencies
 - Charge Nurse: BLS, PALS, ENPC, CPN
 - RN: BLS, PALS, ENPC and CPN (once eligible)
- Nurse Practice Organization:
 - ANA, APHON, AAP

Competency of Caregivers

All nursing staff are oriented and trained upon hire to the unit to demonstrate competency in direct care of the aggregate patient population served. This ensures the skill mix of the nursing staff is consistent among all associates.

- This is documented in the individual nursing staff member's orientation packet and kept on file.
- Each nursing staff member also receives skills training and review via education provided through the learning management system and skills fairs.

Unit Staffing Personnel

Our unit staffing plan uses the following licensed personnel to deliver patient care:

- Registered nurses
- Certified Nurse Assistant/Patient Care Tech (depending on unit census)

Shift by Shift Staffing

- At least one (1) registered nurse and one (1) auxiliary personnel shall be on duty at all times in the Pediatric Unit.
- One registered nurse, qualified by education, training, competency and experience, will be designated as in charge of the unit at all times.
- The unit charge nurse determines the number and skill mix of the nursing staff for the oncoming shift and reassesses throughout the shift to ensure the appropriate number and skill mix of nurses is available to provide safe patient care.
- Nurse-to-patient assignments will vary throughout a patient's length of stay based on a combination of prescribed tasks including education, nursing interventions, demographics, competence, safety measures, coordination of care, and psychosocial needs. Patient assignments will align with the nationally recognized professional organization for the area of specialty as applicable.
- These staffing plans are reassessed annually and/or more frequent if necessary or if any changes are made.
- All areas have established minimum levels of staffing to be used in catastrophic or unusual circumstances.
- During surge situations staffing is adjusted to meet patient demand through the use of innovative care models.

Patient conditions that contribute to a high level of acuity in the Pediatric Unit, include but are not limited to:

- Frequent interventions (more than every 2 hours)
- Unstable respiratory status
- Insulin Drips

The formal process for managing patient flow includes (but is not limited to):

- Overall acuity and workload of the floor with respect to patient turnover (Admission, Discharges and Transfers)
- Charge Nurse/Bedside Nurse/Leadership assessment of ability to safely manage current patient assignment and assume an admission.
- If the acuity of the unit is determined to be high, or admissions are pending, the charge nurse can:
 - Bring in extra staff or limit the amount of patients to be admitted until the acuity or volume decreases by coordinating with the W&C Clinical Shift Supervisor and the Hospital House Supervisor
 - Request to use nursing staff from other units who are cross trained and or otherwise qualified when an additional nurse is needed in the department and no other unit nurses are available.

The RN uses the following chain of command for any concerns or issues related to staffing:

- € Charge Nurse
- € Women's & Children's Shift Supervisor
- House Supervisor
- Unit Nurse Manager
- Director
- Administrator On Call
- Chief Nursing Officer/ACNO
- Regional Chief Nursing Officer

Outcomes and Quality

The unit staffing plan's effectiveness will be evaluated using the following measurements as applicable: patient experience, staffing metrics, and nursing sensitive indicators.

Reviewed and approved by staffing committee on: 7/18/2024

Next review due on 8/2025

Reviewed and/or made available to staff on: (via staff meetings, email, huddles)