

**HACKETTSTOWN REGIONAL MEDICAL CENTER
NURSING POLICIES
STAFFING AND SCHEDULING**

Effective Date: 3/90

Policy No: 8620.Staffing

Cross Referenced: Formerly in Nursing
Department Structure Manual

Origin: Nursing Department

Reviewed Date: 3/05

Authority: Chief Nursing Officer

Revised Date: May 2015

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SCOPE

All Department of Nursing staff members.

PURPOSE

To provide guidelines for nurse staffing and scheduling.

DEFINITIONS

Classification of Employees - See HRMC Employee Handbook for descriptions of full time, part time, per diem and temporary positions.

POLICY

RN's and LPN's at Hackettstown Regional Medical Center must be licensed in the State of New Jersey. Original and renewal license numbers must be recorded in the employee's Human Resources (HR) file.

PROCEDURES

I. Licensing

- A. When new or renewal numbers are received, the individual is responsible to report this in person to HR. Failure to report renewals will jeopardize the individual's employment status. Employees are not permitted to work any shifts or any positions without current licensure.

II. Assignment of Staff

- A. Assignment of patient care on the unit including those patients who are assigned to students, orientees, and agency staff is the responsibility of the Unit Charge Nurse.
- B. Assignment of nursing care will be based on patient care needs as determined by the acuity of the patient and by qualifications of the staff.

III. Shift Schedule by Unit

ICU/PCU	0700-1930; 1900-0730
MS	0700-1930; 1900-0730
OB	0700-1930; 1900-0730
ED	0700-1930; 1030-2300; 1900-0730; 0700-1530; 1530-0330; 1100-2330
SS	Shift depend on unit need

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IV. Staffing

- A. Hackettstown Regional Medical Center utilizes the Res-Q automated scheduling system for staffing on all nursing units.
- B. The staffing framework is selected by each Unit Manager who customizes staffing targets to represent the needs of the units. These targeted hours of care are then distributed by shift and personnel category.
- C. If additional staff is needed, for patient safety, overtime and agency nurses are methods used to staff the units. Directors/ Managers/Assistant Nurse Managers have 24 hour accountability to provide safe, quality care.
- D. See unit specific plan of care for staffing methodology.

V. Scheduling

- A. Managers are responsible for the preparation and approval of a monthly time schedule for all nursing personnel. Schedules are entered into Res-Q two (2) weeks prior to the start of the next schedule and updates are entered immediately by the Department Manager/or designee.
- B. The Nursing Office is responsible for printing the 24 hour schedule. The Administrative Supervisor is responsible for reviewing and discussing any questions or problems with the unit Manager.
- C. The Manager plans with the Administrative Supervisor for any special unit needs.
- D. Managers/Administrative Supervisor in conjunction with the Clinical Resource Nurse/charge nurse are responsible to maintain shift-to-shift staffing. This includes daily staffing huddles.
- E. Except for reasons of emergency, nursing personnel are expected to report to the unit at the assigned time indicated on the posted schedule and be ready for hand-off.

VI. Per Diem Personnel

- A. Per Diem nurses are responsible to carry out the rules and regulations of HRMC. Refer to the Per Diem agreement for specific requirements.
- B. All cancellations due to low census (Nursing Office Day) should be made two hours prior to the start of the next shift, if possible, with the individual remaining available

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until the start of the shift.

- C. Nurses will be assigned days of work as needed according to the days they submit to the Manager/Assistant Manager approximately one month before the new schedule is due.
- D. Holidays will be assigned according to the plan option. Each new Per Diem employee will be work one winter and one summer holiday.
- E. Orientation and ongoing checklists must be completed in each area that the per diem employee works (if multiple).
- F. Evaluations will be done by the Manager where they are assigned 50% or more of their time with input from all other area managers or Administration Supervisors where they have worked.
- G. Provide one weekend a month of availability.

VII. Weekends

- A. Assignment of nursing personnel to patient care areas will be planned in such a rotation that all personnel receive an equal share of weekends and other preferred times off.
- B. Rotation pattern for all regular employees is a maximum of every other weekend off.
- C. A weekend is defined as Saturday and Sunday for day shift, and Friday and Saturday for the night shift.
- D. Additional weekends may be scheduled off by the Manager because of availability of per diem staff; however, this does not negate the every-other-weekend policy when the staffing needs of the unit need to be met.
- E. All members of the nursing staff who are absent on their scheduled weekend may be requested by their Manager to work a makeup shift.

VIII. General: Scheduling

- A. A request for time off is a request and is not automatically granted because it has been submitted. To be considered, all schedule requests must be submitted in writing to the Manager prior to a schedule posting. The Manager will approve/deny

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all requests before a schedule is posted. When a request has been denied and the employee fails to report for the assigned duty, they must report to the Manager before working again. Deliberate absence may be considered insubordination and could be cause for termination.

- B. Requests will be evaluated and approved/denied by the Manager based on unit and hospital needs within four (4) weeks of the current schedule.
- C. Requests for days off after the schedule is posted will require the employee finding an approved alternate to work in their place. The employee shall secure an approved alternate to work in his/her place and be sure that the request has been granted before taking time off. However, it is the employee's responsibility to obtain their replacement.
- D. Requests for time off without pay must be approved by the CNO or designee.
- E. Any requests for elective surgery will be denied from December 15 through January 15.
- F. Switch Slip Policy
1. Once a schedule is posted, staff may utilize a switch slip to obtain a needed day off.
 2. All switch slips must be signed by both parties.
 3. All switch slips must be approved by the Manager/Assistant Manager/Administrative Supervisor.
 4. The Administrative Supervisor will forward a copy of the validated and approved slip to the Manager and edit the staffing sheets to reflect the switch in the absence of the Manager.
 5. A switch slip is not needed for personal emergencies.
- G. Emergency Requests
1. Requests of any emergency nature (personal or family illness, family deaths, etc.) must be discussed with the Manager/or designee as soon as the emergency arises.
 2. All emergency leaves called in during the evening/night hours will be documented in writing by the Administrative Supervisor and given to the Manager.
- H. HRMC supports further education and every effort will be made to accommodate

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the employee's schedule.

I. Paid Time Off (PTO)/AL

1. A PTO bank of hours is a consolidation of all accrued benefit time into one plan having two components. PTO is time accrued for personal time off which includes vacation, holiday and short term illness. EIB (extended illness bank) is time in dollars accrued for long term illness, medical leave or work related injuries that are not directly reimbursed by the HRMC Workman's Compensation carrier and is effective after the first five days are taken from PTO/AL unless the employee has been hospitalized.
2. Vacation
 - a. Employee must have sufficient PTO/AL time in PTO/AL bank before requesting time off and must be approved by the Manager.
 - b. Vacations may only be for a two-week period of time unless authorized by request to the Manager.
 - c. It is recommended that vacations taken in prime time (Memorial Day Weekend through the first week after Labor Day) need to be requested by April 1 and will be granted based on staffing needs. No more than two weeks of vacation time will be granted.
 - d. No more than one staff member from each category per unit will be on vacation at a time. On certain units or during certain times an exception to this requirement may be made based on the needs of the unit.
 - e. All other vacations will be granted based on unit needs and staffing levels. A request does not automatically grant the vacation time.
 - f. PTO/AL /EIB time is restricted to 24 hours from December 20 through the first week of January unless a request is given to the Manager.
 - g. Any employee who changes their request for vacation time off after the schedule has been posted or after relief has been arranged, may have to float for that period of time or take PTO/AL time as originally requested.
 - h. All per diems will submit their expected vacation days to the Manager of their home department.
3. Holidays
 - a. Full and part-time employees who are scheduled two or more days weekly are required to work a minimum of three and a maximum of four holidays each year depending on the needs of their unit.
 - b. The maximum number of PTO/AL hours (including holiday) that can

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be taken from December 20-January 7 is 24 hours (this includes both 8 and 12 hour shifts).

- c. All nursing staff involved in direct patient care activities will be expected to meet the holiday obligation according to the needs of their unit.
- d. Employees are entitled to one summer and one winter holiday off. The three winter holidays are Thanksgiving, Christmas Day, and New Year's Day. Summer holidays are Memorial Day, July 4, and Labor Day. Employees are expected to alternate holidays year to year according to the needs of the hospital.
- e. All new employees hired full or part-time will be assigned a holiday rotation for the year that meets the needs of their individual units.
- f. Holiday pay will be paid from 7 pm on Christmas Eve until 7 pm Christmas night and 7 pm New Year's Eve until 7 pm New Year's Day, but this is not considered meeting the employee's holiday obligation unless approved by the Manager. For the night shift: evenings before a holiday starting at 1900. For the day shift, day of the holiday until 1900.
- g. An employee scheduled off for a holiday and requests to switch with another employee will be scheduled to work that holiday the following year as per rotation.
- h. Employees working part-time less than 2 days a week and Per Diem II will work a minimum of one summer holiday and one winter holiday on a rotating basis.
- i. Employees who call in ill or are absent for any reason for the scheduled holiday can expect to be scheduled for that same holiday the following year and the year after that.
- j. When a holiday is included within a scheduled vacation, staff will need to switch the holiday with another staff member.

4. Illness

- a. Notification of illness must be made directly to the Administrative Supervisor by the employee. Employees may not leave a voicemail message or call directly to the Nursing Unit. Except in an emergency, notification should be at least 2 hours prior to the start of the scheduled shift. Notification of illness or absence after the above stated hours will be considered "late." Three or more "late notifications" in a twelve-month period will be subject to the same disciplinary action as excessive absenteeism. This action is not to discourage the employee from staying home when ill, but to

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- encourage early notification in order to maintain safe staffing.
- b. If the employee is going to be off for more than one day, they must notify the Administrative Supervisor at the time of the call and the Administrative Supervisor will notify the Manager.
 - c. An authorization to return to work from the employee's physician is needed when an employee has missed three scheduled days of work or the nature of the illness might involve employee or patient safety. The physician authorization is to be presented to the Manager/Administrative Supervisor before the employee returns to work. This authorization will be forwarded to Human Resources.
 - d. Arrangements for pre-scheduled sick time should include a physician's written recommended time off request and be submitted to the Manager. Additional time off differing from the physician's original recommendation must be authorized in writing by the physician and submitted to Employee Health. The employee will not be permitted to work until cleared by Employee Health who will then notify the Manager.
 - e. All employees in the Nursing Department must be able to fulfill the physical requirements of their position as outlined in their job description. Restricted work assignments are limited to Workman's Compensation cases. The restriction will be coordinated by Employee Health in conjunction with the Manager.
 - f. Employee sick days are recorded in the Time and Attendance Program. Consistent patterns of absenteeism will be cause for disciplinary action according to HRMC policy. (see Employee Handbook).
 - g. An employee who becomes ill on duty is to report to the Manager/Administrative Supervisor.
 - h. An employee who has called in ill for a shift may not work or be on-call for any other area that same day.
 - i. An employee who calls out sick during a week will not be eligible for overtime unless they are over 40 hours of working time. Overtime consists of more than forty hours worked in one week.
 - j. For extended illness, hospitalizations or FMLA, Human Resources must be contacted for assistance and current regulations.
 - k. An employee who has been absent due to a communicable disease, should contact Employee Health prior to returning to work.

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IX. 12 Hour Shifts:

- A. All Inpatient Units have twelve hour positions available within the Nursing Department.
- B. Regularly scheduled full-time employees will work 36 hours per week.
- C. Part-time employees will work according to hired hours.
- D. Employees working a 36 hour week will be paid for additional hours as follows
 - 1. Straight time will be paid for hours worked up to 40 hours.
 - 2. Time-and-a-half will be paid on hours worked over 40 hours. Any hours worked over 12 per shift will be reviewed by the Manager.
- E. Holiday pay will be paid for all hours worked according to the HRMC Holiday Pay Policy.
- F. Employees are entitled to one un-interrupted meal (unpaid) plus two 15-minute breaks per twelve-hour shift and one 15-minute break for an 8 hour shift.
- G. If an employee does not get to take an uninterrupted meal break, the employee will be paid for the thirty minute break, or the interrupted time. Payroll process for capturing "no lunch" times are department specific.
- H. The night differential will be paid for the 12-hour period starting at 1900 and ending at 0700.
- I. Employees may be asked to take time off due to low census (Nursing Office Day). Employees have the option of using PTO/AL or taking the time off without pay. Benefit time will accrue at the same rate.
- J. In-service time and Shared Governance Council/Committee work will be paid on time attended only. Hours for the remainder of the twelve hours may be supplemented with PTO/AL hours or the employee may be scheduled to work in order to fill in the additional hours needed.

X. Unforeseen Staffing Needs

If an unforeseen situation necessitates an employee staying beyond their scheduled work hours, the total continuous time may not exceed sixteen (16) hours and must be approved by the Manager/Administrative Supervisor.

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XI. On Call (Other Than Surgical Services and OB)

- A. "On Call" is described as the time period that an employee is requested to remain available to meet the need of a specific area or responsibility. The employee will be informed of on-call status by the Manager/Administrative Supervisor. "On Call" hours will be based on the need of the unit as determined by the manager for a minimum of 4 hours.
- B. "On Call" time is paid in addition to any hours worked. "On Call" time will not be paid unless proper authorization has occurred. An attempt will be made to notify employees approximately two hours before the beginning of their shift of "On Call" status. If an "On Call" employee is notified to come in to work before the beginning of the shift, straight time will be paid. If the "On Call" person is called into work after the beginning of the shift, time and one-half will be paid. The pay will be charged to the unit worked on during call time.
- C. "On Call" employees are expected to assist in other than their designated area in cases of emergency (i.e., transports, unforeseen rise in census, illness on duty, etc.). The use of "On Call" employees in other than their designated areas would be after exhausting all other acceptable possibilities.
- D. The "On Call" employee will come in as soon as possible after being called no later than 30 minutes.

XII. Reassignment

A. General Policies

1. All personnel may be reassigned to other units when the census is low or specific emergency needs arise. All personnel may be asked to perform within their scope of practice and competency level. Efforts will be made to reassign personnel to areas of competency; however, a refusal to be reassigned in compliance with this policy may result in disciplinary action. Each unit will track reassignments. This list is used for the purpose of fairness in float assignments. Generally, it is recommended that nurses assigned as a preceptor or charge nurse for the shift are not reassigned.
2. Orientees will not be floated during their orientation period.

B. Nurse reassignment from the Maternal Child Unit

1. A nurse who is reassigned from the Maternal Child Unit is required to work under the following criteria designed to protect the maternity patient from infection and

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to make it possible for the nurse to return to the unit without disrupting the work schedule.

2. The nurse will not be given a regular assignment, and will not provide care for patients with infectious diseases or temperatures above 100.4.
3. The nurse will scrub and change clothing when returning to the Maternal Child Unit.

- C. Nurse Floating from Critical Care (ICU/PCU) - A nurse who is reassigned to a Medical-Surgical Unit from Critical Care will be assigned as needed.

XIII. Time Off Due to Low Census

- A. During periods of low census within a unit or department, personnel may be required to take a Nursing Office (N.O.) Day. The following is used in the selection of the employee who is required to take a N.O. Day.
1. Volunteers for overstaff
 2. Per Diem pool
 3. Regular - full and part-time - on a rotating basis
- B. Every effort will be made to call the employee within one and one-half to two hours before the shift starts to notify the employee of the low census.
- C. If the employee is called before the start of shift and given a N.O. Day, the employee is to be available until the start of that shift because the census could change. On OB and ICU/PCU, nurses remain on call for the entire shift.
- D. If necessary, the Manager/Administrative Supervisor will request call time of the employee who has been given a N.O. day.
- D. Nursing Office Day time may be necessary within a shift when census changes occur. The decision to give time off after the start of a shift may be made by the Manager/Administrative Supervisor after an evaluation of the unit and hospital is made. Employees who are required to take time off after they report to work will be paid a minimum of two hours pay.

XIV. Failure to Report to Work

- A. Failure to report to work, without proper notification to the Manager/Designee or Administrative Supervisor, may result in suspension and/or termination.

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XV. Change of Status

- A. Change of status is defined as a change of unit, shift, number of days or hours worked, or category (i.e., per diem).

- K. Hospital employees desiring to change status (i.e., change from full or part-time to per diem employment or any other combination of status change) must make the request in writing to their manager. The manager will keep the request on file if unable to act on the request immediately. (This does not include changing positions, such as advancement within the department or switching to another department, etc.)

- C. Change of status requests will be reviewed by the appropriate Manager. Employees who qualify will be given consideration for a position before a new applicant.

- D. When a position becomes available within the Nursing Department, this position will be posted. Decisions as to filling the vacant position will be based on qualifications and applicant's length of service in that job category. Employees qualified and interested in the available posted position must fill out an "Application for Transfer" form and submit it to their Current Manager. The Manager will then submit this form to Human Resources.

- E. Any employee who has been in a full-time position (72 hours) and requests in writing to reduce the number of days worked may need to be reassigned according to part-time positions available.

- F. After change of status is granted, the employee will give notice equivalent to number of weeks required for termination. (Refer to the HRMC Employee Handbook for details regarding adequate notice).

XVI. Attendance

- A. Refer to the HRMC EMPLOYEE HANDBOOK.

XVII. Nursing Staff Telephone Numbers

- A. All nursing personnel must provide the Nursing Office a number where they can be reached.

- B. Change of name, address or phone number must be filled out on a Change of Name/Address form and sent to the Nursing Office and to Human Resources.

- C. Employee phone numbers will not be shared unless done through the Manager or

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Administrative Supervisor after receiving permission from the employee.

XIV. Students

- A. Students pursuing RN and LPN educational programs utilize Hackettstown Regional Medical Center for educational experience.
- B. Each student will receive an orientation packet, which needs to be reviewed and signed for confidentiality and proof of being received. Proof of completion by signature will be kept in Human Resources.
- C. The schools assume full responsibility for the planning and implementation of the nursing education program.
- D. Instructors will be responsible for and directly control the educational program.
- E. The hospital will provide orientation for the instructors.
- F. The hospital will maintain final responsibility for all patients.
- G. Students and instructors may attend nursing education programs.

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Addendum 8A: Awaiting Updated Per Diem Contract

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