HEALTH SERVICES POLICY & PROCEDURE MANUAL

North Carolina Department Of Correction Division Of Prisons

SUBJECT: Nurse Staffing Standards

SECTION: Personnel

POLICY # P-1

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EFFECTIVE DATE: January 2012 SUPERCEDES DATE: March 2010

PURPOSE

To provide consistent nurse staffing based on the medical mission and patient acuity of a facility

- 1. to meet the patient needs,
- 2. to meet requirements specified in policies and procedures and standards of care set forth by the American Correctional Association and other accrediting agencies
- 3. to be in compliance with professional practice standards.

DEFINITION

Nursing staff – All classifications of registered nurses, licensed practical nurses and correctional healthcare assistants, along with classifications assigned to nursing services such as medical record assistants, clerical staff, lab techs, physical therapist, rehab therapist, occupational therapist, etc.

POLICY

- 1. The Director of Nursing will establish nurse-staffing standards in accordance with community standards and those of the correct NCDOC accrediting body. The Director of Health Services and the Director of Prisons must approve these standards.
- 2. These standards will be current as reflected in up-to-date resource and reference materials.
- 3. These standards may use hours per patient day (hppd), staff-patient ratio or other methods to determine appropriate staffing.
- 4. Staffing standards will include a relief factor. Relief for facilities with 40 hours per week will be provided by regional float nurses
- 5. Staffing standards will be established for the following:
 - a. Skilled Nursing
 - b. In-Patient Medical Services
 - 1. Acute hospital
 - 2. Specialty Clinics
 - 3. Emergency Room/Urgent Care Center
 - 4. Operating Room
 - c. Infirmary
 - d. Long Term Care
 - e. Processing Teams
 - f. In-patient Mental Health
 - g. Residential Mental Health
 - h. Chronic Disease Units
 - i. Large Segregation and Control Units
 - j. Security Threat Group Units
 - k. Telephone triage facilities
 - 1. Stable Medical Observation Units
 - m. Transition Units
 - n. Out-Patient services according to number of beds and direct observation medications

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- o. Regional Nursing Office (Assistance Directors of Nursing, Regional Nurse Supervisors, Nurse Liaisons, Float Nurses and clerical staff)
- p. Central Nursing Office
- q. Administrative Nursing (Nurse Managers, Nurse Education, Performance Improvement, Infection Control, Utilization Review)

6. Nursing Coverage

- a. There will be four categories of nursing coverage assigned to a facility by the Chief of Health Services:
 - 1. 40 hours per week
 - 2. 16 hours/5 days per week
 - 3. 16 hours/7 days per week
 - 4. 24 hours/7 days per week

During hours of no on-site nursing coverage, Custody officers will have access to a registered nurse via the Telephone Triage System.

- b. The nursing coverage is dependent on the medical mission, custody level and maximum operating capacity.
- c. The following facilities will have 24hour/7 day a week registered nurse coverage:
 - 1. all close custody facilities
 - 2. facilities with a maximum operating capacity of 800 or greater
 - 3. facilities with an Unstable Chronic Disease unit/beds
 - 4. acute medical and mental health facilities
 - 5. processing centers
 - 6. telephone triage facilities
 - 7. long term care facilities
 - 8. skilled nursing facilities
- d. The following facilities will have a minimum of 16 hours/7 days a week nursing coverage with a registered nurse assigned to first and second shift and a nurse extender (LPN or Medication Technician) assigned to third shift (when applicable) with RN accessibility via the Telephone Triage System:
 - 1. Minimum and medium custody facilities with limited medical mission and a maximum operating capacity of less than 800.
- e. Nursing coverage should not fall below the assigned coverage unless as a last resort, at which time a written plan of coverage will be developed by the facility nurse manager and superintendent/warden. This plan is to be reviewed and discussed with the Assistant Director of Nursing. HTA (Health Treatment Administrator) and the Assistant DON. The Assistant Director of Nursing will make their recommendation to the DOP Director of Nursing for approval. The DOP Director of Nursing will inform the Director of Health Services.
- f. Flexible scheduling is encouraged to meet the assigned staffing coverage. Such scheduling may include Modified Weekend Option (similar to a Baylor Program), 10-hour shifts, 12-hour shifts, etc. Flexible scheduling, except on a case by case basis with individual nursing staff, must be approved by the Director of Prisons. Refer to Policy P-10 Requesting Flexible and Alternative Schedules.

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- g. Agency Nurses
 - 1. Agency nurses may be utilized to meet staffing needs during a staffing shortage.
 - 2. If agency nurses are utilized, the following procedures will be done:
 - a. Agency nurses and their representative agency will receive orientation by DOC Nursing personnel.
 - b. Agency nurses will report to the facility's nurse manager or designee
 - c. Agency nurses will follow the facility's Nursing Time and Attendance Policy.
 - d. Agency nurses will work a monthly time schedule as developed/posted by the Nurse Supervisor.
 - e. Agency nurses who are RN's can assume charge responsibilities only after being oriented to a particular inpatient floor or facility a DOC nurse should always be available for consultation.
 - f. Agency nurse who assume charge responsibilities must have:
 - ➢ Worked in DOC system 26 weeks or more
 - Completed Emergency response competency prior to assignment
 - ➤ access to a DOC RN for consultation.
 - > On call schedules and telephone numbers for provider coverage will be readily available.
 - g. Agency nurses will have a performance report completed by the Nurse Supervisor monthly.
 - h. Agency nurses will have hours compiled weekly and signed by the Nurse Supervisor or designee.
 - i. Nurse agency would do background checks on all nurses prior to assignment. Background check would be reviewed by DOC personnel at the facility and determination will be made if additional check is needed.
 - j. Nurse agencies will not be allowed to recruit/hire current facility nursing staff. Previously employed DOC Nurses must have a lapse of 6 months from Department before being considered for hire through a travel agency.

Paula y. Smith, M.D.

1/31/12

Paula Smith, M.D., Director of Health Services

Date

SOR: Director of Nursing