

## MNA LGH SAFE STAFFING PROPOSAL

### Add new Article – Staffing

“The Hospital agrees that it will schedule RN staff on each unit and area so as to provide the following minimum RN to patient limits at all times:

\*\* Charge RN every unit and shift with no patient assignment; except 2 Charge RNs H5 and R4

**Med/Surg and Telemetry** - 4 Patients: 1RN

**Stepdown** –3: 1RN

**VAU; CCU;** – Staffing on the VAU and CCU shall be in compliance with MGL Chapter 111, Section 231 – An Act Relative to Patient Limits in All Hospital Intensive Care Units, which states “the patient assignment for the registered nurse shall be 1:1 or 1:2 depending on the stability of the patient as assessed by the acuity tool and by the staff nurses on the unit.”

**Pediatrics** –3:1RN

**Emergency Center– ICU Patients in ER** -shall receive care in compliance with MGL 111, Section 231:

7a- 12 RNs; 11a- 14 RNs

3p- 16 RNs; 7p- 16 RNs

11p- 12 RNs 3a- 9 RNs

**OR-** 1:1; except local anesthesia cases 1:2 RNs

**PACU** – In accordance with ASPAN standards; Pedi pts 1:1 for minimum of 30 min

**Surgical Daycare**– 4: 1 RN;

**Endoscopy-** 1 RN for sedations and 1 RN for technical assist except ERCPs 2RN for technical assist

**Labor & Delivery** – 6 RNs- days and evenings; 5RN 11p-7a

**Mother/Baby** – 3 couplets: 1RN all shifts

**SCN-2-3 babies:** 1RN

\*\* Critical care patients will receive care in compliance with MGL 111, Section 231 regardless of their location in the Hospital.

\*\*The Hospital will ensure that there is adequate ancillary staffing