

Nursing Staffing Models

DSU (Stepdown) CONTINGENCY STAFFING MODEL (v1.12/17/2020)

Purpose: To provide guidelines on staffing ICU stepdown care when there is a shortage of nurses due to increased census during a disaster or pandemic necessitating a DSU Contingency plan.

Assumptions/Principles of Staffing

- 1) 1 Stepdown RN (No team nursing) 1:3 Usual Care
 - a. Discretion of charge nurse based on acuity
- 2) Contingency Staffing Stepdown Model
 - a. 1:4 Staffing: Stepdown ICU Level of Care Patients

Assumptions of Care: Manager/Director Meeting with consideration of acuity and staffing potential 1:4

Contingency Model:

Deployed when RN shortage of staff in hospital.

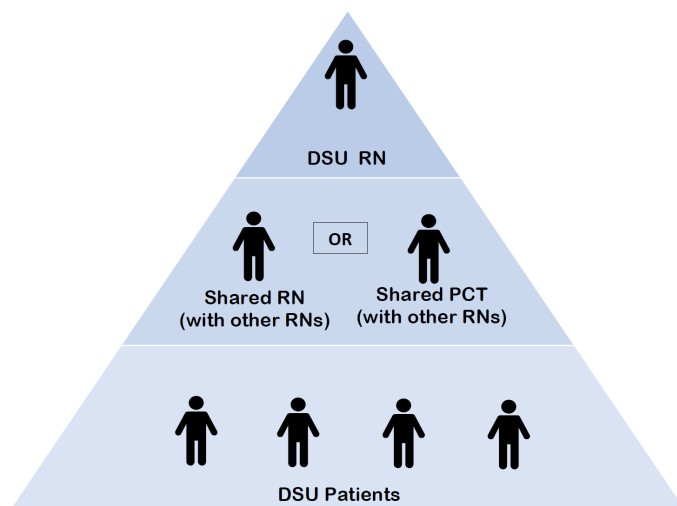
May be activated by HCC in collaboration with NM/Director/CNO

Implement out of ratio:

1 RN to 4 Patients Stepdown ICU level of care with 1 Support RN or ED Tech (when available)

Duties/ Documentation in EMR

- **RN**
 - Perform Physical Assessment
 - Administer all medications
 - Interprets ECG/Telemetry
 - Perform procedures etc
 - Change dressings
 - Empty drains
- **PCT**
 - Vital Signs – document and report
 - Hygiene: Baths/Oral Care/Pericare
 - Activity: Walk patients/ROM
 - Turning patients every 2 hours



DSU Contingency Team 1:4 Nursing Model

Reduce unnecessary tasks

All Documentation will be done on Paper in Crisis Mode. Limit Documentation requirements for admits and during shift care.