

February 6, 2012

Re: Summary of Nurse Staffing Audits for 2011

The Public Health Division, Health Care Regulation and Quality Improvement Program completed its findings for the 2011 Hospital Nurse Staffing Audit in accordance with ORS 441.170(3).

The process for nurse staffing surveys was integrated into routine, onsite survey work and also done during complaint investigations. If a recertification survey or federal validation survey was performed at a hospital which had not previously received a nurse staffing audit, every effort was made to also perform a nurse staffing audit while onsite.

Eleven hospitals received a nurse staffing audit, five of which resulted from nurse staffing complaints. This was more than the single nurse staffing complaints received and investigated in 2010 but one less than the six staffing complaints received and investigated in 2009. Six facilities were audited during federal recertification or validation surveys. Of the eleven audits performed, all of the audits generated by the complaint investigations and two audits performed with a recertification survey resulted in one or more deficiencies.

Four hospitals were cited for failure to develop a nurse staffing plan consistent with or incorporating nationally recognized standards and guidelines. Two hospitals received a deficiency related to the required posting of the Nurse Staffing Oregon Revised Statute. Two hospitals received a deficiency for failure to develop a formal procedure for admission and diversion of patients to another acute care facility, when the direct care nursing staff feels they can not meet the patients' needs. In two hospitals it was noted that there was a failure to ensure that the nurse staffing committee monitored, evaluated, modified and re-approved a nurse staffing plan. One hospital had modified the Nurse Staffing Committee to include members of a Hospital/ Labor Management and had phased out a number of the features required by the Oregon Administrative Rules. One hospital had not conducted regular Nurse Staffing Committee meetings for more than a year. All

hospitals submitted and implemented acceptable plans of correction for all deficiencies found. No civil penalties were assessed.

For 2012, we will continue to integrate nurse staffing surveys with our other hospital survey activities and perform full nurse staffing audits in response to nurse staffing complaints, while focusing on hospitals that have not yet had a nurse staffing audit.

Please see attached table for a complete summary.

If you need this information in an alternate format, please call our office at (971) 673-0540 or TTY (971) 673-0372.

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Facility	Date	Type of Survey	Findings	Outcomes
Tillamook County General Hospital	1/13/2011	CAH Validation Survey	No deficiencies identified	Not Applicable
Samaritan Albany General Hospital	2/17/2011	Complaint Investigation	<p>Deficiencies cited: The nurse staffing plan must be consistent with nationally recognized standards and guidelines per OAR 333-510-0045(3)(e);</p> <p>The hospital failed to develop a formal procedure for admission and diversion of patients to another acute care facility when the direct care nurses feel they cannot meet the patient's needs per OAR 333-501-0035(3)(C).</p>	Plan of correction found to be acceptable 3/28/2011.
Kaiser Sunnyside Medical Center	4/20/2011	Complaint Investigation	<p>Deficiencies cited :</p> <p>The hospital failed to post in a conspicuous place on the premises of the hospital the notice summarizing the provisions of ORS 441.162, 441.166, 441.168, 441.174, 441.176, 441.178, and 441.192 per OAR 333-510-0045(13).</p>	Plan of correction found to be acceptable 5/16/2011.
Oregon State Hospital, Salem	5/17/2011	Complaint Investigation	<p>Deficiencies cited :</p> <p>Nurse Staffing Committee rolled into Oregon State Hospital/Labor Management Committee. There was no clear evidence of a NS Plan per OAR 333-510-0045(1). This committee did not contain member allotments as required in OAR 333-510-0045(1)(a) and (b).</p>	Plan of correction found to be acceptable 7/28/2011.

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			<p>Committee minutes lacked documentation of a staffing committee process and procedures as per OAR 333-510-0045(2).</p> <p>The nurse staffing plan must be consistent with nationally recognized standards and guidelines per OAR 333-510-0045(3)(e).</p>	
Mountain View Hospital	5/25/2011	CAH Recertification Survey	No deficiencies identified	Not Applicable
Vibra Specialty Hospital of Portland	6/3/2011	Complaint Investigation	<p>Deficiencies cited: The hospital failed to develop a plan to monitor, evaluate and modify the nurse staffing plan over time per OAR 333-510-0045(3)(b).</p> <p>The nurse staffing plan must be consistent with nationally recognized standards and guidelines per OAR 333-510-0045(3)(e);</p> <p>The hospital failed to post in a conspicuous place on the premises of the hospital the notice summarizing the provisions of ORS 441.162, 441.166, 441.168, 441.174, 441.176, 441.178, and 441.192 per OAR 333-510-0045(13).</p>	Plan of correction found to be acceptable 6/9/2011.
Southern Coos Hospital and Health Center	6/16/2011	CAH Recertification Survey	<p>Deficiencies cited ;</p> <p>No evidence that the Nurse Staffing Committee had met since 9/11/2009, therefore it had not monitored,</p>	Plan of correction found to be acceptable

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			evaluated, modified or re-approved the nurse staffing plan according to this rule per OAR 333-510-0045(1).	7/12/2011.
Providence Hood River Memorial Hospital	6/28/2011	Complaint Investigation	<p>The hospital failed to develop a formal procedure for admission and diversion of patients to another acute care facility when the direct care nurses feel they cannot meet the patient's needs per OAR 333-501-0035(3)(C).</p> <p>The hospital failed to post in a conspicuous place on the premises of the hospital the notice summarizing the provisions of ORS 441.162, 441.166, 441.168, 441.174, 441.176, 441.178, and 441.192 per OAR 333-510-0045(13).</p> <p>An incidental OAR related to Medical Records</p>	Plan of correction found to be acceptable 8/04/2011.
Coquille Valley Hospital	6/30/2011	CAH Recertification Survey	No deficiencies identified.	Not Applicable
Blue Mountain Recovery Center	8/4/2011	Psychiatric Hospital Re-Certification	The hospital failed to develop a plan to monitor, evaluate and modify the nurse staffing plan over time per OAR 333-510-0045(3)(b).	Plan of correction found to be acceptable 9/9/2011.
Lake District Hospital	8/11/2011	CAH Recertification Survey	No deficiencies identified	Not Applicable