

## Nurse Conference Committee (NCC) Meeting Minutes

Date: December 13, 2023

Time: 1:00-3:00 PM Location: WebEx

NCC Members	Delegate	12/13/23	1/10/24	2/21/24	4/3/24
Bonnie Fryzlewicz	TBD	present			
Danica Pytte	Tammy York	present			
Paulene Toussaint	Holly Beauchene	present			
Kara Yates	-	present			
Kelsey Gellner	-	present			
Kristie Page	TBD	present			
Laura Licea	TBD	Х			
Linda Burbank	-	present			
Lindsey Kirsch	-	present			
Lori Chudnofsky	Molly Aaseby	present			
Mary Field	TBD	present			
Sam Forte	-	present			
Annika Hoogestraat	-	present			
Stefanie Chandos	-	Х			
Katie Podobnik	-	present			
Te'onna Adams	-	present			
Therese Hill	-	present			

Guest(s): Josh Pickett, Henry Jones, Rowena Browman, Laura Knapp

Notetaker: Sarita Wall

ITEM NO.	AGENDA TOPIC	DISCUSSION	COMMITTEE ACTION
1.	<ul> <li>Approval of October 18,</li> </ul>	At 1:03pm – Motion to approve October 18 <sup>th</sup> meeting minutes	<ul> <li>1<sup>st</sup> Mary Field</li> </ul>
	2023 minutes.		

ITEM NO.	AGENDA TOPIC	DISCUSSION	COMMITTEE ACTION
			• 2 <sup>nd</sup> Annika Hoogestraat
II. P	1. SCH updates on PBMU since initiating EOC. 2. Security presence. 3. Additional staffing — coaches/behavioral tech. 4. Staffing plans for nursing roles. 5. Voluntary vs mandatory OT- pay. 6. Admission process. 7. Nurse patient ratios. 8. EDMH staffing for boarders. 9. EDMH with PBMU patients and boarders. 10. Parents with EDMH boarders.	Adding security presence 24/7 in PBMU.  Working with security leadership to create new roles for dedicated security staff in the PBMU.  The new security staff will report to security leadership. The hope is to expand Marcus Chinn's role to have ED and PBMU to fall under him.  The intent is the roles to be PBMU specific  Leadership along with PBMU frontline staff to define what the role will look like in regard to training and competencies for the new roles.  There will be space for PBMU to develop skillset.  The new security roles will have a different job title specific to PBMU.  The new roles will have different pay (defined by the compensation team).  Frontline nurses will be part of the planning and development of the roles.  WSNA reps requested that these roles fall under PBMU leadership and have nurses involved in planning and rollout (considering all feedback) instead of falling under security leadership to avoid accountability and training gaps (reiterating the importance of early nurse involvement in planning).  WSNA reps asked what the barriers are, as to why the new security roles can't be owned and operated by the PBMU.  WSNA reps requested historical data for security on the PBMU.  WSNA reps requested historical data for security on the PBMU.  SC leadership informed WSNA reps the reasoning to have the new roles fall under security is to allow security to develop skillset (resources and tools) and have the ability to answer to certain needs  WSNA reps requested to have Shadi and Adam have input in the development in the new PBMU security roles.	<ul> <li>Paulene to gather         PBMU/security         historical data         and invite         security         leadership to an         upcoming NCC         meeting to         discuss what the         work will look         like and hear         the needs of the         PBMU staff in         the spirit of         collaboration.</li> <li>Paulene to         email Linda a list         of the team         members         involved</li> <li>Paulene to         gather         information         from Kristie         about float staff         training.</li> <li>Paulene to send         responses to         PBMU questions         via email.</li> <li>Henry and Josh         to update their         teams on the         discussed</li> </ul>

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TIEW NO.	AGENDA TOPIC	<ul> <li>SC would like to move forward with more than just a security presence, but instead to have security be a part of care models.</li> <li>WSNA requested more prevention planning.</li> <li>EOC updates (expedited work).</li> <li>PBMU construction to be completed May of 2024 (does not include shell space).</li> <li>Rolling out <u>Ukeru</u> on 1/2/24.         <ul> <li>Josh and Henry will be training along with thirty-six others.</li> <li>PMHS travel staff pool has been approved</li> <li>Thirteen starting on 1/8/24.</li> <li>Seven by 1/22/24.</li> <li>Most travel contracts are 13 weeks</li> </ul> </li> <li>CSW pathway for managing agitation will roll out by the end of December 2023.</li> <li>Working on alignment on admission criteria</li> <li>Approval to start building and planning for behavioral health urgent care to help with admissions prevention and to be an additional safety net to help discharge patients back into the</li> </ul>	updates during today's meeting.  Paulene to send the model of care update to WSNA via email.  Colleadership to add Josh, Henry, Shadi, and Adam to the new security roles planning meetings.  Bonnie to confirm OT changes and send out communication via email to nurses by end of
		community.  Additional staff – coaches/behavioral techs	day today.  • Bonnie,  Maureen, and  Kristie to align
		<ul> <li>Adding structure to provided programming (per frontline nursing and PMHS feedback).</li> <li>New contracts have been secured (to ensure PBMU support).</li> <li>Creating dedicated security roles specific to PBMU.</li> <li>Currently recruiting for rec therapist to help with daytime programming in addition to occupational therapy (engaging patients in therapeutic intervention and reducing boredom).</li> <li>WSNA reps asked if staffing will be at a 1:8 ratio.</li> <li>Over the last month it has been a 1:7-1:8 ratio for nursing and closer to 1:1 ratio for PMHS over the past couple of weeks.</li> </ul>	on PBMU incentives criteria and report back to the group via email next week.  • PBMU nurses, Kristie, and Maureen to meet offline regarding incentives.

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		<ul><li>Currently preparing for surges and acuity changes.</li></ul>	<ul> <li>Bonnie to</li> </ul>
		<ul> <li>Hiring up travel staff.</li> </ul>	communicate to
		<ul> <li>Working closely with recruitment partners</li> </ul>	ED leadership
		to obtain permanent staff and retain	willingness to
		current staff (building skillset).	help the ED
		<ul> <li>WSNA is requesting additional roles (hoping to address</li> </ul>	mental health
		retention and tenure barriers).	team.
		<ul> <li>WSNA reps requested SC leadership look into covering</li> </ul>	
		PMHS licensing as a retention tool.	
		<ul> <li>WSNA reps asked who will be staffing the PBMU urgent</li> </ul>	
		care.	
		<ul> <li>Urgent care will be staffed with therapist and</li> </ul>	
		psychiatric nurse practitioners.	
		Nursing already in Magnuson clinic.	
		Case management will help families	
		connect to community resources.	
		Will mirror hours of most medical walk-in	
		facilities (7 days per week into evening	
		hours).	
		King County is planning to open a 24/7  true by three bour price urgent ears	
		twenty-three-hour crisis urgent care within the next couple of years (long-term	
		planning).	
		o Funded through King County	
		<ul> <li>Not operated by SC</li> </ul>	
		<ul> <li>WSNA emphasized the importance of the break nurse,</li> </ul>	
		resource nurse, rec therapist, and safety coach roles in	
		regard to retention.	
		<ul> <li>Paulene is meeting with PMHS staff, clinical leadership and</li> </ul>	
		Aya next week to discuss PBMU (retention, reputation,	
		and collaboration).	
		<ul> <li>SC leadership requested that WSNA nurses help</li> </ul>	
		with cultivating a positive relationship and	
		engaging with travelers by making sure they feel	
		welcome on the unit, so they want to stay.	
		<ul> <li>There is work to do to redefine the comprehensive care</li> </ul>	
		model on the PBMU (collaborating with frontline staff).	

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		<ul> <li>Adding roles and not knowing how they are going to interact with the care team is not going to be effective.</li> <li>SC reiterated that nurses should be documenting missed breaks, so the data is there to show need for additional roles.</li> </ul>	
		Voluntary vs. mandatory OT pay	
		<ul> <li>WSNA reps believe that nurses are volunteering so they will get hirer pay (double time) than the mandatory OT (time and a half) pay, so data is not being represented properly.         <ul> <li>Mandatory OT has been changed to reflect the same pay (double time).</li> <li>Laura and Kristie are working on removing mandatory OT, overall.</li></ul></li></ul>	
		Questions for Maureen	
		<ul> <li>Regarding incentives, WSNA reps asked if is there anyone who can speak to when and how tiers of incentive are offered?</li> <li>Double time is offered for shifts that are staffed under a preidentified staffing threshold that is based on predicted census. On the day of staffing if there is additional need or the shift was not initially identified as incentive then double time is also offered-same structure as other inpatient areas.</li> </ul>	

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		<ul> <li>PBMU has specific staffing requirements that can't be filled by float pool staff (RN, CNA). What are the barriers to offering separate incentive to PBMU staff?</li> <li>WSNA wanted to get clarity around security incentives for PBMU</li> </ul>	
		Admission process updates	
		<ul> <li>The work has rolled out and communications have been sent.         <ul> <li>Psychiatrist team submits MHEs.</li> <li>ED determines who meets admission criteria.</li> <li>Communication alignment for ED physicians and the psychiatry team on what the criteria is.</li> </ul> </li> <li>WSNA officer asked about nurses having discretion about admissions and acuity (being a part of the decision making and having feedback respected) to ensure unit safety.         <ul> <li>SC leaders confirmed that nurses (specifically charge nurses) are being involved in collective planning for patient admissions.</li> </ul> </li> </ul>	
		EDMH staffing for boarders	
		<ul> <li>WSNA asked what is being done with patients that are being managed by the ED, but the ED is not on the unit?         <ul> <li>Additional Staff.</li> <li>Approved for an ED mental health charge nurse</li> <li>Approved for travel nurses to fill the role through incident command.</li> <li>Kathy is working on a plan for when the role would be warranted.</li> <li>PBMU mentioned willingness to pick up this role to help the ED. Bonnie to pass this to ED leaders.</li> </ul> </li> <li>EDMH with PBMU patients and boarders/ Parents with EDMH boarders</li> </ul>	
		(different rules-personal items allowed)	
		SC took feedback from frontline nurses and implemented those changes. It is not ideal to have both EDMH and PBMU patients in	

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		the same space, however, there is a need to produce creative solutions to ensure every child that comes through the door can be cared for.  O Addressing staffing and retention issues.  WSNA reiterated that the addition of the requested roles will help with upcoming surges and prevent both patients sharing a space.	
		Floating to the PBMU	
		<ul> <li>In regard to nurses floating to the PBMU, Linda asked how to overcome training and competency issues.</li> <li>There has been significant work around training and making nurses feel competent and prepared to work on the PBMU.</li> <li>Linda requested that frontline staff be involved in this work to ensure leadership understands the challenges nurses face when floating to the PBMU.</li> <li>There are frequent check ins with staff that is cross training to PBMU and seeking input on either individual needs or educational and training needs as a whole.</li> <li>SC is currently working on revising the belongings policy (in regard to concerns about what is allowed on the PBMU).</li> </ul>	
		Leader rounding (PBMU/ELT leadership)	
		<ul> <li>WSNA requested for leadership to come to huddles to discuss needs (i.e., construction updates).</li> <li>Maureen and Rowena will work on rounding.</li> </ul>	
		Travel RN staff	
		<ul> <li>WSNA asked how many travel RNs will be added.</li> <li>Six will be starting on 1/8/24.</li> <li>One will start on 1/22/24.</li> </ul>	

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		<ul> <li>Additional offers out for the next onboarding.</li> </ul>	
		Meal carts	
		Tickets have been submitted to EVS to add locks to the meal carts.	
III.	Communication/new:	WSNA requested that SC make communications and transparency top priority.	<ul> <li>Nothing further needed.</li> </ul>
	Communications to staff improvement		

Committee Action Items: Inform, Discussion/Feedback, Decision, Action

Include: Who, What, When

Next Meeting: January 10<sup>th</sup>, 2024, Virtual Meeting

	Committee Action Items – Rolling Queue				
	Торіс	Assigned To:	Status		
GCO:	Follow up offline and provide an update via email	Bonnie Fryzlewicz	In progress		
Follow	up from letter to Bonnie:				
•	Present CLABSI data	Bonnie Fryzlewicz	In progress		
•	Gather data for Acute care data and discuss ambulatory with Tammy	Kristie Page	In progress		
•	Forward email to Bonnie regarding Bellevue surgery nurses	Linda Burbank	In progress		
•	Follow up with Bellevue surgery leaders	Bonnie Fryzlewicz	In progress		
•	Share with leaders how to be more intentional about speaking and addressing EDI items <b>proactively</b>	Paulene Toussaint	In progress		

Workplace Violence/ASR:		
<ul> <li>Leaders to find a way to leverage committees to ensure the correct people are at the table and use NCC time to report out after those discussions.</li> </ul>	SCH Nurse Leaders	In Progress
Follow up with Juliet on HEAL signage.	Maureen O'Brien	In Progress
<ul> <li>Follow up with Security leadership to dispel budget rumors and report back via email.</li> </ul>	Bonnie Fryzlewicz	In Progress
<ul> <li>Invite Laura Knapp to discuss ED mental health plans and present the PBMU Task Force dashboard.</li> </ul>	Paulene Toussaint	In Progress
Communicate PBMU Task Force roster	Paulene Toussaint	In Progress
Take badge alert system to the SWE committee for discussion.	Mary Field	In Progress
<ul> <li>Follow up about workplace violence/racism org-wide communications and signage.</li> </ul>	Paulene Toussaint	In Progress
<ul> <li>Consider different communication pathway regarding WPV to WSNA RNs.</li> </ul>	Sam Forte	In Progress

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Topic	Frequency	Next Agenda this would be on
Expense reimbursement	Twice per year	March 2024
<ul> <li>Education Budget Metrics:</li> <li>Education leave hours (budgeted vs actual)</li> <li>Professional leave hours (budgeted vs actual)</li> <li>Total funds awarded (can report out on this two times/year)</li> <li>Any denials of leave requests (and the nature of the denials)</li> </ul>	Twice per year	March 2024
WSNA Roster	Quarterly	January 2024