



STATE OF WASHINGTON

DEPARTMENT OF HEALTH

July 16, 2015

Anne Piazza, Assistant Executive Director
WA State Nurses Association
575 Andover Park W., Suite 101
Seattle, WA 98188

Re: Investigation # WA00057598

Dear Anne Piazza:

Thank you for bringing your concerns about Whidbey General Hospital to our attention. The Department of Health has conducted a thorough investigation.

After careful consideration of the records and information obtained during our investigation, we have determined there is cause for corrective action against Whidbey General Hospital.

If you have further questions, please contact our office at 360-236-2914.

Sincerely,

A handwritten signature in cursive script that reads "Karen Krueger, P.R.".

Karen Krueger, Manager
Office of Investigations and Inspections
P.O. Box 47874
Olympia, WA 98504-7874
360/236-2914

Investigative Report
On-site State Hospital Investigation

Facility: Whidbey General Hospital
Location: Coupeville, WA
License #: HAC.FS.00000156
Medicare #: 500129
Case #: 57598
Complaint #: 2015-4497
Shell #: PG4U11
Dates of Investigation: June 1, 2015
Investigators: Joan Pierce, MSN, RN

Allegation: The complainant was alleging:

- The hospital was in violation of the Nurse Staffing Committee requirements. The hospital was refusing to allow member-selected staff nurses to attend, develop a staffing plan, meet semiannually, review staffing concerns and the CEO was not reviewing the staffing plan.

Process:

- The complainant was called 5/26/2015 and contacted 6/1/2015 for additional information and clarification of issues.
- I went to the Hospital and interviewed the Chief Nursing Officer, Director of Quality and other staff about the allegations.
- The following Policies, Procedures and documents were requested and reviewed:
 - Nursing Services
 - Nurse Staffing Committee
 - Complaint forms
 - List of Registered Nurses on the Committee
 - Staffing Matrix
 - Actual schedules
 - Documentation related to the election of members of the Nurse Staffing Committee
 - Nurse Staffing Committee meeting minutes for 2013, 2014, 2015
- I reviewed policies, procedures, committee meeting minutes and other hospital documentation. I interviewed employees, observed each hospital unit and located posted staffing scheduled for June 1, 2015.

Summary of findings:

- Review of the hospital Provision of Nursing Care Services: Staffing Team Charter (undated) stated the purpose of the Team included a mechanism for the systematic analysis of nursing care requirements and the collegial development of evidence based staffing plans to support patient care. The team secondarily serves to meet the requirements of the State of Washington Safe Nurse Staffing Legislation RCW 70.41.420. The functions of the Team included nurse staffing plans based on the needs of the patients and provided a forum for nurses to bring concerns related to staffing. The membership included Chief Nurse Officer, managers, staff nurses and nurse supervisor and the Team members would be nominated and appointed by majority vote of the

staff nurses on the units they represented. The Team meetings would occur semiannually in addition to work group meetings.

- Review of the Staffing Council Meeting Minutes since 2013 revealed the Team met on January 30, 2013, November 12, 2013 and December 19, 2014. According to reports and documentation, semiannual Staffing Council Team meetings had not occurred in 2012, 2013 or 2014.
- The CNO stated the semiannual Staffing Council meeting for July 2013 was cancelled due to the implementation of a new electronic medical record system. The CNO reported the meeting was not rescheduled due to a lack of solicited agenda items. No set date had been set for the upcoming July 2015 Staffing Council meeting.
- Interview with Registered Nurse #1 revealed s/he attended the December 19, 2014 Staffing Council meeting. S/He stated no notification was given prior to the day of the meeting. S/He stated it made it difficult for him/ her to attend the meeting due to having scheduled patient appointments at that time. S/He stated a staffing plan was not discussed during the meeting.
- Telephone interview with Registered Nurse #2 revealed s/he was not notified of the December 19th, 2014 Staff Council meeting. There was no evidence to support Registered Nurse #2 was notified electronically or by any other method regarding the scheduled Staffing Council Meeting. The nurse stated there were existing staffing issues which were not addressed by the hospital. The Staffing Council did not provide information related to a proposed staffing plan that was developed by the committee. Documentation indicated Registered Nurse #2 had participated in several previous Staff Council meetings.
- A copy of a notification letter or of an e-mail that notified staff regarding the December 19, 2014 was requested but was not provided.
- The actual staffing plans for each shift for that day were posted on each unit. No documentation was found to support an inclusive hospital staffing plan was developed by the Staffing Council and presented to the Chief Executive Officer (CEO) for approval.
- The Chief Nursing Officer (CNO) stated an actual Staffing Plan for the hospital was not annually developed by the Staffing Council Team or presented to the Chief Executive Officer (CEO) for approval. There was evidence that the hospital staffing proposal was reviewed and approved by the Hospital Board for specific unit employee hours. Review of proposal documentation failed to include a date and failed to identify who was involved in the development of the proposal.

Conclusion:

- Allegation #1 was substantiated. The Hospital did not implement a Nurse Staffing Committee to develop and monitor a staffing plan. The CEO did not review the plan for approval. Staff did not have an opportunity to present and discuss issues related to staffing.

Action: Statement of Deficiencies was written. Violation of WAC 246-320-111(a) citing failure to meet the requirements in RCW 70.41.420 were found pertinent to this complaint.

State of Washington

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: C000092	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 06/01/2015
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NAME OF PROVIDER OR SUPPLIER WHIDBEY GENERAL HOSPITAL	STREET ADDRESS, CITY, STATE, ZIP CODE 101 NORTH MAIN STREET COUPEVILLE, WA 98239
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
B 000	<p>Initial Comments</p> <p>This onsite state hospital investigation #57598/2015-4497 was conducted on June 1, 2015 at Whidbey General Hospital by Joan Pierce, MSN, RN.</p> <p>Violation of state hospital WAC 246-320 was found.</p> <p>Shell: PG4U11</p>	B 000	<p>PLAN OF CORRECTION:</p> <p>You have 10 calendar days from receipt of this document to send your Plan of Correction. The due date is June 22, 2015. An acceptable Plan of Correction must include the following:</p> <ul style="list-style-type: none"> -HOW the deficiency will be or was corrected - WHO is responsible for the correction - WHAT monitors will be put in place to assure continuing compliance - WHEN each deficiency will be corrected. <p>Insert anticipated date of correction in far right column under "Complete Date." Correction cannot take longer than 60 days without investigator approval. The administrator or representative's signature and signing date are required on the first (original) page and initials in the lower right hand corner on all other pages. Please return the original investigative survey report and plan of correction to: Joan Pierce, MSN, RN at WA State Department of Health, Office of Investigations and Inspections, PO Box 47874, Olympia, WA 98504-7874.</p>	
B 005	<p>WAC 246-320-111(1)(a) Hospital Responsibilities-Comply w/Chpt70.41</p> <p>(1) Hospitals must: (a) Comply with chapter 70.41 RCW and this chapter;</p>	B 005		

ADSA --- Residential Care Services or Department of Health
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

06/25/15

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B 005	<p>Continued From page 1</p> <p>This Washington Administrative Code is not met as evidenced by: Based on interview and review of facility documents the facility failed to assure the organization and operations of the Nurse Staffing Committee.</p> <p>Failure to ensure the Nurse Staffing Committee is operationalized creates a risk that staff nurses are not providing input into the development and oversight of an annual patient care unit and shift-based nurse staffing plan based on the needs of patients and to be used as the primary component of the staffing budget. This omission may result in nurse staffing levels that do not support safe and effective patient care.</p> <p>Reference RCW 70.41.420 Nurse Staffing Committee: (2) Participation in the nurse staffing committee by a hospital employee shall be on scheduled work time and compensated at the appropriate rate of pay. Nurse staffing committee members shall be relieved of all other work duties during meeting times of the committee. (3) Primary responsibilities of the nurse staffing committee shall include: (b) Semiannual review of the staffing plan against patient need and known evidence-based staffing information, including the nursing sensitive quality indicators collected by the hospital; ...(6) The committee will produce the hospital's annual nurse staffing plan. If this plan is not adopted by the hospital, the chief executive officer shall provide a written explanation of the reasons why to the committee. (9) ...Critical access hospitals may develop flexible approaches to accomplish the requirements of this section that may include but are not limited to having the nurse staffing</p>	B 005		

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B 005	<p>Continued From page 2</p> <p>committee work by telephone or electronic mail.</p> <p>Findings:</p> <p>All interviews took place on 6/1/2015 unless indicated otherwise.</p> <p>Review of the hospital Provision of Nursing Care Services: Staffing Team Charter (undated) stated the purpose of the Team included a mechanism for the systematic analysis of nursing care requirements and the collegial development of evidence based staffing plans to support patient care. The team secondarily serves to meet the requirements of the State of Washington Safe Nurse Staffing Legislation RCW 70.41.420. The functions of the Team included nurse staffing plans based on the needs of the patients and provided a forum for nurses to bring concerns related to staffing. The membership included Chief Nurse Officer, managers, staff nurses and nurse supervisor and the Team members would be nominated and appointed by majority vote of the staff nurses on the units they represented. The Team meetings would occur semiannually in addition to work group meetings.</p> <p>Review of the Staffing Council Meeting Minutes since 2013 revealed the Team met on January 30, 2013, November 12, 2013 and December 19, 2014.</p> <p>According to reports and documentation, semiannual Staffing Council Team meetings had not occurred in 2012, 2013 or 2014.</p> <p>The CNO stated the semiannual Staffing Council meeting for July 2013 was cancelled due to the implementation of a new electronic medical record system. The CNO reported the meeting</p>	B 005		

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B 005	<p>Continued From page 3</p> <p>was not rescheduled due to a lack of solicited agenda items. No set date had been set for the upcoming July 2015 Staffing Council meeting.</p> <p>Interview with Registered Nurse #1 revealed s/he attended the December 19, 2014 Staffing Council meeting. S/He stated no notification was given prior to the day of the meeting. S/He stated it made it difficult for him/ her to attend the meeting due to having scheduled patient appointments at that time. S/He stated a staffing plan was not discussed during the meeting.</p> <p>Telephone interview with Registered Nurse #2 revealed s/he was not notified of the December 19th, 2014 Staff Council meeting. There was no evidence to support Registered Nurse #2 was notified electronically or by any other method regarding the scheduled Staffing Council Meeting. The nurse stated there were existing staffing issues which were not addressed by the hospital. The Staffing Council did not provide information related to a proposed staffing plan that was developed by the committee. Documentation indicated Registered Nurse #2 had participated in several previous Staff Council meetings.</p> <p>A copy of a notification letter or of an e-mail that notified staff regarding the December 19, 2014 was requested but was not provided.</p> <p>The actual staffing plans for each shift for that day were posted on each unit. No documentation was found to support an inclusive hospital staffing plan was developed by the Staffing Council and presented to the Chief Executive Officer (CEO) for approval.</p> <p>The Chief Nursing Officer (CNO) stated an actual</p>	B 005		
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