



GTA CHN Pandemic Planning Day

September 17, 2009

Human Resources and Staffing
Mississauga-Halton LHIN



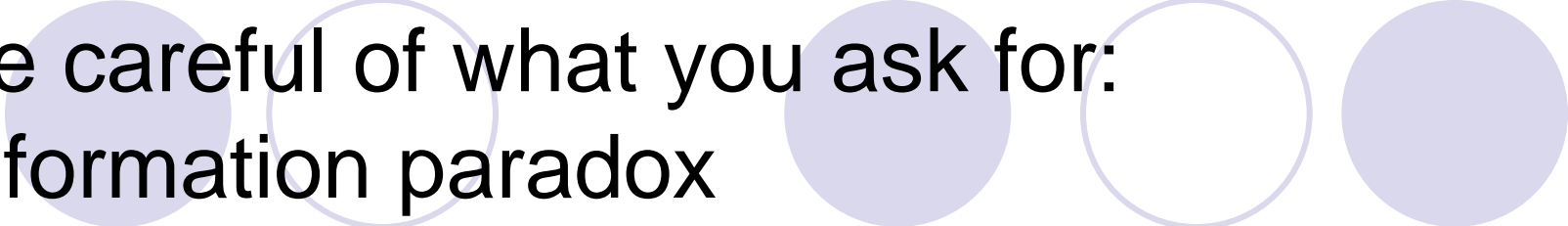
Why is HR and Staffing important?

- Shift in patients being admitted
 - Elective procedures cancelled HOWEVER increasing acuity and volume of admitted patients
 - Current evidence re: nH1N1 and pregnant women and paediatric patients
- Staff illness and absenteeism
 - Increasing % of staff ill
 - Potential increase in staff absenteeism due to family illness, etc.
- **HOW DO WE CARE FOR THE PATIENTS?**

April 2009 Pandemic Planning Day

- Human resources and staffing questions:
 - What is the best way to prepare now to address issues that will arise with respect to staffing?
 - What would staffing be?
 - How can we work together to enhance the skill levels of staff to make them feel better prepared?
 - What is the status of organizations with respect to them undertaking an assessment of their HR resources?

Be careful of what you ask for: Information paradox



- Information prepared and available on the OHPIP website along with appendices and tools to assist with multitude of topics
- Agencies and others working on plans (i.e. CAPHC)
- Professional literature
- MOHLTC
- Professional organizations
- Paralyzed by amount of information and how to operationalize content



Planning

- Overlay of points in time with projected staff illness and projected occupancy/acuity.
- What staff will be available vs. required?
- Assess other options for staff – retirees, students
- Determine staffing mix and model of care required to meet patient care needs in descending order of priority. Will a change in model be required?

Core service capacity losses (example)

% of staff ill	Paed assessment	BF support	IV start	Inhalation therapy	IV meds	Oral meds
10%	100%	100%	100%	100%	100%	100%
20%	100%	100%	100%	100%	100%	100%
35%	75%	65%	75%	75%	75%	75%
50%	50%	25%	50%	50%	50%	50%

Skills Listing (example)

	Paed assessm ent	BF support	IV start	Inhalation therapy	IV meds	Oral meds
RN	X	X	X	X	X	X
RPN	VS	X				
Other:						
PALS						
Phleb			X			
Pharm					X	X
SW						
RRT	X(resp)			X		
PT						

Planning (cont'd)



- Develop principles for staff deployment
 - how and when will this be communicated
- Develop an 'evergreen' contingency staff list and code orange fan out list
- Develop job descriptions for unregulated care workers in advance
 - Break down elements of care and compare to RHPA
- Discuss alternatives with other agencies (i.e. CCAC, Public Health)
- Assist staff to develop their contingency plans for their families in advance (elder care, child care)

Training



- Conduct skills inventory of current staff, volunteers, etc.
 - Develop process on how to obtain and update skills assessments
- Start to provide cross-training opportunities now!
 - Identify staff for up-skilling/cross-training
 - Incorporate into scheduling in order to maintain skills
 - Consider clinically adjacent or complementary patient care areas.

Training (cont'd)



- OHPIP recommends competency based approach with two prongs
 - Identify competencies required related to both influenza care and specialty care
 - Asses current number of staff with competencies

RHPA/Care competency

Role	Controlled act?	Competency required	Profession
Screening	No	<ul style="list-style-type: none"> • Admission screening • Info re: hand hygiene and PPE • Ability to use PPE • Language and organizational skills 	<ul style="list-style-type: none"> • Public domain with targeted education and orientation
L&D triage	Yes	<ul style="list-style-type: none"> • Labour assessment • Fetal Monitoring • Education 	<ul style="list-style-type: none"> • RN/OBS/FP/MW
Labour assessment	Yes	<ul style="list-style-type: none"> • Labour assessment • Fetal monitoring • Vag exam • Epidural monitoring 	<ul style="list-style-type: none"> • RN/OBS/FP/MW
Labour support	No	<ul style="list-style-type: none"> • Support/education of woman/partner in labour • Knowledge of stages of labour and support/comfort strategies 	<ul style="list-style-type: none"> • Public domain with targeted information – doula, prenatal educators • RN/MW/OBS/FP
Caesarean birth	Yes	<ul style="list-style-type: none"> • Operative and anaesthesia knowledge and skills • Circulating and scrub skills • Newborn assessment skills 	<ul style="list-style-type: none"> • OBS/Anaesthesia • RN – birthing suite or OR • RN – Birthing suite, SCN

Advice and Consideration



- April 2009
 - Identify interdisciplinary core team and educate on issues related to leadership during pandemic.
 - Emotional burden on health provider is important consideration.
 - Think about what can be done to support staff in the moment and how to assist them to start planning now
 - One size does not fit all
 - units, levels of care, staffing models differ from site to site

