



Shift Co-ordinator Procedure

Purpose

To assist in providing team leadership, management and the coordination of the ward/unit environment, on a shift by shift or acting CNM/CMM/MH line manger role basis.

Policy

Shift Coordinator requires to meet a series of tasks, behaviours and skills that reside with a registered nurse or midwife on an individual shift providing leadership to the nursing or midwifery team in a ward/unit.

Applicability

The Shift Coordinator role is undertaken by a registered nurse or midwife with recognised ability/potential ability to fulfil the responsibilities outlined in the task list (Appendix) and who has attended or is in the process of undertaking appropriate training.

Model of Care

All patients have a registered/enrolled nurse or midwife allocated to oversee their care. Registered nurses, enrolled nurses and midwives work collaboratively to ensure efficient and effective continuous care. Direction and delegation for enrolled nurses/ nursing assistants/health care assistants/hospital aides is as per Canterbury DHB policy. Care delivery processes uphold professional standards and organisation policies.

When patient acuity/complexity changes the way registered/enrolled nurses or midwives work is reviewed by the Shift Coordinator so patient needs are met and staff health is maintained. In these circumstances registered/enrolled nurses and midwives can only deliver what is reasonably possible and activation of the Variance Response Escalation Management Flowchart may be required.

Roles and Responsibilities

Allocation of the Shift Coordinator Role

The Shift Coordinator role will be delegated by the CNM/CNC/CMN

The Shift Coordinator must be communicated at handover and at any time the CNM/CNC/CMM leaves the ward.

Time allowance will be made in the workload of the designated Shift Coordinator to ensure staff management, care delivery, patient safety and clinical administration can be attended to.

Christchurch Hospital - the Shift Coordinator role when rostered, in most cases is not assigned individual patients but contributes to the clinical workload of the ward/unit as a whole. In some areas there will be capacity in the team to have a Shift Coordinator assigned patients at night or in a smaller unit.

Shift Coordinator

Attributes

- Self aware
- Honest and Courageous
- Resilient and adaptive
- Achieves goals
- Engages others
- Curious
- Manages work priorities

Leadership requirements:

- Strong communicator
- Positive and approachable
- Emotional intelligence
- Critical thinker
- Problem solver
- Can empower others
- Using resources wisely
- Advocacy
- Can manage difficult conversations
- Can manage unpopular decisions
- Can influence others
- Has a strong ethical underpinning to their practice
- Role model and supportive of changes in the workplace such as team nursing, bedside handover and Care Capacity Demand Management (including TrendCare).
- Ability to manage competing demands.



Communication/Handover Tasks

Charge Nurse Manager, Charge Midwife Manager or Clinical Nurse Coordinator (CNM/CNC)

- Two way communication of any conflicts, complaints, patient safety, nursing resource or maintenance issues
- Utilising TrendCare in workload management and workforce planning
 - check the Staff Allocate screen reflects the staff hours on that shift
 - check Inpatient Shift Data screen to confirm all patients are Actualised and Predicted for the next shift

Duty Nurse Manager (DNM) and/or Clinical Team Coordinator (CTC) Interface

- Know what needs to be escalated to DNM and what you need to be responsible for.
- Maintain communication with the DNM throughout the shift to
 - Keep them informed of current status of the area
 - Alert them of any issues/concerns such as patient acuity and skill mix
 - Communicate increased workloads in a timely manner that may lead to staffing overtime or missed meal breaks.

Within ward/unit

- Carry the pager/cell phone/Vocera for the area and respond accordingly.
- Be the central point of contact for the area in relation to Nursing or Midwifery issues and to give global overview of area.
- Receive an adequate ISBAR handover of relevant information from the CNM, CMM or N/MIC of the prior shift.
- Provide an adequate ISBAR handover of relevant information to the CNM, CMM or N/MIC of the oncoming shift.
- Set expectations at the beginning of the shift with the team, including
 - Need to inform him/her of all communications with the DNM, CTC or Medical staff
 - Communicating changes in caseload, patient acuity, unexpected situations
 - Working as a team
 - Being flexible with helping each other
- Maintain communication with Team Leaders/members of the area throughout the shift to ensure important information necessary for the smooth running of the team is fed back including changes in patient status/or any other issue that may impact on the “smooth” running of the area /department/service/ hospital.

Take responsibility for the Trend Care ‘Allocate Staff Screen’.

- Correct staff on duty including casual or agency staff
- Correct staff on at the right time
- Staff hours start in the correct column based on organisational expectations
- Daily updating of screen to reflect the activities of staff at the end of each shift

Staffing Tasks

- Attend staffing meetings.
- Maintain safe skill mix, redeploying staff when requested or as required to maintain patient safety (amending TrendCare to reflect any changes)



- Have knowledge of the Variance Response Escalation Management Flowchart.
- Ensure accuracy of TrendCare Allocate Staff Screen: adjust staffing area to reflect actual clinical hours available as Clinical in Department and other work e.g. clinic/triage/escort
- Allocate workloads that are fair and equitable and that resources meet acuity/skill mix demands of the ward/unit
- Ensure safe direction is in place for Enrolled Nurses/Hospital Aides/Health Care Assistants/Students. A maximum of one casual RN/EN should be used on an AM or PM shift where this can be reasonably anticipated. Where this becomes a problem the DNM and CNM will discuss the issue and provide additional monitoring.
- Allocate students to staff, documenting this in the Comments column on the TrendCare Allocate Staff screen. Where staff are working under the direction and delegation of an RN, the Shift Coordinator must ensure that this RN/RM is clearly identified (and understands direction and delegation responsibilities).
- Co-ordinate staff meal breaks to maintain appropriate skill mix cover and patient flow.
- Ensure all patients have been Categorised and care has been Predicted for the next three shifts (morning shift)
- Ensure all patients have been Actualised, including those admitted during the shift
- Review staffing requirements for the next two shifts (or next day in outpatient/ambulatory areas) for potential impact of staff sickness, looking for early resolution or future planning, notifying the DNM as early as possible if alterations to staffing levels are required.
- Provide clinical/hands on support when able.
- Have a knowledge of what is allowable in the employee agreements
- Have an understanding of organisational requirements around staffing, overtime, call backs, on calls.
- Delegate daily checks for area e.g. emergency equipment, drug checks etc.
- Within the community hospitals, casual staff are rostered as per employee agreements, and depending on patients' needs.

Direction and Delegation Tasks

- Have a full understanding of the expectations of the line manager relating to the Shift Coordinator role and associated responsibilities
- Be fully aware of the specific tasks, reports, meetings and other management systems to undertake/attend, in order to meet the role requirements for their specific workplace environment.
- "Take charge" and assume the role and authority that has been delegated.
- Delegate the Shift Coordinator role to another staff member during any absence (e.g. meal breaks, meetings) and ensure the team are aware of this delegation for the expected timeframe.
- Know the strengths of the team working on that shift and allocate/reallocate/delegate as appropriate.
- Ensure the RNs and Midwives are aware of who they are supervising e.g. EN/HCA/students
- Follow up maintenance issues that occur on the shift

Patient Flow Tasks

- Delegate which nurses or midwives are allocated to which patient, allocating patients geographically if possible, using TrendCare Workloads
- Have an overall picture of all patients'/clients acuity and current activity (including women under the care of Lead Maternity Carers (LMC).
- Maintain bed management: all admissions, discharges, and transfers are accurately reflected and recorded in TrendCare within 30 minutes of patient movement
- Maintain an up-to-date bed status record, via FloView if applicable, which includes patients going on leave and relatives/border babies staying overnight.
- Monitor Shift Variance for accuracy and commence Variance Response Management (VRM) Plans (once available)
- Coordinate Assertive Board Rounds/huddles within ward/unit.
- Attend cluster huddles.
- Co-ordinate admissions, transfers and discharges (as per local policy)
- Play an advisory role for speciality patients residing in overflow wards/units.
- Depending on area - understanding of Bed Plan, CapPlan, Hospital Status at a Glance (Haag), TrendCare to inform patient flow.
- In SMHS, ensure care of any consumers in seclusion is managed as per CDHB policy and their observations, room entries and appropriate reviews are conducted.

Support

- Provide leadership and adequate supervision of staff and patient care.
- Provide support to TrendCare users so that staff predict, update information and actualise the patients allocated to them according to TrendCare guidelines.
- Provide regular catch-ups with staff throughout the shift.
- Provide debriefing if required with staff.
- Provide support during and after clinical emergencies.
- Celebrate the success of the shift.

External Emergencies

- Lead the team in the case of fire, cardiac arrest and internal / external emergencies, including using the RT Broadcast Unit and having a knowledge of where the status reports are located within the area/unit.

Incidents/complaints

- Address any concerns raised by staff, patients and/or relatives and follow up as appropriate and know when to escalate.
- Coordinate initial management of serious or critical incidents or un-anticipated deaths and liaise with CNM/CMM/CTC/DNM. Ensure family whanau members have been informed if a consumer/patient/client is affected in the serious or critical incident
- Manage unexpected events, situations, conflicts, emergencies
- Complete Safety First if required.

TrendCare Allocation of hours for Shift Coordinator role



Below are the recommended standard shift coordinator hours for each area where there is not an appointed afterhours shift coordinator. This excludes AMAU, ED, ICU, Birthing Suite, Maternity and NICU. The allocation of hours is based on the average number of admissions and discharges per shift. The hours are to be split between clinical in department and shift coordination.

- Day coordination staffing area is to be used for Monday to Friday day shift.
- A/H coordination staffing area is to be used for evening and weekend coordination

The hours can be adjusted up or down depending on:

- Unit activity/churn
- Skill mix
- Staff supervision requirements
- Visitor management

Shift coordination includes all clinical staff hours allocated to co-ordinate evening and weekend shifts.

Activities may include:

- organising staffing for the current and subsequent shifts
- supervision of staff if there is a high complement of agency / casual / graduate nurses working on the shift

Where the ward / department manager is completing these activities, the hours are recorded in Clinical Administration.

The Shift Coordination staffing area must not be used for hours worked while performing patient care activities. e.g.

- doctor's rounds
- clinical assistance to other staff
- discussing patient condition with relatives and / or doctors
- organising transfers
- discharge planning
- meal relief for other staff

These activities are included in the acuity measurements and must be recorded in the Clinical in Department staffing area.

Below is the table recommending the shift coordination hours for each clinical area and can be adjusted based on the actual shift and the time required in the role.

For wards with appointed Associate Clinical Nurse or Midwife Managers the hours are allocated based on the rostered role.



Ward	AM	PM
ASH - Acute Assessment Unit	0	0
ASH - Ward 1	2	0
ASH - Ward 2 Asses & Rehab	3	0
BWD-AG	3	2
BWD-AU	1	0
BWD-B1	4	2
BWD-B2	4	2
BWD-BG	3	0
BWD-C1	4	2
BWD-C2	3	2
BWD-CG	2	0
BWD-D1	4	2
BWD-DG	3	2
BWD-FG	3	2
BWD-GG	4	2
BWD-HG	3	2
BWD-SUH	0	0
CHC Child Acute Assessment Unit	2	2
CHC-Bone Marrow Transplant Unit B6	2	2
CHC-Child Haematology Oncology Centre	2	2
CHC-Coronary Care Unit	2	2
CHC-Gynae Assessment Unit & Ward	8	3
CHC-Urology Unit / Ward	2	2
CHC-Ward 10	4	4
CHC-Ward 11	4	4
CHC-Ward 12	5	5
CHC-Ward 14	5	5
CHC-A3	5	5
CHC-SPCU	1	1
CHC-B3	3	3
CHC-SARA	2	2
CHC-A5	5	5
CHC-B4	5	5
CHC-A4	4	4
CHC-OTU	1	1
CHC-Ward 19	5	5
CHC-B7	2	2
CHC-A7	2	2
CHC-Paediatric High Dependency Unit	0	0
CHC-Ward 23	5	5



CHC-Ward 24	5	5
CHC-Ward 25	4	4
CHC-B5	4	4
CHC-Ward 27	5	5
CHC-B8	3	3
CHC-A8	4	4
CHC-Neuro Progressive Care Unit	2	2
Ais Seclusion	0	0
East Mental Health Inpatient	3	3
Kennedy Detoxification Unit	0	1
Mh Assess., Treatment & Rehab.	1	1
North Mental Health Inpatient	3	3
Psaid Inpatients Aroha Pai	1	1
South Mental Health Inpatient	3	3
Te Whare Hohou Roko	1	1
Te Whare Manaaki	2	2
Te Whare Mauriora	1	1
Tupuna Villa	2	2
West Mental Health Inpatient	3	3
Child & Adolescent Inpatient Unit	1.5	1.5
Seagar	3	3
C Ward - Eating Disorders Mothers & Babies	2	2

Policy measurement

Safe Staffing meeting feedback from delegates

Incident management data from Safety First – discussed at Safe Staffing meetings

Each area is to maintain TrendCare 'Gold Standard' categorisation and actualisation rates: 100% of shifts fully actualised every month

Supporting material

Care Capacity Demand Management Policy ref:2407432

Safe Staffing/Deployment Policies

Clinical Incident Management

CDHB Nursing Direction and Delegation policy

CDHB TrendCare Operational Guidelines ref:2406746

Service delivery: Nurse Midwife Policy ref: 2406314

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