



Amended - 21 May 2003

1. Availability of information re demand at ward level

- All wards/units must have made available to them:
 1. Monthly NHPPD reports containing monthly average Required NHPPD and Actual NHPPD including variances.
 2. On-line shift projection reports (i.e. staff required on daily/shift by shift) available through the system for all staff to review the current projected demand.
- Optional
 1. Some sites have (in addition) daily returns available that confirm the projection/allocation of staff.

2. Review/establishment of Units of Care (UOC)

- Units of Care (UOC) should be reviewed by a group of relevant nurse clinicians.
- Hospitals are to review policies and procedures to ensure that nurses at all levels can participate in the review processes. These must provide for at least:
 1. Notification of all (relevant) nurses when particular UOC are to be placed under review;
 2. The ability for nurses to identify issues or comment on the changes that should be considered in altering the UOC; and
 3. Ability for nurses to comment on draft changes to the UOC as the review group considers them.

3. Timings

- All sites must use the agreed DHS timings *process* (package¹), which requires the actual repeated timing of the Observations and Interventions (OI's) to be delivered and the determination of a mean time for inclusion in the UOC. Staff consultation should take place in the same manner as set out for the review of UOC's above.
- Where new UOC's are being developed or implemented without timings that have been validated through this process, the relevant nursing staff should be consulted about the interim timing to be used and this process should reflect the same consultative process as set out for the review of UOC's above.

¹ As agreed to in Principle by the ANF
DATE: 21 MAY 2003

- Ward nursing staff in consultation with their CNC are able to initiate review of timings associated with UOC's either for their ward/unit or generally by contacting the Excelcare Coordinator.
- The Excelcare Coordinator is able to assist nursing staff with any timing issues.

4. Time adjust

- The capacity for nurses to time adjust will be available either by:
 1. Approval in some settings to time adjust on the system directly; or
 2. Approval to time adjust after consultation with the Excelcare Coordinator, or
 3. By logging a request for time adjust on an agreed proforma for the approval of the CNC. The CNC must either approve the time adjust and notify the Excelcare Coordinator of the need to update the system retrospectively or discuss the request with the nurse if they believe that the request should be refused.
 4. The Excelcare Coordinator will provide a monthly report to the CNC on time adjust activity.

5. Education of nurses re use of the system

- Hospitals should review the orientation and induction processes for new staff to ensure that there is adequate time for the training of staff on the basic use of the system
- Staff should be identified in each clinical area to act as resource persons, mentors in relation to the effective use of the system.
- CNC's or delegate should conduct regular reviews and audits of the care plans generated by staff to ensure that they reflect the actual care required by patients and to assist staff to use the system effectively.

Source:

Department of Human Services
Directors of Nursing
Australian Nursing Federation