

Rochester General Hospital Clinical Staffing Committee Charter

Purpose

The Clinical Staffing Committee will work in collaboration with leadership, nurses, and other members of the care team to design and implement a clinical staffing plan. The Clinical Staffing Committee allows for frontline team members to be active participants in the staffing process.

Committee Responsibilities

- Development, oversight, and implementation of an annual clinical staffing plan.
- Semiannual review of the staffing plan against patient needs and known evidence-based staffing information, including the nursing sensitive quality indicators collected by the hospital.
- Complaints related to staffing are to be tracked, reviewed, assessed and responded to. Review, assessment and response to complaints regarding potential violations of the adopted staffing plan, staffing variations or other concerns regarding the implementation of the staffing plan are within the purview of the committee.
- Initial staffing plan to be submitted July 2022 and annually thereafter with implementation date of January 1st 2023 and annually thereafter.
- Clinical staffing plan and daily staffing information to be posted in a publicly visible area on each patient care unit.

Membership Eligibility

1. Team member to be in good standing
2. Understand staff planning process
3. Able to maintain collaborative relationships
4. Utilize a Peer Selection Process

Scope - Divisions

Med/Surg
Perioperative Services
Emergency Medicine
Womens Health
Critical Care
Cardiac Services
Behavioral Health
Pediatrics
Inpatient Dialysis
Cardiac Cath Lab
Non Invasive Cardiology
Interventional Radiology

All Committee Member Terms

Term – 2 year

Term Limits – 4 years

Meeting Frequency – Minimum semi-annually with ad hoc meetings as necessary

Location – variable

Rochester General Hospital Committee Composition

Management Members

1. Chief Nursing Officer, Shari McDonald/Assoc. CNO, Rachelle Stevens (alternate)
2. Assoc. Chief Operating Officer, Maura Snyder
3. Sr. Director, Nursing & Periop, Michelle Beatty
4. Interim VP Human Resources, Tom Vasey
5. Asst. Nurse Manager, Kevin Smith
6. Nurse Manager, Carlos Guevara
7. Nurse Manager, Sarah Collyer
8. Nurse Director, Kimberlee Blied
9. Nurse Director, Betsy Stockmeister
10. Nurse Manager, Jessica Ford
11. Nurse Manager, Morgan O'Shea
12. Nurse Director, Kristee Aliten
13. Director of Hospital/Nursing Operations, Lindsey Sweet
14. Manager, Nursing Services Behavioral Health, Letha Schaff
15. Nurse Manager, Kristen Paliani
16. Nurse Director, Melissa Stewart

Frontline Members and Roles (RN, LPN, PCT, other nursing support)

In the event a Frontline Member is unable to attend a meeting, they must let their manager know as soon as possible. The manager can identify another frontline team member that is in the same discipline/division to attend in their place.

1. Carmen Camelio, RN, MICU, RUNAP President (or delegate)
2. Emily Emmerson, RN, CNL, G1
3. Elizabeth Burgess, RN, Pediatric ED
4. Jessica Stein, RN, OR
5. Kathy Truesdale, RN, CNL, 5800
6. Kate Higgins, RN, MICU
7. Kelly Anderson, RN, PACU
8. Keshia Givens, RN, L&D
9. Kristen McMullen, RN, 7800
10. Leanne Coon, RN, MOU
11. Melissa Rogers, RN, CNL, Adult ED
12. Alysia Negron, RN, 6800
13. Sara Johnson, PCT, Sands 500
14. Timothy Bishop, RN, Cath Lab
15. Mary Burr, PCT, 5200
16. Shannan Hawes, LPN, 4800

Scribe - Mary Beth Irish, Sr. Executive Assistant