

EP10a—STAFFING, SCHEDULING, AND BUDGETING PROCESSES

ADDRESSING STAFFING NEED IN THE EMERGENCY DEPARTMENT

Provide an example with supporting evidence, when a clinical nurse(s) collaborated with a Nurse Assistant Vice President (AVP)/Nurse Director to evaluate data to address a unit-level staffing need.

Area E of the ED (606045-46-48) [ED] at NewYork-Presbyterian/Columbia University Irving Medical Center (NYP/Columbia) consisted of 15 treatment bays allocated for ED patients awaiting transfer to the inpatient floors. At the beginning of 2021, there was an increase in the volume of patients boarding in the ED causing a strain on throughput and on ED nurse staffing. ED boarding refers to holding admitted patients in the ED while awaiting an inpatient bed.

Clinical Nurses and Nurse Director Evaluate Data Related to ED Staffing

Clinical Nurses: Marly Sam, MSN, RN, CEN, and Natalia Ibarra, MSN, RN

Nurse Director: Catherine Halliday, MSN, RN, NEA-BC

Data Evaluated: 18 vacant nurse ED positions, 4 filled; 15:1 ED patients to nurse ratio; nurse onboarding time causing three-month delay

At NYP/Columbia, the Professional Practice Council is responsible for clinical staffing effectiveness and other related issues. Members include clinical nurses, labor union (New York State Nurses Association, NYSNA) representatives, and nursing leaders. Catherine Halliday, MSN, RN, NEA-BC, Director of Nursing, Cardiovascular Services, is the Professional Practice Council nurse leader representative. On July 28, 2021, Marly Sam, MSN, RN, CEN, clinical nurse (at the time), ED, and a Professional Practice Council member (at the time), and Natalia Ibarra, MSN, RN, clinical nurse, ED, council guest, attended the Professional Practice Council meeting to present ED data to advocate for additional ED nurses. Ms. Sam shared that out of 18 vacant ED nurse positions only four were filled at the time. Ms. Halliday stated that “the math was not

adding up,” validating the need for nurse staff in the ED. Ms. Ibarra clarified that the ED nurses were often caring for 15 patients to one nurse, which typically occurred in Area E, where ED patients were boarding. The Professional Practice Council members brainstormed solutions. Ms. Halliday inquired if the ED was utilizing travel nurses. Ms. Sam confirmed that they had Dynamic Military Personnel 3 (DMP3s) for three weeks in the ED. DMP3s were medical medics employed by the Department of Homeland Security who were approved through the governor’s office to assist during the COVID-19 surge in New York City. They functioned as ED technicians supporting the ED nurses. Ms. Sam asserted that even if they could fill the remaining vacancies, there would be a three-month staffing gap due to the onboarding of clinical nurses. The Professional Practice Council members also inquired about the use of float pool nurses and the use of financial incentives to address the ED’s nurse staffing needs. Ms. Halliday told the Professional Practice Council that she would follow up on the incentives with Courtney Vose, DNP, MBA, RN, APRN, NEA-BC, Vice President and Chief Nursing Officer (at the time) and placed follow-up on ED staffing in the action items. [EP10a.1—July 2021 Professional Practice Council Meeting Minutes](#)

Addressing the ED Staffing Need

Following the Professional Practice Council meeting, Ms. Halliday updated Vepuka Kauari, DNP, RN, CEN, Director of Nursing, ED, on what transpired at the Professional Practice Council meeting, especially the recommendation to use supplemental staffing. Dr. Kauari then met with Ms. Sam and Ms. Ibarra and recommended adopting a staffing model used at NewYork-Presbyterian/Weill Cornell Medical Center (NYP/Weill Cornell), which employed dedicated inpatient nurses for patient care of ED boarders awaiting transfer to the inpatient floors instead of relying on agency staff.

Dr. Kauari submitted a request for the nursing positions to the Off Budget Investment Team on September 26, 2021. This team, consisting of representatives from Human Resources, Operations, Finance, Strategic Sourcing, and Nursing, assess new Full-Time Equivalent (FTE) and/or Other Than Personal Service (OTPS) requests. The Off Budget Investment Team request form contained the following:

Project Description and Rationale: Dr. Kauari sought to improve patient care by creating a float pool for the ED’s Area E (boarding patients). The purpose of this Off Budget Investment Team submission was to determine if FTEs could be added to the ED budget to address the unit staffing needs. Her proposal included plans to offset the expenses by reducing agency spend. She justified the plan and described that the ED typically held 30 to 40 boarding patients waiting for inpatient beds. Since the ED was not budgeted to care for a high volume of boarding patients, overtime and agency dollars could be used to fund staffing for Area E. Dr. Kauari included the staffing model successfully implemented at

NYP/Weill Cornell, which had dedicated Emergency Department Inpatient Nurses (EDIN) providing care for this patient population instead of agency staff. The staff coverage calculation for Area E was based on an inpatient medicine unit staffing calculation.

The request included approval to hire 20 RN FTEs, with Dr. Kauari anticipating a 50 percent reduction in agency staffing if nurses were onboarded in time for the new hire orientation scheduled on December 4, 2021. The potential impact for some agency reduction could be observed as early as the end of November if the positions were promptly opened and filled. [EP10a.2—Off Budget Investment Team Submission and Evaluation Form](#)

Fulfilling the Staffing Need

On October 21, 2021, upon approval by the Off Budget Investment Team of 15.61 RN positions of the 20 requested, Jovana Ciric, senior financial analyst, Budget, emailed Marie-Laure Romney, MD, MBA, Vice President of Operations (at the time), who informed Dr. Kauari that Finance released the 15.61 RN positions under cost center 606046 ED Area E. [EP10a.3—FTE Approval Email](#)

These positions were posted on the NewYork-Presbyterian career site. After recruitment efforts, the following ED Area E clinical nurses were hired into the new positions:

1. Natoya Hunter, BSN, RN
2. Fanny Lee Yan, BSN, RN, MEDSURG-BC
3. Gianna Hagnell, BSN, RN
4. Wookyung Jung, BSN, RN, CMSRN
5. Tracy Permanand, BSN, RN
6. Jacqueline Darfour, BSN, RN
7. Seanne Guim, BSN, RN
8. Young Cho, BSN, RN
9. Eunjung Choi, BSN, RN, OCN
10. Dalae Han, BSN, RN
11. Christian Yap, BSN, RN
12. Dexterie Perez, BSN, RN
13. Alyssa Villafana, BSN, RN
14. Ayeon Kim, BSN, RN
15. Barbara Joyce Y. Tang, BSN, RN
16. Philomise Etienne, BSN, RN

[EP10a.4—January 2024 HR Report](#)

Professional Practice Council
July 28th, 2021
12:00-1:30pm
Zoom

NAME	ATTENDANCE
Almarie Cabredo	
Amelia Fortunato, RN	
Anthony Ciampa, RN	Present
Catherine Halliday, RN	Present
Christine Demo, RN	Excused
Claudia Copeland, RN	Present
Cora Aizza Jauga Garcellano, RN	Present
Dolores Steele, RN	Present
Emily Jackson, RN	Present
Jaiveer Grewal, RN	Present
Jeffrey Hammond, RN	Present
Kristin Fay, RN	Absent
Leena Varghese	Present
Lori Wagner, RN	Present
Lucille Austria, RN	Present
Marly Sam, RN	Present
Maxy Escalante, RN	Present
Rebekah Riley, RN	Present
Rachel Feldman	Excused
Theo Firurasin, RN	Present
Guests:	
Natalia Ibarra, RN	Present
Sherwyn Lumaque	Present
Rosy J. Peralta	Present
Ilana Sheinberg	Present
Minerva Vargas	Present

DISCUSSION

7HN Staff Attended

The question was asked how we can reach the grid guidelines and can patients go to other units to offset. It was noted there is no active discussion to have 7HN converted to a stepdown since this will require more resources. The long term strategy will focus on Travelers and Open House to fill vacancies. Cathy said due to the current JCAHO survey this week she didn't speak with

Maureen, but the unit is recruiting and that she met 3 times with the staff to go over strategy. She also noted she is open to suggestions. It was clarified that CTICU was only sending VAD Patients to 7HN.

There were discussions on the following:

- Working OT in other unit
- How to make NYP competitive
- How to retain services
- Float pool have no nurses to give
- It was confirmed Float Pool does not hire new grads
- It was requested to advise when people are leaving requisition can be put in
- It was confirmed we are receiving new grad applications
- It was noted we need experience to fill some vacancies
- It was suggested to put proposal to recruitment for bonus when recruiting
- Cathy will escalate all suggestions to Courtney
- What is immediate plan – Cathy advised we have recruited 4 travelers
- 7HN has 2 staff starting on August 9
- Could we over hire since we know when nurses graduate they will leave- Cathy noted in CCU there are 12 NPs so not everyone leaves after graduating
- It was suggested to invite Theo and Jai to 7HN meeting.

ED – Marly Sam (8 new coming/3 Transfer)

ED at Surge – Lots of people leaving – delayed with staff starting. Everyday below grid.

Has been a steady up take for this time of year. Need to get to grid

Per Cathy math not adding up.

Natalia Ibarra gave overview of day in ED 15:1 – need help immediately

Cathy asked if there was discussion on acquiring Travelers

Marly advised they had DMP3 for 3 weeks. She shared out of 18 positions only 4 filled and suggested if we can increase rate to Covid rate and also increase rate for Travelers pay so as to attract nurses coming to us. She noted if vacancies are filled there will be 11 people on orientation for 8 weeks which will leave 3 months without help.

It was suggested using the close unit to offset burden in ED

It was asked if it is easier to get travelers for MedSurg.

Lucille could not get travelers – no success. Looking at 6HS to see how can get resources.

It was asked if the ED could have access to the Float Pool nurses.

Jai noted problems with staffing is throughout the hospital and is not localized.

Natalia noted if we cannot get people to come here to work if there was any thought of taking care of the nurses here and giving incentives to attract nurses to come. Cathy advised this was presented twice before but she will pass along again.

Cathy will follow up with 7HN and ED and will mention to Courtney about bonus for OT.

ACTION ITEMS	WHEN	RESPONSIBLE PERSON
Staffing 7HN & ED		Cathy will follow up

New York-Presbyterian Hospital							
Off Budget Investment Team (OBIT): Submission & Evaluation Form							
PROJECT NAME:	Milstein, Vepuka E, Kauari, Premium Labor Reduction, Emergency Department, 44465	Submission Date:	9/26/2021				
Complete unbranded sections ONLY (shaded cells populate automatically), with as much detail as available and submit electronically to PresInvest@nyu.edu							
Totals	0	\$0					
4. Non-Patient Care Revenue (increase/decrease in case volume for existing or new services, in \$'s relative to budgeted baseline) <i>(Enter increases in revenue as positives and decreases as negatives)</i>							
Revenue Account	Total	Impact Date	Impact End Date (one-time impact only)				
Totals	\$0						
COMPLETE FOR ADDITIONAL RESOURCE REQUESTS ONLY (i.e., OBIT)							
PERFORMANCE CRITERIA & SCREENING FOR ADDITIONAL RESOURCES REQUIRED TO ACHIEVE FINANCIAL BENEFIT							
1. What is the funding source for the additional resources? Other (please specify on the line below):							
Plant, COO or VP Operations/CNO		Reduction in Agency and OT spend.					
2. What are the current number of FTE vacancies in the cost centers identified in the proposal? 3							
3. How many of these FTE vacancies have been outstanding for more than 6 months? 0							
Resource: R. Krieger							
4. What is the year-to-date overtime and agency use (in FTEs) in the cost centers identified in the proposal? 33,55351111111111							
Resource: Kronos Productivity Report (please attach)							
5. What is the current vacancy rate for the department? 3.62%							
<i>(defined as the number of open requisitions divided by total position numbers (budgeted and unbudgeted))</i>							
Resource: R. Krieger							
6. What is the department's turnover rate? 9.90%							
<i>(defined as number of terminations / average head count for the trailing twelve month period)</i>							
Source: HRIS							
7. What is the basis for justifying the additional demand in volume for the unit of service in question? Not Applicable							
needs of the patients. See supplemental documentation for more details.							
8. What is the basis for justifying the reduction in expense using additional resources?							
9. What is the impact of this proposal on each of the following support areas and who has attested to this determination?							
EVS: Increased Need							
Materials Management: No Change							
Security: No Change							
Other Supp. Svcs: No Change							
10. Will the investment cover its costs in the current fiscal year? No							
11. What is the historical and current performance of the unit of service? Unit of Service: Visits (excludes LWBS and Admitted)							
<i>(Complete actual volume only if the unit of service is not budgeted for)</i>							
Performance	Prior Calendar Year			YTD (enter month number)			7
	Actual	Budget	Variance	Actual	Budget	Variance	
Volume	85,613	79,068	6,545	52,767	49,525	3,262	
Revenue	\$32,451,727	\$37,830,675	(\$5,378,948)	\$20,606,033	\$23,504,933	(\$2,898,900)	
Resource: J. Atwell							
				Year over Year Actual Growth (Vol)			6%
				Year over Year Actual Growth (Rev)			9%
12. What is the historical and current performance of the cost center(s) and/or account(s) for which the reduction in expense is being proposed?							
Cost Center	Prior Calendar Year			YTD (enter month number)			7
	Actual	Budget	Variance	Actual	Budget	Variance	
Labor							
806048 - MILSTEIN EMERGEN	\$21,277,301	\$18,203,493	-\$3,073,808	\$12,168,791	\$10,901,882	-\$1,266,909	
806046 Area E			\$0	\$788,946	\$0	-\$788,946	
			\$0			\$0	
			\$0			\$0	
Sub-Total (Labor)	\$21,277,301	\$18,203,493	-\$3,073,808	\$12,957,737	\$10,901,882	-\$2,055,855	
Non-labor (OTPS)							
806048 - MILSTEIN EMERGEN	\$3,980,555	\$2,991,095	-\$989,460	\$2,756,742	\$2,144,215	-\$612,527	
806046 Area E	\$0	\$0	\$0	\$1,700	\$0	-\$1,700	
			\$0			\$0	
			\$0			\$0	
Sub-Total (Non-labor)	\$3,980,555	\$2,991,095	-\$989,460	\$2,758,442	\$2,144,215	-\$614,227	
Totals	\$25,257,856	\$21,194,588	-\$4,063,268	\$15,716,180	\$13,046,097	-\$2,670,082	
Resource: J. Chou							
				Year over Year Actual Growth (Labor)			4%
				Year over Year Actual Growth (Non-labor)			19%

New York-Presbyterian Hospital				
Off-Budget Investment Team (OBIT): Submission & Evaluation Form				
PROJECT NAME:	Mistain, Vepuka E. Kauai, Premium Labor Reduction, Emergency Department, 44465			Submission Date: 9/26/2021
Complete unshaded sections ONLY. Shaded cells populate automatically, with as much data as available and submit electronically to ffr@nyp.org				
13. How will the addition of the requested labor and OTPS resources maintain Truven/PACT metrics between the 25-50th percentile?				Truven of PACT Benchmark Percentile
Resource: D. Moller			Current	w. add'l FTEs/OTPS
Enter benchmark metric: Patient Visits			>50%	>50%
14. Please provide the department(s)/ cost per unit of service trend.				
Prior Year	Current Year	Current Year w. Requested resources	Year over Year Variance	Proposed Variance
\$295.02	\$297.73	\$297.73	1%	1%
15. Provide any additional comments supporting the request for additional resources in the space provided (e.g. - impacts to patient experience, patient safety, quality outcomes, regulatory compliance, etc.)				
<p>Area E of the ED contains 15 treatment bays but on any given day the ED has 30-40 boarding patients waiting to go up to the floors. The Emergency Department is not budgeted to care for a high volume of boarding patients. Overtime and agency dollars are used to fund staffing for Area E. We would like to staff our ED boarding patients with a similar model to NYP/Cornell who has dedicated EDIN (Emergency Department Inpatient Nurses) providing care for their patients instead of agency staff.</p> <p>The purpose of this OBIT submission is to determine if FTEs should be added to the Emergency Department budget to provide coverage for Area E. The staff coverage calculation for Area E is based on an inpatient medicine unit staffing calculation.</p>				
SUBMISSIONS, RECOMMENDATIONS & APPROVALS				
Off-Budget Investment Team Recommendation:				Date:
Comments:				
Escalation Team Decision:				Date:
Comments:				

From: Ciric, Jovana <joc9330@nyp.org>
Sent: Thursday, October 21, 2021 2:02 PM
To: Ohia, Obed <obo9006@nyp.org>
Cc: Romney, Marie-Laure <msr9015@nyp.org>; Chou, Judy Huilan <huc9001@nyp.org>
Subject: AREA E Additional FTEs

Hi Obed,

Hope all is well. Finance agreed to release additional 15.61 RN positions and 31.40 Emergency Room Techs for Area E. These positions should be opened in **CC 606046** Area E Emergency in Job Codes **228 CNI** and **105 Emergency Room Technician**. Please submit a TO change form and inform department manager to create new positions in Workday. Let me know if you have any questions. Thank you.

Sincerely,

Jovana Ciric
Sr. Financial Analyst – Budget
NewYork-Presbyterian Hospital
Tel: 646-297-9804

From: "Romney, Marie-Laure" <msr9015@nyp.org>
Date: Thursday, October 21, 2021 at 2:29 PM
To: "Ciric, Jovana" <joc9330@nyp.org>, "Ohia, Obed" <obo9006@nyp.org>
Cc: "Chou, Judy Huilan" <huc9001@nyp.org>, Vepuka <kaueive@nyp.org>
Subject: RE: AREA E Additional FTEs

Thank you Jovana. Looping in Vepuka to open the lines.

Best,
Marie

Marie-Laure Romney, MD, MBA
Vice President of Operations
NewYork-Presbyterian Hospital
Columbia University Irving Medical Center
O: [212.305.7675](tel:212.305.7675) | C: [646.261.1395](tel:646.261.1395) | msr9015@nyp.org

From: Kauari, Vepuka <kaueive@nyp.org>
Sent: Thursday, October 21, 2021 5:14 PM
To: Romney, Marie-Laure <msr9015@nyp.org>; Ciric, Jovana <joc9330@nyp.org>; Ohia, Obed <obo9006@nyp.org>
Cc: Chou, Judy Huilan <huc9001@nyp.org>
Subject: Re: AREA E Additional FTEs

Dr. Romney Thank you!!!!!! and Jovana let us connect tomorrow .

Best,

/v

Vepuka E. Kauari DNP, RN, CEN

Director of Nursing

Emergency Departments

Tel: 212.305.2345 | Mobile: 914.325.0136 | Email: kaueive@nyp.org

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Morgan Stanley
Children's Hospital

 AMERICAN COLLEGE OF SURGEONS
Verified Trauma Center

From: "Ciric, Jovana" <joc9330@nyp.org>
Date: Monday, October 25, 2021 at 8:55 AM
To: Vepuka <kaueive@nyp.org>
Cc: "Ohia, Obed" <obo9006@nyp.org>
Subject: RE: AREA E Additional FTEs

Good Morning Vepuka,

I was off on Friday and did not have a chance to connect with you. Were you able to request positions?
Do you have any questions? Thank you.

Sincerely,

Jovana Ciric

Sr. Financial Analyst – Budget

NewYork-Presbyterian Hospital

Tel: 646-297-9804

From: Kauari, Vepuka <kaueive@nyp.org>
Date: Monday, October 25, 2021 at 11:29 AM
To: Ciric, Jovana <joc9330@nyp.org>, Ghany, Shirley <ghanysh@nyp.org>
Cc: Ohia, Obed <obo9006@nyp.org>
Subject: Re: AREA E Additional FTEs

Happy Monday Jovana

Adding Shirley to coordinate with you today,

Thank you

/v

Vepuka E. Kauari DNP, RN, CEN
Director of Nursing

Emergency Departments

Tel: 212.305.2345 | Mobile: 914.325.0136 | Email: kaueive@nyp.org

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(<http://infonet.nyp.org/QA/HospitalManual>).

Report from HR received on 1/22/2024

Worker	Job Title	Cost Center	Location	Manager	Director	Last Hire Date
Natoya Hunter	Clinical Nurse I	606046 Area E Emergency Dept	NYP/Columbia University Irving Medical Center	Shirley Ghany	Vepuka Kauari	1/10/2022
Fanny Lee Yan	Clinical Nurse I	606046 Area E Emergency Dept	NYP/Columbia University Irving Medical Center	Shirley Ghany	Vepuka Kauari	1/10/2022
Gianna Hagnell	Clinical Nurse I	606046 Area E Emergency Dept	NYP/Columbia University Irving Medical Center	Shirley Ghany	Vepuka Kauari	1/10/2022
Wookyung Jung	Clinical Nurse I	606046 Area E Emergency Dept	NYP/Columbia University Irving Medical Center	Shirley Ghany	Vepuka Kauari	1/10/2022
Tracy Permanand	Clinical Nurse I	606046 Area E Emergency Dept	NYP/Columbia University Irving Medical Center	Shirley Ghany	Vepuka Kauari	1/10/2022
Jacqueline Darfour	Clinical Nurse I	606046 Area E Emergency Dept	NYP/Columbia University Irving Medical Center	Shirley Ghany	Vepuka Kauari	1/10/2022
seanne guim	Clinical Nurse I	606046 Area E Emergency Dept	NYP/Columbia University Irving Medical Center	Shirley Ghany	Vepuka Kauari	2/22/2022
Young Cho	Clinical Nurse I	606046 Area E Emergency Dept	NYP/Columbia University Irving Medical Center	Shirley Ghany	Vepuka Kauari	2/7/2022
Dalae Han	Clinical Nurse I	606046 Area E Emergency Dept	NYP/Columbia University Irving Medical Center	Shirley Ghany	Vepuka Kauari	3/7/2022
Dexterie Perez	Clinical Nurse I	606046 Area E Emergency Dept	NYP/Columbia University Irving Medical Center	Shirley Ghany	Vepuka Kauari	3/21/2022
Alyssa Villafana	Clinical Nurse I	606046 Area E Emergency Dept	NYP/Columbia University Irving Medical Center	Shirley Ghany	Vepuka Kauari	4/4/2022
Ayeon Kim	Clinical Nurse I	606046 Area E Emergency Dept	NYP/Columbia University Irving Medical Center	Shirley Ghany	Vepuka Kauari	4/4/2022
Christian Yap	Clinical Nurse I	606046 Area E Emergency Dept	NYP/Columbia University Irving Medical Center	Shirley Ghany	Vepuka Kauari	6/13/2022
Barbara Joyce Y. Tang	Clinical Nurse I	606046 Area E Emergency Dept	NYP/Columbia University Irving Medical Center	Shirley Ghany	Vepuka Kauari	5/2/2022
Philomise Etienne	Clinical Nurse I	606046 Area E Emergency Dept	NYP/Columbia University Irving Medical Center	Shirley Ghany	Vepuka Kauari	5/2/2022
Eunjung Choi	Clinical Nurse I	606046 Area E Emergency Dept	NYP/Columbia University Irving Medical Center	Shirley Ghany	Vepuka Kauari	6/13/2022