

LPCH Nurse Practice Committee – Job Description

CRONA is posting two positions for membership in the Nurse Practice Committee. Please read below for further information about the positions as well as a summary of related contractual language. Application for open positions must be submitted using the Consent to Serve form, available on the crona.org website on the Forms page. Applications must be received no later than July 26, 2019.

Length of Term/Time Commitment: Each position is for a two-year term, from September 2019 through August 2021. The Nurse Practice Committee meets monthly at the hospital main campus, on the second Thursday of the month. In addition to the monthly meeting, the Committee member may spend a small amount of time obtaining and reviewing information; such work may be done remotely.

Qualifications: Any CRONA Nurse in good standing¹ may apply for an open position. CRONA is seeking to represent all nursing practice areas, including inpatient, outpatient, and procedural. The ideal candidate will have knowledge of staffing and acuity matrix (where applicable), and an interest in supporting CRONA Nurses. The ideal candidate will have familiarity with topics such as Title 22, the CRONA contract, and hospital policies affecting nursing practice; or a willingness to acquire such knowledge. Must be able to communicate in a timely and effective manner.

Expectations: CRONA-appointed members of the Nurse Practice Committee participate in monthly meetings to discuss all topics on the monthly agenda. Committee members may be assigned to research relevant issues in order to prepare to discuss items on the agenda. Examples of this include researching issues related to ADOs (Assignment Despite Objection) filed by CRONA Nurses, or review of contractual language related to hospital policy. Members of the Nurse Practice Committee work with the CRONA Executive Board to coordinate and communicate about issues related to Nursing Practice. Must attend a minimum of 75% of meetings. Committee members are paid for time spent in meetings.

Membership in Nurse Practice Committee qualifies for 2 points for PNDP under Category F, Leadership.

CRONA's Collective Bargaining Agreement (CBA), also known as the CRONA contract, contains language specific to the Nurse Practice Committee, as well as language outlining specific issues that are within the purview of the Nurse Practice Committee. Next follows a summary of contract language that specifically mentions Nurse Practice. Only the language from each section that mentions Nurse Practice is shown; please see the complete CBA for more.

SECTION 31 NURSE PRACTICE COMMITTEE

31.1 Composition. The Nurse Practice Committee is a joint Employer/CRONA committee consisting of four (4) representatives selected by the Employer and four (4) Nurses selected by CRONA, and with advance mutual agreement, additional ad hoc Nurse or Patient Care Manager participants as the Committee

¹ See CRONA Bylaws, Article IV, Section 401.1 for definition of "member in good standing".

determines to be of assistance on particular issues or problems. In the event that either the Employer or CRONA wishes to have additional representatives appointed to the Nurse Practice Committee from departments outside the Department of Nursing who have CRONA R.N. staff, the appointment would be subject to the Committee's approval. This committee will have a co-chair from the Employer and from CRONA selected by the respective parties from the eight (8) appointed members.

31.2 Purpose. To promote, develop, and continually enhance professional nursing practice, effective utilization of nursing resources, and an organizational climate conducive to professional practice.

31.3 Responsibilities.

31.3.1 To discuss items mutually agreed to be of concern as issues affecting Nursing Practice by both the Employer and CRONA.

31.3.2 To discuss and develop guidelines for the involvement of Nurses and physicians in a collaborative partnership in the provision of excellent patient care.

31.3.3 To consult, explore problems, and make recommendations to the Vice President of Patient Care regarding issues arising from staffing and patient care assignments or from Nurse objections to assignments.

- a. Staffing is determined by a combination of professional judgment, acuity and staffing matrices. The Nurse Practice Committee may review each unit's current acuity and matrix tool; and monitor the appropriateness of staffing levels by reviewing the Nursing Department's benchmarks and quality indicators. Upon request, the Committee will review changes in the composition of personnel of the affected units which result in a material change in the duties or work load of Nurses working on the affected unit. Recommendations on staffing levels will be made to the Vice President of Patient Care. If the Nurse Practice Committee does not reach consensus on its recommendations, the issues will be referred for final discussion between the Vice President of Patient Care and the President of CRONA.

In meeting the staffing needs of the unit, the Resource Nurse is permitted to use judgment in adjusting staffing levels that may not be fully addressed by the acuity and staffing matrix.

- b. Assignment Despite Objection Form (ADO) as prepared by CRONA will be an open agenda item for review by the Nurse Practice Committee with recommendations, if any, made in accordance with

31.3.3. ADO forms will be made available on the units. The manager or designee shall respond in writing to this Assignment Despite Objection Form (ADO) within two (2) weeks after notification by CRONA. A copy shall be submitted to CRONA and the respective Patient Care Director.

31.3.4 To consider and make recommendations regarding changes that are desired from time to time by either party regarding "float regions" and "closed staffing units" before decision by the Vice President of Patient Care. The Committee will discuss ideas for other operational arrangements, if feasible, to minimize the need for Nurses to float outside their designated float region.

31.3.5 To develop guidelines for delegation of nursing care to non-R.N. staff.

31.4 Procedures.

- 31.4.1 Upon request of either the Employer or CRONA representatives, the issue or problem and the unit/region shall be identified and the Committee shall determine the appropriate procedure to discuss and review that issue or problem, including the appropriateness of inviting additional participants (Nurse(s) or Patient Care Manager(s)) from the unit or region to provide useful facts or particular expertise. The Committee shall defer placement of the issue on its agenda until the issue has been fully discussed and reviewed at the appropriate unit or region level.
- 31.4.2 The Nurse Practice Committee shall discharge its responsibilities in accordance with mutually agreed upon procedures. The Committee shall meet once a month, if necessary, to work on outstanding agenda items.
- 31.4.3 The Committee's discussions will focus on the facts of the particular issue and identification of potential ways, if any, to resolve the issues. The Committee shall attempt to prepare a joint recommendation to the Vice - President of Patient Care if appropriate to the particular issue or problem. If a joint recommendation is not made, either the Employer or CRONA representatives may request that the Committee refer the issue or problem for final discussion and review between the Vice President of Patient Care and the President of CRONA.
- 31.4.4 It is understood that in order to promote full exploration of issues and efforts at problem solving, no matters discussed or action taken as a result of the work of the Committee shall change or alter any of the provisions of the Agreement or the obligations or rights under the Agreement of either CRONA or the Employer.

Other CBA language referencing Nurse Practice Committee:

- 7.1.5 Prior to revising or establishing new qualifications and Clinical Performance Criteria for Clinical Nurse II, the Employer shall give the LPCH Nurse Practice Committee the opportunity to participate in a mutual effort to revise or establish such qualifications or criteria. Disputes regarding revised or new qualifications or criteria that are not resolved within forty-five (45) days of notification of CRONA may be submitted by CRONA to mediation, pursuant to the terms of Section 27.2.4, but such disputes shall not be subject to arbitration under this Agreement. Mediation shall occur within thirty (30) days of CRONA's submission of the dispute to mediation. Disputes not resolved at the Nursing Practice Committee or submitted to but not resolved in mediation may be resolved by the CNO. Unless agreed to by the Nurse Practices Committee or in mediation, the revised or new qualifications or criteria for Clinical Nurse II shall not be implemented by the CNO earlier than at least forty-five (45) days after the Employer has provided notice to CRONA of such changes if CRONA has not requested mediation during that time, or ninety (90) days after the Employer has provided notice to CRONA of such changes if CRONA has timely requested mediation. The Employer shall make the final determination of the definition of qualifications and criteria, and nothing shall restrict the Employer's right to determine the qualifications and criteria required for a particular Nurse classification.
- 7.7.1 From time to time, the Nurse Practice Committee shall meet and review the list of pre-designated appropriate sleep locations to discuss potential modifications or expansions to the list.
- 7.11.9 Each unit will maintain a list of qualified preceptors. In the event that a unit does not or will not have a sufficient number of qualified Preceptors, the matter will be discussed at Nurse Practice Committee.

CRONA and the Employer agree to work collaboratively to identify Nurses who are interested in becoming Preceptors.

- 15 ... Before changing the open or closed status of a unit, the Employer will notify CRONA and the affected Nurses and hold meetings through the Nurse Practice Committee no later than one (1) month before the suggested implementation.
- 15.3 Policy on Selection for Mandatory Floating (Open Staffing Units) . Where competence and skills of Nurses available for a mandatory float assignment are assessed by nursing supervision as providing equivalent qualifications for the assignment, seniority and the number of previous float assignments in the current calendar quarter (three (3) schedule periods) will be factored into the selection of the Nurse for the assignment. Mandatory floating will not be used to cover for voluntary time off in another unit. Staff will be floated in accordance with the floating policies developed by the Nurse Practice Committee.

Before changing this Policy, the Employer will present the proposed changes to the LPCH Nursing Practice Committee for consultation as to any recommendations for changes.

- 19.6 Closed Staffing. In an effort to promote staff satisfaction, each nursing unit will have closed staffing from 11:00 p.m. Wednesday until 11:00 p.m. Friday of Thanksgiving week, and from 7:00 a.m. December 23 until 7:00 a.m. December 27 and 7:00 p.m. December 30 until 7:00 a.m. January 2. A good faith effort will be made to staff according to the needs of each unit. During that period if the home unit's census is low, staff will have the choice between floating (if work is available on other units) or taking an EA day. Each unit will maintain a staff request EA/float list. "A" Days will be granted off during this period per the "A" Day Policy developed by the Nurse Practice Committee.
- 32.4 The Employer shall maintain a Workplace Violence Prevention Program compliant with applicable law. The Employer's Workplace Violence Prevention Program shall be discussed at Nurse Practice Committee at least annually. Nurse Practice Committee shall review the program as it affects Nurses and shall provide input on appropriate modifications, unit-based workplace violence prevention plans and training provided to Nurses. As part of these discussions at Nurse Practice Committee, the parties shall review the Workplace Violence Incident Log for incidents related to Nurses.
- 32.5 If an issue related to the Workplace Violence Prevention Program is placed on the agenda of a Nurse Practice Committee meeting, the Employer shall appoint a member of its Employee Safety Council to attend the meeting as a representative of the Employer.

SIDE LETTER Between Lucile Packard Children's Hospital And CRONA Re RESOURCE NURSE POSITIONS 2004

Any program to establish regular designated Resource Nurse positions for any unit will be discussed and details finalized in Nurse Practice Committee. Such details should include (but not limited to): the minimum number of clinical hours required to maintain clinical skills, etc., the clinical and leadership requirements, the number of permanent Resource Nurses required, and an evaluation process for the program.

SIDE LETTER Between Lucile Packard Children's Hospital And CRONA Re Packard 2.0 2019

The Hospital acknowledges that its intent is that Nurses who are affected by the move from the existing hospital to the new hospital will be provided the opportunity to maintain their current commitment

CRONA: LPCH Nurse Practice Committee Job Description; June 2019.

levels and shifts, and agrees to use reasonable efforts to provide Nurses with such an opportunity. The Hospital also agrees to discuss implementation of this process with CRONA through Nurse Practice Committee. CRONA acknowledges that this Side Letter does not affect the Hospital's management rights under the Agreement, except to the extent it obligates the Hospital to use reasonable efforts to provide Nurses the opportunity to maintain their current commitment levels and shifts, as provided above.

SIDE LETTER Between Lucile Packard Children's Hospital Stanford And CRONA Re Traveler Orientation 2019

- 3) c) In the event that the Employer determines that a unit has an insufficient number of Nurses already participating in the Preceptor Program available to orient Traveler Nurses, the matter will be discussed at Nurse Practice Committee.