

TITLE:	Staff Shortages & Contingency Planning	POLICY #:	XVIII-Q-10.00
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MANUAL	Emergency Management	APPROV. AUTH:	Administrator
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Staff Shortages & Contingency Planning Policy #: XVIII-Q-10.00

POLICY:

In order to address staffing shortages, in addition to preparing and implementing contingency plans, the Home's leadership team will:

- Work closely with all departments to understand hiring needs and ramp up hiring
- Work with all departments to implement cohorting
- Accelerate onboarding processes while maintaining quality
- Actively manage return to work
- Prevent work refusals through education, training, and enablement of team members

PROCEDURE:

The Administrator or designate will:

- 1) Develop/review contingency plan to:
 - Identify minimum staffing needs for each home area
 - Prioritize critical and essential services based on resident population needs
 - Identify backup for each shift and role and ensure training provided
- 2) Create contingency plan for leadership in the event that several critical roles can no longer attend work due to illness or other reasons and critical leadership gaps exist.
 - Identify team members who could potentially take on a leadership role.
 - This may also require discussions on available staffing support with HR, Support Services, Partners, and other institutions.
- 3) Recruit and train for as many vacancies as possible and hire to fill gaps across all areas as established in contingency plan. Prioritize RN, RPN, PSW/HCA/RCA.
- 4) Monitor government directives that impact team members, compensation, schedules, etc., as well as any other programs that offer team member support (e.g. emergency childcare). Communicate as appropriate.
- 5) Review staffing schedules, availability of alternate staff, and emergency contact numbers for team members.
- 6) Provide guidelines for team member cohorting and train department leads.
- 7) Limit PT and casual resources to one home area/floor as much as possible.
- 8) Work with Department managers/schedulers to:
 - Increase staffing to support additional requirements/surge capacity
 - Create contingency plans
 - Implement team member cohorting
 - Determine who should work from home

- Ensure schedule is in compliance with latest orders (e.g. no team members work in more than one location)
 - Improve team member engagement and morale
- 9) Work with department leads to identify backup schedulers.
 - 10) Redeploy team members who work in non-essential/suspended services.
 - 11) Closely monitor absenteeism, execute contingency plans as needed, and adjust staffing plans accordingly.
 - 12) Identify all available options to meet staffing needs, including:
 - Volunteers
 - Agency contracts
 - Health Unit support
 - Local healthcare facilities (e.g. hospital)
 - Emergency services (e.g. army)
 - Recruit college/university students, individuals from other sectors (e.g. hotels, restaurants)
 - Cross-training/universal roles (e.g. housekeeping and tray delivery)
 - Look at team member history (e.g. PSWs who were housekeepers) and how to leverage cross-skilling
 - 13) Review plans to offer team member hotel accommodation, transportation subsidy, grocery delivery/meals, etc. Ensure initiated and communicated as indicated.
 - 14) Consider adding scheduling staff to support outbreak needs.
 - 15) Discuss with Support Services and health authorities/hospital partners thresholds for requesting external staffing help and determine contact person.
 - 16) Place enhanced focus on team member engagement and morale as difficult situations arise (e.g. death of resident, team member).
 - 17) If using emergency staffing (e.g. army, hospital staff), discuss timeline for availability, create a plan to self-sustain staffing needs, and continue recruiting.
 - 18) Implement Return to Work protocols.

The HR Team will:

- 1) Collect information from team members, contractors, and volunteers about:
 - Availability
 - Skills (including cross training)
 - Likely or actual exposure to disease at home (as applicable)
- 2) Implement initiatives to increase team member engagement and empowerment and prevent high absenteeism in the event of an outbreak including:
 - Recognize team members' hard work often
 - Check in with team members
 - Organize engagement activities (e.g. sidewalk chalk messages, team video, etc.)
 - Ensure team members are aware of EAP and other resources available for their wellness
 - Mitigate team member fears by communicating protection measures taken/to follow

- 3) Discuss with team members ahead of time to understand whether they plan on attending work in anticipation of rapidly changing situations i.e. outbreak, weather that limits travel, etc.
- 4) Support the Home's leadership team as required to address staffing shortages and plan for contingencies.
- 5) Support conversion of as much casual and part-time team members as possible to full-time to facilitate cohorting and increase capacity.

Attachments: XVIII-Q-10.00(a) Staffing Contingency Plan Template
XVIII-Q-10.00(c) Staffing Shortage – Immediate Activities (Sample)
XVIII-Q-10.00(d) Priority Tasks – Clinical/Wellness (Sample)
XVIII-Q-10.00(e) Priority Tasks – Food and Nutrition (Sample)
XVIII-Q-10.00(f) Priority Tasks – Life Enrichment (Sample)
XVIII-Q-10.00(g) Priority Tasks – Housekeeping (Sample)
XVIII-Q-10.00(i) Staffing Contingency Assignment (Sample)