

TITLE:	Staff Contingency Plan Template	POLICY #:	XVIII-Q-10.00(a)
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MANUAL	Emergency Management	APPROV. AUTH:	Administrator
ORIGINAL ISSUE:	July 2022	SCOPE:	Sun Parlor Home
PAST REVISIONS:	Jan/23, Jan/24		
CURRENT REVISION:	January 2025		

STAFFING CONTINGENCY PLAN TEMPLATE – Policy # XVIII-Q-10.00(a)

The Staffing Contingency Plan is to be operationalized when staffing levels reach a critical level where care/services are at risk of interruption, allowing team members to quickly adapt to changing circumstances and minimizing disruption to the delivery of care/services.

There are three parts to this document:

- **100% Site Specific Staffing Plan:** Home to update with their normal complement of full staffing positions/hours/services provided (add or delete roles, services as applicable for your location)
- **Site Specific Staffing Contingency Plan:** Locations to update with their Full Time positions
- **Work Short Protocols:** Plan/Strategy for managing shifts with short staff

Percentage of positions w/in a 24 hour period	Team Member Positions Available	Prioritized Services
100%	Food and Nutrition: 17 Housekeeping: 11 Laundry: 7 Leadership: 15 Life Enrichment: 9 Maintenance: 6 PSW/HSW: 72.5 Ward Clerks: 4 RN: 10 RPN: 21 List others: consider using volunteers, essential caregivers	<input checked="" type="checkbox"/> Hydration & Nutrition <input checked="" type="checkbox"/> Medication Management <input checked="" type="checkbox"/> Medical & Symptoms Monitoring (Dialysis, O2) <input checked="" type="checkbox"/> Specialized Care (Wound TX) <input checked="" type="checkbox"/> Personal Care (bathing, toileting, grooming) <input checked="" type="checkbox"/> Maintenance <input checked="" type="checkbox"/> Therapeutic Services (PT/OT, Recreation) <input checked="" type="checkbox"/> Administration <input checked="" type="checkbox"/> Housekeeping <input checked="" type="checkbox"/> Laundry <input checked="" type="checkbox"/> Other
65%	Food and Nutrition: 11 Housekeeping: 7.5 Laundry: 4.5 Leadership: 9.5	<input checked="" type="checkbox"/> Hydration & Nutrition <input checked="" type="checkbox"/> Medication Management <input checked="" type="checkbox"/> Medical & Symptoms Monitoring (Dialysis, O2)

Percentage of positions w/in a 24 hour period	Team Member Positions Available	Prioritized Services
	Life Enrichment: 6 Maintenance: 4 PSW/HSW: 47 Ward Clerks: 2.5 RN: 6.5 RPN: 14 List others: consider using volunteers, essential caregivers	<input checked="" type="checkbox"/> Specialized Care (Wound TX) <input checked="" type="checkbox"/> Personal Care (bathing, toileting, grooming) <input checked="" type="checkbox"/> Maintenance – urgent only <input checked="" type="checkbox"/> Therapeutic Services <input checked="" type="checkbox"/> Administration – urgent only <input checked="" type="checkbox"/> Housekeeping <input checked="" type="checkbox"/> Laundry <input type="checkbox"/> Other
50%	Food and Nutrition: 8.5 Housekeeping: 5.5 Laundry: 3.5 Leadership: 7.5 Life Enrichment: 4 .5 Maintenance: 3 PSW/HSW: 37 Ward Clerks: 2 RN: 5 RPN: 11 List others: consider using volunteers, essential caregivers	<input checked="" type="checkbox"/> Hydration & Nutrition <input checked="" type="checkbox"/> Medication Management <input type="checkbox"/> Medical & Symptoms Monitoring (Dialysis, O2) <input type="checkbox"/> Specialized Care (Wound TX) <input checked="" type="checkbox"/> Personal Care (bathing, toileting) <input checked="" type="checkbox"/> Maintenance – urgent only <input type="checkbox"/> Therapeutic Services <input checked="" type="checkbox"/> Administration – urgent only <input checked="" type="checkbox"/> Housekeeping <input checked="" type="checkbox"/> Laundry <input type="checkbox"/> Other
35%	Food and Nutrition: 6 Housekeeping: 4 Laundry: 2.5 Leadership: 5 Life Enrichment: 3 Maintenance: 2 PSW/HSW: 26 Ward Clerks: 1 RN: 3.5 RPN: 8 List others: consider using volunteers, essential caregivers	<input checked="" type="checkbox"/> Hydration & Nutrition <input checked="" type="checkbox"/> Medication Management <input type="checkbox"/> Medical & Symptoms Monitoring (Dialysis, O2) <input type="checkbox"/> Specialized Care (Wound TX) <input checked="" type="checkbox"/> Personal Care (toileting) <input type="checkbox"/> Maintenance <input type="checkbox"/> Therapeutic Services <input type="checkbox"/> Administration <input checked="" type="checkbox"/> Housekeeping <input type="checkbox"/> Laundry

Percentage of positions w/in a 24 hour period	Team Member Positions Available	Prioritized Services
		<input type="checkbox"/> Other

WORK SHORT PROTOCOLS

As per provincial legislation, a Staffing Contingency Plan is to be put into operation if needed, especially in case of emergencies, and to allow staff to quickly adapt to changing circumstances to minimize disruption to the delivery of care/services.

When Work Short Protocols are initiated, possible strategies that are to be used to replace the vacant shift and strategies that are to be implemented to provide resident care are:

- Initiate Call In Roster as per Collective Agreement (if applicable)
- Extend Shifts
- Reassign work assignments i.e. if trained as PSW/HCA but works in laundry
- Utilize Agency, as needed
- Call local vendors for support i.e. dry cleaning for laundry, catering for meals, restaurants for staffing
- Contact union (if applicable).

NURSING DEPARTMENT WORK SHORT PROTOCOLS

Instructions

- List the potential vacant positions that would require alternate work assignments
- Develop a location-specific plan/strategy to provide directions on what to do during vacancies
- Identify routines/tasks that **must** be completed despite the staffing complement for that shift.
- During outbreaks, cohorting principles to be maintained as much as possible.

List all duties that **must be done** (Priority Tasks) regardless if working with full complement. For example:

- Residents dressed appropriately
- Oral Care
- Continence Care
- Repositioning
- Medications
- Time Sensitive Treatments/Wound Care
- Nutrition/Hydration
- Restriction of large activities
- Life Enrichment to assist with meals/nourishments
- Providing additional fluids and nutrients
- Assisting with meals
- Recording intake
- Progress Notes/Shift to Shift Communication

PSW/HCA Work Short Protocol

PSW/HCA Critical Staff Level	Vacant Shift	Plan/Strategy	Duties That Must be Done
2 or less on home area PSW/HCA	Days	<input type="checkbox"/> Call all available PSW/HCA <input type="checkbox"/> Bring staff in early or stay late <input type="checkbox"/> Reassign staff, review resident census/complement <input type="checkbox"/> Call other departments to assist <input type="checkbox"/> Pull 1:1 as appropriate <input type="checkbox"/> Pull float/short shifts <input type="checkbox"/> Partner up with other floors to provide assistance with showers and meals <input type="checkbox"/> Reschedule bathing/adjust to bed baths <input type="checkbox"/> Nurses to assist with care <input type="checkbox"/> Call Agency as required <input type="checkbox"/> Utilize support from multidisciplinary team (i.e. LE Staff/HSK for meal service assistance and portering) <input type="checkbox"/> Leadership team members to assist where able (meals/portering/spotting transfers/independent residents/monitoring)	Provide supervision and/or assistance to the residents in the activities of daily living including eating, dressing, transferring, toileting, hygiene, and grooming, See Priority Tasks
2 or less on home area PSW/HCA	Afternoons	<input type="checkbox"/> Call all available PSW/HCA <input type="checkbox"/> Call other departments to assist <input type="checkbox"/> Pull 1:1 as appropriate <input type="checkbox"/> Bring staff in early or stay late <input type="checkbox"/> Reassign staff, review resident census/complement <input type="checkbox"/> Pull float/short shift <input type="checkbox"/> Partner up with other floors to provide assistance with showers and meals <input type="checkbox"/> Reschedule bathing/adjust to bed baths <input type="checkbox"/> Nurses to assist with care <input type="checkbox"/> Utilize support from multidisciplinary team (i.e. LE Staff/HSK for meal service assistance and portering) <input type="checkbox"/> Leadership team members to assist where able (meals/portering/spotting	Provide supervision and/or assistance to the residents in the activities of daily living including eating, dressing, transferring, toileting, hygiene, and grooming See Priority Tasks

PSW/HCA Critical Staff Level	Vacant Shift	Plan/Strategy	Duties That Must be Done
		transfers/independent residents/monitoring) <input type="checkbox"/> Call Agency as required	
9 or less PSW/HCA in the Home (or assigned as PSW/HCA)	Nights	<input type="checkbox"/> Call all available PSW/HCA <input type="checkbox"/> Call other departments to assist <input type="checkbox"/> Pull 1:1 as appropriate <input type="checkbox"/> Bring staff in early or stay late <input type="checkbox"/> Reassign staff, review resident census/complement <input type="checkbox"/> Registered staff to assist with care <input type="checkbox"/> Call in an additional RPN/RN <input type="checkbox"/> Manager on call, Leadership team to come in for support as needed <input type="checkbox"/> Call Agency as required	Provide supervision and/or assistance to the residents in the activities of daily living including transferring, toileting, hygiene, repositioning. and grooming See Priority Tasks

RN/RPN Work Short Protocol

Nurse Critical Staff Level	Vacant Shift	Plan/Strategy	Duties That Must be Done
1 or less RN	Days/ Afternoon s	<input type="checkbox"/> Call all available RNs <input type="checkbox"/> Ask RN to stay later <input type="checkbox"/> Ask RN to come in early <input type="checkbox"/> Replace with Agency or Nurse Leader as needed <input type="checkbox"/> Replace with RPN (as long as ADON or DON is in building) <input type="checkbox"/> Re-assignment of Registered Staff onsite to cover all home areas	<ul style="list-style-type: none"> ▪ In-Charge duties as assigned ▪ Resident assessment and documentation of high risk issues (i.e. Falls, injuries, change in conditions) ▪ Medications ▪ Time Sensitive Treatments – skin & wound dressings, dialysis ▪ All possible tasks that can be delegated are to be delegated See Priority Tasks
Less than 1 RN	Nights	<input type="checkbox"/> Call all available RNs <input type="checkbox"/> Ask RN to stay later <input type="checkbox"/> Ask RN to come in early <input type="checkbox"/> Replace with RPN <input type="checkbox"/> Ensure RN/Nurse Leader on-site <input type="checkbox"/> Re-assignment of Registered Staff onsite to cover all neighbourhoods	<ul style="list-style-type: none"> ▪ In-Charge duties as assigned ▪ Resident assessment and documentation of high risk issues (i.e. Falls, injuries, change in conditions) ▪ Medications ▪ Time Sensitive Treatments – skin & wound dressings, dialysis ▪ All possible tasks that can be delegated are to be delegated See Priority Tasks

Nurse Critical Staff Level	Vacant Shift	Plan/Strategy	Duties That Must be Done
6 or less RPN (or assigned as)	Days/Afternoons	<input type="checkbox"/> Call all available RPNs/RNs <input type="checkbox"/> Ask RPN/RN to stay later <input type="checkbox"/> Ask RPN/RN to come in early <input type="checkbox"/> Have RPN/RN cover additional 0.5 home area <input type="checkbox"/> Replace with Agency as needed <input type="checkbox"/> Re-assignment of Registered Staff onsite to cover all home areas (RNs, Education/Committee work (BSO, S&W, IPAC))	<ul style="list-style-type: none"> ▪ Resident assessment and documentation of high risk issues (i.e. Falls, injuries, change in conditions) ▪ Medications ▪ Time-Sensitive Treatments <p>See priority Tasks</p>
< 2 Registered Staff	Nights	<input type="checkbox"/> Call all available RPNs/RNs <input type="checkbox"/> Ask RPN/RN to stay later <input type="checkbox"/> Ask RPN/RN to come in early <input type="checkbox"/> Have RPN/RN cover additional 0.5 home area <input type="checkbox"/> Replace with Agency as needed <input type="checkbox"/> Re-assignment of Registered Staff onsite to cover all home areas (RNs, Education/Committee work (BSO, S&W, IPAC))	<ul style="list-style-type: none"> ▪ Resident assessment and documentation of high risk issues (i.e. Falls, injuries, change in conditions) ▪ Medications ▪ Time-Sensitive Treatments <p>See priority Tasks</p>

Food and Nutrition Work Short Protocol

Instructions

- List the potential vacant positions that would require alternate work assignments
- Develop a location-specific plan/strategy to provide directions on what to do during Cooks/Food Services Workers vacancies
- Identify routines/tasks that **must** be completed despite the staffing complement for that shift.
- During outbreaks, cohorting principles to be maintained as much as possible.

List all possible strategies that are to be used to replace the vacant shift and strategies that are to be implemented to provide resident care. For example:

- Initiate Call In Roster as per Collective Agreement (if applicable)
- Extend Shifts
- Reassign work assignments i.e. if trained as FSW but works in laundry
- Utilize Agency, as needed
- Call local vendors for support i.e. dry cleaning for laundry, catering for meals, restaurants for staffing

List all duties that **must be done** regardless if working with full complement. For example:

- Food Prep

- Food Delivery
- Production on home areas/neighbourhoods
- Serving and distribution – could be delegated
- Trays to isolation – could be delegated
- Removing dishes – cleaning tables – could be delegated
- Washing dishes and tidying servery – could be delegated or use disposable
- Providing additional fluids and nutrients – cart – could be delegated
- Assisting with feeding – could be delegated
- Disinfection of returned carts and all high touch in the kitchen/service areas – could be delegated

<i>Food Service Workers Vacant Position</i>	<i>Vacant Shift</i>	<i>Plan/Strategy</i>	<i>Duties That Must be Done</i>
3 or more Vacant	Days or afternoons	<input type="checkbox"/> Call all available food service workers and cooks <input type="checkbox"/> Ask food service workers and cooks to stay later <input type="checkbox"/> Ask Food and Nutrition to come in early <input type="checkbox"/> Replace with Agency (if applicable), FSS <input type="checkbox"/> FSS, or Cook <input type="checkbox"/> Re-assignment of food services workers, cooks	<ul style="list-style-type: none"> ▪ Food Prep ▪ Food Delivery ▪ Production on home areas ▪ Serving and distribution ▪ Trays to isolation ▪ Removing dishes – cleaning tables – could be delegated ▪ Washing dishes and tidying servery – could be delegated or use disposable ▪ Providing addition fluids and nutrients – cart ▪ Disinfection of returned carts and all high touch in the kitchen/service areas

Housekeeping & Laundry Work Short Protocol

Instructions

- List the potential vacant positions that would require alternate work assignments
- Develop a location-specific plan/strategy to provide directions on what to do during Hskpg/Food and Nutrition vacancies
- Identify routines/tasks that **must** be completed despite the staffing complement for that shift.
- During outbreaks, cohorting principles to be maintained as much as possible.

List all possible strategies that are to be used to replace the vacant shift and strategies that are to be implemented to provide resident care. For example:

- Initiate Call In Roster as per Collective Agreement (if applicable)
- Extend Shifts
- Reassign work assignments i.e. if trained as laundry but works in housekeeping
- Utilize Agency (as needed)
- Call local vendors for support i.e. dry cleaning for laundry, catering for meals, restaurants for staffing

List all duties that **must be done** regardless if working with full complement. For example:

HOUSEKEEPING

- #1 High Priority – cleaning and disinfection of environmental surfaces high touch areas only, Clean non-affected rooms first (non-ill residents), dirty/affected rooms last.
- Next Priority – Garbage Removal
- Next Priority – Common/communal areas
- Next Priority – Resident room and bathroom cleaning (Clean non-affected rooms first (non-ill residents), dirty/affected rooms last).
- Least priority – dusting, vacuuming, cleaning floors and carpets

LAUNDRY

- Disposable gowns high priority – disposable gowns preferred and always have stock on hand
- Personal laundry low priority – residents would not be dressed every day necessarily
- Peri-cloths – disposable wipes to be used to decrease amount of laundry
- Life Enrichment staff, volunteers can be trained to operate laundry machines

Housekeeping / Laundry Aides Vacant Position	Vacant Shift	Plan/Strategy	Duties That Must be Done
3 or more Vacant	Days/After noons	<input type="checkbox"/> Call all available environmental staff (EVS), including charge hands <input type="checkbox"/> Ask EVS to stay later <input type="checkbox"/> Ask EVS to come in early <input type="checkbox"/> Replace with Agency or external cleaning crew, if needed <input type="checkbox"/> Deploy Manager of Building Services if necessary <input type="checkbox"/> Re-assignment of EVS onsite to cover all home areas	<ul style="list-style-type: none"> ▪ #1 High Priority – cleaning and disinfection of environmental surfaces high touch areas only, clean non-affected rooms first (non-ill residents), dirty/affected rooms last ▪ Next Priority – garbage removal ▪ Next Priority – Common/communal areas ▪ Next Priority – Resident room and bathroom cleaning (clean non-affected rooms first (non-ill residents), dirty/affected rooms last)

Life Enrichment Work Short Protocol

Instructions

- List the potential vacant positions that would require alternate work assignments
- Develop a location-specific plan/strategy to provide directions on what to do during Life Enrichment vacancies
- Identify routines/tasks that **must** be completed despite the staffing complement for that shift.
- During outbreaks, cohorting principles to be maintained as much as possible.

List all possible strategies that are to be used to replace the vacant shift and strategies that are to be implemented to provide resident care. For example:

- Initiate Call In Roster as per Collective Agreement (if applicable)
- Extend Shifts
- Reassign work assignments
- Call local vendors for support i.e. virtual programming options and resources

List all duties that **must be done** regardless if working with full complement. For example:

- When not in an outbreak, provide Programs as per monthly Recreation Calendar/1:1 Programs
- Continue all applicable interventions to support residents with responsive behaviours
- Support virtual visits, window visits, phone visits with residents and family members
- Provide support/education to essential caregivers
- Clean/sanitize all materials used
- Assist with escorting to programs/meals
- Assist in Dining Rooms or with tray service
- Assist residents at meal times, encourage fluid intake
- Friendly visits
- Circle of Family and Friends meetings and follow-up to minutes within 10 days
- Complete Newsletter
- Create monthly Recreation Calendar
- Communication with Residents Council to continue

- 1:1 physiotherapy interventions to be supported in resident rooms and other locations

<i>Vacant Position</i>	<i>Vacant Shift</i>	<i>Plan/Strategy</i>	<i>Duties That Must be Done</i>
4+ Vacant Roles	Days/Afternoons	<input type="checkbox"/> Call all available Life Enrichment staff in to work <input type="checkbox"/> Ask LE staff to stay later <input type="checkbox"/> Ask LE staff to come in early <input type="checkbox"/> Support with volunteers <input type="checkbox"/> Deploy Manager if necessary <input type="checkbox"/> Re-assignment of LE staff onsite to cover all home areas	<ul style="list-style-type: none"> ▪ Initiate programs as per calendar ▪ Documentation ▪ 1:1 support for residents with responsive behaviours ▪ Connect Residents with family ▪ Assist other departments as directed ▪ Assist with portering ▪ Assist with meals and tray service ▪ Encourage fluid intake when supporting residents