Minnesota Nurses Association Proposal to Allina Health
May 31, 2019

ML Union Proposal #35

High Acuity Care (Replaces Staffing Review)

United Hospital ARTICLE 20 – PROFESSIONAL NURSING PRACTICE
   Append to Section h(5)

Mercy Hospital ARTICLE 21 – PROFESSIONAL NURSING PRACTICE
   Append to Section H5

ANW/PEI – ARTICLE 20 – LABOR MANAGEMENT PRINCIPLES AND ACTIVITIES

Unity Hospital – ARTICLE 11 – LABOR MANAGEMENT COMMITMENT

High Acuity Care

The Hospital and the Association recognize that from time to time there may be patients that require higher degree of dedicated nursing care. To address these elevated needs of patients with high acuity and detailed care plans, the parties agree that minimum standards will apply to patient care assignments, including but not limited to:

1. Airborne, Enteric and/or Contact Precaution

   RNs who have a patient assignment that includes a contact precaution/enteric/airborne patient shall not be required to take on a patient assignment greater than fifty percent (50%) of what the unit matrix would normally require.

2. Violent Restraint

   An RN who accepts a patient assignment where that patient is in physical restraints of any kind will not be part of the count for the staffing matrix on the unit for as long as that patient is in physical restraints.

3. One to One Care

   RN Grid Escalator: For every three (3) 1:1 care assignment present on a unit during a given shift, that unit shall add one RN to the unit above what the unit matrix or hospital recommends for adequate core staffing levels.

4. Active Withdrawal

    RNs who have a patient assignment that includes a patient in active withdrawal shall not be required to take on a patient assignment greater than fifty percent (50%) of what the unit matrix would normally require through the duration of the active withdrawal.

5. Diabetic Ketoacidosis Protocol

    RNs who have a patient assignment that includes a diabetic ketoacidosis patient shall not be required to take on a patient assignment greater than fifty percent (50%) of what the unit matrix would normally require until that patient's blood sugar level is stabilized.