

Procedure for providing and counting nursing staff according to the levels of surgical services and interventions.

Workforce Management (Staffing)

Principles, Values, Responsibilities:

- **Proper staffing affects all nurses' ability to provide safe, quality care at all levels of practice and in all sector areas.**
- **Nursing care delivery is multifaceted and requires standards-based measures such as:**
 - Identifying patient care needs;
 - Staff skills assessment;
 - Nursing staff education;
 - Determining the level of competence of the staff;
 - The job is to determine the (department) specificity.
- **Manager nurses have a professional duty to know about staffing processes and organizational functions as part of their responsibility to their patients.**
- **Four phases of the recruitment process:**
 - Forecasting (includes budgeting and planning);
 - Scheduling;
 - staffing;
 - Improvements (monitoring and analyzing results);
- **Basic Qualification Requirements for Nursing Staff at the Perioperative Support Stage:**
 - 5th Level Nursing Practitioner Diploma + Post Graduate Certificate (State Accredited) Intraoperative Nursing Management and Surgical Patient Nursing Management;
 - Bachelor of Nursing Degree + Post Graduate Certificate (State Accredited) Intraoperative Nursing Management and Surgical Patient Nursing Management;
 - Membership of professional associations for the continuous development and updating of information;
 - Owning and applying the standard of professional practice and nursing practice in accordance with national regulations in the workprocess.

Nursing Interventions During the perioperative care phase, the working areas are defined according to the patient's needs:

- The need for nursing management of patients in the preoperative stage, by category of surgical intervention
- The need for nursing management of patients at the intraoperative stage, by category of surgical intervention
- planned nursing management in cases of delays of 24 hours or less in the postoperative phase;
- The need for postoperative long / intensive care (planned nursing management);
- Plan nursing management during the postoperative observation and monitoring phase
- Nursing management of patients during the perioperative stage in life-threatening conditions

In order to properly manage the work process of nurses in a frequently changing environment and to ensure patient care and quality service delivery, it is essential that nursing staff be adapted and adequately:

N(N)LP „Union of Nurses”

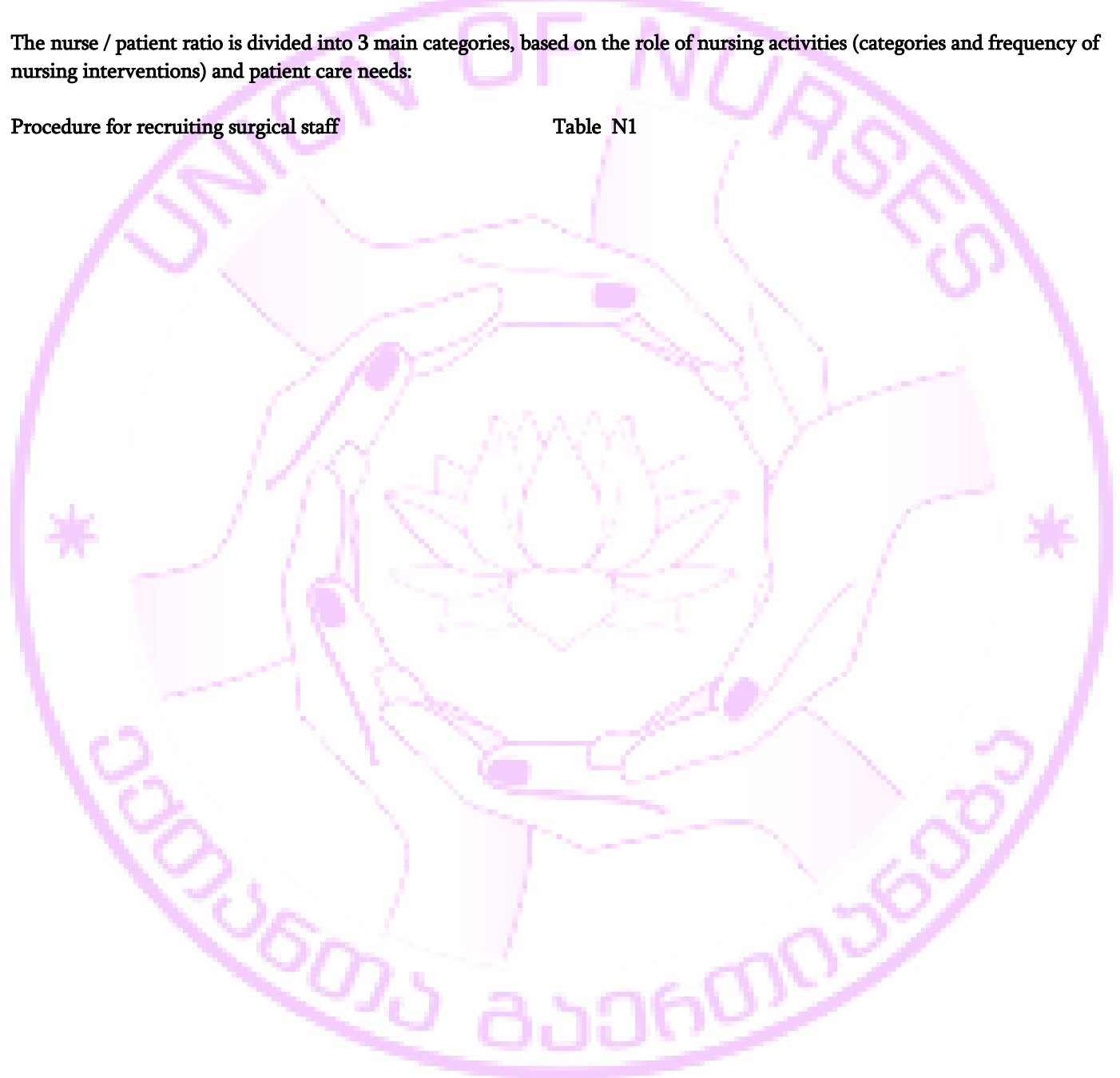
2020

- Pre-operative inpatient need for nursing management, ratio of nurse to patient at any level of surgical services 1/3 - 1/5;
- Intra-operative stage Nursing management of patients at any level of surgical services 2 operating nurses - 2/1;
- (Main and Assistant Nurse) + Anesthesia Nurse 1/1; + Equipment Nurse 1/2 (One Nurse for Two surgery blocks)
- In case of delay of 24 hours and less in postoperative stage, planned nursing management - nurse-patient ratio 1/2 - 1/3
- The need for postoperative long / intensive care (planned nursing management); 1/1 - 1/2
- Post-operative Surveillance and Monitoring Stage (Surgical Inpatient Care) Stage 3 Nursing Management; 1/3 - 1/5

The nurse / patient ratio is divided into 3 main categories, based on the role of nursing activities (categories and frequency of nursing interventions) and patient care needs:

Procedure for recruiting surgical staff

Table N1



N(N)LP „Union of Nurses”
2020

Surgical phase	Minimum needs	Comments
Scheduling	Pre-operative supervision by a special person. RN-registered nurse.	Depending on the format of the service. These activities may combine with other business or special duties. Additional staff members may depend on the volume and hours provided by the spreadsheet.
Develop a program of action	1 RN	Depending on the level of regulation and activity, this step may require additional RN and accompanying support. This may include pre-operative phone calls / concerns or planning for specialized supplies and equipment to suit the patient's needs.
Registration (registration nurse)	Support Person	The number of assistants depends on the institution, activity level, number of patients identified, types of procedures and manipulations, and other possible combined tasks.
Day of operation: Preoperative	1 RN	The number of additional RNs should be based on the number of patients, the number of procedure rooms, the quality of the patient conditions, the types of manipulations, the complexity of the equipment needed for patient care, the time required to perform tasks, the age of the patient, and the average time required for individual patient preparation. Licensed practicing nurses and unlicensed assistant staff may include pre-operative work team plans. unlicensed Assistant Personnel may be assigned to perform patient care assignments as specified by the RN and implemented in accordance with individual state and local regulations on the scale of nursing practice.
Intraoperative	1 RN - Operating Nurse - 1 operating (1/1) In regulation per patient. 1 assistant (scrub) nurse for a black work for each patient in each room. A surgical technician nurse (equipment) or assistant nurse, in some circumstances person who does black work, may not be necessary.	Additional work team members (anesthesia nurses) with adequate competence may be used as follows: - In general anesthesia stage 1 RN monitors patients. - Local anesthesia - depends on patient needs, definition of nursing care and type of manipulation. Occasionally, additional monitoring by a registered nurse may be required. - Complex surgical manipulations and patients with different types of intervention needs - Supplemental RN (Anesthesia Nurse) supervision and persons who do black work. - Technological requirements (lasers, robotics, audio-visual equipment, audio transfusion mechanism) - First aid equipment.
Postoperative phase Stage I - The stage of care	Two graduate nurses, one of whom will be registered for the post-operative care phase of the surgery, at the post-anesthesia stage. Staffing is provided by the American Association for Pre-Anesthetic Nursing - "Patient Classification Recommended by Personnel Guidelines	Stage of Care I Group I - 1: 2-1 nurse for two patients who are - 1 without conscious, stable, without managed breathing, > 8 years of age and 1 conscious, stable, without complications. - 2 conscious, stable and without complications. - 2 Conscious, stable, <8 years of age and over with family or competent support team members presenting. Category 1: 1-1 Nurses with one patient. - During the patient's hospitalization until the critical condition is present. - Unstable respiratory tracts. - Any <8 years or patient with unconscious condition - The second nurse is accountable for providing assistance if needed. Group 2: 2-1 nurses for 1 patient. - Critical, unstable, patients with various complications. Additional team members should be included in the support group. unlicensed assistants may be delegated to assist with the patient care stage with various tasks. (Subject to local, state regulations.)
Stage II - Stage of Care	Two competent persons, one of whom is a registered nurse in the second phase of post-anesthesia nursing practice, who is in the same room where the patient receives the second phase of care. The registered	Phase II Level of Care. Group 1: 3-1 nurses for 3 patients. - From the age of 8 years. - <8 years of age under the supervision of a family member Group 1: 2-1 nurses with 2 patients.

N(N)LP „Union of Nurses”
2020

	nurse must be on duty at any stage of the process, as appropriate to the patient's condition.	<ul style="list-style-type: none"> - A patient <8 years old without a family member or support group member. - Further procedures for initial hospitalization of the patient Group 1: 1-1 nurse with 1 patient. - Unstable patient at any age. <p>The core staff team should also include support staff unlicensed assistants may be delegated to assist with the patient care stage with various tasks. (Subject to local, state regulations.)</p>
Prolonged observation. Care stage	<p>Two competent staff (nurses), one of whom is a registered nurse,</p> <p>Competent for the flow of patients, integrated in an environment where the patient needs care in the form of observation.</p> <p>The involvement of other additional registered nurses or assistants depends on the quality of the patient's condition, the outcome of the patient's assessment, and the physical condition.</p>	<p>The stage of prolonged observation and care.</p> <p>Group 1: 3/5- 1 nurse for 3 or 5 patients.</p> <p>An example of a patient who may be under such care is given below:</p> <ul style="list-style-type: none"> - Patients awaiting discharge / transportation home. - Patients without caregiver. - Patients who have undergone procedures that require prolonged supervision (potential risk of bleeding, pain management, postoperative vomiting, vomiting feeling). - Inpatient patients. <p>The core staff team should also include support staff Unlicensed assistants may be delegated to assist with the patient care stage with various tasks. (Subject to local, state regulations.)</p>
Implementation of services	The registered nurse assesses the results of the procedures performed for the patient, their standing and readiness and confirms the order protocol to the anesthesiologist / surgeon according to the facility regulations for the patient's discharge.	<p>Perianesthesia nurses use basic protocols for communication and patient information / consent, they model for transient perianesthesia patient transport.</p> <p>1. There should be a policy to ensure safe transfer of patients.</p> <ul style="list-style-type: none"> - The professional nurse determines the accompanying staffing regimen, number and level of competence as the patient needs them. - A professional nurse provides appropriate access to transport the patient to another facility. - A professional nurse provides medical assistance during emergencies during transportation <p>2. The professional nurse should accompany the patient:</p> <ul style="list-style-type: none"> - When continuous cardiac monitoring is needed - or continuous treatment (in the form of medication delivery) during movement (vasopressive infusion, pulse oximetry, etc.).
Postoperative period	A registered nurse performs an assessment of the condition at the outpatient postoperative stage.	Outpatient surgery patients are evaluated postoperatively. The scope of action and appropriate response depends on the patient's needs, care, treatment and service. Individual organizations should develop services to improve patients' condition.
AORN Position Statement on Perioperative Safe Staffing and On-Call Practices		

Nursing staff positions, range of competencies and functions at any level of surgical services in three major categories:

1. Clinical support in the management phase of surgical patients

Outpatient Stage Preoperative Planning - Practitioner Nurse Competence –

V Level Diploma Practitioner Nurse or Bachelor of Nursing + Postgraduate Education Course "Nursing Management for Surgical Patients"

Function:

- a) Organize pre-operative laboratory and instrumental studies, mobilize patient preparation
- b) Production of medical documentation in accordance with regulations
- c) Educate patient and patient family members according to their competence

At the inpatient stage, preoperative nursing management - practitioner nurse competence –

V Level Diploma Practitioner Nurse or Bachelor of Nursing + Postgraduate Education Course "Nursing Management for Surgical Patients"

Function:

- a) Mobilize the results of pre-operative laboratory and instrumental studies
- b) Preoperative patient preparation: communication / information; Patient evaluation and intervention category determination; Hygiene; Transportation;
- c) Manage the nursing process in the extended observation and care phase (III) of the postoperative patient

Intraoperative Patient Nursing Management

Operating Practitioner Nurse

Competence - V Level Diploma Practitioner Nursing or Bachelor of Nursing + Postgraduate Education Course "Intraoperative Nursing Management - Operating Nurse"

Function:

- a) Managing the nursing process in the intraoperative stage
- b) Assist the surgeon in the intraoperative stage
- c) Organize / control safety and infection control measures

Operating Nurse Assistant (scrub) Nurse

Competence - V Level Diploma Practitioner Nurse or Assistant to Level III Nurse or Bachelor of Nursing + Postgraduate Education Course "Intraoperative Nursing Management - Nursing Operation"

Function:

- A) Intraoperative stage nursing process management - patient preparation (position)
- B) Preparation of operating room, pre / postoperatively - treatment of operating room
- C) assisting the operating nurse

Anesthesia Practitioner Nurse

Competence - V Level Diploma Practitioner Nurse or Bachelor of Nursing + Postgraduate Education Course "Nursing Management and Anesthesia for Critical Care Patients"

Function:

- A) Management of the intraoperative stage of the nursing process according to the types and stages of anesthesia
- B) Managing the nursing process in stage I postoperative care according to the types and stages of anesthesia

Postoperative Patient Nursing Management

Practitioner Nurse in Stages I and II of Postoperative Management

Competence - V Level Diploma Practitioner Nurse or Bachelor of Nursing + Postgraduate Education Course "Nursing Management and Anesthesia for Critical Care Patients"

Function:

Manage the nursing process according to the patients' conditions and needs in the postoperative phase

2. Management - Organizational management support of the surgical patient management process stage.

Perioperative Nurse (Supervisor, Pre / Intra / Post Operative Stage), Clinical Coordinator and Quality Control

Competence - Level V Nursing Practitioner or Bachelor of Nursing + Postgraduate Education Course "Leadership and Management"; "Intraoperative Nursing Management - Operational Nurse"; "Surgical Nursing Management";

Function:

- A) Organizing and controlling nursing clinical activities during the perioperative phase
- B) Ensure infection prevention and control during the perioperative stage

- C) personnel selection, training, reassignment and delegation of functions
- D) Organize / implement problem-focused theoretical and practical training
- E) Management of necessary resources
- F) Patient triage and safe movement according to surgical interventions

Pre / Postoperative Planning Nurse - (Organizing / Controlling Patient Reception-Recording Process)

Competence - Level V Practitioner Nursing or Bachelor of Nursing + Postgraduate Course in “Leadership and Management”

Function:

- A) Patient Reception, Registration, Organizing Planned Laboratory and Instrumental Studies / Patient Accompanying / Coordinating in accordance with Surgical Interventions in the Preoperative Stage, Producing Relevant Documentation
- B) Informing the patient according to the surgical interventions, education at the pre / postoperative stage.

Registration Nurse

Competence - Level V Nursing Practitioner or Bachelor of Nursing + Postgraduate Course in “Leadership and Management”

Function:

Pre-postoperative stage registration of patient movements, provision of relevant regulatory messages in public services.

Pre / Post Clinical Coordinator (Senior Nurse in Surgical stationary)

Competence - Level V Nursing Practitioner or Bachelor of Nursing + Postgraduate Education Course "Leadership and Management"; "Surgical Nursing Management";

Function:

- A) Organizing and controlling nursing clinical activities at the pre / postoperative stage
- B) Ensure infection prevention and control at the pre / postoperative stage
- D) Organize / implement problem-focused practice instruction
- E) Management of necessary resources
- F) In the department, providing surgical triage and safe movement of patients according to surgical interventions

Clinical Coordinator at Stages I and II of Postoperative Care (Intensive Care / Resuscitation Senior Nurse)

Competence - Level V Nursing Practitioner or Bachelor of Nursing + Postgraduate Education Course "Leadership and Management"; "Nursing Management and Anesthesia for Critical Care Patients"

Function:

- A) Organizing and controlling nursing clinical activities in the postoperative phase
- B) Provision of infection prevention and control in the postoperative stage
- D) Organize / implement problem-focused practice instruction
- E) Management of necessary resources
- F) In the department, providing surgical triage and safe movement of patients according to surgical interventions

Clinical Coordinator (Senior Operating Nurse)

Competence - Level V Nursing Practitioner or Bachelor of Nursing + Postgraduate Education Course "Leadership and Management"; "Intraoperative Nursing Management - Operational Nurse";

Function:

- A) Organizing and controlling nursing clinical activities at the intraoperative stage
- B) Ensure infection prevention and control during the intraoperative stage
- D) Organize / implement problem-focused instructional instruction
- E) Management of necessary resources
- F) In the department, providing surgical triage and safe movement of patients according to surgical interventions
- G) Draw up and control of operations according to surgical interventions

Evidence-Based Nurse Practitioner - Introducing Best Nursing Practice

Competence - Level V Nursing Practitioner or Bachelor of Nursing + Postgraduate Education Course "Leadership and Management"; Infection Prevention and Control

Function:

- A) Organize and control nursing clinical activities / best practices during the perioperative phase

- B) Provision of Prevention and Control of Infection in Postoperative Stage - Implementation of Nursing Clinical Protocols Based on Practical Guidelines
- C) Evaluation of nursing clinical activities, identification of problems and problem-focused practical instructions

3. Safety and resource control at the surgical patient management stage

The nurse responsible for transporting the patient

Competence - Assistant Level III Nursing Assistant or Bachelor of Nursing 3rd Semester + Postgraduate Education Course "Emergency Medical Assistance for Paramedics";

Function:

- A) Safe transportation of patients

Person responsible for medical waste and linen

Competence - Postgraduate Education Course on "Occupational Safety and Environmental protection measures" "Medical Facility Cleaning"

Function:

- A) Waste management
- B) Medical linen management
- C) Cleaning the medical facility

Nurse Responsible for the Treatment of Patient Areas and Equipment (Level III Assistant)

Competence - Level III Nursing Assistant or Bachelor of Nursing / Level 3 Nursing + Postgraduate Education Course "Occupational Safety and Environmental Measures" "Medical Facility Cleaning" "Infection Prevention and Control"

Function

- A) Waste segregation
- B) Patient Care / Hygiene
- C) Patient nutrition
- D) decontamination, disinfection of equipment in the patient area
- E) assisting the nurse

Technical Equipment Nurse - In the period of perioperative management of patients, The technical equipment nurse is responsible for maintaining, restoring, and training the equipment for use in the appropriate equipment.

This role is auxiliary, but must meet 2 (two) supervisions per week - 1 equipment nurse 2 working days a week, pre / postoperative.

Intraoperative stage - 24/7 (1 nurse in 3 operating rooms)

Competence - Level V Nursing Practitioner or Bachelor of Nursing + Postgraduate Education Course on "Rules of Use of Medical Equipment and Safe Medical Practice";

The levels of basic surgical services are:

- A) Emergency care levels - Emerg - I, II, III, IV;
- B) Levels of trauma / injury management - TR- I, II, III, IV;
- C) Levels of surgical services (by category of operations) - Surg - I, II, III;
- D) Perinatal Care Levels - Per - I, II, III;
- E) Intensive Care Levels - ICU - I, II, III;
- F) Cardiological service levels - Cor - I, II, III;
- G) Neurological Service Levels - Neur - I, II, III.

Levels of surgical services (both children and adults) according to interventions

- A) Level I - performs surgical interventions of categories I, II and III;
- B) Level II - Performs surgical interventions of categories I, II, III and IV;
- C) Level III - Performs surgical interventions of categories I, II, III, IV and V.
Category I surgeries include outpatient surgical procedures.

Summary data by levels, See Table N2 (Excel format)

Resources:

N(N)LP „Union of Nurses”

2020

- AORN Position Statement on Perioperative Safe Staffing and On-Call Practices
- Nursing Professional Standard LEPL National Center for Educational Quality Enhancement, 2015;
<http://vet.ge/direction2/?d=10&sub=35&mod=67> Professional Standard Code: 090552 Professional Standard Registration Number: 09101 Code of Professional Standard Relevant to the International Standard Classification of Employment (ISCO-08) - 2230)
- The Importance of the Optimal Nurse-to-Patient Ratio Created Nov 10 2016, by [LIPPINCOTT NURSING EDUCATION](#); Nurse-to-Patient Ratio
- Core Standards for ICUs - Ed 1 2013
- How Many Nurses per Patient? Measurements of Nurse Staffing in Health Services Research. Joanne Spetz, Nancy Donaldson, Carolyn Aydin, and Diane S. Brown
- ANA website-staffing-and-acuity-systems-pdf-final_2017
- ER stafing .CENA-STAFFING-STANDARDS_FINAL-DRAFT-version
- Order of the Minister of Labor, Health and Social Affairs of Georgia No. 01-9 / n 4 March 2016 Tbilisi - On the classification of medical institutions

