

WHITING FORENSIC HOSPITAL
Nursing Policy and Procedure Manual

SECTION A: NURSING POLICY AND PROCEDURE MANUAL
NURSING SERVICE ORGANIZATION

CHAPTER 1: HOSPITAL PLAN FOR PROVIDING NURSING CARE

**Policy and Procedure: 1.2 Reporting To Work and the Maintenance of
Recordkeeping**

Standard of Practice:

Nursing staff will report to work on time and swipe in indicating their arrival.

Standard of Care:

Nursing staff are required to sign into work prior to the start of each shift worked.

Policy:

To establish guidelines for reporting to work as scheduled and to maintain the overtime records.

Procedure:

Swiping into work will occur prior to the start of every shift

A. Staff responsibility

1. All nursing staff reporting to duty will swipe in on the keypad located in the main hallway located outside the police bubble.
2. Recognizing that staff must be present on their unit for report, staff may swipe in up to 15 minutes prior to the start of the each shift worked.

B. Supervisor responsibility

Supervisors are responsible for running the Lynx report after the start of shift.

1. The supervisor will then review the Lynx report for completeness.
 - For staff that are scheduled to work and have not swiped in, the nursing supervisor will first call the unit that the staff is assigned to, and determine whether or not the staff has arrived on the unit.
 - If staff is located on the unit, the supervisor will have the employee report to the nursing office and have the employee swipe in. At this point, the nursing staff person that did not swipe in needs to be reeducated on the procedure.
 - Repeated failure to swipe in prior to reporting to the unit may result in progressive discipline after being reeducated on the procedure.
 - If the staff is not located on the unit, an attempt will be made to reach the employee by phone, at which point the status of the employee will be determined.

- Lateness: Per work rule # 9 “Employees unable to report for work shall call in to their supervisor or designee within one-half hour of the start of their scheduled workday to provide the reason for their tardiness or absence and/or to request the use of earned time, as required. Where continuous operations are involved, a call shall be made at least one-half hour prior to the start of a shift.”

Supervisors may approve the use of PL for urgent/emergent situations, facility needs permitting. Employee may be required to show proof of urgent/emergent situations. In the absence of PL, the employee will be marked “tardy” for the full amount of time that the employee is late.

For staff arriving after the start of the shift:

The Nurse Supervisor will document the time of arrival, and address it with staff as indicated

2. In the event of a staffing emergency, (snow storm, for example) when it may be necessary to hold an employee over for more than two shifts, a Director of Nursing will be contacted to either approve or deny the request.
3. All overtime documentation shall be maintained in the nursing support office (or designated area) for a period of five years.

C. Director of Nursing Responsibility

1. It will be the responsibility of the Director of Nursing` in charge of the nursing support office to perform an audit twice a year, on ten different employees, comparing the Lynx reports to the actual timesheet of randomly chosen employees to determine the accuracy.
2. In the event that an emergency occurs in the facility, it will be the responsibility of the Director of Nursing in charge to authorize additional hours of work exceeding two shifts. In addition to the approval of such hours, the Director of Nursing is responsible for giving written approval for the additional hours, which will be filed with the nursing boards/sign-in sheets for the shift in which it occurred.