Guidance for Calculating Staff to Resident Ratios and Direct Nursing Care Hours

Effective July 1, 2023

When reviewing nursing staff schedules, facilities should ensure that the correct number of RNs, LPNs, and NAs are scheduled for each shift (day, evening, and night) as per 28 PA Code 211.12. These requirements are effective July 1, 2023, and will change on July 1, 2024. The changes are detailed below.

28 Pa Code 211.12 (e) The facility shall designate a charge nurse who is responsible for overseeing total nursing activities within the facility on each tour of duty each day of the week. Charge nurse definition can be found at: July 1 NCF Regs with Guidance.pdf (pa.gov)

**.Staff to Resident ratio requirements as of July 1, 2023:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | DAY SHIFT | EVENING SHIFT | NIGHT SHIFT |
| NA | 1:12 | 1:12 | 1:20 |
| LPN | 1:25 | 1:30 | 1:40 |
| RN | 1:250 | 1:250 | 1:250 |

**Staff to Resident ratio requirements of July 1, 2024:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | DAY SHIFT | EVENING SHIFT | NIGHT SHIFT |
| NA | 1:10 | 1:11 | 1:15 |
| LPN | 1:25 | 1:30 | 1:40 |
| RN | 1:250 | 1:250 | 1:250 |

When calculating nursing hours consider the following:

Surveyors will ask the facility to complete the attached table to document the actual number of hours each nursing staff worked for the selected periods of time. Direct care nursing staff are included for the purpose of calculating the daily number of hours of care per resident/day (PPD). The following are examples of staff that should not be included in the calculation of daily nursing care hours:

Orientees

Light-duty nursing staff who are not providing direct care

 RNACs

Hospice staff

Private caregivers

Feeding assistants

Student nurses

Unit clerks (even if they are nurse aides)

Examples of hours that may be included:

Light duty nursing staff providing direct care such as nail care, feeding or 1:1

Meal times of staff who remain “on duty” (physically present & able to personally provide nursing care when needed).

 Nursing staff that accompany residents on appointments should be counted.

Managers who do not normally perform direct care but are needed because of call offs should keep a record of tasks performed for that given day and the amount of time spent performing those tasks as proof of the hours worked. Those recorded hours may be counted towards the minimum hours PPD for that day.

Surveyors will review the job descriptions for tasks that the RN performs that are direct resident care, such as medications and treatments, taking orders for meds or treatments, assessment of residents, feeding, etc. versus personnel issues, scheduling, arranging transportation, etc. Observations will be made to assess the amount of time that is counted toward the PPD and direct care.

The Department may cite the facility for including hours of charge nurses &/or unit managers who are observed to be engaged in duties other than providing direct care if the facility is counting them for purposes of meeting the PPD. The Department may review the job description for these staff for the purpose of determining whether a citation is appropriate.

To calculate the direct care hours per resident/day:

Add the total number of direct care nursing staff hours for each 24-hour period, using the actual number of hours each person worked. Divide the total hours for each 24-hour period by the total census at midnight for each day to calculate the PPD. If a facility’s PPD fails to meet the current requirements of 211.12(i), a citation will be issued.

The PPD must be at least 2.87 Effective July 1, 2023

The PPD must be at least 3.2 Effective July 1, 2024

If the facility meets the appropriate PPD for each day reviewed, the facility must also consider if the direct care hours are adequate to meet the needs of the residents. The facility is accountable for providing adequate direct nursing care to meet the needs of all residents, which may necessitate staffing that exceeds the minimum required PPD.