

Staffing Data – Monthly Update Cheat Sheet

Who is responsible for data submission? Health Center Nurse Manager

STEP 1: Open email attachment containing Staffing Data Capture tool for your clinic (Excel document)

Nurse Manager receives staffing data tool by:



- Monday, February 27th
- Monday, April 3rd
- Monday, May 1st
- Tuesday, May 30th
- Monday, July 3rd

Nurse Manager submits staffing data by

- Thursday, March 2nd
- Thursday, April 6th
- Thursday, May 4th
- Thursday, June 1st
- Thursday, July 6th

STEP 2: Nurse Manager enters prospective (looking 30 days ahead) staffing data

INCLUDE TEMPORARILY ASSIGNED EMPLOYEES WHO ARE EXPECTED TO WORK AT THE ASSIGNED CLINIC FOR 30 DAYS OR LONGER.

THE FOLLOWING JOB CLASSIFICATIONS SHOULD BE EXCLUDED: 2908, 9910, 9924

JOB TYPE DEFINITIONS

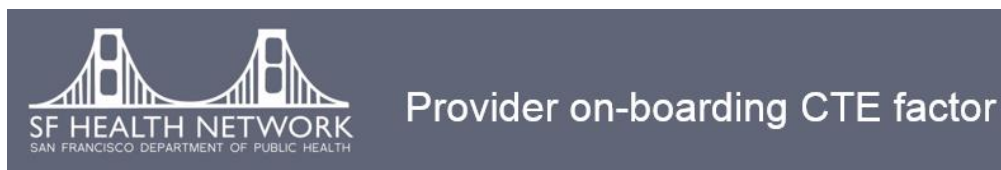
- **LEAVE:** Administrative, medical, unpaid, or vacation time -- if at time of update (e.g. Monday March 2nd), **extends for 30 days or more.** All FTE and CTE values should be zeroed out when an employee is on leave. Leave is no longer tracked in a separate column.
- **FMLA:** Provider or staff is away for planned FMLA for 2 weeks or more than half the time of any month. If this is the case, the reduced time should be factored in (e.g., if someone is out half the days of the month, she should count as 50% of her regular FTE).
- **VACANT:** Position assigned to Health Center by SFHN Primary Care and does not yet have someone working. All FTE and CTE values should be zeroed out if a position is vacant. Vacancies are no longer tracked in a separate column.
- **LEAVING SYSTEM:** Resignation or retirement **expected within 30 days.** When an individual provider has a planned resignation or retirement starting within 30 days of the update, that provider's CTE (clinical time equivalent, see below) should be counted as 0 for that reporting period. This subtraction (for planned leaving the system within the next 30 days) applies only to providers, not staff.
- **AS NEEDED:** Use this job type if employee is in as-needed or float classification.
- **FULL TIME:** Where employee's FTE at this clinic is 1.0 and employee is not float/as-needed.
- **PART TIME:** Where employee's FTE at this clinic is less than 1.0 and employee is not float/as-needed.

FTE AND CTE DEFINITIONS

- **TOTAL FTE UTILIZED:** Total FTE worked by employee at this clinic (used for staff with > 1 type of FTE). Applies to as-needed as well as part/full-time employees.
Providers: = FTE WORKED IN CLINIC + CLINICAL SPECIAL PROJECTS FTE + NON-CLINICAL SPECIAL PROJECTS FTE + MEDICAL DIRECTOR ADMIN FTE
Nursing support: = FTE WORKED IN CLINIC + NURSING SPECIAL PROJECTS FTE + ADMIN FTE
Clerical Support: = FTE WORKED IN CLINIC + ADMIN FTE
Clinical Support and Clinic Management staff each have only one type of FTE so this column is omitted for them.
- **FTE WORKED IN CLINIC:** Time spent doing primary care work; includes administrative time spent in clinic. This is generally the same number as CTE unless a CTE Factor is present (see below) or unless a provider is specified as a "NON-PCP" (in which case FTE worked in clinic will be counted but CTE will be zero).

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- **NURSING SPECIAL PROJECTS FTE:** Time spent by nursing support staff on PC-wide special projects that have been approved by the Director of Nursing. Each special project must be described and quantified (as FTE) in Notes column.
- **CLINICAL SPECIAL PROJECTS FTE (providers only):** Time spent on special projects that involve caring for patients outside the PCC panel (e.g., TAPS) and have been approved by the Primary Care Director or CMO. Each clinical special project must be described and quantified (as FTE) in Special Project Notes column.
- **NON-CLINICAL SPECIAL PROJECTS FTE (providers only):** Time spent on special projects which do not involve direct patient care (e.g., QI) and have been approved by the Primary Care Director or CMO. Each non-clinical special project must be described and quantified (as FTE) in Special Project Notes column.
- **MEDICAL DIRECTOR ADMIN FTE:** Administrative time for Assistant Medical Directors or Medical Directors only.
- **ADMIN FTE (nursing, clerical, managerial):** Administrative time spent outside clinic.
- **CTE FACTOR (providers only):** Number between 0 and 1 specifying the proportion of FTE WORKED IN CLINIC that should be included as CTE (Clinical Time Equivalent, see below). Reason for decrease (e.g. ramp-up or eCW) must be documented in CTE Factor Notes column.
- **CTE (Clinical Time Equivalent, providers only):** Time that provider is expected to work in clinic, after taking into account factors such as ramp-up or eCW. Enter for PCPs only (not for psychiatrists or other providers who should have FTE worked in clinic but not CTE). If physician is not a PCP, enter “NON-PCP” in CTE Factor Notes column to explain why zero CTE.
- **REDUCED CTE AND FTE WORKED IN CLINIC FOR MONTHS OF JUNE, JULY AND AUGUST (ZSFG PC residents only):** Due to the onboarding of new medical residents at SFGH PC clinics each summer, resident FTE worked in clinic and resident CTE will be reduced by 50% during the months of June, July and August.



New Provider (new to SFHN or eCW)

- Month 1 --0.3
- Month 2 – 0.45
- Month 3 –0.7
- Month 4 –0.85
- Month 5 –1.0

Experienced Provider

- Month 1 --0.4
- Month 2 – 0.6
- Month 3 –0.8
- Month 4 –1.0

STEP 3: Email updated form by the above due date to: Anne.Hirozawa@sfdph.org.