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	<b>Revision Date:</b> 5/21
<b>Author(s):</b> Nursing Leadership Team	<b>Approval Date:</b> 7/21

## 1.0 Purpose

- 1.1 The Patient Classification System (PCS) Tool is a methodology for determining, validating, monitoring and evaluating the nursing care needs of each patient, each shift and the overall nursing resources required by each nursing unit, each shift.

## 2.0 Policy Statement

- 2.1 Patients are classified into a level of care according to the amount and type of nursing care that they require. The number of patients classified into each level of care provides a measure of the of the nursing care needs by patient, by shift and per unit, per shift. The patient's level of care classification is one of the elements utilized to determine staffing on a shift-to-shift basis per nursing unit. When the Registered Nurse completes the acuity assessment each shift, the Patient Classification data is downloaded into KP Mainframe and transcribed into the One-Staff Staffing and Scheduling System. Patient Classification into a level of care is determined for the patient two times/day by the Registered Nurse evaluating the following care indicators for each patient: 1) Activities of Daily Living; 2) Positioning/Mobility/Hygiene; 3) Diet; 4) Assessments; 5) Interventions; 6) Care Management/Stability.

## 3.0 Scope/Coverage

- 3.1 This policy applies to all Inpatient Nursing Units at San Diego Medical Center (SDMC) and Zion Medical Center (ZMC).

## 4.0 Definitions

- 4.1 Patient Classification System (PCS) – a methodology for determining, validating, monitoring and evaluating patient care requirements. Patient classification systems meet the following criteria: 1) A method for looking at individual patient care requirements; 2) An established method by which the amount of nursing care required for each patient can be validated; 3) A means to discern trends and patterns of nursing care and acuity on nursing units; 4) A method to determine staff resource allocation.

## 5.0 Procedures

- 5.1 Baseline Registered Nurse Competency
  - 5.1.1 Baseline PCS Tool competency for the Registered Nurses (RN) is demonstrated in new hire orientation through completion of a PCS Tool Self Learning Module and associated post-test.
  - 5.1.2 Ongoing competency is demonstrated annually during Annual Competency Training.
  - 5.1.3 Float Pool Staff and Travel Registered Nurse Staff complete the Self Learning Module for their primary work unit of assignment.
- 5.2 Patient Classification Assessment

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- 5.2.1** Individual patient care need requirements are assessed once every 12h shift for each patient by the Registered Nurse assigned to that patient. This assessment consists of the Registered Nurse completing the PCS Tool.
- 5.2.2** The PCS Tool is completed in Kaiser Permanente (KP) Mainframe twice a day 1) For a 12h day shift (7a-7p) between 2p and 3p; 2) For a 12h night shift (7p-7a) between 2a and 3a.
- 5.2.3** All newly admitted or transferred in patients to any unit must be acutized upon admission up to 60 minutes prior to the start of the next shift.
- 5.2.4** Patients experiencing a change in status are to have the PCS Tool updated to reflect the status/acuity change at the time the change is noticed.
- 5.2.5** The Staffing Coordinator, when staffing for each shift utilizes the PCS data from KP Mainframe to establish recommended staffing levels.
- 5.3** Annual Maintenance, Monitoring and Evaluation
  - 5.3.1** The PSC Tools are reviewed annually by Nursing Leadership, Nursing Education and Nursing Staff for content validity. Specifically, the care indicator definitions, care level descriptions and examples of such are reviewed and revised annually.
  - 5.3.2** Average and median levels of care for each unit are tracked and reported annually as frequency distributions. This data is reviewed annually by the vendor with Nursing Leadership, Nursing Education and Nursing Staff.
  - 5.3.3** Reliability is evaluated ongoing and as part of the PCS Tool annual monitoring and maintenance. This data is reviewed annually by the vendor with Nursing Leadership, Nursing Education and Nursing Staff.

## **6.0 References/Related Policies**

- 6.1** Park, S., Blegen, M., Spetz, J., Chapman, S., DeGroot, H. (2012) "Comparison of Nurse Staffing Measures in Staffing Outcomes Research." Medical Care Vol. 1 [www.medicalcare.com](http://www.medicalcare.com)

## **7.0 Appendix/Attachment**

- 7.1** N/A

## **8.0 Approver/Approving Committee**

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8.1 Nurse Executive Committee

8.2 Medical Executive Committee

**9.0 Review History**

9.1 2/5, 2/15, 10/17, 5/21

**10.0 Revision History**

10.1 7/03, 2/05, 2/06, 1/08, 4/08, 1/09, 1/10, 12/11, 10/17, 5/21