

Manual M-1, Operations. Part IX, Staffing Guidelines and Productivity Enhancements

Chapter 2, Quarterly Reporting Requirements (Paragraphs 2.01 through 2.05)

This document includes:

Title page for M-1, Part IX, dated **April 21, 1989**

Foreword for M-1, Part IX, dated **April 21, 1989**

Introduction for M-1, Part IX, dated **April 21, 1989**

Contents pages for M-1, Part IX, dated **April 21, 1989**

Contents pages and Rescissions page for M-1, Part IX, dated **August 22, 1991**

Contents page for Chapter 2, dated **April 21, 1989**

Text for Chapter 2, dated **April 21, 1989**

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Sheet dated **April 21, 1989**

**Department of
Veterans Affairs**

OPERATIONS

Staffing Guidelines and Productivity Enhancements

**M-1, Part IX
April 21, 1989**

**Veterans Health Services and
Research Administration
Washington, DC**

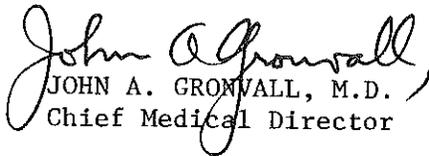
FOREWORD

This manual has been written to provide guidelines to equitably and effectively allocate manpower resources based on workload and the level of service to eligible veteran patients. The guidelines represent a viable mechanism for estimating manpower resource requirements in most program areas.

The Manpower Planning Division has developed, tested, and refined the guidelines as necessary as workload data was made available through published reporting requirements.

Prior to this document, guidelines were transmitted, tested, and implemented via VHS&RA circulars. With the exception of first generation guidelines, which are required in the development and testing of the staffing criteria, all guidelines thereafter are to become a part of this manual.

In addition to staffing guidelines, this manual provides guidance and procedures with regard to new management and productivity improvement initiatives and re-emphasizes existing initiatives which, heretofore, had not been fully implemented. These initiatives are: Circular No. A-76, "Performance of Commercial Activities," Cost Containment, Efficiency Review Program, and Productivity Improvement Program. These initiatives are identified as "Productivity Enhancements."

 M.D.
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INTRODUCTION

The development of guidelines for allocating staff to the medical facilities of the VHS&RA (Veterans Health Services and Research Administration) has been an evolutionary one in VA since the early 1960's, reflecting state-of-the-art advances since that time. These developmental efforts began with the formulation, through "work measurement" studies, of staffing guidelines for specific medical center activities, such as those engaged in by Dietetic and Supply Services. In the 1970's, the formulation of "core staffing ratios" ("x" staff per "y" patients) was introduced for all VHS&RA medical facilities.

The 1970's saw the publication of two major reports on VA's health care system that relied heavily on the core staffing concept. The first, ^{1/}published in response to a Presidential directive, resulted in substantial increases in key medical facility professional and support staff. In 1977, the NAS (National Academy of Sciences) presented a report, ^{2/}pursuant to Public Law 93-82, Section 201(c), of an extensive study of health care for American veterans, carried out over a 3-year period. The purpose of the NAS study was ". . . to determine a basis for the optimum number and categories of personnel and other resources to ensure the provision to eligible veterans of high quality care . . ." Unfortunately, the NAS study failed in this objective, touching only lightly on the central question of staffing requirements in VA's medical facilities. Instead of providing the VA with staffing guidelines based on the latest management engineering techniques, the NAS study simply utilized VA's own core staffing ratios. In fact, the NAS report recommended that "the VA develop procedures for assessment of patient needs and use them for staffing...that VA Central Office judiciously apply and continually refine existing instruments..." (pps. 286-7). In other words, the NAS recommended that VA undertake a task the NAS itself was asked to accomplish in its contract. In its response to Congress, ^{3/}VA concurred with this recommendation and thus committed itself to the development of staffing guidelines that would replace core staffing ratios, though cautioning that "extensive revisions and modifications will be required before even limited application can be made of existing methodologies" (pps. 22-23). Hence, VA began the task of replacing the existing core staffing ratios, which were not refined enough to enable precise staffing needs to be defined for complex medical facilities and programs. Subsequently, a number of different approaches to standards development in the private health care sector were studied. Much valuable information and experience were thus acquired by VA personnel who were eventually incorporated into a new organizational unit in VHS&RA. Thus, in 1981, Management Systems Service was organized for the purpose of developing, testing, refining, and implementing staffing guidelines for all medical facility activities. Since 1981, Management Systems Service has been engaged in work on staffing guidelines, the magnitude of which is unparalleled in the health care industry.

During 1984 and 1985, productivity effectiveness was repeatedly stressed and emphasized, predominantly by the Office of Management and Budget. At the direction of OMB, VHS&RA began to address productivity effectiveness through several new initiatives, i.e., most efficient organization, productivity improvement program, and efficiency reviews; and re-emphasized existing initiatives such as Circular No. A-76, "Performance of Commercial Activities," and cost containment. These functions are assigned to the Strategic Planning Office, Manpower Planning Division.

1/ Report of Special Survey of Level of Quality of Patient Care in VA Hospitals, House Committee Print No. 163, Washington, DC, October 1974

2/ Health Care for American Veterans, NAS, Washington, DC, June 1977

3/ VA Response to the Study of Health Care for American Veterans, Senate Committee Print No. 7, Washington, DC, September 1977

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5. (Reserved.) BIOMEDICAL ENGINEERING STAFFING GUIDELINES
6. (Reserved.) BUILDING MANAGEMENT STAFFING GUIDELINES
7. (Reserved.) DENTAL SERVICE STAFFING GUIDELINES
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17. NUCLEAR MEDICINE SERVICE STAFFING GUIDELINES
18. (Reserved.) NURSING SERVICES STAFFING GUIDELINES
19. (Reserved.) OUTREACH PROGRAM STAFFING GUIDELINES
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29. SOCIAL WORK STAFFING GUIDELINES
30. (Reserved.) SPINAL CORD INJURY STAFFING GUIDELINES
31. (Reserved.) SUPPLY STAFFING GUIDELINES
32. (Reserved.) CIRCULAR NO. A-76, PERFORMANCE OF COMMERCIAL ACTIVITIES
33. (Reserved.) COST CONTAINMENT
34. EFFICIENCY REVIEW PROGRAM
35. (Reserved.) MEO (MOST EFFICIENT ORGANIZATION)
36. (Reserved.) PRODUCTIVITY IMPROVEMENT PROGRAM

RESCISSIONS

1. Complete Rescissions

Circulars

10-84-71 and supplements
10-85-119
10-85-122
10-86-70
10-84-216
10-85-120
10-87-89
10-88-37

2. Partial Rescissions

Circulars

10-84-14 attachments A, B, E, I, J, K, and M

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CHAPTER 2. QUARTERLY REPORTING REQUIREMENTS

2.01 DEFINITION

Workload Statistics Worksheets (Appendix A of each chapter) and VA Form 10-0067, Workload Statistics Codesheet, are used to collect and code workload data for transmission to the Austin DPC (Data Processing Center) by the keypunch unit. A partially completed example of the Workload Statistics Codesheet is included as Appendix B of each chapter.

2.02 PURPOSE OF QUARTERLY REPORTING REQUIREMENTS

The purpose of quarterly reporting of workload data via VADATS (VA Data Transmission System) to the Austin DPC is to produce a printout (i.e., staffing profile) which reflects the actual FTEE, earned FTEE, a delineation of various types of leave, hours worked, hours paid, types of employees and resulting (actual minus earned) FTEE. This printout presents an overall picture for each facility. Printouts also provide staffing data in national, regional, and district summaries. The data provided by these recurring staffing profiles demonstrate human resource requirements for specific functions/services at each VA medical facility. This information should enable the medical center Director to judiciously plan the staffing of human resources to provide adequate levels of medical care and related services to eligible veteran patients.

2.03 INSTRUCTIONS FOR SUBMISSION OF WORKLOAD INFORMATION

a. As stated in paragraph 2.01, VA Form 10-0067 is used to code information for transmission to the Austin Data Processing Center. The Workload Statistics Codesheet consists of two parts: (1) a header and (2) activity detail lines. The fields for recording data are separated by a slash (/) and the activity detail lines by a semicolon (;). All required slashes and semicolons have been added to the codesheet. All data entry must begin in the first block after the slash.

(1) Batch Header Record

- (a) Size of the Fields - The sizes of the fields are fixed and cannot be changed.
- (b) System Identifier (MQP) - A necessary code for the computerization of the data, MQP, is already inscribed in columns 1-3 of the Header of the Workload Statistics Codesheet. This must not be altered.
- (c) Facility Number - Enter the three (3) digit Facility Number followed by two (2) blank spaces.
- (d) Report Period - Enter 01 for the first quarter, 02 for the second quarter, 03 for the third quarter, or 04 for the fourth quarter.
- (e) Period Ending - Enter the period ending date (i.e., 123189, 033190, 063090, or 093090), or Fiscal Year as appropriate.
- (f) Service - See paragraph 2.04 for appropriate alpha code identification.
- (g) Section - Enter 99999
- (h) Cost Center - Enter 9999

(i) Page Number - Enter 01 if all data are on one codesheet. If additional codesheets are required, enter 02, 03, etc.

(2) Activity Detail Lines

(a) The sizes of the fields in the activity detail lines are variable. No leading zeros are to be used.

(b) Activity Code - Enter the activity code corresponding to the particular activity being reported.

(c) Activity Volume - Enter the volume processed corresponding to the activity code reported. The volume must be reported per description of work count requested.

(d) Activity Code - Enter the activity code for the next particular activity being reported.

(e) Activity Volume - Enter the volume processed corresponding to the activity code reported. The volume must be reported per description of work count requested.

(f) End of Data - Enter a \$ sign after the semicolon on the last activity detail line for each page. However, if only one header card is used for a service, the \$ sign should only be on the last page.

NOTE: Report only activity codes for which an activity volume is to be reported.

b. Instructions for keypunching

(1) Preparing the VADATS Header Record

All "MQP" messages will be assigned a precedence of "2" (Routine) and will be routed to the Austin DPC using the designated VADATS Routing Indicator "NSY".

VADATS HEADER RECORD FORMAT

<u>RECORD COLUMN</u>	<u>INSTRUCTIONS</u>
1-4	>>>>
5-7	NSY
8-80	MUST BE BLANK

(2) Preparing the Batch Header Record

(a) Punch one (1) batch header record for each service code.

(b) Batches released for transmission to the Austin DPC without the appropriate header record will be rejected.

(c) The source document for the batch header is VA Form 10-0067.

(d) Keypunch instructions for the batch header record are:

<u>Field Name</u>	<u>Record Column</u>	<u>Instructions</u>
System Identifier	1-3	Punch three alpha characters "MQP". Cannot be blank
Facility Number	4-9	Punch a slash (/) in CC4 followed by three digit Facility Number followed by two blanks.
Report Period	10-12	Punch a slash (/) in CC10 followed by two digit number. Specifically, 01, 02, 03 or 04. Cannot be blank.
Period Ending	13-19	Punch a slash (/) in CC13 followed by six digit number. Cannot be blank.
Service	20-24	Punch a slash (/) in CC20 followed by four alpha characters. Cannot be blank.
Section	25-30	Punch a slash (/) in CC25 followed by five digit number. Cannot be blank.
Cost Center	31-35	Punch a slash (/) in CC31 followed by four digit number. Cannot be blank.
Page Number	36-38	Punch a slash (/) in CC36 followed by a two digit number. Cannot be blank.
End-of-Header (EOH)	39	Punch a semicolon (;) in CC39. Cannot be blank.

NOTE: THERE SHOULD BE ONLY ONE BATCH HEADER RECORD FOR EACH SERVICE, FOLLOWED BY THE SPECIFIC ITEM DETAIL LINES FOR THAT SERVICE. THE SYSTEM IDENTIFIER C.C. 1-3 MUST BE "MQP" MARY, QUEEN, PRINCE.

(3) Preparing the Activity Detail Line Record

(a) Punch one (1) record for each detail line coded.

(b) The Workload Statistics Codesheet is the source document for the activity detail line records.

(c) Do not key any blanks or spaces between the first slash (/) and the End-of-Segments (;) punch.

(d) The Workload Statistics Codesheet must be coded left to right (Activity Code/Activity Volume, Activity Code/Activity Volume). The only exceptions are:

1. Where there is only one Activity Code/Activity Volume to be reported.
2. Where the Activity Code/Activity Volume is the last entry for the service (see examples 2 or 3).

(e) Key punch Instructions for the activity detail lines are:

<u>Field Name</u>	<u>Record Column</u>	<u>Instructions</u>
Activity Code	Variable	Punch a slash (/) in CC1 followed by a one to six digit number. Cannot be blank if an activity volume is reported.
Activity Volume	Variable	Punch a slash (/) followed by a one to nine digit number. Cannot be blank if an activity code is reported.
Activity Code	Variable	If there are more activities to report, punch a slash (/) followed by a one to six digit numbers. See example 1 or 2 below as applicable. If there are no more activities to report, see example 3. Cannot be blank if an activity volume is reported.
Activity Volume	Variable	Punch a slash (/) followed by a one to nine digit number. Cannot blank if an activity code is reported.
End-of-Segment	Variable	Punch a semicolon (;). Mandatory Entry.

NOTE: *The last detail line transaction for each service must have a dollar (\$) sign after the semicolon (;).*

Example 1 of activity detail line:

/5/143/10/29;

Example 2 of the last activity detail line for a service

/390/220/400/240;\$

Example 3 of the last activity detail line for a service with only one activity code:

/44/240;\$

(4) PREPARING THE VADATS END-OF-MESSAGE RECORD

<u>RECORD COLUMN</u>	<u>INSTRUCTIONS</u>
1-4	NNNN
5-80	MUST BE BLANK

Each service's data will be transmitted as a separate VADATS message. Prepare each transmittal to the Austin DPC as follows:

VADATS Header Record - One record for each Transmission

MQP Header Record (Page 01) - One record for each service

Activity Detail Record (Page 01) - One record for each Activity Detail Line

End-of-Message Record - One record for each Transmission

c. Transmittal Instructions. In order to continue meeting scheduled deadlines, Manpower Planning Division will require workload reporting on a recurring basis. Reporting periods are set up to provide the information needed for scheduled, continued development of guidelines and to minimize the burden on the field personnel involved. The ultimate goal is to create a set of staffing guidelines that are easily used and easily maintained. The data for all report periods should be keypunched from the Workload Statistics Codesheets and transmitted to the Austin DPC not later than 10 workdays after the end of the reporting period. Health care facilities requested to verify or correct data, as a result of built-in edit checks at Austin, must do so within 5 workdays following the above 10th workday. The NSY queue closes on the 15th workday COB Central Time.

d. It is no longer necessary to mail Workload Statistics Worksheets into VA Central Office. The worksheets may still be mailed in for corrected data after the NSY queue has closed, or for transmitting information relative to a new workload not covered by the guideline. Worksheets which fall under either of these situations should be mailed to:

Manpower Planning Division (10A41C)
VA Central Office
810 Vermont Avenue, N.W.
Washington, DC 20420
ATTN: Specific Four Character Alpha Service Code

2.04 SERVICE CODE ALPHA CHARACTERS

The instructions in paragraph 2.03a.(1)(f) require identification of the service/function on the Workload Statistics Codesheet. Uniformity in coding to simplify such identification to four alpha characters was developed. These are listed in alphabetical order as follows:

<u>Service/Function</u>	<u>Four Character Alpha Service Code</u>
Alcohol and Drug Abuse	(Reserved)
Audiology and Speech Pathology	SPCH

<u>Service/Function</u>	<u>Four Character Alpha Service Code</u>
Biomedical Engineering	BMED
Building Management	
Environmental Sanitation	BMES
Textile Care	BMTC
Dentistry	DENT
Dietetic	DIET
Engineering	
Grounds and General Labor	ENGR
Motor Vehicle	ENGR
Plant Operations	ENGR
Safety and Fire	ENGR
Fiscal	FISC
Laboratory	CLAB
Library	LIBR
Medical Administration	MASS
Medical Media Production	MMPS
Medical Services	
Cardiac Catheterization	CCTH
Dialysis	DIAL
Electrocardiology Laboratory	ECGL
Electroencephalographic Laboratory	EEGL
Non-Invasive Laboratory	NINV
Respiratory Therapy and Pulmonary Function Laboratory	RTPF
Sickle Cell	SICL
Nuclear Medicine	NUCM
Nursing	
Ambulatory Care	(Reserved)
Critical Care	NURS
Intermediate Care and Nursing Home Care	NURS
Medical and Surgical Care	NURS
Operating Room	(Reserved)
Psychiatric Care	NURS
Other Nursing (Recovery Room, HBHC, etc.)	(Reserved)

<u>Service/Function</u>	<u>Four Character Alpha Service Code</u>
Outreach Program	(Reserved)
Personnel	PERS
Pharmacy	PHAR
Physicians	(Reserved)
Prosthetic	PROS
Psychology	PSYC
Radiology	RADI
Recreation	RECR
Rehabilitation Medicine	
Case Management	REHB
Corrective Therapy	REHB
Educational Therapy	REHB
Occupational Therapy	REHB
Physical Therapy	REHB
Vocational Therapy	REHB
Security	SECS
Maintenance and Repair, Engineering	SHOP
Social Work	SWSV
Spinal Cord Injury	SCRD
Supply	SUPP

2.05 REPORTS AND STATISTICS

The RCS number for each function and AMIS reports used to extract staffing data are as follows:

FUNCTION	RCS #	AMIS (Segment/Report)
Audiology and Speech Pathology Service	10-0701	234
Bio-Medical Engineering Service	10-0716	
Building Management Service	10-0743	218

FUNCTION	RCS #	AMIS (Segment/Report)
Cardiac Catheterization Laboratory	10-0702	
Craft Shops, Engineering Service	10-0718	
Critical Care Nursing (Reserved.)	10-0688	200
Dialysis Activities	10-0641	
Dietetic Service	10-0703	
Electrocardiology Laboratory	10-0704	
Electroencephalographic Laboratory	10-0705	
Engineering Service	10-0717	
Fiscal Service	10-0670	
Intermediate Care & Nursing Home Care	10-0638	200
Laboratory Service	10-0744	8UA2
Library Service	10-0706	
Medical Administration Service	10-0634	212 - 350
Medical Media Production Service	10-0707	
Medical and Surgical Nursing Activities	10-0639	200
Non-Invasive Activities	10-0708	
Nuclear Medicine Service	10-0747	
Personnel Service	10-0709	
Pharmacy Service	10-0710	
Prosthetic Service	10-0711	
Psychiatric Nursing Service	10-0687	200
Psychology Service	10-0640	
Radiology Service	10-0745	186 and 189
Recreation Service	10-0712	

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FUNCTION	RCS #	AMIS (Segment/Report)
Rehabilitation Medicine Service	10-0713	
Respiratory Therapy and Pulmonary Function Laboratory	10-0764	
Security Service	10-0665	
Sickle Cell Activities	10-0714	
Social Work Service	10-0748	
Spinal Cord Injury	10-0799	
Supply Service	10-0715	

SEP 21 1989

April 21, 1989

1. Transmitted is a new Veterans Health Services and Research Administration's Manual M-1, "Operations," Part IX, "Staffing Guidelines and Productivity Enhancements," Chapter 1, "General;" Chapter 2, "Quarterly Reporting Requirements," Chapter 4, "Audiology and Speech Pathology Staffing Guidelines;" Chapter 8, "Dietetic Service Staffing Guidelines;" Chapter 9, "EEG (Electroencephalographic) Laboratory Staffing Guidelines;" Chapter 11, "Fiscal Service Staffing Guideline;" "Chapter 16, "Medical Service Staffing Guidelines;" Chapter 17, "Nuclear Medicine Service Staffing Guidelines;" Chapter 20, "Personnel Service Staffing Guidelines;" Chapter 21, "Pharmacy Service Staffing Guidelines;" Chapter 26, "Recreation Service Staffing Guideline;" Chapter 28, "Security Service Staffing Guidelines;" and Chapter 29, "Social Work Service Staffing Guidelines".

2. Principal policies are:

a. **Paragraph 1.01:** Defines staffing guidelines as an analytical method for determining FTEE requirements based on predetermined workload time values.

b. **Paragraph 1.03:** Cites the delegation of authority for developing, refining and implementing staffing guidelines to the Planning and Evaluation Service under the Director (ACMD), Strategic Planning, (10A4)).

3. Filing Instructions:

Insert pages

Cover through vi

1-i through 1-2

2-i thru 2-9

4-i thru 4B-1

8-i thru 8E-1

9-i thru 9B-1

11-i thru 11B-1

16-i thru 16G-1

17-i thru 17B-1

20-i thru 20B-1

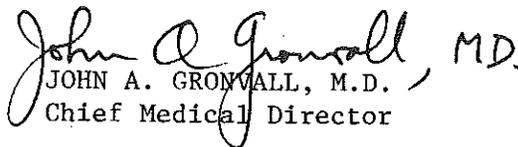
21-i thru 21B-7

26-i thru 26B-1

28-i thru 28C-1

29-i thru 29B-1

4. **RESCISSIONS:** Attachments A, B, E, I, J, K and M to Circular 10-84-14, dated February 6, 1984; Circular 10-84-171, dated October 3, 1984 and all supplements; Circular 10-84-216, dated December 20, 1984, and all supplements; Circular 10-85-119, dated July 25, 1985, and all supplements; Circular 10-85-122, dated August 6, 1985, and all supplements; Circular 10-86-70, dated June 5, 1986, and all supplements; Circular 10-85-120, dated July 26, 1985, and all supplements; Circular 10-87-98, dated August 27, 1987, and all supplements.


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Chief Medical Director

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