

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

**Chapter 8, Dietetic Service Staffing Guidelines (Sections I and II
(Paragraphs 8.01 through 8.08); Appendix 8A through Appendix 8E)**

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 8, dated **April 21, 1989**

Text for Chapter 8, dated **April 21, 1989**

Section I, Food Production and Service, RCS 10-0703

Section II, Clinical Dietitian (**Reserved**)

Text for Appendix 8A through Appendix 8E, dated **April 21, 1989**

Transmittal sheet located at the end of the document:

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**

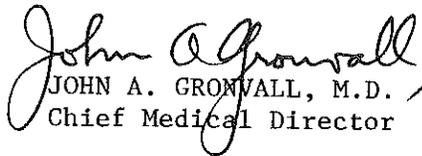
FOREWORD

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."

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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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30. (Reserved.) SPINAL CORD INJURY STAFFING GUIDELINES
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Circulars

10-84-71 and supplements
10-85-119
10-85-122
10-86-70
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CHAPTER 8. DIETETIC SERVICE STAFFING GUIDELINES

SECTION I. FOOD PRODUCTION AND SERVICE, RCS 10-0703

8.01 MISSION

The FP&S (Food Production and Service) section of Dietetic Service is responsible for the preparation and service of food and supplementary feedings for patients. The activities of the FP&S section include receiving and distribution, portioning, dishwashing, sanitation, tray assembly and delivery. Quality control and quality assurance are also key functions of the FP&S section.

8.02 APPLICABILITY

This guideline is applicable to all facilities where the FP&S section of Dietetic Service is under the administrative control of the Veterans Health Services and Research Administration.

8.03 METHOD OF DEVELOPMENT

a. A work sampling study of the FP&S activities was conducted at six VA medical centers in the early 1960's. This study was initiated to determine how manhours were being used in order to develop objective guidelines for determining the level of dietetic personnel required for the preparation and service of food. The study revealed that time requirements for those employees directly concerned with the preparation and service of food (cooks, bakers, meat cutters, and food service workers) could be measured in terms of minutes per ration served. The major factors which influenced the number of minutes per ration were the size of the medical center, layout and type of tray service.

b. The "Dietetic Service Food Production and Service Interim (test) Staffing Standards" were published in 1981. This guideline was based on a set of four regression equations that predicted the number of food service FTEE required to prepare and serve meals to patients based on the medical center's Average Daily Census.

c. The first refinement of the "Interim (test) Staffing Standards," was published on January 13, 1983, which covered all dietetic personnel except clinical dietitians. In this issuance, the four previous equations were replaced by only one. It was soon recognized that a pure statistical approach did not sufficiently address the impact of environmental and operational characteristics (i.e., layout, equipment, convenience food), and that the data required to make the necessary adjustments did not exist at this time.

d. In 1983, time studies were conducted at five VA medical centers that represented varying levels of complexities to establish the time it took to perform FP&S activities. A staffing data questionnaire was developed and forwarded to all medical facilities in 1985 to determine each medical center's dietetic service's actual level of staffing. In 1986, a supplemental survey form was sent to dietetic services nationwide requesting transportation information which focused primarily on the method and distances involved in transporting meals from one location to another. Data collected from both surveys, in addition to the time studies, were statistically analyzed and the composite values were developed through regression analysis.

8.04 WORK CENTER TIME VALUE(S)

The transportation time values for each station are as follows:

<u>VA MEDICAL CENTER</u>	<u>TRANSPORTATION TIME (HOURS PER DAY)</u>
402 TOGUS, ME	191.67
405 WHITE RIVER JCT, VT	52.78
436 FT. HARRISON, MT	28.79
437 FARGO, ND	58.25
438 SIOUX FALLS, SD	79.29
442 CHEYENNE, WY	42.89
452 WICHITA, KS	64.24
460 WILMINGTON, DE	79.42
500 ALBANY, NY	217.13
501 ALBUQUERQUE, NM	125.65
502 ALEXANDRIA, LA	168.88
503 ALTOONA, PA	40.16
504 AMARILLO, TX	27.80
505 AMERICAN LAKE, WA	112.46
506 ANN ARBOR, MI	130.71
508 ATLANTA (DECATUR), GA	175.09
509 AUGUSTA, GA	191.71
512 BALTIMORE, MD	48.87
513 BATAVIA, NY	50.72
514 BATH, NY	170.86
515 BATTLE CREEK, MI	205.00
516 BAY PINES, FL	244.83
517 BECKLEY, WV	55.13
518 BEDFORD, MA	247.58
519 BIG SPRING, TX	60.22
520 BILOXI, MS	157.70
521 BIRMINGHAM, AL	81.10
522 BONHAM, TX	91.67
523 BOSTON, MA	137.52
525 BROCKTON, MA	312.61
526 BRONX, NY	187.83
527 BROOKLYN, NY	270.93
528 BUFFALO, NY	185.18
529 BUTLER, PA	103.32
531 BOISE, IA	47.38
532 CANANDAIGUA, NY	255.69
533 CASTLE POINT, NY	140.01
534 CHARLESTON, SC	74.77
535 CHICAGO, (LAKESIDE), IL	104.72
537 CHICAGO, (WEST SIDE), IL	105.34
538 CHILLICOTHE, OH	182.93
539 CINCINNATI, OH	162.90
540 CLARKSBURG, WV	53.46
541 CLEVELAND, OH	307.89
542 COATESVILLE, PA	232.74

VA MEDICAL CENTER

TRANSPORTATION TIME
(HOURS PER DAY) CONT'D

543	COLUMBIA, MO	111.81
544	COLUMBIA, SC	131.44
546	MIAMI, FL	254.34
549	DALLAS, TX	182.97
550	DANVILLE, IL	214.40
552	DAYTON, OH	321.78
553	ALLEN PARK, MI	156.99
554	DENVER, CO	89.06
555	DES MOINES, IA	55.02
556	NORTH CHICAGO, IL	339.80
557	DUBLIN, GA	131.27
558	DURHAM, NC	88.11
561	EAST ORANGE, NJ	406.97
562	ERIE, PA	50.37
564	FAYETTEVILLE, AR	44.40
565	FAYETTEVILLE, NC	80.59
566	FORT HOWARD, MD	65.26
567	FORT LYONS, CO	87.42
568	FORT MEADE, SD	60.69
569	FORT WAYNE, IN	69.02
570	FRESNO, CA	65.23
573	GAINESVILLE, FL	159.76
574	GRAND ISLAND, NE	42.41
575	GRAND JUNCTION, CO	35.35
578	HINES, IL	254.54
579	HOT SPRINGS, SD	91.37
580	HOUSTON, TX	266.13
581	HUNTINGTON, WV	68.76
583	INDIANAPOLIS, IN	222.02
584	IOWA CITY, IA	71.26
585	IRON MOUNTAIN, MI	54.60
586	JACKSON, MS	159.08
589	KANSAS CITY, MO	72.35
590	HAMPTON, VA	198.05
591	KERRVILLE, TX	99.18
592	KNOXVILLE, IA	196.05
594	LAKE CITY, FL	104.28
595	LEBANON, PA	189.09
596	LEXINGTON, KY	242.24
597	LINCOLN, NE	30.32
598	LITTLE ROCK, AR	422.90
599	LIVERMORE, CA	73.62
600	LONG BEACH, CA	325.54
603	LOUISVILLE, KY	69.43
604	LYONS, NJ	276.19
605	LOMA LINDA, CA	95.68
607	MADISON, WI	62.63
608	MANCHESTER, NH	84.93
609	MARION, IL	54.87

VA MEDICAL CENTERS

TRANSPORTATION TIME
(HOURS PER DAY) CONT'D

610	MARION, IN	171.18
611	MARLIN, TX	40.99
612	MARTINEZ, CA	98.19
613	MARTINSBURG, WV	205.15
614	MEMPHIS, TN	195.13
617	MILES CITY, MT	22.32
618	MINNEAPOLIS, MN	161.61
619	MONTGOMERY, AL	43.72
620	MONTROSE, NY	251.24
621	MOUNTAIN HOME, TN	247.92
622	MURFREESBORO, TN	168.73
623	MUSKOGEE, OK	40.85
626	NASHVILLE, TN	84.61
627	NEWINGTON, CT	36.09
629	NEW ORLEANS, LA	99.69
630	NEW YORK, NY	178.15
631	NORTHAMPTON, MA	116.46
632	NORTHPORT, NY	206.23
635	OKLAHOMA, CITY, OK	78.25
636	OMAHA, NE	113.81
637	ASHEVILLE, NC	154.87
640	PALO ALTO, CA	353.41
641	PERRY POINT, MD	212.93
642	PHILADELPHIA, PA	106.42
644	PHOENIX, AZ	152.77
645	PITTSBURGH, (HIGHLAND DRIVE), PA	154.83
646	PITTSBURGH, (UNIVERSITY DRIVE), PA	225.57
647	POPLAR BLUFF, MO	50.31
648	PORTLAND, OR	141.35
649	PRESCOTT, AZ	60.72
650	PROVIDENCE, RI	54.19
652	RICHMOND, VA	204.22
653	ROSEBURG, OR	109.74
654	RENO, NV	65.36
655	SAGINAW, MI	50.76
656	ST. CLOUD, MN	161.16
657	ST. LOUIS, MO	326.88
658	SALEM, VA	224.02
659	SALISBURY, NC	211.04
660	SALT LAKE CITY, UT	156.17
662	SAN FRANCISCO, CA	71.39
663	SEATTLE, WA	134.07
664	SAN DIEGO, CA	116.58
665	SEPULVEDA, CA	198.16
666	SHERIDAN, WY	55.36
667	SHREVEPORT, LA	79.63
668	SPOKANE, WA	55.41
670	SYRACUSE, NY	74.82
671	SAN ANTONIO, TX	171.81

VA MEDICAL CENTERS

TRANSPORTATION TIME
(HOURS PER DAY) CONT'D

	225.86
672 SAN JUAN, PR	199.47
673 TAMPA, FL	248.71
674 TEMPLE, TX	166.00
676 TOMAH, WI	172.48
677 TOPEKA, KS	95.77
678 TUCSON, AZ	177.94
679 TUSCALOOSA, AL	231.16
680 TUSKEGEE, AL	180.30
685 WACO, TX	166.55
686 LEAVENWORTH, KS	34.59
687 WALLA WALLA, WA	201.57
688 WASHINGTON, DC	136.75
689 WEST HAVEN, CT	243.72
691 WEST LOS ANGELES, CA	94.77
692 WHITE CITY, OR	153.38
693 WILKES-BARRE, PA	301.35
695 MILWAUKEE, WI	

8.05 STAFFING EQUATION

Staffing requirements on a weekly basis may be determined by using the following equation:

a. **EARNED HOURS FOR FOOD PREPARATION PER DAY =**

$$\frac{\text{Total trays served per day} \times (6.04 \text{ minutes per day})}{60 \text{ Minutes Per Hour}}$$

b. **TOTAL HOURS REQUIRED FOR FOOD PREPARATION PER DAY =**

$$(a) \times (1.063 \text{ PF\&D allowance})^*$$

c. **TOTAL FTEE REQUIRED PER WEEK =**

$$\frac{(b) + (\text{TRANSPORTATION TIME PER DAY})^{**} \times (7 \text{ days p/w}) \times 1.13^{***}}{40 \text{ Hrs Available Per FTEE Per Week}}$$

**Personal, Fatigue & Delay*

***Each station's individual transportation time which includes the methods and distances involved in transporting meals from one location to another listed in paragraph 8.04.*

****Leave Factor*

EXAMPLE

The method of determining weekly FTEE is illustrated in the following example:

Assembled trays per week = 10,843

Cafeteria trays per week = 8,162

Transportation time = 353.83

I. AVERAGE TOTAL TRAYS SERVED PER DAY

$$= \frac{10,843 + 8,162}{7} = 2715$$

II. EARNED HOURS FOR FOOD PREPARATION PER DAY

$$= \frac{2715 \times 6.04 \text{ min}}{60 \text{ min per hour}} = 273.31$$

III. TOTAL HOURS REQUIRED FOR FOOD PREPARATION PER DAY

$$= 273.31 \times 1.063$$

$$= 290.53$$

IV. TOTAL FTEE REQUIRED PER WEEK

$$= \frac{(290.53 + 353.83) \times 7 \times 1.13}{40 \text{ hours worked per week}}$$

$$= \frac{5096.89}{40}$$

$$= 127.42$$

**Time value for food preparation*

***Personal, fatigue and delay time factor*

8.06 GLOSSARY

a. **Assembled Trays (Code 101).** Record the average number of meals served per day in a reporting quarter. Assembled trays include all trays assembled and distributed by employees to patients' rooms or carried/served to patients/WOC, etc. in dining rooms and/or day rooms; all early and late trays; duplicate trays; and sack lunches, picnics, etc. Do NOT count nourishments.

b. **Cafeteria Trays (Code 102).** Record the average number of meals served per day in a reporting quarter. Cafeteria trays are trays that are received by anyone going through a cafeteria line and carrying their own tray. Cafeteria trays also include second portions; and gratuitous (volunteer) students, residents and outpatients meals and sack lunches.

c. **Total Dietetic Service FTEE (Code 201).** Record all FTEE assigned to Dietetic Service (includes full-time, part-time and temporary employees).

d. **Clinical FTEE (Code 202).** Record the clinical dietitians FTEE.

e. **Administrative FTEE (Code 203).** Record the FTEE for the Dietetic Service Chief, assistant chief, chief administrative section, clinical section chief, administrative dietitians, internship director, education & staff development dietitians, administrative technicians and quality assurance dietitians.

f. **Support Staff FTEE (Code 204).** Record support staff FTEE such as the service secretary, clerk-typists and cost accountant clerk and clinical dietetic technicians, who perform clinical activities.

g. **Supervisory FTEE (Code 205).** Record supervisory FTEE which includes supervisory cooks and supervisory food service workers.

h. **Food Production and Service FTEE (206).** Record non-supervisory FTEE for all employees who work in the FP&S section (including the diet communication FTEE). Exclude the FTEE recorded in Codes 202 through 205 above. *NOTE: Only allocate FTEE devoted to diet communication functions and distribute the remaining FTEE to other appropriate codes.*

8.07 INSTRUCTIONS FOR COMPLETING VA FORM 10-0057n-2, SUPPLEMENTAL TRANSPORTATION INFORMATION WORKSHEET, RCS 10-0703

a. VA Form 10-0057n-2 must be completed when significant changes occur in the number of carts, the average distance required for serving food, and/or the man-hours expended for food distribution. Significant changes include the following examples:

- (1) Closing a ward for 6 months or closing a dining room.
- (2) Opening a new unit (e.g., Nursing Home Care).
- (3) Moving into a new or remodeled facility.
- (4) Change in type of food delivery system (manual or mule train).
- (5) Change from a conventional to convenience food system.
- (6) Change from cafeteria to tray service.
- (7) Conversion to an Advance Food Preparation (AFP) system.

b. Should there be any changes, you must:

- (1) Recount the carts;
- (2) Remeasure the transportation distances;
- (3) Recalculate man-hours expended for food distribution; and
- (4) Recount assembled and/or cafeteria trays.

c. Then record results in the appropriate activity codes on the VA Form 10-0057n-2 (appendix 8C).

d. **Number of Carts Pushed Manually (Codes 401, 501, 601, 701).** Report the number of carts which are manually pushed for all or any part of the distance from a central food preparation or assembly area to a food serving location.

e. **Number of Carts Moved in Manual/Automatic Elevators (Codes 402, 502, 602, 702).** For the purposes of this report, the term elevator includes manual or automatic elevators manned or unmanned, cart dumbwaiters, trayveyor distribution shafts, and electrical/mechanical cart distribution system. Those facilities with trayveyor shafts should take credit for one cart movement (vertical distance) for each nursing unit (e.g., trays are delivered to wards 8A, 8B, and 8C, total credit given for 3 carts plus vertical distance for each). Report the number of carts which are moved by the elevator for all or any part of the distance from a central food preparation of assembly area to a food serving location.

f. **Number of Carts Moved by Mule Train (Codes 403, 503, 603, 703).** Report the number of carts moved by mule train for all or any part of the distance from a central food preparation or assembly area to a food serving location.

g. **Number of Carts Moved by Truck (Codes 404, 504, 604, 704).** Report the number of carts moved by truck for all or any part of the distance from a central food preparation or assembly area to a food serving location.

h. **Distance Carts are Pushed Manually (Codes 801, 901).** Report the distance (feet) that a cart is push manually for all or any part of the distance on a one-way trip from the food preparation or assembly area to the food serving location. Include short distances (ten feet, etc.) to move a cart into or out of an elevator.

i. **Distance Carts are Moved via Manual or Automatic Elevator (Codes 802, 902).** Report the distance (feet) that a cart is moved vertically or horizontally for all or any part of the distance on the one-way trip by means of an elevator shaft, an electrical/mechanical guide system, a trayveyor or a combination of same from a central food preparation or assembly area to a food service location.

j. **Distance Carts are Moved by Mule Train (Codes 803, 903).** Report the distance (feet) that a cart is moved by mule train for all or any part of the distance on a one-way trip from a central food preparation or assembly area to a food service location.

k. **Distance Carts are Moved by Motorized Truck (Codes 804, 904).** Report the distance (feet) that carts are moved for all or any part of the distance on a one-way trip from the food preparation or assembly area to a food service area.

l. **Man-hours Expended for Food Distribution (Code 905).** Report the total man-hours expended for the transportation and distribution activities plus the time spent passing the individual trays and nourishments to the recipients. Include the time required for returning empty carts and carts with soiled trays to the Dietetic Service area. Do NOT include time for assembling food trays, putting assembled trays onto carts, unloading returned trays, or cleaning trays or carts.

m. **Number of Assembled Trays (Code 1201).** Report the number of assembled trays (meals) served per day.

n. **Number of Cafeteria Trays (Code 1202).** Report the number of cafeteria trays (meals) served per day.

8.08 WORKLOAD DATA SOURCE

a. All facilities will report their staffing and workload data on a quarterly basis in accordance with the instructions contained in chapter 2. The data must be entered on the VA Form 10-0057n-1, Dietetic Service Food Production and Service Workload Statistics Worksheet, prior to transcribing to the VA Form 10-0067, Workload Statistics Codesheet, to be keypunched and transmitted to the DPC (Austin Data Processing Center). The data for this report are reported under RCS 10-0703. A blank copy of the VA Form 10-0057n-1 is contained in appendix 8A and a partially completed example of the VA Form 10-0067 is contained in appendix 8B. VA Form 10-0057n-2, Supplemental Transportation Information Worksheet (appendix 8C), VA Form 10-0057n-3, Cart Transportation Worksheet (appendix 8D), and VA Form 10-0057n-44, Tray Distribution Worksheet (appendix 8E) are to be used when calculating the distances that Dietetic carts and trays travel from one location to another.

b. VA Form 10-0067 is available from the VA Forms and Publications Depot and can be obtained through normal supply channels. Because of the rapidly changing nature of the VA Form 10-0067, an exception has been granted and the blank VA Form 10-0067 contained in appendix 8A is authorized for local reproduction. Once the data to be gathered have stabilized, the form will be printed and stocked in VA Forms and Publications Depot.

April 21, 1989

**DIETETIC SERVICE
FOOD PRODUCTION AND SERVICE
WORKLOAD STATISTICS WORKSHEET
RCS 10-0703**

VAMC: _____ FACILITY NUMBER: _____
QUARTER ENDING: _____ FISCAL YEAR: _____
SERVICE CHIEF: _____ FTS NUMBER: _____

WORKLOAD DATA

ACTIVITY	ACTIVITY CODE	QUARTERLY AVERAGE MEALS SERVED PER DAY
Assembled Trays	101	_____ COUNT
Cafeteria Trays	102	_____ COUNT

STAFFING

		QUARTERLY AVERAGE ACTUAL FTEE
Total Dietetic Service FTEE (All full-time, part-time and temporary employees)	201	_____ FTEE
Clinical FTEE	202	_____ FTEE
Administrative FTEE	203	_____ FTEE
Support Staff FTEE	204	_____ FTEE
Supervisory FTEE	205	_____ FTEE
Food Production and Service FTEE (Minus 202, 203, 204, 205)	206	_____ FTEE

STAFFING UTILIZATION DATA

DESCRIPTION	ACTIVITY CODE	DATA FOR QUARTER
TOTAL PAID HOURS Report the number of man-hours paid during the report period for all non-supervisory Food Production and Service employees including temporary and intermittent employees. Include unscheduled hours and hours for authorized paid overtime, leave and holidays. (Do not include incentive therapy patients.)	300	_____ HOURS

VAMC: _____

FACILITY NUMBER: _____

QUARTER ENDING: _____

FISCAL YEAR: _____

STAFFING UTILIZATION DATA CONTINUED

DESCRIPTION	ACTIVITY CODE	DATA FOR QUARTER
PAID OVERTIME HOURS Report the paid hours worked by all Food Production and Service employees in excess of eight hours in a day or forty hours in an administrative workweek. These hours should be included in the total paid hours.	301	_____ HOURS
COP (Continuation-of-Pay) HOURS (45 days or less) Report the total number of COP hours due to job-related injuries for all whose paid hours are charged to the Food Production and Service section. These hours should be included in the total paid hours.	302	_____ HOURS
TOTAL HOURS WORKED Report hours actually worked by non-supervisory employees including temporary and intermittent employees performing Food Production and Service activities i.e., hours spent on the job. These hours should include the normal duty hours, overtime/compensatory hours, and uncompensated hours worked by employees, work-study students, WOC appointed personnel, etc. (Do not include incentive therapy patients, and time spent performing union activities.)	310	_____ HOURS
VOLUNTEER HOURS WORKED Report time devoted to activities of the Food Production and Service section by formal volunteers.	315	_____ HOURS

April 21, 1989

M-1, Part IX
Chapter 8
APPENDIX 8A

VAMC: _____

FACILITY NUMBER: _____

QUARTER ENDING: _____

FISCAL YEAR: _____

STAFFING UTILIZATION DATA CONTINUED

DESCRIPTION	ACTIVITY CODE	DATA FOR QUARTER
TOTAL UNPAID LWOP (LEAVE WITHOUT PAY) AND AWOL (ABSENCE WITHOUT LEAVE) HOURS Report the total number of hours officially recorded as LWOP or AWOL for all employees assigned to the Food Production and Service section.	316	_____ HOURS
MAN-HOURS BORROWED Report the hours spent performing Food Production and Service activities by employees assigned from another Service.	320	_____ HOURS
MAN-HOURS LOANED Report the hours spent by employees of the Food Production and Service section performing activities of another Service including union activities.	330	_____ HOURS

April 21, 1989

DIETETIC SERVICE
FOOD PRODUCTION AND SERVICE
RCS 10-0703

VAMC: _____

FACILITY NUMBER: _____

QUARTER ENDING: _____

FISCAL YEAR: _____

SERVICE CHIEF: _____

FTS NUMBER: _____

SUPPLEMENTAL TRANSPORTATION INFORMATION WORKSHEET
(This form only needs to be completed when significant changes occur)

	PUSHED MANUALLY	MANUAL/ AUTOMATIC ELEVATOR	MULE TRAIN	TRUCK
<u>Number of Carts:</u>				
Bulk Food Carts (hot or cold per meal)	(401) _____	(402) _____	(403) _____	(404) _____
Assembled Food Tray Carts (per meal)	(501) _____	(502) _____	(503) _____	(504) _____
Nourishment Carts (per day)	(601) _____	(602) _____	(603) _____	(604) _____
Dietetic Supply Carts (per day)	(701) _____	(702) _____	(703) _____	(704) _____
	PUSHED MANUALLY (feet)	MANUAL/ AUTOMATIC ELEVATOR (feet)	MULE TRAIN (feet)	TRUCK (feet)
<u>Average Distance:</u>				
Bulk Food Carts (hot or cold per meal)	(801) _____	(802) _____	(803) _____	(804) _____
Assembled Food Tray Carts (per meal)	(901) _____	(902) _____	(903) _____	(904) _____
Man-hours expended for Food Distribution (per day)				(905) _____
Number of Assembled Trays (per day)				(1201) _____
Number of Cafeteria Trays (per day)				(1202) _____

**DIETETIC SERVICE
FOOD PRODUCTION AND SERVICE
RCS 10-0703**

CART TRANSPORTATION WORKSHEET
(This form only needs to be completed when significant changes occur)

INSTRUCTIONS: Complete this form by measuring the distance (one-way) that each cart travels from a central food preparation or assembly area to a central food service location. The distance that each cart travels to a central food service location must be entered in the appropriate space below which represents the method that each cart travels. Total and then average the distances in each category. Record the results in the spaces provided on this worksheet. The average cart distance (plus the average tray distance) must then be recorded in the corresponding code on the "Supplemental Transportation Information Worksheet" (Appendix 8C).

CART	DISTANCE PUSHED MANUALLY	DISTANCE FOR ALL TYPES ELEVATORS	DISTANCE TRAVELED BY MULE TRAIN	DISTANCE TRAVELED BY TRUCK
TO: _____	_____	_____	_____	_____
TO: _____	_____	_____	_____	_____
TO: _____	_____	_____	_____	_____
TO: _____	_____	_____	_____	_____
TO: _____	_____	_____	_____	_____
TO: _____	_____	_____	_____	_____
TO: _____	_____	_____	_____	_____
TOTAL DISTANCE:	_____	_____	_____	_____
AVERAGE CART DISTANCE:	_____	_____	_____	_____

DIETETIC SERVICE
FOOD PRODUCTION AND SERVICE
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TRAY DISTRIBUTION WORKSHEET

(This form only needs to be completed when significant changes occur)

INSTRUCTIONS: Complete this form by measuring the distance (one-way) that each tray is transported from a central food service location to the bedside of each patient. The distance that the individual trays are transported to each patient's bedside must be totalled, averaged and then placed in the appropriate spaces provided below. Add the average tray distribution distance to the average cart distance from the "Cart Transportation Worksheet" (Appendix 8D). The average total is to be entered in the appropriate code on the "Supplemental Transportation Information Worksheet" (Appendix 8C).

ROOM OCCUPANCY		DISTANCE TO BEDSIDE	TRAY DISTANCE
			(feet)
_____	single room(s) X _____	feet per one way distance	= _____
_____	double room(s) X _____	feet, first bed, one way distance	= _____
_____	double room(s) X _____	feet, second bed, one way distance	= _____
_____	3 person room(s) X _____	feet, first bed, one way distance	= _____
_____	3 person room(s) X _____	feet, second bed, one way distance	= _____
_____	3 person room(s) X _____	feet, third bed, one way distance	= _____
_____	4 person room(s) X _____	feet, first bed, one way distance	= _____
_____	4 person room(s) X _____	feet, second bed, one way distance	= _____
_____	4 person room(s) X _____	feet, third bed, one way distance	= _____
_____	4 person room(s) X _____	feet, fourth bed, one way distance	= _____
	Other: (specify)		= _____
	Total distance tray(s) travel from central food service location to the patient(s) beside.		= _____
	Average Tray Distribution		= _____

SEP 21 1989

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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

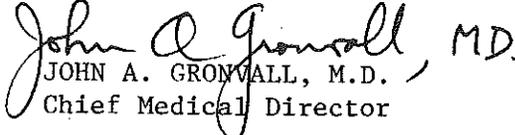
21-i thru 21B-7

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.


JOHN A. GRONVALL, M.D.
Chief Medical Director

Distribution: RPC: 1150 is assigned
FD

Printing Date: 8/89