

Mandatory Overtime Report between  
Service Employees International Union (SEIU) Local 1000 and the  
Department of State Hospitals

**Mandatory Overtime History**

Mandatory overtime (MOT) is defined within the SEIU Memorandum of Understanding (MOU) for Bargaining Units 17 and 20, in contract provisions 19.15.17 and 19.13.20, as a mandated holdover of two (2) hours or more. The history of MOT began in 2001 when California was one of the first states in the nation to limit excessive work hours for nurses. However, the wage order from the legislature did not cover nurses who work in state-run facilities.

In 2005, Assembly Bill (AB) 1184 was introduced to prohibit mandatory overtime for nurses. The bill was vetoed on September 29, 2005, by Governor Schwarzenegger citing nursing shortages, recruitment difficulties, and pursuant to the Ralph C. Dills Act, should be addressed through the collective bargaining process.

In 2014, AB 2155 was introduced by Assembly member Sebastian Ridley-Thomas, who was also a current Commissioner and member of the Little Hoover Commission (LHC). The bill also proposed to eliminate mandatory overtime for nurses. On September 30, 2014, Governor Brown vetoed the bill stating that these matters are more appropriately settled through the collective bargaining process.

On May 12, 2015, Assembly member S. Ridley-Thomas sent a letter to the LHC, requesting that the LHC examine the use of mandatory overtime for nurses employed by the State of California. Ridley-Thomas' intention in this letter stated: "...By examining this issue, the Commission can help to facilitate a dialogue that will improve efficiencies and working conditions for nurses while enhancing patient outcomes..."

Additionally, on August 19, 2015, Ridley-Thomas proposed AB 840 to the California legislature. This bill would prohibit a nurse from being compelled to work in excess of the regularly scheduled workweek or shift. This bill was vetoed by Governor Brown on September 30, 2016, citing the same reason as above.

In 2016, the Little Hoover commission conducted a public hearing and study on overtime in state facilities and issued a report to the governor and legislature. The report included the following areas, which are drivers of MOT: health and safety issues, overtime costs, vacancies, civil service challenges, scheduling issues/errors. On page 16, second paragraph of the Little Hoover Report, it states "More than a decade ago, the U.S. Institute of Medicine recommended prohibiting nursing staff from providing patient care in excess of 12 hours in a 24-hour work period and in excess of 60 hours per seven-day work period to reduce error-producing fatigue."

Furthermore, on page 16 in paragraph three, the report states “It is inexcusable that California state facilities rely heavily on overtime as a staffing tool when other public sector healthcare providers have succeeded in reducing overtime in general and avoiding mandatory overtime in all but extreme emergencies. The departments are not solely to blame as they must comply with outdated civil service rules that make it harder and take longer to fill vacancies and it is more difficult to implement creative staffing tools that could help minimize the need for excess overtime. They are also governed by budget and staffing allocations that may not be based on accurate assumptions for employee leave time and fluctuating patient needs.” This information can be found at [Time and Again: Overtime in State Facilities – Little Hoover Commission](#)

Little Hoover Commission data highlights - Overtime in California for Fiscal Year 2014-2015:

- 3.75 million hours of overtime.
- 85% of the entire nursing staff worked overtime.
- \$179 million in overtime pay = 1,802 employees working 40-hour weeks for a full year.
- 18.2% of total pay for state nurses is overtime ➡ 4x the percentage of pay for registered nurses and healthcare workers nationally.

In 2016 SEIU started a #StopMOT movement to activate nursing classifications to become leaders within their respective facilities to develop the power necessary to eliminate MOT, fix staffing issues, and improve working conditions. SEIU developed web pages for Unit 17 and Unit 20 to document and track MOT for our nurse members. The outcome of these actions by SEIU nurses resulted in legislation to eliminate MOT, but Governor Jerry Brown exempted state nurses with respect to MOT.

### **Joint Labor Management Task Force history**

The Joint Labor Management Task Force (JLMTF) was established in 2017 as part of the 2016 MOU agreement to include three departments: California Correctional Health Care Services (CCHCS), California Department of State Hospitals (DSH), and the California Department of Veterans Affairs (CalVet). The intent of this agreement was to eliminate/reduce MOT within the three departments. In the 2013 MOU, it was agreed that DSH was to not schedule RNs more than five MOT shifts per month and six shifts for LVNs. In the 2016 MOU, there was a reduction of the amount of MOT for nurses per month.

The DSH/SEIU JLMTF was established to meet quarterly per the MOU with the three departments to identify drivers of MOT and to develop and implement recommendations regarding patient and staff needs, training and assessment, and staffing best practices to eliminate/reduce MOT. Per the MOU, DSH was tasked to track the number of voluntary and mandatory overtime hours at each facility for RNs and LVNs. By November 2019, the JLMTF were to make recommendations for the elimination/reduction of MOT and develop a plan for implementing the JLMTF’s recommendations. This information can be found on the CalHR website and pertains to contract article section:19.36 (DSH).

In the 2020-2023 MOU, it was agreed that effective January 2, 2020, the RNs would work no more than three (3) MOT shifts per month and LVNs work no more than four (4) MOT shifts per month. Effective July 1, 2021, the number was to reduce to two (2) MOT shifts for RNs and three (3) MOT shifts for LVNs. However, there was no mutual agreement between the state and

SEIU; therefore, the reduction was to occur July 1, 2022. During this time, the contract stated that SEIU Local 1000 would meet with the departments every other month to achieve this goal. Ultimately the toolkit was never developed by the JLMTF.

In the 2023-2026, MOU, it was agreed that the JLMTF would continue and develop strategies to work towards a reduction of MOT. Additionally, the JLMTF was tasked to develop this report as the department was unable to reduce the amount of MOT for nurses per month.

### **Acknowledgement that MOT is still an issue and demonstrate that MOT has declined**

Presently, SEIU and DSH continue the JLMTF and work collaboratively to explore solutions to eliminate/reduce MOT. Potential strategies such as: alternative scheduling options, increased focus on recruitment and retention, and non-monetary incentives (employee recognition programs) have been identified. Across the department, there are multiple locations throughout the state where we are still seeing MOT issues that need to be addressed. The task force continues to work toward the goal to identify MOT concerns and make recommendations to alleviate them. This topic will be discussed in greater detail in the MOT Recommendations section of the report.

#### **SEIU's Perspective –**

First, there has been a decline in MOT across the department due to SEIU and CalHR's bargaining efforts at the table and DSH's efforts at the hospitals to reduce the number of monthly mandates for nurses. In 2016, the RNs were at five mandates per month and the LVNs were at six mandates per month. Beginning August 1, 2016, RNs were reduced to four mandates per month and LVNs were reduced to five per month. During that time period, the departments agreed to meet with SEIU to develop a plan to eliminate/reduce MOT, but the parties were unable to reach an agreement and therefore no plan was agreed upon or implemented. In 2019 due to the conversation at the bargaining table SEIU began to draft an unfair labor practice (ULP) charge, however the departments agreed to negotiate an agreement prior to the filing of the ULP. The result of the 2020 negotiations decreased mandates so that RNs were to be mandated only two times per month and LVNs three times per month effective July 1, 2022. The decrease in mandates was accomplished over a four-year period, indicating that this didn't happen overnight. Finally, in 2023 during bargaining negotiations the state declined to further reduce the number of mandates per month and as a result the JLMTF was continued with the requirement of the Joint MOT Report between SEIU and the departments.

MOT has been reduced by a few important factors for the department. Registry nursing staff has been used for several years now; however, the use of registry staff has increased significantly and is utilized by the department to cover the large vacancy rates which in turn has reduced overtime. Another method being used by the department is redirecting nursing staff to other areas without back-filling, which has reduced overtime needs. DSH has implemented an alternative work schedule of twelve-hour shifts at Patton State Hospital, which has reduced MOT for RNs specifically.

## MOT Data section –

At DSH, from 2016 to 2022 the overall total use of MOT for Unit 17 and Unit 20 has hovered between 30 to 50 thousand hours per year. In 2023, the most recent year with complete data, the total MOT usage at DSH was around 16.5 thousand hours, a drop of 50% from 2022. This decline in MOT for both Units in the context of opposite trends in staffing levels suggests that MOT usage is largely unaffected by civil service staffing levels and is driven by a potential increase in the use of registry staff to cover shifts. Below you will see a summary table of MOT hours for Unit 17 and Unit 20 for all DSH hospitals from 2016-2023.

### RN MOT Hours 2016-2023

Year	Total MOT	Atascadero	Coalinga	Metro	Napa	Patton
2016	<b>33789.2</b>	3413.5	470.7	1330.0	22901.4	5673.6
2017	<b>44893.9</b>	4273.1	437.2	2578.5	33769.7	3835.4
2018	<b>31763.5</b>	1630.7	135.2	297.5	23509.7	6190.4
2019	<b>51395.3</b>	2730.9	.8	87.2	38764.3	9752.1
2020	<b>39044.6</b>	1276.9	219.9	3510	21902	12137.8
2021	<b>52942.2</b>	3636.7	12	4163.5	27364	17766
2022	<b>30945.7</b>	2839.1	38.6	1655	22367.3	4045.7
2023	<b>16544.4</b>	2290.7	34	1285	11958.4	976.3

### LVN MOT Hours 2016-2023

Year	Total MOT	Atascadero	Coalinga	Metro	Napa	Patton
2016	<b>4395.8</b>	0	62.7	174.5	1936.2	2222.4
2017	<b>3696.7</b>	0	58.2	313.4	2402	923.1
2018	<b>3868.2</b>	303.5	15.5	36.5	2603	909.7
2019	<b>3712.8</b>	436.2	55.7	19.7	2508.7	692.5
2020	<b>3894.4</b>	463.5	50.7	118.7	2284.8	976.7
2021	<b>12453.8</b>	1293.2	27.7	616.7	6368	4148.2
2022	<b>7587.5</b>	974.9	76.2	563.5	5044.2	928.7
2023	<b>2662.4</b>	144.2	66.2	258.5	1891	262.5

DSH conducted an analysis of RN and LVN vacancy rates for the last three (3) fiscal years (FY). RN vacancies have steadily increased at DSH-A, DSH-C and DSH-N, but have steadily decreased at both DSH-M and DSH-P.

RN Vacancies	FY 2021-22	FY 2022-23	FY 2023-24
DSH-Atascadero	17.75%	19.8%	24.25%
DSH-Coalinga	5.8%	15.9%	11.9%
DSH-Metro	26.6%	23.4%	19.1%
DSH-Napa	9.5%	14%	19.5%
DSH-Patton	11%	6.75%	4.9%

#### DSH perspective –

The LVN vacancy rates for all DSH hospitals have been up and down (i.e., volatile) but have steadily increased. Please note that the DSH-Patton vacancy rate change from 2022-2023 to 2023-2024 was not due to hiring but a direct result of 13 LVN positions being reclassified to other SEIU classifications. Also, for Metro, DSH received position authority to staff five units as part of the increased secure bed capacity project, however, not all units were activated to increase census, therefore the vacancy rate appears higher until DSH moves forward with hiring upon activation of the remaining two units.

LVN Vacancies	FY 2021-22	FY 2022-23	FY 2023-24
DSH-Atascadero	18.4%	25%	53%
DSH-Coalinga	14.8%	29%	21.1%
DSH-Metro	10.5%	18.1%	34%
DSH-Napa	26%	31%	45.7%
DSH-Patton	29.6%	37.3%	14.8%

DSH continues to work diligently to reduce these vacancy rates. In January 2022, DSH established the Workforce Initiative Now (WIN) program to focus on the top five most hard to recruit classifications, which includes RN but not LVNs. Through the program, progress has been made. Some of the efforts made are continuous posting of vacancies and expanded recruitment efforts in various platforms (i.e., job fairs, college visits, out-of-state recruitment events, virtual events). Although recruitment of permanent full-time civil service nurses is the priority, DSH continues to utilize internal and external registry staff to fill in gaps to ensure DSH can meet its licensed ratios and provide quality of care to its patients and ensure the continued safety of its staff and patients.

#### SEIU Perspective –

Since June 2022 DSH-Patton continued to leave 13 LVN positions vacant and neglected to advertise the vacancies. In December 2023, the 13 positions were converted into administrative positions to include Associate Governmental Program Analysts (AGPA). In July 2023, the Mission Based Review document directed that one (1) AGPA position was to be redirected back on-unit. Level of care (LOC) staff still remain in the Central Staffing Office (CSO) to date. The Mission Based Review states on page 3, section II under Direct Care Nursing “An additional 29.0 positions have been added as of the FY 2023-24 Budget Act. These positions are to be used to allow nursing staff currently in off-unit roles to go back on-unit. SEIU believes the LOC staff assigned to the CSO should be utilized for direct patient care resulting in a reduction of MOT. As a note of clarification, this practice of using LOC staff in the CSO is continuing in all DSH hospitals.

While the WIN program addresses staffing shortages, excluding LVNs limits its effectiveness. The department's omission of LVNs further increases the staffing strain on the LOC staff and shows that the department has little respect for the LVN.

In summary, for Unit 17 the total use of MOT never exceeded 10 percent of the total VOT hours, and when we convert this to monthly FTE equivalents MOT usage ranged between 3.2 to 22.4 percent in any particular month and an average of 9 percent overall. The MOT FTE equivalent values represent a very small fraction when considered against the overall size of the Unit 17 workforce of around 1,850 established positions.

Similarly, for Unit 20 the total use of MOT never exceeded 12 percent of the total VOT hours, and when we convert this to monthly FTE equivalents MOT usage ranged between 0.6 to 2.7 percent in any particular month and an average of 1.3 percent overall. The MOT FTE equivalent values represent a very small fraction when considered against the overall size of the Unit 20 workforce that is just above 300 established positions, despite a very high vacancy rate.

#### DSH Perspective –

Furthermore, unplanned absences can contribute to MOT, especially in 24/7 facilities. When employees unexpectedly call out, DSH faces staffing shortages that disrupt workflow and delivery of services to its patients. To maintain operations, DSH requires other staff to work additional hours leading to MOT. Below is a chart of unplanned absences for both RNs and LVNs for 2020-2024.

#### LVN (in hours)

Hospital	2020	2021	2022	2023	2024
DSH-A	1426.7	1943.1	1478.0	850.5	513.1
DSH-C	2798.5	2927.7	5576.8	5821.0	4769.5
DSH-M	1051.0	1545.0	1589.0	1579.0	1852.0
DSH-N	3472.0	4497.0	5766.0	3254.0	3485.0
DSH-P	9604.2	6199.4	4145	4327	3036

#### RN (in hours)

Hospital	2020	2021	2022	2023	2024
DSH-A	24,157.7	26,322.8	25,281.4	17,927.1	15,927.0
DSH-C	26,378.7	27,590.9	30,836.1	19,831.1	16,902.7
DSH-M	13,013.0	14,422.0	16,092.0	16,274.0	18,500.0
DSH-N	40,850.0	46,584.0	51,347.0	40,051.0	51,720.0
DSH-P	75,563.6	77,331.2	57,044.2	56,488.6	50,852.4

Another factor tied to unplanned absences is the number of certifications under the Family and Medical Leave Act (FMLA) as it relates to MOT. When an employee or their family member has a serious health condition that qualifies for FMLA, they can avoid MOT without penalty. However, this leaves the department short staffed and requires someone else to be mandated. The report below demonstrates the number of hours of MOT that is avoided with the use of FMLA.

## SEIU Perspective –

While FMLA may allow employees to avoid MOT, it is a federally protected right designed to support those facing serious health conditions. Blaming FMLA for staffing shortages shifts the focus away from the real issue, insufficient staffing, and retention just to name a couple. The department should focus on the root causes of excessive MOT, which are the following: improving recruitment, appropriate distribution of LOC staff to include registry on the units and improving scheduling practices. When we say improving scheduling practices, one example is that another DSH classification is unwilling to consider 12 hour shifts to assist with the reduction of MOT. DSH's focus on staff use of FMLA also puts a negative connotation toward the individual or their family members whose serious health condition for which it is needed.

### LVN (in hours)

Hospital	2020	2021	2022	2023	2024
ASH	486.75	675.75	838.8	787.5	97.5
CSH	13.9	160	11.5	4.25	2.25
MSH	0	7.25	59.5	211.5	7.25
NSH	1216	1435	1239	1066	1440
PSH	608.55	951.25	134.75	103	41.5

### RN (in hours)

Hospital	2020	2021	2022	2023	2024
ASH	568	2400.25	3792.5	3715	433.25
CSH	0	0	0	0	0
MSH	1115.5	2414.25	1016.5	1447.3	266.3
NSH	7689	11721	11051	10541	15224
PSH	4550.75	8879.95	820.25	286.75	

## Registry Data –

DSH has at least five registry contracts for nursing services that cover two fiscal years (FY 2023-24 and 2024-25). These are statewide contracts for nursing services across various classifications and provide the department with authority to have a maximum expenditure of \$778 million dollars across both fiscal years demonstrated by the data table below:

Current Statewide DSH Contracts for Registries Services Totals and Rates (January 2024)					
Vendor	Maximum Expenditures	Contract Dates	CNA	LVN	RN
Huckeye Health	\$146,453,463	7/23-6/25	\$39- \$45 hourly (\$81,120- \$93,600 annual)	\$59 - \$65 hourly (\$122,720 - \$135,200 annual)	\$105 - \$125 hourly (\$218,400 - \$260,000 annual)
Wynden Stark	\$159,174,800	7/23-6/25	\$39- \$45 hourly (\$81,120- \$93,600 annual)	\$59 - \$65 hourly (\$122,720 - \$135,200 annual)	\$105 - \$125 hourly (\$218,400 - \$260,000 annual)
Pinnacle Health	\$159,728,716	7/23-6/25	\$39- \$45 hourly (\$81,120- \$93,600 annual)	\$59 - \$65 hourly (\$122,720 - \$135,200 annual)	\$105 - \$125 hourly (\$218,400 - \$260,000 annual)
Healthcare Staffing	\$154,688,347	7/23-6/25	\$39- \$45 hourly (\$81,120- \$93,600 annual)	\$59 - \$65 hourly (\$122,720 - \$135,200 annual)	\$105 - \$125 hourly (\$218,400 - \$260,000 annual)
Intuitive Health	\$158,586,874	7/23-6/25	\$39- \$45 hourly (\$81,120- \$93,600 annual)	\$59 - \$65 hourly (\$122,720 - \$135,200 annual)	\$105 - \$125 hourly (\$218,400 - \$260,000 annual)
Total		<b>\$777,632,200</b>			
Civil Service	Salary Costs	Current Aveage	\$4,289 monthly (\$51,468 annual)*	\$5975 monthly (\$71,700 annual)	\$10,645 monthly (\$127,740 annual)
*DSH does not have Civil Service CNAs , vallues calculated from CNAs from all other departments					

The billing rates for the classifications range from \$39 an hour for CNAs (which DSH does not use) up to \$125 an hour for RNs. For comparison purposes, the current average salary rate for approximately 1,500 DSH RNs is about \$10,645 a month, or \$127,741 on an annual basis. The billing rates across these contracts for RNs range between \$218,400 and \$260,000 on an annual basis. Broadly, the use of registry nurses is more costly than civil service RNs, somewhere between \$90,659 and \$134,339 on an annualized full-time basis, for each FTE.

Similarly, the cost of registry LVNs far exceeds the costs of civil service LVNs doing the same work. On an annual basis, the average DSH LVN has salary costs of \$71,700 while the registries LVNs have a billing rate that ranges between \$122,720 and \$135,200. Therefore, for each FTE, the difference between the salary rate and range of billing rates for LVNs is \$51,020 and \$63,500 on an annualized full-time basis.

While we acknowledge that civil service salary costs do not represent the total compensation costs for a civil service employee, however, the difference between the civil service salary rates and the published billing rates far exceeds any additional salary driven costs in this scenario.

DSH Perspective –

DSH contract expenditures

Vendor	Actual Expenditures
Huckeye Health	\$270,227
Wynden Stark	\$1,833,954
Healthcare Staffing	\$192,680
Intuitive Health	\$51,935,668
<b>TOTAL</b>	<b>\$56,385,122</b>

The table above shows the expenditures to date (July 2023 through December 2024), which reflects that DSH has spent a minimal percentage of the total available budgeted funds. At the end of the registry contract term, DSH will disencumber funds not spent, which is anticipated to be approximately 80% of the total contract expenditures. The actual expenditures demonstrate that DSH is looking to staff its hospitals 24/7 using qualified registry staff to ensure it meets



licensing requirements, maintain quality of care of its patients and ensure safety of all its staff, while simultaneously doing so in the most fiscally responsible way. This also provides more work/life balance for its level of care staff by reducing MOT while DSH continues its efforts to recruit more civil service nurses.

In addition, when looking at the civil service salaries above it does not include compensation related to benefits such as health, dental, retirement, etc. The billing rates for registry includes the hourly salary paid to staff and a monthly flat overhead fee that does not exceed fifteen percent (15%).

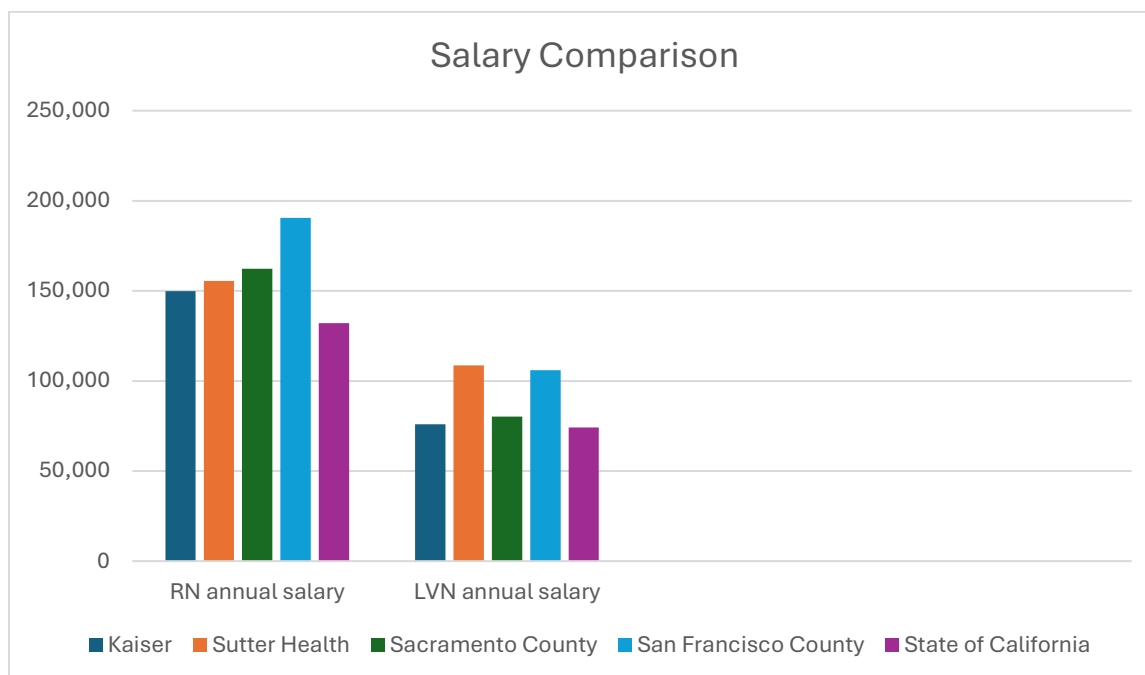
### **SEIU Salary Perspective –**

SEIU researched salaries across the private and public sectors to display sample data for RNs and LVNs who are impacted by MOT.

The salary ranges seen in the table below are calculated by taking the lowest/highest hourly rate and multiplying those numbers by 2,080 hours (standard work hours annually).

The salary ranges for DSH were taken from the civil service pay scales from the CalHR website – the lowest/highest monthly salaries were multiplied by twelve. At the top of page 4, you will see a bar graph showing the salary comparisons of the listed organizations.

<b>Organizations:</b>	<b>Kaiser</b>	<b>Sutter Health</b>	<b>Sacramento County</b>	<b>San Francisco County</b>	<b>State of California (DSH) Range T</b>
<b>RN annual salary</b>	<b>\$149,760</b> (average salary)	<b>\$101,566 - \$155,480</b>	<b>\$127,441 - \$162,219</b>	<b>\$160,804 - \$190,569</b>	<b>\$110,796 - \$132,060</b>
<b>LVN annual salary</b>	<b>\$75,899 -</b> (average salary)	<b>\$80,974 - \$108,700</b>	<b>\$65,977 - \$80,225</b>	<b>\$87,214 - \$105,996</b>	<b>\$59,208 - \$74,112</b>



The salary data was found on the websites listed below:

- <https://www.indeed.com/>
- <https://jobs.sutterhealth.org/>
- <https://careers.sf.gov/>
- <https://www.sacounty.gov/>
- <https://www.calhr.ca.gov/state-hr-professionals/Pages/pay-scales.aspx>

\*Please note that salary comparison documents are located in the Appendix.

In a competitive job market where there are many healthcare organizations that are trying to attract skilled nurses, the DSH pay ranges make it challenging to keep up with salaries in the private sector and as seen above, in some public sectors too (SF County and Sacramento County). Aside from salary, other benefits are also being offered outside of what DSH can offer such as: flexible hourly scheduling (staff choice), sign-on bonuses, more competitive shift differential pay (higher differential pay), and no MOT for the private sector companies. When looking at the salary comparison chart, please note this does not include benefits such as health, dental, retirement, etc. Additionally, some healthcare organizations offer free medical within their system as well as offering their employees more robust retirement packages.

Another important aspect of working within civil service is the dissatisfaction of many nurses when it comes to their work/life balance due to fixed schedules, challenging work culture, and the unpredictability of MOT. This information has been obtained by surveying DSH nurses.

### Outcome:

It is SEIU's opinion that the lower pay ranges offered by the State of California are regulated by CalHR and DOF and places DSH at a significant disadvantage in terms of recruitment and retention of employees in a very competitive health care services market.

Some of the employment factors noted above are displayed in the graph below regarding the top five reasons why nurses leave their positions.

All the data points SEIU has presented make a strong case for the State of California to look inward to what they are offering with respect to competitive salaries, work/life balance, and employee incentives.



\*Please see the link to a more detailed version of the survey results above [The nursing shortage in 2023 | McKinsey](#)

### **Alternative Work Schedule (AWS):**

In 2021 the RNs at the DSH-Patton location worked an eight-hour Daphne cycle schedule. A Daphne cycle schedule is a set rotational pattern of eight- or twelve-hour shifts. This resulted in SEIU and DSH creating a survey for nurses to consider a twelve-hour shift schedule. The survey results indicated the RNs favored the twelve-hour shift schedule. In January 2022, the twelve-hour shift schedule was implemented at DSH Patton and has remained in place to date.

### **Outcome:**

Based on a DSH MOT report submitted to SEIU recently from January 2021 through December 2021, the MOT hours for DSH-Patton were 17,766. After the twelve-hour shift implementation, the MOT hours from January 2022 through December 2022 for DSH-Patton were 4,045. This is a reduction of 13,721 MOT hours for the year. As noted above in the MOT report, DSH-Patton's MOT hours have significantly decreased since the twelve-hour schedule was implemented. It has resulted in nurses having better staff morale, increased work/life balance, and ultimately has enhanced patient care.

## **DSH MOT reduction efforts –**

At the advent of the DSH MOT reduction strategic objective, the efforts recorded internally by DSH in April 2018, and updated April 2022, included the following DSH statewide efforts to reduce MOT:

- Continuous posting of vacancies
- Conduct regular interviews
- Use internal and external registries
- Use Retired Annuitants and Permanent Intermittent
- Utilize non-nursing staff, where appropriate
- Continuous review of 1:1 and look for alternatives to decrease numbers
- Weekly pre-hire broadcast through ASSIST
- Lower enhancements as appropriate
- Review of unplanned/unscheduled leave usage
- Review MOT/POT/VOT hours for comparison and trends
- Continued for monitoring of FMLA usage to ensure use is within parameters
- Continuous rebalancing of staff to provide equitable coverage between units and shifts
- Affiliation with several colleges
  - West Hills Lemoore
  - Fresno City College
  - Napa Valley College
  - Pacific Union College
  - Los Medanos College
  - Solano Community College
  - Mt. San Antonio College
  - CNI College
  - West Coast College

DSH-Napa has created innovative administrative practices and incentives for their nursing staff. Management at DSH-Napa developed a practice that allowed their staff an opportunity to be exempted on the mandate list to be requested at the beginning of the shift, which would be approved or denied by a supervisor as feasible. Although an exemption from the mandate list wasn't guaranteed, there was a structure in place that allowed management to occasionally exempt an employee from being mandated. This allowed flexibility for management and staff to work through the mandate requirements in a reasonable manner, which resulted in improved relationships between staff and management.

DSH Napa offers an incentive for good attendance. If a staff member has no call-offs for ninety (90) days, they are able to choose an additional day off utilizing their own leave. Like the practice above, this incentive structure that traded no call-offs for employee flexibility to turn down a mandate helped the worksite achieve a reduction in MOT and resulted in better relations between management and staff.

Lastly, across all DSH facilities the consistent implementation of the Exchange of Days (Unit 17)/ Exchange of Time off (Unit 20) option is a good practice and a right that has been established in the MOU. Both management and the union should continue to monitor and enforce this right so that all DSH employees can benefit from this good practice equally.

**Outcome:**

Presently the nursing staff is able to enjoy a better work/life balance as they have more control over their MOT. DSH-Napa presented a unique test case to determine whether innovative administrative practices and incentives had a positive role in the administration of MOT while providing employees greater autonomy and work/life balance. Based on SEIU's conversations with employees at DSH-Napa these practices were good foundations to help tackle MOT issues.

**Recommendations Section – 2024 latest recommendations (both parties)**

One of the primary purposes of the JLMTF is to collaboratively work together to develop strategies for MOT reduction. SEIU and DSH mutually agreed that both sides would make recommendations toward this goal. In this section we will highlight joint recommendations between SEIU and DSH and SEIU recommendations.

**Joint recommendations:**

- Increase staffing. Work collaboratively with SEIU and DSH's Recruitment Unit
- Continuous posting of all RN/LVN vacancies statewide
- Participate in more hiring events with a focus on RN/LVN
- Increase collaboration with local colleges
- Remind staff of and encourage swaps
- Review investigation timelines to see if they can be streamlined. This is in an effort to get staff back working on the unit(s) who have been reassigned during an investigation
- Review of FMLA timekeeping and tracking
- Implement the Daphne Cycle Scheduling System at Napa State Hospital (Implemented 1/1/2025)
- Reduce redundant paperwork for nursing staff to allow more time for patient care/relationship building. Institute electronic health care record system for efficient patient charting.

**SEIU recommendations:****Non-monetary –**

- 30-day no call-out incentive, staff can use their own time the following month at management's discretion to take one day off.
- Offer Alternative Work Schedules (e.g., 12-hour shifts like DSH-A, DSH-C and DSH-P) in more DSH facilities – more scheduling flexibility

**Monetary –**

- Sign-on bonus of \$4,000 (example: \$1,500 upon completion of 3 consecutive pay periods, \$1,500 upon completion of 6 consecutive pay periods, and \$1,000 upon completion of 18 consecutive pay periods).

- Allocate budget for a 20/20 Program: open up opportunities to numerous classifications for upward mobility to increase staff retention
- Staff appreciation:
  - Quarterly gift basket raffle for all staff to improve (examples: earplugs, sleep mask, lavender pillow, white noise machine) – Dept. budget
  - Annual Employee Appreciation Day (e.g., BBQ, pizza party, Unit games – trivia with a small gift to the winner) – Dept. budget
  - Quarterly Meal/coffee delivery for the Unit with the least number of call-offs for staff appreciation
- DSH to offer specific positions R&R (hard to recruit) for challenging units/programs (Article sections 11.17 and 11.17.17)

#### Joint Conclusion –

As noted throughout the document, MOT has been a long-standing issue with notable progress. Through the coordinated efforts of SEIU, CalHR and DSH, significant progress has been made to reduce MOT for RNs and LVNs. It is agreed that DSH vacancy rates are high, and more work should be done to reduce and the recommendations above is a great pathway forward.

While it is understood the use of registry nurses has increased during COVID-19 and beyond, it is imperative that DSH maintains staffing levels to meet operational needs and provides necessary patient care. The recommendations stated above by DSH and SEIU may assist in recruiting and retaining existing employees.

Also, there are benefits to working for DSH, and the State. Employees have a retirement plan, generous health care benefits including dental and vision coverage, flexible paid leave and may qualify for student loan forgiveness. These are some of the highlights used in recruitment efforts and are a benefit to retaining employees.

#### SEIU Conclusion –

As highlighted from the MOT Data section from 2016 to 2022 MOT within all DSH hospitals was between 30,000 to 50,000 hours a year for Unit 17 and Unit 20 employees, however in 2023, the total MOT hours were roughly 16.5 thousand hours, which is a drop of 50% from 2022. This suggests that the implementation of registry staff has greatly impacted the reduction of MOT, not necessarily increasing staffing by the department. It's important to note that Unit 20 LVN vacancy rates are at alarming levels as seen from the vacancy tables above provided by the department.

This begs the question; will the state focus on recruitment and retention of their nursing staffing moving forward? One way this can be accomplished is by offering more competitive salaries.

Earlier in the report SEIU discussed salary comparisons and offered a sample of private and public sector salaries for the nursing classifications that DSH utilizes. SEIU can draw the conclusion that from the sample offered in the salary table/graph indicates that the State of California is at the bottom when compared to the other organizations.

Since the State of California offers the lowest a competitive base salary (based on those surveyed by SEIU), this makes it challenging to recruit and retain qualified nursing staff. As noted above when discussing registry staff utilized by DSH, it is very difficult to recruit top-tier nurses when the registry pay rates are significantly higher when annualized compared to permanent state employees. If you were an RN and had the option of state employment with an average salary of \$127,741 compared to a registry RN making an average of \$218,400, which opportunity would you take?

Finally, we reported on AWS opportunities being offered at DSH locations, however these are typically fixed schedules where staff don't necessarily have a choice in their work schedule. Healthcare organizations outside of civil service offer their nurses various schedule choices, for example: 8hr, 10hr, or 12hr shift schedules, which allow flexibility for a better work/life balance. We look forward to continuing to collaborate with the department to improve the areas reported in this MOT Joint report.

#### Appendix Section:

SEIU Appendix A – Salary Comparison

SEIU Appendix B – MOT Data Analysis

SEIU Appendix C – RN-LVN Registry Contracts Expenditures through December 2024

DSH Appendix D – RN MOT Data

DSH Appendix E – LVN MOT Data

DSH Appendix F – RN Vacancy Rates

DSH Appendix G – LVN Vacancy Rates

SEIU Appendix H - Mission Based Review Position Phased in Procedures

# **SEIU Appendix A**

## **Salary Comparison**





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# Registered Nurse hourly salaries in California at Kaiser Permanente

Job Title

Registered Nurse 

Location

California 

Average salary 

**\$71.99**

per hour 

↑ 73%

 Above national average

Average \$71.99

Low \$34.90

High \$200 

Does this salary seem accurate? [Yes](#) [No](#)

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## Description

We are so glad you are interested in joining Sutter Health!

### Organization:

SCH-Sutter Coast Hospital

### Position Overview:

The Registered Nurse in the Acute Care setting manages the patient/family experience through utilization of critical thinking, teamwork, effective communication, and nursing judgment/knowledge/skills.

- Provides indirect and direct care to patients ranging in

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age/developmental stages from infants (pediatrics) to geriatrics with the main focus on adults to geriatrics.

- Uses the nursing process of assessment, planning, implementation and evaluation to meet the physiological, psychosocial, safety, learning and self-care needs of patients and their families.
- Responsible for managing care of assigned patients and directing activities of ancillary staff.
- Responsible for comprehensive nursing care of patients performed in association with nursing peers, physicians, and allied support services.
- Provides individualized, goal directed nursing care to patients through the use of the nursing processes & documentation from admission to discharge.
- This includes & is not limited to patient assessment by gathering information necessary to formulate a nursing diagnosis to be used as a basis for planning care consistent with formulated nursing diagnosis.
- Implements care that is skillful, efficient, safe & based on patient care standards by performing nursing procedure required for patient assignments, documenting the care given & changes in the patient's condition in accordance with standards.
- Anticipates & recognizes potential problems & intervenes appropriately by correlating data, test results, progress notes & patient condition.
- Evaluates the degree of effectiveness & makes changes as needs are recognized.
- Provides leadership by managing care through others using Standards of Practice (Joint Commission, Title XXII, Professional Practice Acts) & interpreting (or uses others to interpret) Standards of Practice to other staff which may include legal implications.
- Actively participates in professional growth opportunities & provides high quality customer relations.

**Charge Nurse:** The Charge Nurse serves as a role model and resource for other patient care staff. Is recognized as a leader by exhibiting fairness, honesty, flexibility, positive communication skills, empathy, competency, positive attitude and the ability to motivate others.

\*Hours will be: 24 hours one week and 36 hours the next week.

### **Job Description:**

# Life at Sutter Health

## Culture

We are committed to fostering a culture of growth and belonging.



## Total Rewards

Demonstrating our commitment to your overall well-being.





**EDUCATION**

Associates in Nursing or above. Bachelors preferred.

**CERTIFICATION & LICENSURE**

RN-Registered Nurse of California

BLS-Basic Life Support Healthcare Provider

**EXPERIENCE**

1 experience in an acute health care setting preferred.

**SKILLS AND KNOWLEDGE**

Must have demonstrated knowledge of basic nursing skills and effective English written and communication skills. Working knowledge of pharmacology. Excellent communication and customer service skills. Independently practices and prioritizes multiple demands in an ever-changing environment. Good interpersonal, communication (both oral and written), and teamwork skills are required.

\*\*\*\*\* Sign on Bonus for Newly Hired experienced candidates

\*\*\*\*\*

**Job Shift:**

Nights

**Schedule:**

Full Time

**Shift Hours:**

12

**Days of the Week:**

Variable

**Weekend Requirements:**

Rotating Weekends

**Benefits:**

Yes

**Career Development**



Re-energize both your professional and personal development.

**Get tailored job recommendations based on your interests.**



**Similar jobs**

**Unions:**

Yes

**Position Status:**

Non-Exempt

**Weekly Hours:**

36

**Employee Status:**

Regular0

Sutter Health is an equal opportunity employer  
EOE/M/F/Disability/Veterans.

Pay Range is \$48.83 to \$74.75 / hour

*The salary range for this role may vary above or below the posted range as determined by location. This range has not been adjusted for any specific geographic differential applicable by area where the position may be filled. Compensation takes into account several factors including but not limited to a candidate's experience, education, skills, licensure and certifications, department equity, training and organizational needs. Base pay is just one piece of the total rewards program offered by Sutter Health. Eligible roles also qualify for a comprehensive benefits package.*

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## Register ed...

The Registered Nurse in the Acute Care setting manages the patient/family experience through utilization of critical thinking, teamwork, effective communication, and nursing judgment/knowledge/skills....

Crescent City,  
California, United  
States of  
America

R-85338

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## Register ed...

The Registered Nurse in the Acute Care setting manages the patient/family experience through utilization of critical thinking, teamwork, effective communication, and nursing



## County of Sacramento

## Registered Nurse D/CF (Level I/II)

<b>SALARY</b>	\$61.27 - \$77.99 Hourly	<b>LOCATION</b>	Sacramento, CA
<b>JOB TYPE</b>	Permanent Full-Time	<b>JOB NUMBER</b>	28333-B
<b>DEPARTMENT</b>	County Wide	<b>OPENING DATE</b>	04/25/2012
<b>CLOSING DATE</b>	Continuous		

## The Position



This is a continuous filing exam. The next filing cut-offs are at **5:00 pm** on:

11/5/2024, 1/2/2025, 3/6/2025, 5/8/2025, 7/3/2025, 9/4/2025, 11/6/2025

Registered Nurse D/CF Level I: \$61.27 - \$74.48 hourly

Registered Nurse D/CF Level II: \$64.16 - \$77.99 hourly

Note: For additional nursing opportunities please see [Psychiatric Nurse](#), [Public Health Nurse Level I/II](#)

In a detention/correctional facility, the Registered Nurse D/CF performs a variety of professional nursing duties including hands-on care, assessment, testing, and treatment of patients; interviewing patients and assisting them in follow-up care; maintaining medical and medication supplies; rendering emergency medical treatment; dispensing and administering medications; and maintaining charts and records.

## Examples of Knowledge and Abilities

## Knowledge of

- Professional registered nursing principles, procedures and techniques
- State of California laws and regulations on registered nursing
- Proper handling and administering of biologicals
- Standard medical record-keeping
- Interviewing techniques
- Common current medical terminology
- Use and care of medical equipment used in clinical and infirmary settings
- Basic medical indications of alcoholism and drug abuse and their overdoses
- Basic behavioral indications of mental disturbance
- Basic laboratory testing procedures
- Current standard asepsis protocols
- Basic symptoms and treatment of communicable diseases



- Common drugs and medications used for birth control, communicable diseases, immunizations, allergies, cardiovascular conditions, and substance overdoses, including their contra-indications and normal and abnormal results

**Ability to**

- Effectively communicate with and gain the cooperation of patients of various social, cultural, economic and educational backgrounds
- Accurately follow oral and written instructions, including standing orders, clinical protocols, orders for treatment, and dispensary orders
- Work cooperatively with other health care providers and other staff
- Learn and comply with laws, rules, regulations, protocols, and procedures, including security requirements, applicable to the work unit
- Clearly and accurately chart all patient information and physician's orders
- Gain cooperation of patients in treatment and follow-up care
- Maintain patient confidentiality

**Employment Qualifications****Minimum Qualifications**

(Level II): Possession of a current valid Registered Nurse license issued by the State of California.

**Note:** Failure to maintain such license may be cause for disciplinary action in accordance with Civil Service Commission Rules.

(Level I): Possession of a current valid Interim Permit or Temporary License as a Registered Nurse, or a current valid license as a Registered Nurse, issued by the State of California.

**Note:** Interim Permittees and Temporary Licensees are expected to obtain full licensure within six months of appointment. Failure to obtain and/or maintain the required license may be cause for disciplinary action in accordance with Civil Service Commission Rules.

**Note:** 1) The level at which initial appointments to the class of Registered Nurse are made and 2) advancement from the lower level of this class to the higher level (Level I to Level II), are at the discretion of the appointing authority, providing the minimum qualifications are met.

**Notes:**

1. Experience requirements are stated as full-time work; to convert part-time to full-time equivalency: 173.6 hours = 21.7 days = 1 work month.
2. Required experience may be paid or unpaid.

**Note:** The word "experience" referenced in the minimum qualifications means full-time paid experience unless the job announcement states that volunteer experience is acceptable. Part-time paid experience may be accumulated and pro-rated to meet the total experience requirements.

**Note:** If the minimum qualifications include an educational or certificate/license requirement, applicants must submit proof of requirements with the application. Failure to submit proof of requirements may result in disqualification from the examination. Unofficial transcripts are acceptable. For guidelines on submitting acceptable proof of educational requirements, please click [here \(Download PDF reader\)](#) or speak to someone in our office before the cut-off date listed in this notice.

**Labor agreement**

SEIU 1021 Staff &amp; Per Diem RNs

**Effective date**

August 17, 2012

## Current compensation plan

**Effective:** Jul 01, 2024See [Historic and future compensation information](#) for this class

<b>Step:</b>	<b>Step 1</b>	<b>Step 2</b>	<b>Step 3</b>	<b>Step 4</b>	<b>Step 5</b>	<b>Step 6</b>
<b>Rate /hr:</b>	\$77.3125	\$79.7375	\$83.0500	\$85.3875	\$88.0625	\$91.6250
<b>Rate</b>						
<b>/biweekly:</b>	\$6,185.00	\$6,379.00	\$6,644.00	\$6,831.00	\$7,045.00	\$7,330.00
<b>Rate</b>						
<b>/year:</b>	\$160,810	\$165,854	\$172,744	\$177,606	\$183,170	\$190,580

## Job description

CLASS TITLE: REGISTERED NURSE CODE: 2320

### CHARACTERISTICS OF THE CLASS:

Under general supervision, performs professional nursing duties in hospitals, emergency hospitals, clinics, sanitariums and other institutions; administers treatment to patients as instructed by physician; observes patients' symptoms; keeps related charts and records in accordance with standard practices; may direct the work of subordinate assistants; and performs related duties as required.

Requires responsibility for: carrying out existing methods and procedures relating to 'various aspects of patient care; achieving moderate economies or preventing moderate losses through the proper use and handling of hospital and medical equipment, materials and supplies; contacting physicians, nursing supervisors and other employees, for the purpose of furnishing and obtaining information on medical and nursing care matters; maintaining charts and records concerning

patient's treatment, care and progress and compiling related data and reports. Nature of work requires sustained physical effort



Schem Code	Class Code	Full Class Title	Compensation	Pay Period *	SISA	Footnotes	AR Crit	MCR	Prob. Mo.	WWG	NT	CBID
IS52	4016	REGIONAL COMPLIANCE OFFICER, HEALTH FACILITIES CONSTRUCTION	\$12,196.00 - \$15,266.00	01 19				1	12	E		S09
IR85	4169	REGIONAL CONSTRUCTION AND MAINTENANCE SUPERINTENDENT, DEPARTMENT OF MOTOR VEHICLES	\$6,199.00 - \$7,699.00	01 19				1	12	2		S12
SR25	9424	REGIONAL DENTAL DIRECTOR, CEA	A \$14,212.00 - \$17,917.00 P \$34,817.00 - \$41,514.00	19 19		475 475	0 0	6 6	E E			M16 M16
SA32	7614	REGIONAL HEALTH CARE EXECUTIVE (SAFETY)	\$18,705.00 - \$22,584.00	01 19 41			0	12	E			M16
SA31	7613	REGIONAL HEALTH CARE EXECUTIVE, CEA (SAFETY)	\$18,705.00 - \$22,584.00	19 40 46			0	6	E			M16
BU81	2788	REGIONAL INTERPRETIVE SPECIALIST	\$5,588.00 - \$6,997.00	19			1	6	2			R01
OY11	9914	REGIONAL MANAGER, CLAIMS ADJUDICATION	\$13,044.00 - \$16,401.00	01 19			1	12	E			M02
IE15	3871	REGIONAL MANAGER, DIVISION OF OCCUPATIONAL SAFETY AND HEALTH	\$13,487.00 - \$15,322.00	01 19			1	12	E			M09
TT49	2167	REGISTERED DIETITIAN	A \$5,209.00 - \$7,083.00 T \$6,267.00 - \$8,321.00	01 01		437 437	1 1	12 12	2 2			R19 R19
TT50	2172	REGISTERED DIETITIAN (SAFETY)	A \$5,237.00 - \$7,114.00 T \$6,300.00 - \$8,359.00	R1 01 R1 01		437 437	1 1	12 12	2 2			R19 R19
TT48	9279	REGISTERED DIETITIAN, CORRECTIONAL FACILITY	A \$5,209.00 - \$7,083.00 P \$6,582.00 - \$8,735.00	01 01		437 437	1 1	12 12	2 2			R19 R19
TI90	8165	REGISTERED NURSE	A \$6,503.00 - \$8,440.00 B \$6,891.00 - \$8,977.00 C \$6,738.00 - \$8,759.00 D \$7,140.00 - \$9,325.00 F \$5,419.17 - \$7,033.33 G \$5,742.50 - \$7,480.83 S \$7,456.00 - \$11,005.00 T \$9,233.00 - \$11,005.00	01 21 01 21 01 21 01 21 01 21 01 21 01 21 01 21		047 231 437 047 231 437 047 231 437 047 231 437 047 231 437 047 231 437 047 231 437 047 231 437	1 1 1 1 1 1 1 1	12 12 12 12 12 12 12 12	2 2 2 2 2 2 2 2			R17 R17 R17 R17 R17 R17 R17 R17
TH55	8094	REGISTERED NURSE (SAFETY)	A \$6,192.00 - \$8,039.00 B \$6,564.00 - \$8,552.00 C \$6,738.00 - \$8,759.00 D \$7,140.00 - \$9,325.00 T \$9,233.00 - \$11,005.00 U \$10,177.00 - \$12,134.00	01 21 P8 01 21 P8 01 21 P8 01 21 P8 01 21 P8 01 21 P8		231 437 231 437 231 437 231 437 231 437 231 437	1 1 1 1 1 1	12 12 12 12 12 12	2 2 2 2 2 2			R17 R17 R17 R17 R17 R17
TI80	9275	REGISTERED NURSE, CORRECTIONAL FACILITY	A \$6,192.00 - \$8,039.00 B \$6,564.00 - \$8,552.00 C \$6,738.00 - \$8,759.00 D \$7,140.00 - \$9,325.00 J \$9,694.00 - \$11,556.00 K \$10,686.00 - \$12,740.00 R \$9,694.00 - \$11,556.00 S \$9,986.00 - \$11,902.00	01 21 01 21 01 21 01 21 01 21 01 21 01 21 01 21		231 437 285 231 437 285 231 437 285 231 437 285 231 437 285 231 437 285 231 437 285 231 437 285	1 1 1 1 1 1 1 1	12 12 12 12 12 12 12 12	2 2 2 2 2 2 2 2			R17 R17 R17 R17 R17 R17 R17 R17
JE80	4492	REGISTRAR OF CHARITABLE TRUSTS	\$7,627.00 - \$9,492.00	01 19			1	12	E			S01
BT20	2806	REGISTRAR OF INTERPRETIVE COLLECTIONS	\$5,588.00 - \$6,997.00	19			1	6	2			R01
XG44	9796	REHABILITATION ADMINISTRATOR I (SPECIALIST)	A \$6,479.00 - \$8,500.00 L \$6,480.00 - \$8,500.00	01 19 01 19		285 285	1 1	12 12	2 2			R19 R19
XG41	9794	REHABILITATION SPECIALIST	\$5,885.00 - \$7,711.00	01 19			1	12	2			R19
XG40	9783	REHABILITATION SUPERVISOR	\$6,467.00 - \$8,096.00	01 19			1	12	E			S19

\* All salaries are monthly unless otherwise indicated.



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## Licensed Vocational Nurse hourly salaries in California at Kaiser Permanente

Job Title

Licensed Vocational Nurse



Location

California



Average salary 

**\$36.49**

per hour 

↑ 17%

Above national average

Average \$36.49

Low \$18.45



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# Surgical Float Pool LVN

Available in 2 locations   See all   R-83786  
Full Time   Days   40

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## Description

We are so glad you are interested in joining Sutter Health!

### Organization:

PAMF-Palo Alto Medical Foundation PAD

### Position Overview:

Under general supervision and within in the scope of their certification or licensure, assists providers by performing greeting and identifying patients, escorting patient to exam room, identifying purpose of visit, preparing patient for office visit such as weighing patient, taking vital signs, performing minor medical procedures and other tasks associated with patient care. The LVN delivers care within the scope of the California Nurse Practice Act and the PAMF Nursing guidelines.

### Job Description:

### EDUCATION

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this job

Life at  
Sutter  
Health

Other: Graduate of an accredited school of nursing

### **CERTIFICATION & LICENSURE**

LVN-Licensed Vocational Nurse

BLS-Basic Life Support Healthcare Provider

### **PREFERRED EXPERIENCE AS TYPICALLY ACQUIRED IN**

Related medical experience

### **SKILLS AND KNOWLEDGE**

Bilingual, Spanish speaking

Verbal and written communication skills for regular contact with employees, patients and patient families; requires tact.

Basic high school math aptitude.

Basic Windows skills to include keyboarding, mouse movement and computer data entry skills to enter patient information.

Organizational skills.

Ability to lift and position patients.

Visual capabilities to observe patients.

Knowledge of medical terminology/anatomy.

Ability to work with others in a flexible, cooperative manner.

Requires moderate mental application and concentration to handle varying procedures and interruptions.

### **Job Shift:**

Days

### **Schedule:**

Full Time

### **Shift Hours:**

8



## **Cultur**

## **e**

We are committed to fostering a culture of growth and belonging.

## **Total**

## **Rewar**

## **ds**

Demonstrating our commitment to your overall well-being.

## **Caree**

## **r**

## **Devel**

## **opme**

## **nt**

Re-energize both your professional and personal development.

**Get tailored job recommendations based on your interests.**



**Days of the Week:**

Monday - Friday

**Weekend Requirements:**

None

**Benefits:**

Yes

**Unions:**

Yes

**Position Status:**

Non-Exempt

**Weekly Hours:**

40

**Employee Status:**

Regular

This position may regularly work, store, prepare, receive, unpack, transport, dispose of, or administer drug(s) identified as hazardous, or potentially hazardous, by the National Institute for Occupational Safety and Health (NIOSH) for purposes of USP 800.

Sutter Health is an equal opportunity employer  
EOE/M/F/Disability/Veterans.

Pay Range is \$38.93 to \$52.26 / hour

*The salary range for this role may vary above or below the posted range as determined by location. This range has not been adjusted for any specific geographic differential applicable by area where the position may be filled. Compensation takes into account several factors including but not limited to a candidate's experience, education, skills, licensure and certifications, department equity, training and organizational needs. Base pay is just one piece of the total rewards program offered by Sutter Health. Eligible roles also qualify for a comprehensive benefits package.*

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Started

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## Staff Nurse II...

Working knowledge of the healthcare industry, safety precaution policies, best practices regarding patient care and privacy, and changes in local/state/federal regulations. Time management and organiz...

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California, United  
States of  
America

R-83984

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## County of Sacramento

## Licensed Vocational Nurse D/CF

<b>SALARY</b>	\$31.72 - \$38.57 Hourly \$5,519.28 - \$6,711.18 Monthly \$66,231.36 - \$80,534.16 Annually	<b>LOCATION</b>	Sacramento, CA
<b>JOB TYPE</b>	Permanent Full-Time	<b>JOB NUMBER</b>	28119-B
<b>DEPARTMENT</b>	County Wide	<b>OPENING DATE</b>	05/02/2012
<b>CLOSING DATE</b>	Continuous		

## The Position



The position was given a 2% equity for Fiscal Year 23/24 with an effective date of April 9, 2023. Additionally the 15% Correctional Health Differential has been rolled into the salary.

This is a continuous filing exam. The next filing cut-offs are at 5:00 PM on:  
10/3/2024, 1/3/2025, 4/4/2025, 7/3/2025, 10/3/2025

In a detention/correctional facility, the Licensed Vocational Nurse D/CF performs a wide variety of vocational nursing duties, including hands-on care, testing, and treatment of patients; interviewing patients and assisting them in follow-up care; maintaining medical and medication supplies; assisting in emergency medical treatment; administering medications; and maintaining charts and records.

## Examples of Knowledge and Abilities

## Knowledge of

- Vocational nursing principles, procedures and techniques
- State of California laws and regulations on licensed vocational nursing
- Proper handling and administering of biologicals
- Standard medical record-keeping
- Interviewing techniques
- Common current medical terminology
- Use and care of medical equipment used in clinical and infirmary settings
- Basic medical indications of alcoholism and drug abuse and their overdoses
- Basic behavioral indications of mental disturbance
- Basic laboratory testing procedures
- Current standard asepsis protocols
- Basic symptoms and treatment of communicable diseases
- Common drugs and medications used for birth control, communicable diseases, immunizations, allergies

- Cardio-vascular conditions and substance overdoses, including their contra-indications and normal and abnormal results
- Universal Precautions

**Ability to**

- Communicate with and gain the cooperation of patients of various social, cultural, economic and educational backgrounds
- Work cooperatively with other medical care providers and staff
- Comply with laws, rules, regulations, protocols, and procedures, including security requirements, applicable to the work unit
- Chart all patient information and physician's orders
- Gain cooperation of patients in treatment and follow-up care
- Maintain patient confidentiality
- Follow oral and written instructions, including standing orders, clinical protocols, orders for treatment and dispensary orders
- Take patients vital signs

**Employment Qualifications****Minimum Qualifications**

Possession of a current valid Licensed Vocational Nurse license issued by the State of California.

**Note:** Failure to maintain such license may be cause for disciplinary action in accordance with Civil Service Commission Rules.

**Other Requirements**

When required the special skills may be used in the performance of typical tasks wherein incumbents translate and interpret using standard English and a language other than standard English; and/or act as a consultant to others regarding the needs and problems presented by individuals of different languages and cultural backgrounds.

Physical Requirements:

- Incumbents must possess and maintain sufficient strength, agility, and endurance to perform during physically, mentally, and emotionally stressful and emergency situations encountered on the job without endangering their own health and well being or that of their fellow employees, forensic clients, patients, inmates, or the public
- Ability to lift up to 30 lbs
- Constant holding, reaching, grasping, writing and need for repetitive motion

Criminal History Check: The County may access criminal history information on all applicants, consistent with the provisions of Board of Supervisors Resolution No. 82-602, Personnel Policies and Procedure, and applicable federal and state law. The County shall not consider for employment any applicant who has been convicted of a felony or misdemeanor that relates to or impacts the applicant's ability to perform the job duties of this class unless it is determined that mitigating circumstances exist. For purposes of accessing such state and local summary criminal history information, an applicant will be fingerprinted through the California Department of Justice's LiveScan. A subsequent arrest notification may be obtained.

Licensure, Certification and Registration: Persons appointed to this class are required to:

- Obtain, and maintain a valid CPR certificate
- Have or obtain a valid blood draw certificate, hearing testing certificate, emergency first aid certificate, and/or other specialty training appropriate to Licensed Vocational Nurses and necessary in their job assignment

Working Conditions: Required to work, regularly or periodically, evenings, weekends and holidays.



Labor agreement

SEIU 1021

Effective date

August 17, 2012

# Current compensation plan

Effective: Jul 01, 2024

See [Historic and future compensation information](#) for this class

Step:	Step 1	Step 2	Step 3	Step 4	Step 5
Rate /hr:	\$41.9375	\$44.0250	\$46.2250	\$48.5250	\$50.9625
Rate /biweekly:	\$3,355.00	\$3,522.00	\$3,698.00	\$3,882.00	\$4,077.00
Rate /year:	\$87,230	\$91,572	\$96,148	\$100,932	\$106,002

# Job description

SAN FRANCISCO CIVIL SERVICE

COMMISSION

CLASS TITLE: LICENSED VOCATIONAL NURSE CODE: 2312

CHARACTERISTICS OF THE CLASS:

Under supervision and according to physicians' or registered nurses' instructions, prepares, administers and records ordered medications and injections; obtains patient histories; observes, reports and records physiological and psychosocial signs; takes vital signs; maintains medical records; maintains a safe and clean environment, and performs related duties as required.

DISTINGUISHING FEATURES:

As a member of the health care team, the 2312 Licensed Vocational Nurse performs direct patient care, observes and reports physiological/psychosocial changes in the patient's chart and provides a safe and clean environment. This classification differs from that of the 2302 Orderly in that 2312 Licensed Vocational Nurses are permitted to administer oral medications and intramuscular and subcutaneous injections; they can also administer intravenous injections after proper training and certification. Also,



Schem Code	Class Code	Full Class Title										
			Compensation	Pay Period *	SISA	Footnotes	AR Crit	MCR	Prob. Mo.	WWG	NT	CBID
FM55	2952	LIBRARIAN -CORRECTIONAL FACILITY-										
		1 \$5,027.00 - \$6,941.92				19 R0	047	1	6	E		R03
		A \$5,484.00 - \$7,573.00				19 R0	047	1	6	E		R03
		F \$4,570.00 - \$6,310.83				19 R0	047	1	6	E		R03
		T \$4,113.00 - \$5,679.75				19 R0	047	1	6	E		R03
FM60	2959	LIBRARY PROGRAMS ADMINISTRATOR										
		A \$8,718.00 - \$10,918.00				01 19	047	1	12	E		S21
		F \$7,265.00 - \$9,098.33				01 19	047	1	12	E		S21
FM65	2958	LIBRARY PROGRAMS CONSULTANT										
		A \$7,997.00 - \$10,010.00				01 19	047	1	12	E		R21
		F \$6,664.17 - \$8,341.67				01 19	047	1	12	E		R21
CG95	1318	LIBRARY TECHNICAL ASSISTANT (SAFETY)										
		\$3,873.00 - \$4,847.00						1	6	2		R04
CG90	1307	LIBRARY TECHNICAL ASSISTANT I										
		A \$3,873.00 - \$4,847.00			SISA 43		285 322	1	6	2		U04
		L \$3,986.00 - \$4,990.00			SISA 43		285 322	1	6	2		U04
		S \$3,987.00 - \$4,999.00			SISA 43		285 322	1	6	2		U04
CG80	1308	LIBRARY TECHNICAL ASSISTANT II										
		\$4,191.00 - \$5,246.00				01 43		1	12	2		S04
TL78	8249	LICENSED VOCATIONAL NURSE										
		A \$3,867.00 - \$5,086.00			SISA 01		437	1	12	2		R20
		T \$4,934.00 - \$6,176.00			SISA 01		437	1	12	2		R20
TL80	8274	LICENSED VOCATIONAL NURSE (SAFETY)										
		A \$3,867.00 - \$5,086.00			SISA 01 R1		437	1	12	2		R20
		J \$5,179.00 - \$6,487.00			SISA 01 R1		437	1	12	2		R20
		K \$5,816.00 - \$7,282.00			SISA 01 R1		437	1	12	2		R20
		T \$4,934.00 - \$6,176.00			SISA 01 R1		437	1	12	2		R20
TL81	8257	LICENSED VOCATIONAL NURSE, CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION										
		A \$3,867.00 - \$5,086.00			SISA 01		466	1	12	2		R20
		B \$5,741.00 - \$5,913.00			01		466	1	12	2		R20
		C \$6,027.00 - \$6,209.00			01		466	1	12	2		R20
		D \$6,296.00 - \$6,487.00			01		466	1	12	2		R20
		E \$6,598.00 - \$6,796.00			01		466	1	12	2		R20
		F \$6,928.00 - \$7,136.00			01		466	1	12	2		R20
		G \$7,072.00 - \$7,282.00			01		466	1	12	2		R20
TL77	8286	LICENSED VOCATIONAL NURSE, DEPARTMENTS OF MENTAL HEALTH AND DEVELOPMENTAL SERVICES										
		A \$3,867.00 - \$5,086.00			SISA 01		437	1	12	2		R20
		T \$4,934.00 - \$6,176.00			SISA 01		437	1	12	2		R20
WL46	8223	LICENSING PROGRAM ANALYST										
		A \$3,823.00 - \$4,942.00				01 19 21	196	1	12	2		R19
		B \$4,138.00 - \$5,399.00				01 19 21	196	1	12	2		R19
		C \$4,962.00 - \$6,497.00				01 19 21	196	1	12	2		R19
		D \$5,435.00 - \$7,137.00				01 19 21	196	1	12	2		R19
WL42	8222	LICENSING PROGRAM MANAGER I										
		\$7,200.00 - \$8,945.00				01 19 29		1	12	E		S19
WL40	8224	LICENSING PROGRAM MANAGER II										
		\$7,903.00 - \$9,821.00				01 19		1	12	E		S19
WL38	8220	LICENSING PROGRAM MANAGER III										
		\$9,606.00 - \$10,907.00				01 19 29		1	12	E		M19
KC55	3063	LICENSING REPRESENTATIVE I, ALCOHOL BEVERAGE CONTROL										
		\$4,063.00 - \$5,090.00				01 19 R1		1	12	2		R07
KC53	3065	LICENSING REPRESENTATIVE II, ALCOHOLIC BEVERAGE CONTROL										
		A \$4,992.00 - \$6,199.00				01 21 R1	432	1	12	2		R07
		B \$5,485.00 - \$6,799.00				01 21 R1	432	1	12	2		R07
VS50	8758	LICENSING-REGISTRATION EXAMINER, DEPARTMENT OF MOTOR VEHICLES										
		\$4,716.00 - \$5,783.00				34 R1		1	6	2		R07
VA55	8398	LIEUTENANT, CALIFORNIA HIGHWAY PATROL										
		\$16,311.00 - \$19,263.00				01 19		1	12	E		M05
VC60	1947	LIEUTENANT, STATE FAIR POLICE										
		\$5,808.00 - \$7,794.00				01 19 34 P6		1	12	E		S07
WU70	9574	LIEUTENANT, YOUTH AUTHORITY										
		\$8,923.00 - \$11,230.00				01 19 R3		1	12	2		S06

\* All salaries are monthly unless otherwise indicated.

# **SEIU Appendix B**

## **MOT Data Analysis**

**From:** [Sims, Kenny](#)  
**To:** [Jaber, Hakam](#); [Markovich, Heather](#); [Seastrong, Vanessa](#)  
**Cc:** [Pierman, Brooke](#)  
**Subject:** DSH MOT Data Analysis  
**Date:** Thursday, December 5, 2024 11:19:06 AM  
**Attachments:** [Summary Tables DSH Overtime Report KS\\_12.5.2024.xlsx](#)

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Good morning Team

Below are some bullet points and tables for the DSH data. Please keep in mind that the data was not complete, but the overall pattern tends to be consistent over a relevant time period of a few years. I make mention of the lack of registries data, but you will see regardless of whether we have that data it's pretty clear that this is what is going on. Also, i think you need to make sure you make a lot of noise about the high and increasing level of Unit 20 vacancies at DSH. This is getting to alarming levels.

The tables below should fit into a standard page and i am attaching the excel sheet as well.

Best,  
Kenny

***Summary of DSH Total MOT Hours for All BU 17 and 20 (2016-2023)***

Year	Total	Atascadero	Coalinga	Metro	Napa	Patton
2016	32,970.6	3,413.5	470.8	1,330.0	22,901.5	5,673.6
2017	43,047.8	4,273.1	473.3	2,578.6	33,769.8	3,835.4
2018	31,763.7	1,630.7	135.3	297.6	23,509.8	6,190.4
2019	51,335.6	2,730.9	0.9	87.3	38,764.3	9,752.2
2020	39,044.7	1,276.9	218.0	3,510.0	21,902.1	12,137.8
2021	52,942.5	3,636.8	12.1	4,163.6	27,364.0	17,766.1
2022	30,946.0	2,839.2	38.7	1,655.1	22,367.3	4,045.8
2023	16,544.9	2,290.7	34.0	1,285.0	11,958.4	976.7

- At DSH, from 2016 to 2022 the overall total use of MOT for Unit 17 and Unit 20 has hovered between 30 to 50 thousand hours per year. In 2023, the most recent year with complete data, the total MOT usage at DSH was around 16.5 thousand hours, a drop of 50% from the 2022.
- The 2022 to 2023 decline in MOT usage occurred for Unit 17 and 20 even though the

vacancy rates for each Unit were experiencing opposite trends. Unit 17's highest vacancy rate was in late 2022 and early 2023 at around 20%, and by March 2024 this had dropped to about 18%. In contrast, Unit 20 also experienced an overall decline in MOT hours, but unlike Unit 17 its vacancy rate has been almost twice as high as Unit 17, hovering around 35 to 40% and its most recent peak occurred in March 2024 at 43.3%.

- This decline in MOT for both Units in a context of opposite trends in staffing levels suggests that MOT usage is largely unaffected by civil service staffing levels and is probably driven by a potential increase in the use of registries to cover the shifts. However, this thesis cannot be explored for DSH because registry hour usage was not provided, but this is a trend that we have seen in other 24/7 institutions at CCHCS and CalVet.
- 

***Summary of Unit 17 DSH Data on MOT, VOT and Positions and Vacancies***

	Year	Hours		FTEs		Vacancy (all Classes)			
		MOT	VOT	MOT	VOT	Est.	Fill.	Vac.	Vac. %
January	2022	3,885.3	37,514.9	22.4	216.4				
February	2022	552.8	32,304.1	3.2	186.4				
March	2022	1,727.4	35,156.5	10.0	202.8	1,843.5	1,508.2	335.3	18.2%
April	2022			-	-				
May	2022			-	-				
June	2022			-	-				
July	2022	3,001.4	42,226.1	17.3	243.6				
August	2022	3,031.7	39,740.6	17.5	229.3				
September	2022	2,321.2	36,181.7	13.4	208.7	1,845.3	1,494.7	350.6	19.0%
October	2022	2,729.2	40,393.3	15.7	233.0				
November	2022	3,262.5	42,211.8	18.8	243.5				
December	2022	3,696.7	42,655.9	21.3	246.1	1,854.0	1,481.9	372.1	20.1%
January	2023	2,073.0	37,786.0	12.0	218.0				
February	2023	1,227.3	32,918.7	7.1	189.9				
March	2023	1,778.6	42,226.8	10.3	243.6	1,850.0	1,478.8	371.2	20.1%
April	2023	2,176.1	47,497.3	12.6	274.0				
May	2023	1,352.0	41,495.5	7.8	239.4				
June	2023	692.8	42,813.9	4.0	247.0	1,852.0	1,494.6	357.4	19.3%
July	2023	893.8	45,885.4	5.2	264.7				
August	2023	977.5	48,815.8	5.6	281.6				
September	2023	950.8	44,211.9	5.5	255.1	1,851.0	1,515.3	335.7	18.1%
October	2023	1,170.8	46,469.2	6.8	268.1				
November	2023	1,326.5	40,121.4	7.7	231.5				
December	2023	1,936.9	35,468.1	11.2	204.6				

January	2024			-	-				
February	2024			-	-				
March	2024			-	-	1868.2	1535.5	332.7	17.8%
April	2024	2,056.8	39,664.3	11.9	228.8				
May	2024	2,433.8	37,482.7	14.0	216.2				
June	2024	1,383.4	41,493.1	8.0	239.4				

- Overall, for Unit 17 the total use of MOT never exceeded 10 percent of the total VOT hours, and when we convert this to monthly FTE equivalents MOT usage ranged between 3.2 to 22.4 in any particular month and an average of 9 overall. The MOT FTE equivalent values represents a very small fraction when considered against the overall size of the Unit 17 workforce of around 1,850 established positions.

***Summary of Unit 20 DSH Data on MOT, VOT and Positions and Vacancies***

		Hours		FTEs		Vacancy (all Classes)			
	Year	MOT	VOT	MOT	VOT	Est.	Fill.	Vac.	Vac. %
January	2022	434.3	3,999.3	2.5	23.1				
February	2022	111.3	4,253.3	0.6	24.5				
March	2022	251.4	4,489.5	1.5	25.9	285.1	207.2	77.9	27.3%
April	2022			-	-				
May	2022			-	-				
June	2022			-	-				
July	2022	463.3	4,206.2	2.7	24.3				
August	2022	332.5	3,657.6	1.9	21.1				
September	2022	276.1	3,892.1	1.6	22.5	285.1	199	86.1	30.2%
October	2022	437.1	4,194.4	2.5	24.2				
November	2022	430.1	4,555.6	2.5	26.3				
December	2022	465.6	4,024.5	2.7	23.2	299.1	200.2	98.9	33.1%
January	2023	203.6	3,820.4	1.2	22.0				
February	2023	100.1	2,940.2	0.6	17.0				
March	2023	154.3	3,468.1	0.9	20.0	299.1	184.2	114.9	38.4%
April	2023	226.8	4,307.9	1.3	24.9				
May	2023	179.1	4,257.9	1.0	24.6				
June	2023	86.3	4,152.2	0.5	24.0	304.1	178.8	125.3	41.2%
July	2023	261.3	3,913.0	1.5	22.6				
August	2023	241.3	4,536.3	1.4	26.2				
September	2023	111.3	3,929.3	0.6	22.7	301.1	185.6	115.5	38.4%
October	2023	215.0	4,940.5	1.2	28.5				

November	2023	162.8	4,306.5	0.9	24.8				
December	2023	598.0	3,989.8	3.5	23.0				
January	2024			-	-				
February	2024			-	-				
March	2024			-	-	313.3	177.6	135.7	43.3%
April	2024	306.8	4,460.8	1.8	25.7				
May	2024	313.8	4,642.4	1.8	26.8				
June	2024	317.8	6,237.9	1.8	36.0				

Likewise, for Unit 20 the total use of MOT never exceeded 12 percent of the total VOT hours, and when we convert this to monthly FTE equivalents MOT usage ranged between 0.6 to 2.7 in any particular month and an average of 1.3 overall. The MOT FTE equivalent values represents a very small fraction when considered against the overall size of the Unit 20 workforce that is just above 300 established positions, despite a very high vacancy rate.

# **SEIU Appendix C**

## **RN-LVN Registry Contracts**

### **Expenditures through December 2024**

Department of State Hospitals  
RN/LVN Registry Contracts Expenditures through December 2024

Sum of Sum Amount Supplier Name	PO Ref	PO No.	Program	ENY 2023	2024	Grand Total
HEALTHCARE STAFFING PROF INC	23-09006-002	0000047366	4410020	(95,192.02)		(95,192.02)
	23-09006-002 CSH	0000053427	4410020		(97,488.84)	(97,488.84)
<b>HEALTHCARE STAFFING PROF INC Total</b>				<b>(95,192.02)</b>	<b>(97,488.84)</b>	<b>(192,680.86)</b>
HUCKEYE HEALTH STAFFING LLC	23-09006-005 CSH	0000047597	4410020	(54,840.72)		(54,840.72)
	23-09006-005 CSH Level of Car	0000053431	4410020		(215,386.16)	(215,386.16)
<b>HUCKEYE HEALTH STAFFING LLC Total</b>				<b>(54,840.72)</b>	<b>(215,386.16)</b>	<b>(270,226.88)</b>
INTUITIVE HEALTH SERVICE INC	23-09006-001	0000046006	4410020	(15,720,937.91)		(15,720,937.91)
	23-09006-001 CSH	0000053412	4410020		(9,155,533.56)	(9,155,533.56)
	23-09006-001 FY 23/24	0000045717	4410040	(12,146,689.55)		(12,146,689.55)
	23-09006-001 FY 24/25	0000052250	4410040		(10,516,180.16)	(10,516,180.16)
	A 23-09006-001	0000050550	4410010	(3,112,482.35)		(3,112,482.35)
		0000052470	4410010		(1,283,844.25)	(1,283,844.25)
<b>INTUITIVE HEALTH SERVICE INC Total</b>				<b>(30,980,109.81)</b>	<b>(20,955,557.97)</b>	<b>(51,935,667.78)</b>
PINNACLE HEALTH SERVICE INC	23-09006-003 CSH	0000047730	4410020	(69,892.40)		(69,892.40)
	23-09006-003 CSH Level of Car	0000053429	4410020		(570,819.02)	(570,819.02)
	A 23-09006-003	0000046727	4410010	(1,243,438.24)		(1,243,438.24)
		0000052564	4410010		(268,442.35)	(268,442.35)
<b>PINNACLE HEALTH SERVICE INC Total</b>				<b>(1,313,330.64)</b>	<b>(839,261.37)</b>	<b>(2,152,592.01)</b>
WYNDEN STARK LLC	23-09006-004 CSH	0000047022	4410020	(150,608.73)		(150,608.73)
	A 23-09006-004	0000046706	4410010	(1,538,317.72)		(1,538,317.72)
		0000052567	4410010		(145,027.95)	(145,027.95)
<b>WYNDEN STARK LLC Total</b>				<b>(1,688,926.45)</b>	<b>(145,027.95)</b>	<b>(1,833,954.40)</b>
<b>Grand Total</b>				<b>(34,132,399.64)</b>	<b>(22,252,722.29)</b>	<b>(56,385,121.93)</b>



# **DSH Appendix D**

## **RN MOT Data**

**Department of State Hospitals**  
**SEIU BU17 Mandatory Overtime Report**  
**(January 2016 - December 2023)**

Appendix D

2016	Atascadero	Coalinga	Metro	Napa	Patton	Total
Jan-16	553.50	47.00	139.00	805.00	314.25	1858.75
Feb-16	482.50	31.00	209.00	1367.50	280.75	2370.75
Mar-16	485.50	13.75	79.00	1894.92	111.75	2584.92
Apr-16	203.50	24.00	61.50	2979.03	140.50	3408.53
May-16	308.50	81.00	32.50	2567.25	553.00	3542.25
Jun-16	301.50	13.50	15.50	3373.75	726.25	4430.50
Jul-16	67.00	30.25	38.00	2353.00	433.25	2921.50
Aug-16	251.00	35.75	0.00	1552.00	838.75	1858.75
Sep-16	119.00	75.25	113.25	928.50	243.75	1479.75
Oct-16	232.00	29.50	149.75	2677.00	235.50	3323.75
Nov-16	124.25	12.00	173.50	1448.00	682.00	2439.75
Dec-16	285.25	77.75	319.00	955.50	1113.85	2751.35
<b>2016 Total</b>	<b>3413.50</b>	<b>470.75</b>	<b>1330.00</b>	<b>22901.45</b>	<b>5673.60</b>	<b>33789.20</b>

2017	Atascadero	Coalinga	Metro	Napa	Patton	Total
Jan-17	469.55	30.00	329.00	1925.75	986.75	1858.75
Feb-17	561.80	62.25	375.75	1668.25	120.75	2788.80
Mar-17	644.25	43.50	237.00	2750.75	276.75	3952.25
Apr-17	1008.25	143.00	479.13	2228.75	201.75	4060.88
May-17	872.75	101.75	503.25	3209.25	240.75	4927.75
Jun-17	228.25	44.00	278.75	2349.25	612.65	3512.90
Jul-17	86.00	14.25	142.00	8089.00	271.75	8603.00
Aug-17	152.25	10.25	7.75	3262.50	203.50	3636.25
Sep-17	33.75	0.00	2.18	3452.75	0.50	3489.18
Oct-17	7.50	12.00	31.00	2353.00	48.00	2451.50
Nov-17	35.50	8.00	22.50	1552.00	175.00	1793.00
Dec-17	173.25	4.25	170.25	928.50	697.25	1973.50
<b>2017 Total</b>	<b>4273.10</b>	<b>473.25</b>	<b>2578.56</b>	<b>33769.75</b>	<b>3835.40</b>	<b>44893.96</b>

2018	Atascadero	Coalinga	Metro	Napa	Patton	Total
Jan-18	183.75	12.00	175.83	1925.75	900.25	3197.58
Feb-18	62.00	8.00	7.75	1668.25	380.50	2126.50
Mar-18	128.50	4.00	7.75	2750.75	53.50	2944.50
Apr-18	255.00	6.00	17.75	2288.75	473.75	3041.25
May-18	357.00	8.00	31.50	3409.25	415.50	4221.25
Jun-18	3.47	10.00	2.75	2549.25	539.75	3105.22
Jul-18	423.50	18.50	0.00	2103.00	1368.75	3913.75
Aug-18	16.00	0.50	7.75	952.00	593.15	1569.40
Sep-18	20.75	4.00	0.00	1096.25	158.00	1279.00
Oct-18	37.50	6.00	0.00	2303.00	162.00	2508.50
Nov-18	18.75	24.00	7.75	1542.00	537.00	2129.50
Dec-18	124.50	34.25	38.75	921.50	608.25	1727.25
<b>2018 Total</b>	<b>1630.72</b>	<b>135.25</b>	<b>297.58</b>	<b>23509.75</b>	<b>6190.40</b>	<b>31763.50</b>

**Department of State Hospitals**  
**SEIU BU17 Mandatory Overtime Report**  
**(January 2016 - December 2023)**

Appendix D

2019	Atascadero	Coalinga	Metro	Napa	Patton	Total
Jan-19	15.50	0.25	30.75	3247.92	427.50	3721.92
Feb-19	23.25	0.63	23.25	2715.50	815.50	3578.13
Mar-19	16.25	0.00	23.00	3150.50	627.50	3817.25
Apr-19	323.00	0.00	0.00	2398.75	4208.75	6930.50
May-19	232.75	0.00	2.50	3419.25	736.25	4390.75
Jun-19	7.25	0.00	0.00	2560.25	317.25	2884.75
Jul-19	181.50	0.00	0.00	2234.00	514.50	2930.00
Aug-19	218.50	0.00	0.00	13107.41	490.00	13815.91
Sep-19	470.63	0.00	0.00	1109.00	143.50	1723.13
Oct-19	326.56	0.00	0.00	2343.25	184.50	2854.31
Nov-19	173.50	0.00	7.75	1544.00	196.65	1921.90
Dec-19	742.25	0.00	0.00	934.50	1090.25	2767.00
<b>2019 Total</b>	<b>2730.94</b>	<b>0.88</b>	<b>87.25</b>	<b>38764.33</b>	<b>9752.15</b>	<b>51395.35</b>

2020	Atascadero	Coalinga	Metro	Napa	Patton	Total
Jan-20	242.25	0.00	0.00	3271.95	414.25	3928.45
Feb-20	30.00	2.25	18.00	2775.5	739.05	3564.80
Mar-20	85.50	4.88	0.00	3188.50	490.75	3769.63
Apr-20	34.50	0.00	23.25	2315.00	130.75	2503.50
May-20	4.25	0.00	7.75	1548.00	156.25	1716.25
Jun-20	0.00	0.00	61.75	898.50	1430.75	2391.00
Jul-20	191.00	2.75	1064.92	2240.10	1913.00	5411.77
Aug-20	155.00	4.00	519.00	968.00	927.00	2573.00
Sep-20	19.50	6.00	4.25	884.96	358.00	387.75
Oct-20	181.25	6.00	162.50	2230.00	664.00	3243.75
Nov-20	37.34	134.00	440.50	1553.00	1410.00	3574.84
Dec-20	296.33	58.08	1208.08	913.50	3504.00	5979.99
<b>2020 Total</b>	<b>1276.92</b>	<b>217.96</b>	<b>3510.00</b>	<b>21902.05</b>	<b>12137.80</b>	<b>39044.63</b>

2021	Atascadero	Coalinga	Metro	Napa	Patton	Total
Jan-21	531.50	0.00	1013.08	3103.50	1519.00	6167.08
Feb-21	0.00	4.25	398.50	2600.02	498.00	3500.77
Mar-21	11.50	0.00	760.00	2022.00	1414.00	4207.50
Apr-21	34.00	0.00	765.00	2173.75	1624.47	4597.22
May-21	109.75	6.58	430.50	2100.00	2007.61	4654.44
Jun-21	27.25	0.00	246.75	2752.25	2755.75	5782.00
Jul-21	585.98	0.00	130.75	3441.74	2505.75	6664.22
Aug-21	52.50	0.00	23.00	417.75	140.25	633.50
Sep-21	735.03	1.25	0.00	1774.84	1661.50	4172.62
Oct-21	658.25	0.00	31.00	3349.88	1041.50	5080.63
Nov-21	384.50	0.00	0.00	1069.25	1178.50	2632.25
Dec-21	506.50	0.00	365.00	2559.04	1419.75	4850.29
<b>2021 Total</b>	<b>3636.76</b>	<b>12.08</b>	<b>4163.58</b>	<b>27364.02</b>	<b>17766.08</b>	<b>52942.22</b>

**Department of State Hospitals**  
**SEIU BU17 Mandatory Overtime Report**  
**(January 2016 - December 2023)**

Appendix D

2022	Atascadero	Coalinga	Metro	Napa	Patton	Total
Jan-22	494.75	9.00	356.00	1977.25	1048.25	3885.25
Feb-22	8.50	0.00	0.00	1069.25	1178.50	2256.25
Mar-22	45.25	0.00	39.25	1614.92	28.00	1727.42
Apr-22	0.00	1.00	27.75	1784.10	28.75	1841.60
May-22	3.80	0.00	32.00	336.33	22.25	394.38
Jun-22	35.75	1.25	213.58	2646.77	158.75	3056.10
Jul-22	262.40	0.41	77.75	2374.79	286.00	3001.35
Aug-22	376.50	0.00	110.75	2263.25	280.25	3030.75
Sep-22	80.60	0.00	78.00	1862.75	49.25	2070.60
Oct-22	283.70	0.00	88.00	2199.50	158.00	2729.20
Nov-22	551.50	0.00	328.00	2041.15	335.75	3256.40
Dec-22	696.40	27.00	304.00	2197.25	472.00	3696.65
<b>2022 Total</b>	<b>2839.15</b>	<b>38.66</b>	<b>1655.08</b>	<b>22367.31</b>	<b>4045.75</b>	<b>30945.75</b>

2023	Atascadero	Coalinga	Metro	Napa	Patton	Total
Jan-23	390.20	20.75	265.00	1357.02	40.00	2072.97
Feb-23	100.30	0.00	179.00	907.20	37.75	1224.25
Mar-23	391.30	0.00	91.00	1250.05	46.25	1778.60
Apr-23	411.10	0.25	47.00	1426.00	291.73	2176.08
May-23	381.40	0.00	63.00	886.33	21.25	1351.98
Jun-23	162.30	9.00	107.00	331.50	83.00	692.80
Jul-23	257.58	0.00	46.00	489.25	101.00	893.83
Aug-23	80.50	0.00	201.00	632.00	60.00	973.50
Sep-23	90.25	1.25	0.00	850.25	9.00	950.75
Oct-23	7.00	2.25	47.00	1064.00	50.50	1170.75
Nov-23	0.00	0.00	38.00	1257.50	27.00	1322.50
Dec-23	18.78	0.50	201.00	1507.33	209.25	1936.86
<b>2023 Total</b>	<b>2290.71</b>	<b>34.00</b>	<b>1285.00</b>	<b>11958.43</b>	<b>976.73</b>	<b>16544.47</b>

# **DSH Appendix E**

## **LVN MOT Data**

**Department of State Hospitals**  
**SEIU BU 20 Mandatory Overtime Report**  
**(January 2016 - December 2023)**

Appendix E

2016	Atascadero	Coalinga	Metro	Napa	Patton	Total
Jan-16	0.00	8.75	45.00	35.50	55.75	145.00
Feb-16	0.00	0.00	22.00	98.75	25.50	146.25
Mar-16	0.00	4.00	8.00	182.25	88.25	282.50
Apr-16	0.00	0.00	10.75	279.75	35.00	325.50
May-16	0.00	0.00	7.75	212.25	106.25	326.25
Jun-16	0.00	7.25	0.00	318.25	119.00	444.50
Jul-16	0.00	0.00	0.00	224.25	117.25	341.50
Aug-16	0.00	5.75	0.00	109.75	243.20	358.70
Sep-16	0.00	2.75	15.75	82.25	51.00	151.75
Oct-16	0.00	7.00	9.50	211.25	1127.00	1354.75
Nov-16	0.00	7.75	22.00	100.75	106.75	237.25
Dec-16	0.00	19.50	33.75	81.25	147.50	282.00
<b>2016 Total</b>	<b>0.00</b>	<b>62.75</b>	<b>174.50</b>	<b>1936.25</b>	<b>2222.45</b>	<b>4395.85</b>

2017	Atascadero	Coalinga	Metro	Napa	Patton	Total
Jan-17	0.00	23.75	53.25	201.00	200.00	478.00
Feb-17	0.00	6.25	74.50	84.75	14.25	179.75
Mar-17	0.00	0.00	38.25	158.75	63.00	260.00
Apr-17	0.00	4.25	38.50	221.25	109.00	373.00
May-17	0.00	12.00	67.00	313.25	74.50	466.75
Jun-17	0.00	0.00	15.50	146.50	111.38	273.38
Jul-17	0.00	12.00	7.75	263.00	107.00	389.75
Aug-17	0.00	0.00	0.00	257.75	38.25	296.00
Sep-17	0.00	0.00	0.00	339.25	1.50	340.75
Oct-17	0.00	0.00	0.00	224.50	31.00	255.50
Nov-17	0.00	0.00	15.25	109.75	33.50	158.50
Dec-17	0.00	0.00	3.42	82.25	139.75	225.42
<b>2017 Total</b>	<b>0.00</b>	<b>58.25</b>	<b>313.42</b>	<b>2402.00</b>	<b>923.13</b>	<b>3696.70</b>

2018	Atascadero	Coalinga	Metro	Napa	Patton	Total
Jan-18	0.00	0.00	18.00	201.00	226.25	445.25
Feb-18	0.00	0.00	0.00	84.75	17.75	102.50
Mar-18	0.00	0.00	8.00	158.75	40.50	207.25
Apr-18	12.75	0.00	10.50	231.25	111.75	366.25
May-18	48.25	0.00	0.00	308.25	45.25	401.75
Jun-18	54.25	0.00	0.00	299.00	67.00	420.25
Jul-18	58.25	0.00	0.00	663.75	173.25	895.25
Aug-18		0.00	0.00	103.25	55.25	193.25
Sep-18	8.25	0.00	0.00	132.25	40.50	181.00
Oct-18	15.75	7.75	0.00	228.25	44.25	296.00
Nov-18	20.00	0.00	0.00	111.00	20.75	151.75
Dec-18	51.25	7.75	0.00	81.50	67.25	207.75
<b>2018 Total</b>	<b>303.50</b>	<b>15.50</b>	<b>36.50</b>	<b>2603.00</b>	<b>909.75</b>	<b>3868.25</b>

**Department of State Hospitals**  
**SEIU BU 20 Mandatory Overtime Report**  
**(January 2016 - December 2023)**

Appendix E

2019	Atascadero	Coalinga	Metro	Napa	Patton	Total
Jan-19	40.00	0.00	2.00	370.25	60.25	472.50
Feb-19	32.75	0.00	0.00	221.00	49.75	303.50
Mar-19	45.25	0.00	0.00	144.75	71.00	261.00
Apr-19	8.75	0.00	7.75	55.25	40.75	112.50
May-19	2.75	0.00	0.00	107.00	47.50	157.25
Jun-19	3.50	0.00	7.50	88.50	99.25	198.75
Jul-19	46.50	15.50	2.50	663.75	56.00	784.25
Aug-19	24.50	23.25	0.00	104.25	49.50	201.50
Sep-19	43.00	0.00	0.00	110.25	49.25	202.50
Oct-19	31.00	0.00	0.00	228.25	46.50	305.75
Nov-19	77.25	0.00	0.00	334.00	23.00	434.25
Dec-19	81.00	17.00	0.00	81.50	99.75	225.42
<b>2019 Total</b>	<b>436.25</b>	<b>55.75</b>	<b>19.75</b>	<b>2508.75</b>	<b>692.50</b>	<b>3712.82</b>

2020	Atascadero	Coalinga	Metro	Napa	Patton	Total
Jan-20	27.00	0.00	0.00	372.25	52.50	451.75
Feb-20	36.25	0.00	0.00	219.00	75.25	330.50
Mar-20	25.00	4.25	0.00	155.75	70.75	255.75
Apr-20	8.75	0.00	7.75	55.25	40.75	112.50
May-20	2.75	0.00	0.00	107.00	47.50	157.25
Jun-20	3.50	0.00	7.50	88.50	99.25	198.75
Jul-20	32.00	0.00	23.00	663.75	81.00	799.75
Aug-20	95.25	0.00	19.00	97.85	70.75	282.85
Sep-20	43.25	0.00	7.75	109.76	37.00	197.76
Oct-20	83.25	0.00	0.00	232.25	59.00	374.50
Nov-20	76.75	5.25	4.00	105.00	90.00	281.00
Dec-20	29.75	41.25	49.75	78.50	253.00	452.25
<b>2020 Total</b>	<b>463.50</b>	<b>50.75</b>	<b>118.75</b>	<b>2284.86</b>	<b>976.75</b>	<b>3894.45</b>

2021	Atascadero	Coalinga	Metro	Napa	Patton	Total
Jan-21	39.50	0.00	25.00	288.78	147.25	500.53
Feb-21	0.00	0.00	7.75	250.75	40.25	298.75
Mar-21	0.00	0.00	19.25	186.50	124.50	330.25
Apr-21	24.00	22.00	63.75	280.50	160.25	550.50
May-21	34.50	0.00	62.00	269.50	211.75	577.75
Jun-21	19.50	0.00	20.25	291.50	257.25	588.50
Jul-21	52.50	0.00	23.00	417.50	140.25	633.25
Aug-21	82.00	0.00	23.00	193.00	228.00	526.00
Sep-21	66.00	5.75	0.00	200.25	140.75	412.75
Oct-21	84.25	0.00	7.75	361.50	99.75	553.25
Nov-21	384.50	0.00	0.00	1069.25	1178.50	2632.25
Dec-21	506.50	0.00	365.00	2559.04	1419.75	4850.29
<b>2021 Total</b>	<b>1293.25</b>	<b>27.75</b>	<b>616.75</b>	<b>6368.07</b>	<b>4148.25</b>	<b>12453.82</b>

**Department of State Hospitals**  
**SEIU BU 20 Mandatory Overtime Report**  
**(January 2016 - December 2023)**

Appendix E

2022	Atascadero	Coalinga	Metro	Napa	Patton	Total
Jan-22	65.50	7.00	34.00	201.25	126.50	434.25
Feb-22	7.75	11.00	0.00	76.75	15.75	111.25
Mar-22	0.00	0.00	0.00	234.92	16.50	251.42
Apr-22	0.00	0.00	15.50	214.76	0.00	230.26
May-22	3.80	0.00	32.00	336.33	22.25	394.38
Jun-22	53.00	0.00	70.25	353.53	53.75	
Jul-22	38.00	0.00	37.00	328.50	59.75	463.25
Aug-22	15.50	9.25	20.50	236.50	50.75	332.50
Sep-22	16.60	0.00	11.25	240.75	7.50	276.10
Oct-22	31.30	22.00	8.00	345.75	30.00	437.05
Nov-22	47.10	0.00	31.00	278.00	74.00	430.10
Dec-22	696.40	27.00	304.00	2197.25	472.00	3696.65
<b>2022 Total</b>	<b>974.95</b>	<b>76.25</b>	<b>563.50</b>	<b>5044.29</b>	<b>928.75</b>	<b>7587.56</b>

2023	Atascadero	Coalinga	Metro	Napa	Patton	Total
Jan-23	29.30	4.50	41.00	124.75	4.00	203.55
Feb-23	20.10	0.00	16.00	28.75	35.25	100.10
Mar-23	15.50	0.00	23.00	108.00	7.75	154.25
Apr-23	0.00	4.75	24.00	139.75	58.25	226.75
May-23	17.80	6.50	0.00	114.25	40.50	179.05
Jun-23	13.00	0.00	16.00	30.25	27.00	86.25
Jul-23	7.50	18.50	49.00	166.25	20.00	261.25
Aug-23	22.00	9.25	39.00	146	25.00	241.25
Sep-23	17.75	0.00	26.50	142.50	7.00	193.75
Oct-23	1.25	22.75	16.00	164.50	10.50	215.00
Nov-23	0.00	0.00	0.00	158.83	4.00	162.83
Dec-23	0.00	0.00	8.00	567.25	23.25	598.50
<b>2023 Total</b>	<b>144.20</b>	<b>66.25</b>	<b>258.50</b>	<b>1891.08</b>	<b>262.50</b>	<b>2662.43</b>



# **DSH Appendix F**

## **RN Vacancy Rates**

Department of State Hospitals  
SEIU BU 17 Vacancy Rate Report  
(January 2021 - December 2024)

Appendix F

Registered Nurse																
Date	DSH-A			DSH-C			DSH-M			DSH-N			DSH-P			
	Total	Vacant	Vacancy Rate	Total	Vacant	Vacancy Rate	Total	Vacant	Vacancy Rate	Total	Vacant	Vacancy Rate	Total	Vacant	Vacancy Rate	
Jan-21	245.8	36.8	14.97%	232	10	4.31%	294.1	100.1	34.04%	451.2	38.25	8.48%	362.1	23.1	6.38%	
Apr-21	245.8	38.8	15.79%	232	19	8.19%	294.1	96.1	32.68%	451.2	29.75	6.59%	361.1	32.1	8.89%	
May-21	244.8	37.8	15.44%	232	14	6.03%	294.1	100.1	34.04%	451.2	29.75	6.59%	362.1	40.1	11.07%	
Jun-21	244.8	38.8	15.85%	232	16	6.90%	294.1	93.1	31.66%	451.2	28.75	6.37%	362.1	42.1	11.63%	
Jul-21	244.8	42.8	17.48%	232	16	6.90%	294.1	84.1	28.60%	451.2	31.75	7.04%	362.1	42.1	11.63%	
Aug-21	244.8	44.8	18.30%	232	13	5.60%	294.1	83.1	28.26%	450.2	31.5	7.00%	362.1	54.1	14.94%	
Sep-21	244.8	47.8	19.53%	232	13	5.60%	294.1	72.1	24.52%	461.2	48	10.41%	362.1	42.1	11.63%	
Oct-21	244.8	47.8	19.53%	232	13	5.60%	294.1	72.1	24.52%	461.2	51	11.06%	362.1	38.1	10.52%	
Nov-21	244.8	45.8	18.71%	232	13	5.60%	294.1	75.1	25.54%	461.2	52	11.27%	362.1	37.1	10.25%	
Dec-21	244.8	43.8	17.89%	232	16	6.90%	294.1	78.1	26.56%	461.2	51	11.06%	362.1	39.1	10.80%	
Jan-22	244.8	44.8	18.30%	232	15	6.47%	294.1	81.1	27.58%	461.2	51	11.06%	362.1	42.1	11.63%	
Feb-22	244.8	46.8	19.12%	231	13.8	5.97%	294.1	80.1	27.24%	461.2	52	11.27%	362.1	33.1	9.14%	
Mar-22	244.8	43.8	17.89%	232	12.8	5.52%	294.1	82.1	27.92%	461.2	55	11.93%	362.1	27.1	7.48%	
Apr-22	244.8	43.8	17.89%	232	13.8	5.95%	294.1	78.1	26.56%	461.2	57	12.36%	362.1	24.1	6.66%	
May-22	244.8	46.8	19.12%	232	19.8	8.53%	294.1	75.1	25.54%	461.2	58	12.58%	362.1	27.1	7.48%	
Jun-22	244.6	45.6	18.64%	232	22.6	9.74%	294.1	72.1	24.52%	461.2	58	12.58%	362.1	18.1	5.00%	
Jul-22	244.6	39.6	16.19%	232	22.6	9.74%	294.1	72.1	24.52%	461.2	59	12.79%	362.1	21.1	5.83%	
Aug-22	244.6	39.6	16.19%	231.9	31.5	13.58%	294.1	74.1	25.20%	461.2	55	11.93%	362.1	24.1	6.66%	
Sep-22	244.6	43.6	17.83%	237.9	35.5	14.92%	294.1	71.1	24.18%	461.2	55	11.93%	362.1	27.1	7.48%	
Oct-22	244.6	45.6	18.64%	237.9	37.5	15.76%	294.1	75.1	25.54%	461.2	55	11.93%	362.1	25.1	6.93%	
Nov-22	244.4	46.4	18.99%	237.9	41.5	17.44%	294.1	68.1	23.16%	461.2	69	14.96%	362.1	27.1	7.48%	
Dec-22	244.4	45.4	18.58%	237.9	45.5	19.13%	294.1	68.1	23.16%	461.2	72	15.61%	362.1	27.1	7.48%	
Jan-23	244.4	48.4	19.80%	237.9	46.5	19.55%	294.1	68.1	23.16%	461.2	74	16.05%	362.1	30.1	8.31%	
Feb-23	244.4	52.4	21.44%	236.9	43.5	18.36%	294.1	68.1	23.16%	461.2	71.8	15.57%	362.1	30.1	8.31%	
Mar-23	244.4	52.4	21.44%	236.9	46.5	19.63%	294.1	68.1	23.16%	461.2	76.8	16.65%	362.1	26.1	7.21%	
Apr-23	244.4	54.4	22.26%	235.9	43.5	18.44%	294.1	67.1	22.82%	461.2	77.8	16.87%	362.1	21.1	5.83%	
May-23	244.4	55.4	22.67%	235.9	41.5	17.59%	294.1	64.1	21.80%	461.2	75.8	16.44%	362.1	17.1	4.72%	
Jun-23	244.4	53	21.69%	235.9	36.5	15.47%	294.1	64.1	21.80%	461.2	78.8	17.09%	362.1	21.1	5.83%	
Jul-23	244.4	54.4	22.26%	235.9	36.5	15.47%	294.1	63.1	21.46%	461.2	90.8	19.69%	362.1	19.1	5.27%	
Aug-23	244.4	52.4	21.44%	235.9	37.5	15.90%	294.1	64.1	21.80%	461.2	91.3	19.80%	362.1	19.1	5.27%	
Sep-23	244.4	52.4	21.44%	235.9	32.3	13.69%	294.1	64.1	21.80%	461.2	88.3	19.15%	362.1	16.1	4.45%	
Oct-23	244.4	60.4	24.71%	235.9	31.3	13.27%	294.1	64.1	21.80%	461.2	93.8	20.34%	362.1	8.1	2.24%	
Nov-23	244.4	58.4	23.90%	235.9	32.3	13.69%	294.1	64.1	21.80%	461.2	93.8	20.34%	362.1	13.1	3.62%	
Dec-23	244.4	59.4	24.30%	235.9	29.3	12.42%	304.1	66.1	21.74%	461.2	93.8	20.34%	363.1	16.4	4.52%	
Jan-24	242.4	57.4	23.68%	235.9	29.3	12.42%	304.1	63.1	20.75%	461.2	87.8	19.04%	363.4	21.4	5.89%	
Feb-24	248.5	69.5	27.97%	236.9	23.1	9.75%	304.1	57.1	18.78%	461.2	85.8	18.60%	363.4	18.4	5.06%	
Mar-24	248.5	63.5	25.55%	236.9	21.1	8.91%	304.1	45.1	14.83%	461.2	93.8	20.34%	363.1	17.1	4.71%	
Apr-24	247.5	61.5	24.85%	236.9	21.1	8.91%	304.1	47.1	15.49%	461.2	94.8	20.56%	363.1	12.1	3.33%	
May-24	247.5	61.5	24.85%	236.9	21.1	8.91%	303.9	44.9	14.77%	461.2	93.8	20.34%	363.1	11.1	3.06%	
Jun-24	246.5	58.5	23.73%	236.9	21.3	8.99%	303.7	45.7	15.05%	461.2	95.8	20.77%	363.1	15.1	4.16%	
Jul-24	246.5	59.5	24.14%	236.9	26.3	11.10%	303.7	45.7	15.05%	461.2	89.8	19.47%	363.1	13.1	3.61%	
Aug-24	246.5	58.5	23.73%	236.9	27.3	11.52%	300.7	42.7	14.20%	461.2	87.8	19.04%	367.1	23.1	6.29%	
Sep-24	246.5	52.5	21.30%	236.9	26.3	11.10%	300.7	42.7	14.20%	460.2	77.8	16.91%	367.1	26.1	7.11%	
Oct-24	246.5	49.5	20.08%	236.9	23.3	9.84%	300.7	38.7	12.87%	460.2	67.3	14.62%	360.1	24.1	6.69%	
Nov-24	246.4	49.4	20.05%	236.9	24.3	10.26%	299.7	35.7	11.91%	460.2	68.3	14.84%	366.1	25.1	6.86%	
Dec-24	246.4	45.4	18.43%	235.9	22.3	9.45%	300.7	32.7	10.87%	461.2	64.3	13.94%	365.1	18.1	4.96%	

Year	Registered Nurse Vacancy Rate Average				
	DSH-A	DSH-C	DSH-M	DSH-N	DSH-P
2021	17.35%	6.16%	29.04%	8.59%	10.77%
2022	18.11%	11.06%	25.42%	12.58%	7.44%
2023	22.28%	16.12%	22.19%	18.19%	5.46%
2024	23.20%	10.10%	14.90%	18.21%	5.14%

# **DSH Appendix G**

## **LVN Vacancy Rates**

Department of State Hospitals  
SEIU BU 20 Vacancy Rate Report  
(January 2021 - December 2024)

Appendix G

Licensed Vocational Nurse																
Date	DSH-A			DSH-C			DSH-M			DSH-N			DSH-P			
	Total	Vacant	Vacancy Rate	Total	Vacant	Vacancy Rate	Total	Vacant	Vacancy Rate	Total	Vacant	Vacancy Rate	Total	Vacant	Vacancy Rate	
Jan-21	11	0	0.00%	16.8	1	5.95%	20	5	25.00%	41	8	19.51%	36	6	16.67%	
Apr-21	11	0	0.00%	16.8	1	5.95%	20	7	35.00%	42	5	11.90%	36	7	19.44%	
May-21	11	0	0.00%	16.8	1	5.95%	20	7	35.00%	42	6	14.29%	36	7	19.44%	
Jun-21	11	0	0.00%	16.8	1	5.95%	20	8	40.00%	42	7	16.67%	36	7	19.44%	
Jul-21	11	1	9.09%	16	1	6.25%	20	4	20.00%	42	7	16.67%	36	8	22.22%	
Aug-21	11	1	9.09%	16.8	1	5.95%	20	2	10.00%	42	7	16.67%	36	8	22.22%	
Sep-21	11	1	9.09%	17.8	2	11.24%	20	2	10.00%	52	14	26.92%	36	10	27.78%	
Oct-21	11	1	9.09%	17.8	2	11.24%	20	2	10.00%	52	14	26.92%	36	10	27.78%	
Nov-21	11	1	9.09%	17.8	2.8	15.73%	20	2	10.00%	52	14	26.92%	36	10	27.78%	
Dec-21	11	2	18.18%	17.8	2.8	15.73%	20	2	10.00%	52	13	25.00%	36	10	27.78%	
Jan-22	11	2	18.18%	17.8	2.8	15.73%	20	2	10.00%	52	13	25.00%	36	11	30.56%	
Feb-22	11	2	18.18%	17.8	3.8	21.35%	20	1	5.00%	52	14	26.92%	36	12	33.33%	
Mar-22	11	2	18.18%	17.8	3.8	21.35%	20	1	5.00%	52	14	26.92%	36	12	33.33%	
Apr-22	10	3	30.00%	17.8	3.8	21.35%	20	1	5.00%	52	14	26.92%	36	12	33.33%	
May-22	11	3	27.27%	17.8	2.8	15.73%	19	5	26.32%	52	14	26.92%	36	12	33.33%	
Jun-22	11	2	18.18%	17.8	2.8	15.73%	20	1	5.00%	52	12	23.08%	36	13	36.11%	
Jul-22	11	2	18.18%	17.8	2.8	15.73%	20	1	5.00%	52	12	23.08%	36	13	36.11%	
Aug-22	11	2	18.18%	16.8	3.8	22.62%	20	3	15.00%	52	12	23.08%	36	13	36.11%	
Sep-22	11	2	18.18%	17.8	4	22.47%	20	3	15.00%	52	10	19.23%	36	13	36.11%	
Oct-22	11	2	18.18%	17.8	5	28.09%	20	2	10.00%	52	10	19.23%	36	13	36.11%	
Nov-22	11	2	18.18%	17.8	5.8	32.58%	20	2	10.00%	52	18	34.62%	36	13	36.11%	
Dec-22	11	2	18.18%	17.8	5.8	32.58%	20	3	15.00%	52	18	34.62%	36	13	36.11%	
Jan-23	11	2	18.18%	17.8	5.8	32.58%	20	3	15.00%	51	17	33.33%	36	14	38.89%	
Feb-23	11	2	18.18%	18.8	5.8	30.85%	24	7	29.17%	51	17	33.33%	36	14	38.89%	
Mar-23	11	4	36.36%	18.8	5.8	30.85%	24	7	29.17%	51	18	35.29%	36	14	38.89%	
Apr-23	11	4	36.36%	19.8	8.8	44.44%	24	7	29.17%	51	19	37.25%	36	14	38.89%	
May-23	11	4	36.36%	16.8	5.8	34.52%	24	8	33.33%	51	20	39.22%	36	14	38.89%	
Jun-23	11	5	45.45%	16.8	6.8	40.48%	24	8	33.33%	51	20	39.22%	36	13	36.11%	
Jul-23	11	5	45.45%	16.8	5.8	34.52%	24	7	29.17%	51	22	43.14%	36	15	41.67%	
Aug-23	11	5	45.45%	16.8	4	23.81%	24	7	29.17%	51	22	43.14%	36	15	41.67%	
Sep-23	11	6	54.55%	15.8	3	18.99%	24	7	29.17%	51	24	47.06%	36	15	41.67%	
Oct-23	11	6	54.55%	15.8	3	18.99%	24	8	33.33%	51	24	47.06%	35	14	40.00%	
Nov-23	11	6	54.55%	15.8	3	18.99%	24	8	33.33%	51	24	47.06%	35	14	40.00%	
Dec-23	11	6	54.55%	15.8	3	18.99%	24	9	37.50%	51	24	47.06%	35	14	40.00%	
Jan-24	11	6	54.55%	15.8	3	18.99%	24	9	37.50%	51	24	47.06%	23	2	8.70%	
Feb-24	11	6	54.55%	15.8	3	18.99%	24	9	37.50%	48	21	43.75%	23	2	8.70%	
Mar-24	11	6	54.55%	15.8	2	12.66%	24	9	37.50%	48	22	45.83%	23	1	4.35%	
Apr-24	11	6	54.55%	15.8	4	25.32%	24	9	37.50%	48	22	45.83%	24	2	8.33%	
May-24	11	6	54.55%	15.8	4	25.32%	24	8	33.33%	48	22	45.83%	23	1	4.35%	
Jun-24	11	6	54.55%	15.8	4	25.32%	24	8	33.33%	48	22	45.83%	23	1	4.35%	
Jul-24	11	6	54.55%	15.8	4	25.32%	24	8	33.33%	48	21	43.75%	23	1	4.35%	
Aug-24	11	6	54.55%	15.8	6	37.97%	24	9	37.50%	48	21	43.75%	23	1	4.35%	
Sep-24	11	6	54.55%	15.8	5	31.65%	24	9	37.50%	48	22	45.83%	23	2	8.70%	
Oct-24	12	6	50.00%	15.8	4	25.32%	24	9	37.50%	48	21	43.75%	19	2	10.53%	
Nov-24	12	6	50.00%	15.8	5	31.65%	24	9	37.50%	48	23	47.92%	23	2	8.70%	
Dec-24	12	5	41.67%	15.8	5	31.65%	24	9	37.50%	48	23	47.92%	23	2	8.70%	

Year	Licensed Vocational Nurse Vacancy Rate Average									
	DSH-A		DSH-C		DSH-M		DSH-N		DSH-P	
2021	6.36%		8.99%		20.50%		20.15%		23.06%	
2022	19.92%		22.11%		10.53%		25.80%		34.72%	
2023	41.67%		29.00%		30.07%		41.01%		39.63%	
2024	52.71%		25.84%		36.46%		45.59%		7.01%	

# **SEIU Appendix H**

## **Mission Based Review Position Phased in Procedures**

## OPERATIONAL PROCEDURE

<b>TITLE:</b> Mission Based Review Position Phase-In Procedures	<b>NUMBER:</b> Admin-OP-2203
<b>EFFECTIVE DATE:</b> July 1, 2023	<b>SUPERSEDES:</b> Admin-OP-2203 (Dated July 1, 2022)

**To:** Executive Directors, Hospital Administrators, Medical Directors, Human Resource Directors, Nurse Administrators, Chief of Protective Services

**From:** Budget Management Branch

### **Purpose**

This Operational Procedure (OP) provides guidance to Department of State Hospitals (DSH) staff responsible for the implementation of the five Mission-Based Review (MBR) items. Those five items are:

- I. Court Evaluations and Reports
- II. Direct Care Nursing
- III. Workforce Development
- IV. Protective Services
- V. Treatment Team and Primary Care Services

Each of the five items will be broken down into sub-areas as described in the original Budget Change Proposals (BCPs). For each sub-area, this OP will provide the number of positions, by classification, and the date each of those positions should be phased in. Further instruction concerning payroll reporting unit (PRU) and serial numbers will also be provided where needed.

### **Who is Affected**

Department of State Hospitals Human Resources and Position Control employees, Executive Directors, Hospital Administrators, Deputy Directors, Chief of Protective Services, and hiring managers

### **Definitions**

**Administratively Established (AE):** Circumstances may arise, outside of normal budget and legislative cycles, in which departments require additional personnel to meet critical and time sensitive workload demands. The need to administratively establish positions outside of the budget and legislative processes is not common and is typically reserved for critical and immediate needs, with additional costs being absorbed within existing appropriation authority. Positions are hired into the temporary help blanket.

## OPERATIONAL PROCEDURE

**Budget Change Proposal (BCP):** A Budget Change Proposal is a proposal to change the level of service or funding sources for activities authorized by the Legislature, or to propose new program activities not currently authorized.

**Executive Team:** Consists of the Director, Chief Deputy Directors, Division Deputy Directors, Hospital Executive Directors, and others as designated by the Chief Deputy Directors.

**Mission-Based Review:** A project led by the California Department of Finance created with the goal to determine the appropriate level of expenditures and resources needed to implement government services and programs.

**Payroll Reporting Unit (PRU):** The second block of three in the 13-digit position number. It is used to group positions into units at a lower level than the agency code (the first 3-digit block in a position number).

**Serial Number:** The final 3-digits in the 13-digit position number.

**Temporary Help Blanket:** The Blanket is a budgetary tool that provides staffing flexibility to meet operational needs and allows departments to temporarily hire above the Total Authorized Positions as displayed in the Salaries and Wages Supplement (Schedule 7A). To the extent the department can absorb the additional personnel costs, the Blanket should be used for temporary and intermittent staff, with the intent that an employee needed on a permanent basis will be moved into an authorized position as soon as a vacancy becomes available, or a permanent position is established through the budgetary process.

### Roles and Responsibilities

**Budget Analysts:** Sacramento budget analysts track all hiring and report bi-annually on the process to the Department of Finance and the Legislature.

**Human Resources Staff (HR):** Responsible at each location to adhere to the below processes and ensure the positions are established correctly and the civil service hiring process is followed.

**Hiring Managers:** Responsible for coordinating with HR and designated Budget Analyst to establish positions and complete hiring process for the proposals identified below.

**Hospital Administrators (HA):** Ensures completion of bi-annual reports to Sacramento Budget Management Branch.

**Executive Team:** Provides oversight of activities necessary to implement proposes identified below.

## **OPERATIONAL PROCEDURE**

### **Process and Procedure**

#### **I. Court Evaluations Implementation**

- A. This item was fully phased-in as of Fiscal Year (FY) 2021-22.
  - 1. No changes in FY 2023-24.
  - 2. See Attachment 1: Court Evaluations Positions Implementation Schedule by Hospital and Area for position details.

#### **II. Direct Care Nursing**

- A. This item is scheduled to be fully phased-in as of FY 2023-24.
  - 1. An additional 29.0 positions have been added as of the FY 2023-24 Budget Act. These positions are to be used to allow nursing staff currently in off-unit roles to go back on-unit. See Attachment 2: Direct Care Nursing, Redirected Off-Unit Admin Positions for details on the area each new admin position should be established in and the nursing classification that should be redirected from that area back on-unit. Note that any 5393 - Associate Governmental Program Analyst positions that appear on Attachment 2 are interchangeable positions and a 5157 – Staff Services Analyst may be used instead, at the hospital's discretion.
  - 2. A total of 50.5 Medication Room Psychiatric Technicians scheduled for phase-in on January 1, 2023, and April 1, 2023, have been delayed until January 1, 2024. Note: These positions may have been established already. If they have not been established, do not establish until January 1, 2024.
  - 3. Medication Room Psychiatric Technicians must be placed in PRUs that end in either “2” or “4” (XX2 or XX4).
  - 4. Afterhours Supervising Nurses must be placed in PRUs that end in either “2” or “4” (XX2 or XX4).
  - 5. See Attachment 3: Direct Care Nursing Positions Implementation Schedule by Hospital and Area for position details. The 29.0 new positions are highlighted yellow and the 50.5 Medication Room Psychiatric Technicians that have been delayed until January 1, 2024, are highlighted green.

#### **III. Workforce Development**

- A. This item was fully phased-in as of FY 2019-20.
  - 1. No changes in FY 2023-24.
  - 2. See Attachment 4: Workforce Development Positions Implementation Schedule by Hospital and Area for position details.

#### **IV. Protective Services**

- A. This item was fully phased-in as of FY 2022-23.
  - 1. No changes in FY 2023-24.
  - 2. Hospital Police Officers, Lieutenants, and Sergeants must be placed in PRU 561.
  - 3. The Chief of Police must be placed in PRU 561.



## OPERATIONAL PROCEDURE

- a. This position must be established as a CEA-A as part of the executive team at each hospital.
  - b. This position replaces the job functions of the Chief, Protective Services and Security and acts as the Chief for each hospital.
  - c. All applicants, including incumbent Chiefs of Protective Services and Security, are required to go through the competitive recruitment and interview process.
4. The Chief, Protective Services and Security will act as the Assistant Chief of Police and will report to the Chief of Police (CEA-A).
5. The Assistant Chief of Law Enforcement in the Office of Protective Services must be placed in PRU 511.
  - a. This position must be established as a CEA-A at DSH-Sacramento.
6. See Attachment 5: Protective Services Positions Implementation Schedule by Hospital and Area for position details.

### V. Treatment Team and Primary Care Services

- A. This item will be fully phased-in as of FY 2026-27.
  1. As of the 2022 Budget Act, all 29.5 Psychologist and Psychiatrist positions scheduled for phase-in in FY 2022-23 have been delayed until January 1, 2026, to allow the department time to fill the positions already phased-in the from prior years.
  2. As of the 2023 Budget Act, all 46.5 Treatment Team positions scheduled for phase-in in FY 2023-24 have been delayed until July 1, 2026, to allow the department time to fill the positions already phased-in the from prior years.
  3. Positions in the Treatment Team area must be established in PRUs ending in “1” or “3” (XX1 or XX3).
  4. Positions in the Primary Medical Care area must be established in PRUs ending in “1” or “3” (XX1 or XX3).
  5. Positions in the Clinical Executive Leadership area have been created to address supervisory gaps and to create a formal medical executive and supervisory structure for DSH-Sacramento and the five hospitals.
    - a. DSH-Sacramento will establish 1.0 Assistant Medical Director in PRU 506 and will move the incumbent acting in this capacity into this position upon completion of all necessary approvals. DSH-Atascadero will retain position authority for position number 455-200-7609-001 and may re-utilize it to meet business needs.
  6. Positions in the Trauma-Informed Care area must be established at DSH-Sacramento. The Trauma-Informed Care Program Director position is stationed in Sacramento under the Clinical Operations Division. Each hospital’s position is stationed at the hospital but is established under a Sacramento position number and reports to the Program Director in Sacramento.
  7. Positions in the Administrative Support area must be established at the hospitals in PRUs associated with Human Resources. DSH-Sacramento must establish the allocated position in PRU 220.

## **OPERATIONAL PROCEDURE**

8. Positions in the Discharge Strike Team area must be established at the hospitals in PRUs ending in “1” or “3” (XX1 or XX3). DSH-Sacramento must establish the allocated position in PRU 506.
9. Positions in the Clinical Operations Advisory Council (COAC) must be established at DSH-Sacramento.
10. See Attachment 6: Treatment Team and Primary Care Services Positions Implementation Schedule by Hospital and Area for position details. The 46.5 positions shifted to phased-in on January 1, 2026, are highlighted yellow.
11. Administratively Established (AE) Staff Psychiatrist Positions must be phased out according to Attachment 7: Treatment Team and Primary Care Phase-out of Administratively Established Positions (note this table displays the total AE positions available by year.)

### **Signature**

*Original Signed by Deputy Director*

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Sean Hammer, Deputy Director  
Admin Services Division

### **Authority**

1. Government Code section 11340.9(d). This chapter does not apply to a regulation that relates only to the internal management of the state agency.

This OP in its entirety is an internal management policy, meeting the regulatory exemption provision of Government Code section 11340.9(d).

### **References**

1. N/A

## **OPERATIONAL PROCEDURE**

### **Attachments**

1. Attachment 1: Court Evaluations Positions Implementation Schedule by Hospital and Area
2. Attachment 2: Direct Care Nursing, Redirected Off-Unit Positions
3. Attachment 3: Direct Care Nursing Position Implementation Schedule by Hospital and Area
4. Attachment 4: Workforce Development Position Implementation Schedule by Hospital and Area
5. Attachment 5: Protective Services Position Implementation Schedule by Hospital and Area
6. Attachment 6: Treatment Team and Primary Care Position Implementation Schedule by Hospital and Area
7. Attachment 7: Treatment Team and Primary Care, Phase-out of Administratively Established Positions