



# Stony Brook Eastern Long Island Hospital

## Stony Brook Eastern Long Island Hospital Clinical Staffing Plans July 2023

### Intensive Care Unit

ICU (2 beds)- <b>Ratio 1:2 RN to Patient Ratio</b> DAYS/NIGHTS		ADC 0 - 0.8
Census	RN	
1-2 pts	2	
*When the unit is open		

\*Matrices are developed as a guide for shift-to -shift unit-based staffing decisions and are adjusted up or down based on patient factors and skill-mix of hospital staff.

### Medical/Surgical

2N Med/Surg (15 beds) - <b>Ratio 1:6 RN to Patient Ratio</b>					ADC: 8
2N MEDSURG DAYS					
Census	RN	LPN	NA	Unit Clerk 9A-9P	
1-15 pts	2	-	2	1	

2N MEDSURG NIGHTS				
Census	RN	LPN	NA	Unit Clerk
1-15 pts	2	-	2	0

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## Rehab

2W REHAB (20 beds-sub acute) DAYS					ADC: 15
Census	RN	LPN	NA	Unit Clerk 9A-9P	
1-20 pts	2	0	1	0.5	

REHAB NIGHTS				
Census	RN	LPN	NA	Unit Clerk
1-20 pts	1	0	2	0

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## Detox

2E DETOX (10 beds) DAYS					ADC: 7
Census	RN	LPN	NA	Unit Clerk 9A-9P	
1- 10 pts	2	0	1	0.5	

DETOX NIGHTS				
Census	RN	LPN	NA	Unit Clerk
1-10 pts	2	0	1	0

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## Psychiatry

2S PSYCHIATRY (23 beds) DAYS				
Census	RN	LPN	NA	Unit Clerk 9A-9P
11-23 pts	3	0	3	1
1-10 pts	2	0	2	1

ADC: 16

2S PSYCHIATRY NIGHTS				
Census	RN	LPN	NA	Unit Clerk
11-23 pts	3	0	3	0
1-10 pts	2	0	2	0

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## Emergency Department

EMERGENCY DEPARTMENT (capacity 9)				
TIME of DAY	RN	LPN	OPST	Unit Clerk 9A-9P
7A-7P	2	0	1	1
SWING SHIFT	1	0	1	0
7P-7A	2	1	1	0

RN Ratios \*ED 1:4

\*Staffing fluctuates based on acuity of patients\*



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Service Line	Unit	Average Daily Census	Nursing Staff	Coverage by Shift		
				Day	Swing	Night
Peri-Operative Services	OR  (3 OR Rooms: Staffing for 1 Room Due to Volume)	3 Cases Per Day	CRNA	1	On-Call	On-Call
			RN	1	On-Call	On-Call
			Certified Surg-Tech/RN	1	On-Call	On-Call
			Unit Secretary	0.25	-	-
	Endoscopy Room (Room 4)		CRNA	1	On-Call	On-Call
			RN	1	On-Call	On-Call
			Certified Surg-Tech/RN	2	On-Call	On-Call
			Unit Secretary	0.25	-	-
	ASU-Pain-7A-10A (8 Bays)	6-9 Patients/3 HR	RN	2	-	-
			Surg-Tech/LPN	1	-	-
			Unit Secretary	1	-	-
	ASU-Wound Care-10A-2P (8 Bays)	8-10 Patients/4 HR	RN	2	-	-
			Surg-Tech/LPN	2	-	-
			Unit Secretary	1	-	-
	PACU 1:1-2 RN	7 Cases Per Day	RN	1.5	-	-
			Unit Secretary	0.5	-	-
	Pre-Surgical Assessment (0-10)	As Required	*RN	1	-	-



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			*CRNA: Reviews as Required	1	-	-
	<i>**These RNs do not see patients; however, complete chart review, phone assessments, schedule follow-up appointments and arrange for Medical Clearances. **</i>					
Radiology	<b>CT/MRI/Nuclear</b>					
	8A-4P		RN	1		

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November 8, 2023

Attached is the written nursing staffing plan as developed by the Stony Brook Eastern Long Island Hospital (SBELIH) Clinical Staffing Committee and approved under the administrative authority of the Director of Nursing Services, i.e.: Suzie Marriott, MS RN PMH-BC, THE Chief Nursing Officer (CNO).

The CNO is responsible for the operation of nursing services. The SBELIH CNO is responsible for all areas where nursing care is delivered.

Factors considered in development of the staffing plans for each unit included:

1. Census and activity (discharges, admissions, transfers, procedures)
2. Acuity factors that are determined shift by shift by expected acuity and flexed to account for exceptions as pre-approved at the Clinical Staffing Committee and built into the staffing analysis.
3. Skill mix per unit as denoted on individual nursing staffing plans
4. Experience, expertise, and training of personnel including designation of charge nurse and other specific duty nurses (e.g.: pre-surgical assessment nurses)
5. Unit specific required equipment (e.g.: telemetry)
6. Architecture and geography of individual units that take into account difference needs based on units with all private rooms, vs. semi-private rooms, vs. open bays (e.g.: PACU)
7. Methods of 1:1 Observation
8. Specialty characteristics of units, including but not limited to psychiatric care, medical detoxification, sub-acute rehab, emergency care, interpreter needs, and social determinants of health needs
9. Worker and patient safety including but not limited to patient handling equipment, panic buttons, de-escalation training
10. State, local and specialty specific nursing guidelines (ICU, OR)
11. Support for unit-based nursing including but not limited to phlebotomy, Respiratory Therapy, Physical Therapy, Social Workers, Counselors, Creative Therapies, Case Managers, emergency teams





# Stony Brook Eastern Long Island Hospital

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Chief Nursing Officer, SVP Patient Care Services  
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12. Emergency surge plans which have been developed to support unforeseen circumstances and based on allowable waivers
13. Coverage for meal breaks, rest breaks and planned time off
14. Measurement and review of Nursing Quality Indicators as submitted to NDNQI
15. Approval of all plans in collaboration with the Chief Financial Officer and designee and within allotted budgets
16. The ability to supplement the plan through agency staffing to cover needs and account for unexpected circumstances

Sincerely,

A handwritten signature in black ink, appearing to read "Suzie Marriott".

Suzie Marriott, MS, RN, PMH-BC  
Chief Nursing Officer  
Stony Brook Eastern Long Island Hospital

