

HOSPITAL INFORMATION

Region	Metropolitan Area Regional Office
County	Kings
Council	New York City
Network	INDEPENDENT
Reporting Organization	Maimonides Midwood Community Hospital
Reporting Organization Id	1293
Reporting Organization Type	Hospital (pfi)
Data Entity	Maimonides Midwood Community Hospital

RN DAY SHIFT STAFFING

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Planned average number of Registered Nurses (RN) on the unit providing direct patient care per day on the Day Shift? (Please provide a number with up to 5 digits. Ex: 101.50)	Planned total hours of RN nursing care per patient including adjustment for case mix and acuity on the Day Shift (Please provide a number with up to 5 digits. Ex: 101.50)	Planned average number of patients on the unit per day on the Day Shift? (Please provide a number with up to 5 digits. Ex: 101.50)	What is the planned average number of patients for which one RN on the unit will provide direct patient care per day on the Day Shift (Please provide a number with up to 5 digits. Ex: 101.50) ?
OR (Operating Department)	11	1.8	30	3
Ambulatory/Surgery	8	1.8	30	6
PST (Pre-Surgical Testing)	3	1.8	20	6
Interventional Radiology program is offered at MMCH and provides patients who need IR procedures.	2	1.8	5	1
This is an article 28 facility with 17 infusion center chairs	5	1.8	40	5
PCU - Progressive Care Unit - 12 Bed Capacity	4	4.2	10.08	3
ICU - 7 Bed total capacity	3	6.25	5.8	2
911 Receiving ED - 29 Bays in the main ED and 6 Chairs in the Fast Track.	6	1.8	70	7
4th Floor- Medical and Surgical Unit - 24 beds with 15 beds tele capacity.	3	1.8	19.82	7

3rd Floor Medical and Surgical Unit - 41 beds total capacity with 15 beds tele capacity.	4	1.8	28.41	7
2nd Floor -Medical and Surgical Unit - 41 total beds capacity with 15 beds tele capacity.	4	1.8	26.55	7

LPN DAY SHIFT STAFFING

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Planned average number of Licensed Practical Nurses (LPN) on the unit providing direct patient care per day on the Day Shift? (Please provide a number with up to 5 digits. Ex: 101.50)	Planned total hours of LPN care per patient including adjustment for case mix and acuity on the Day Shift (Please provide a number with up to 5 digits. Ex: 101.50)
OR (Operating Department)	0	0
Ambulatory/Surgery	0	0
PST (Pre-Surgical Testing)	0	0
Interventional Radiology program is offered at MMCH and provides patients who need IR procedures.	0	0
This is an article 28 facility with 17 infusion center chairs	0	0
PCU - Progressive Care Unit - 12 Bed Capacity	0	0
ICU - 7 Bed total capacity	0	0

911 Receiving ED - 29 Bays in the main ED and 6 Chairs in the Fast Track.	0	0
4th Floor- Medical and Surgical Unit - 24 beds with 15 beds tele capacity.	0	0
3rd Floor Medical and Surgical Unit - 41 beds total capacity with 15 beds tele capacity.	0	0
2nd Floor -Medical and Surgical Unit - 41 total beds capacity with 15 beds tele capacity.	0	0

DAY SHIFT ANCILLARY STAFF

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Planned average number of ancillary members of the frontline team on the unit per day on the Day Shift? (Please provide a number with up to 5 digits. Ex: 101.50)	Planned total hours of ancillary members of the frontline team including adjustment for case mix and acuity on the Day Shift (Please provide a number with up to 5 digits. Ex: 101.50)
OR (Operating Department)	0	0
Ambulatory/Surgery	0	0
PST (Pre-Surgical Testing)	1	2

Interventional Radiology program is offered at MMCH and provides patients who need IR procedures.	0	0
This is an article 28 facility with 17 infusion center chairs	0	0
PCU - Progressive Care Unit - 12 Bed Capacity	0	0
ICU - 7 Bed total capacity	0	0
911 Receiving ED - 29 Bays in the main ED and 6 Chairs in the Fast Track.	1	8
4th Floor- Medical and Surgical Unit - 24 beds with 15 beds tele capacity.	1	8
3rd Floor Medical and Surgical Unit - 41 beds total capacity with 15 beds tele capacity.	1	8
2nd Floor -Medical and Surgical Unit - 41 total beds capacity with 15 beds tele capacity.	1	8

DAY SHIFT UNLICENSED STAFFING

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Planned average number of unlicensed personnel (e.g., patient care technicians) on the unit providing direct patient care per day on the Day Shift? (Please provide a number with up to 5 digits. Ex: 101.50)	Planned total hours of unlicensed personnel care per patient including adjustment for case mix and acuity on the Day Shift (Please provide a number with up to 5 digits. Ex: 101.50)
OR (Operating Department)	7	4
Ambulatory/Surgery	1	2
PST (Pre-Surgical Testing)	1	2
Interventional Radiology program is offered at MMCH and provides patients who need IR procedures.	0	0
This is an article 28 facility with 17 infusion center chairs	3	1.8
PCU - Progressive Care Unit - 12 Bed Capacity	2	1.6
ICU - 7 Bed total capacity	1	1.14
911 Receiving ED - 29 Bays in the main ED and 6 Chairs in the Fast Track.	4	1.14
4th Floor- Medical and Surgical Unit - 24 beds with 15 beds tele capacity.	3	1.14

3rd Floor Medical and Surgical Unit - 41 beds total capacity with 15 beds tele capacity.	4	1.14
2nd Floor -Medical and Surgical Unit - 41 total beds capacity with 15 beds tele capacity.	4	1.14

DAY SHIFT ADDITIONAL RESOURCES

<p>Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.</p>	<p>Description of additional resources available to support unit level patient care on the Day Shift. These resources include but are not limited to unit clerical staff, admission/discharge nurse, and other coverage provided to registered nurses, licensed practical nurses, and ancillary staff.</p>
<p>OR (Operating Department)</p>	<p>Operating Department and PACU department - provide various types surgery to the patient at MMCH. PACU department recovers the patient post anesthesia.</p>

<p>Ambulatory/Surgery</p>	<p>Ambulatory/Surgery Department welcomes the patient on the day of the surgery, makes sure all the necessary medical information is there, as well as performs one last medical check with either blood work, radiology exam or speciality clearances such as cardiovascular. After the surgery the patient is then given all the necessary instructions, as well as the final check is done by the nurses to make sure the patient is safe to go home.</p>
<p>PST (Pre-Surgical Testing)</p>	<p>Pre-surgical testing department prepares patient for their surgery by working with Mid-level provider do blood tests, radiological exams and speciality clearances such as cardiac for patients who will be having an surgery at MMCH.</p>

<p>Interventional Radiology program is offered at MMCH and provides patients who need IR procedures.</p>	<p>IR is a new service that started in 2023 at MMCH with conjunction with our main hospital campus MMC. Currently we have low volume and are monitoring the progression of the program. IR is staffed with two nurses who provide safe and optimum care to the patient, by helping the physician do the procedure and then the nurses recover the patient. Scheduling is done by MMC.</p>
<p>This is an article 28 facility with 17 infusion center chairs</p>	<p>The infusion center has a pharmacy tech, pharmacy, lab tech, clerical support team and medical assistance who all work diligently to make sure patients get the safest and most optimum experience possible.</p>

<p>PCU - Progressive Care Unit - 12 Bed Capacity</p>	<p>Phlebotomist are 24 hour/ 7 day coverage, Dietician/Nutritionist Day (7am - 3pm), EKG tech also 24/7 coverage, Dietary support aid Day and Evening coverage, Transporters 24/7 coverage. Supervisor on duty 24/7 Coverage. Medical Doctors 24/7 coverage, Respiratory therapist 24/7 coverage.</p>
<p>ICU - 7 Bed total capacity</p>	<p>Phlebotomist are 24 hour/ 7 day coverage, Dietician/Nutritionist Day (7am - 3pm), EKG tech also 24/7 coverage, Dietary support aid Day and Evening coverage, Transporters 24/7 coverage. Supervisor on duty 24/7 Coverage. Medical Doctors 24/7 coverage, Respiratory therapist 24/7 coverage.</p>
<p>911 Receiving ED - 29 Bays in the main ED and 6 Chairs in the Fast Track.</p>	<p>Phlebotomist are 24 hour/ 7 day coverage, Dietician/Nutritionist Day (7am - 3pm), EKG tech also 24/7 coverage, Dietary support aid Day and Evening coverage, Transporters 24/7 coverage. Supervisor on duty 24/7 Coverage. Medical Doctors 24/7 coverage, Respiratory therapist 24/7 coverage.</p>

<p>4th Floor- Medical and Surgical Unit - 24 beds with 15 beds tele capacity.</p>	<p>Unit Secretary - Day (7am to 3pm) and Evening Shift (3pm to 11pm), Phlebotomist are 24 hour/ 7 day coverage, Dietician/Nutritionist Day (7am - 3pm), EKG tech also 24/7 coverage, Dietary support aid Day and Evening coverage, Transporters 24/7 coverage. Supervisor on duty 24/7 Coverage. Medical Doctors 24/7 coverage, Respiratory therapist 24/7 coverage.</p>
<p>3rd Floor Medical and Surgical Unit - 41 beds total capacity with 15 beds tele capacity.</p>	<p>Unit Secretary - Day (7am to 3pm) and Evening Shift (3pm to 11pm), Phlebotomist are 24 hour/ 7 day coverage, Dietician/Nutritionist Day (7am - 3pm), EKG tech also 24/7 coverage, Dietary support aid Day and Evening coverage, Transporters 24/7 coverage. Supervisor on duty 24/7 Coverage. Medical Doctors 24/7 coverage, Respiratory therapist 24/7 coverage.</p>

<p>2nd Floor -Medical and Surgical Unit - 41 total beds capacity with 15 beds tele capacity.</p>	<p>Unit Secretary - Day (7am to 3pm) and Evening Shift (3pm to 11pm), Phlebotomist are 24 hour/ 7 day coverage, Dietician/Nutritionist Day (7am - 3pm), EKG tech also 24/7 coverage, Dietary support aid Day and Evening coverage, Transporters 24/7 coverage. Supervisor on duty 24/7 Coverage. Medical Doctors 24/7 coverage, Respiratory therapist 24/7 coverage.</p>
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DAY SHIFT CONSENSUS INFORMATION

<p>Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.</p>	<p>Our Clinical Staffing Committee reached consensus on the clinical staffing plan for this unit:</p>	<p>If no, Chief Executive Officer Statement in support of clinical staffing plan for this unit:</p>	<p>Statement by members of clinical staffing committee selected by the general hospital administration (management members):</p>	<p>Statement by members of clinical staffing committee that were registered nurses, licensed practical nurses, and ancillary members of the frontline team (employee members):</p>
<p>OR (Operating Department)</p>	<p>Yes</p>			
<p>Ambulatory/Surgery</p>	<p>Yes</p>			
<p>PST (Pre-Surgical Testing)</p>	<p>Yes</p>			
<p>Interventional Radiology program is offered at MMCH and provides patients who need IR procedures.</p>	<p>Yes</p>			

This is an article 28 facility with 17 infusion center chairs	Yes			
PCU - Progressive Care Unit - 12 Bed Capacity	Yes			
ICU - 7 Bed total capacity	Yes			
911 Receiving ED - 29 Bays in the main ED and 6 Chairs in the Fast Track.	No	Yes	<p>providing safe and effective care to the patients of its community. The propose staffing ratios for nurses, PCA and NSA staff takes in account all the additional ancillary support staff that is providing safe and optimum care at MMCH. A long side of nurses and PCA's, MMCH provides phlebotomist techs, EKG techs and IV team that reduces the burden of the front-line Nurses and PCA to manage the above tasks. The ratios proposed takes into account the lower CMI the institution has been experiencing, which reflects the overall acuity of the facilities patients. The frontline managers are constantly evaluating and assessing the clinical operation ensure patients are getting safe and</p>	<p>for patient care and safety. Management's recommendation for minimal staffing is not consistent with the legislation NYSHCSC Law 2805-t. Sufficient staffing ensures patients receive the attention, expertise, and support they need. It allows for swift responses to emergencies, reduces the risk of errors, and improves outcomes. Insufficient staffing jeopardizes lives and compromises care quality. Management's suggestion prioritizes cost-cutting over patients. To achieve our goal, we must recognize that adequate staffing is non-negotiable. It is essential for optimal care and patient well-being. Patient safety depends on it, and management must acknowledge the</p>

<p>4th Floor- Medical and Surgical Unit - 24 beds with 15 beds tele capacity.</p>	<p>No</p>	<p>Yes</p>	<p>providing safe and effective care to the patients of its community. The propose staffing ratios for nurses, PCA and NSA staff takes in account all the additional ancillary support staff that is providing safe and optimum care at MMCH. A long side of nurses and PCA's, MMCH provides phlebotomist techs, EKG techs and IV team that reduces the burden of the front-line Nurses and PCA to manage the above tasks. The ratios proposed takes into account the lower CMI the institution has been experiencing, which reflects the overall acuity of the facilities patients. The frontline managers are constantly evaluating and assessing the clinical operation ensure patients are getting safe and</p>	<p>for patient care and safety. Management's recommendation for minimal staffing is not consistent with the legislation NYSHCS Law 2805-t. Sufficient staffing ensures patients receive the attention, expertise, and support they need. It allows for swift responses to emergencies, reduces the risk of errors, and improves outcomes. Insufficient staffing jeopardizes lives and compromises care quality. Management's suggestion prioritizes cost-cutting over patients. To achieve our goal, we must recognize that adequate staffing is non-negotiable. It is essential for optimal care and patient well-being. Patient safety depends on it, and management must acknowledge the</p>
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<p>3rd Floor Medical and Surgical Unit - 41 beds total capacity with 15 beds tele capacity.</p>	<p>No</p>	<p>Yes</p>	<p>providing safe and effective care to the patients of its community. The propose staffing ratios for nurses, PCA and NSA staff takes in account all the additional ancillary support staff that is providing safe and optimum care at MMCH. A long side of nurses and PCA's, MMCH provides phlebotomist techs, EKG techs and IV team that reduces the burden of the front-line Nurses and PCA to manage the above tasks. The ratios proposed takes into account the lower CMI the institution has been experiencing, which reflects the overall acuity of the facilities patients. The frontline managers are constantly evaluating and assessing the clinical operation ensure patients are getting safe and</p>	<p>for patient care and safety. Management's recommendation for minimal staffing is not consistent with the legislation NYSHCS Law 2805-t. Sufficient staffing ensures patients receive the attention, expertise, and support they need. It allows for swift responses to emergencies, reduces the risk of errors, and improves outcomes. Insufficient staffing jeopardizes lives and compromises care quality. Management's suggestion prioritizes cost-cutting over patients. To achieve our goal, we must recognize that adequate staffing is non-negotiable. It is essential for optimal care and patient well-being. Patient safety depends on it, and management must acknowledge the</p>
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<p>2nd Floor -Medical and Surgical Unit - 41 total beds capacity with 15 beds tele capacity.</p>	<p>No</p>	<p>Yes</p>	<p>providing safe and effective care to the patients of its community. The propose staffing ratios for nurses, PCA and NSA staff takes in account all the additional ancillary support staff that is providing safe and optimum care at MMCH. A long side of nurses and PCA's, MMCH provides phlebotomist techs, EKG techs and IV team that reduces the burden of the front-line Nurses and PCA to manage the above tasks. The ratios proposed takes into account the lower CMI the institution has been experiencing, which reflects the overall acuity of the facilities patients. The frontline managers are constantly evaluating and assessing the clinical operation ensure patients are getting safe and</p>	<p>for patient care and safety. Management's recommendation for minimal staffing is not consistent with the legislation NYSHCS Law 2805-t. Sufficient staffing ensures patients receive the attention, expertise, and support they need. It allows for swift responses to emergencies, reduces the risk of errors, and improves outcomes. Insufficient staffing jeopardizes lives and compromises care quality. Management's suggestion prioritizes cost-cutting over patients. To achieve our goal, we must recognize that adequate staffing is non-negotiable. It is essential for optimal care and patient well-being. Patient safety depends on it, and management must acknowledge the</p>
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RN EVENING SHIFT STAFFING

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Planned average number of Registered Nurses (RN) on the unit providing direct patient care per day on the Evening Shift? (Please provide a number with up to 5 digits. Ex: 101.50)	Planned total hours of RN nursing care per patient including adjustment for case mix and acuity on the Evening Shift (Please provide a number with up to 5 digits. Ex: 101.50)	Planned average number of patients on the unit per day on the Evening Shift? (Please provide a number with up to 5 digits. Ex: 101.50)	What is the planned average number of patients for which one RN on the unit will provide direct patient care per day on the Evening Shift (Please provide a number with up to 5 digits. Ex: 101.50)?
OR (Operating Room)	3	1.8	10	3
PCU - Progressive care Unit - 12 bed Capacity	4	4.2	10.08	3
ICU - 7 Bed Capacity	3	6.25	5.8	2
911 Receiving ED-29 Bays in the main ED and 6 Chairs in the Fast Track	6	1.8	70	7
4th Floor Medical and Surgical Unit - 24 beds with 15 beds tele capacity.	3	1.8	19.82	7
3rd Floor Medical and Surgical Unit. Total 41 Bed Capacity with 15 Tele Bed Capacity.	4	1.78	28.41	7
2nd Floor Medical and Surgical Unit - 41 total beds capacity with 15 beds tele capacity.	4	1.8	26.55	7

LPN EVENING SHIFT STAFFING

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Planned average number of Licensed Practical Nurses (LPN) on the unit providing direct patient care per day on the Evening Shift? (Please provide a number with up to 5 digits. Ex: 101.50)	Planned total hours of LPN care per patient including adjustment for case mix and acuity on the Evening Shift (Please provide a number with up to 5 digits. Ex: 101.50)
OR (Operating Room)	0	0
PCU - Progressive care Unit - 12 bed Capacity	0	0
ICU - 7 Bed Capacity	0	0
911 Receiving ED-29 Bays in the main ED and 6 Chairs in the Fast Track	0	0
4th Floor Medical and Surgical Unit - 24 beds with 15 beds tele capacity.	0	0
3rd Floor Medical and Surgical Unit. Total 41 Bed Capacity with 15 Tele Bed Capacity.	0	0
2nd Floor Medical and Surgical Unit - 41 total beds capacity with 15 beds tele capacity.	0	0

EVENING SHIFT ANCILLARY STAFF

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Planned average number of ancillary members of the frontline team on the unit per day on the Evening Shift? (Please provide a number with up to 5 digits. Ex: 101.50)	Planned total hours of ancillary members of the frontline team including adjustment for case mix and acuity on the Evening Shift (Please provide a number with up to 5 digits. Ex: 101.50)
OR (Operating Room)	0	0
PCU - Progressive care Unit - 12 bed Capacity	0	0
ICU - 7 Bed Capacity	0	0
911 Receiving ED-29 Bays in the main ED and 6 Chairs in the Fast Track	1	8
4th Floor Medical and Surgical Unit - 24 beds with 15 beds tele capacity.	1	8
3rd Floor Medical and Surgical Unit. Total 41 Bed Capacity with 15 Tele Bed Capacity.	1	8
2nd Floor Medical and Surgical Unit - 41 total beds capacity with 15 beds tele capacity.	1	8

EVENING SHIFT UNLICENSED STAFFING

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Planned average number of unlicensed personnel on the unit providing direct patient care per day on the Evening Shift? (Please provide a number with up to 5 digits. Ex: 101.50)	Planned total hours of unlicensed personnel care per patient including adjustment for case mix and acuity on the Evening Shift (Please provide a number with up to 5 digits. Ex: 101.50)
OR (Operating Room)	2	2
PCU - Progressive care Unit - 12 bed Capacity	2	1.6
ICU - 7 Bed Capacity	1	1.3
911 Receiving ED-29 Bays in the main ED and 6 Chairs in the Fast Track	4	1.14
4th Floor Medical and Surgical Unit - 24 beds with 15 beds tele capacity.	3	1.14
3rd Floor Medical and Surgical Unit. Total 41 Bed Capacity with 15 Tele Bed Capacity.	4	1.14
2nd Floor Medical and Surgical Unit - 41 total beds capacity with 15 beds tele capacity.	4	1.14

EVENING SHIFT ADDITIONAL RESOURCES

<p>Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.</p>	<p>Description of additional resources available to support unit level patient care on the Evening Shift. These resources include but are not limited to unit clerical staff, admission/discharge nurse, and other coverage provided to registered nurses, licensed practical nurses, and ancillary staff.</p>
<p>OR (Operating Room)</p>	<p>Operating Department and PACU department - provide various types surgery to the patient at MMCH. PACU department recovers the patient post anesthesia.</p>
<p>PCU - Progressive care Unit - 12 bed Capacity</p>	<p>Phlebotomist are 24 hour/ 7 day coverage, Dietician/Nutritionist Day (7am - 3pm), EKG tech also 24/7 coverage, Dietary support aid Day and Evening coverage, Transporters 24/7 coverage. Supervisor on duty 24/7 Coverage. Medical Doctors 24/7 coverage, Respiratory therapist 24/7 coverage.</p>

<p>ICU - 7 Bed Capacity</p>	<p>Phlebotomist are 24 hour/ 7 day coverage, Dietician/Nutritionist Day (7am - 3pm), EKG tech also 24/7 coverage, Dietary support aid Day and Evening coverage, Transporters 24/7 coverage. Supervisor on duty 24/7 Coverage. Medical Doctors 24/7 coverage, Respiratory therapist 24/7 coverage.</p>
<p>911 Receiving ED-29 Bays in the main ED and 6 Chairs in the Fast Track</p>	<p>Unit Secretary - Day (7am to 3pm) and Evening Shift (3pm to 11pm), Phlebotomist are 24 hour/ 7 day coverage, Dietician/Nutritionist Day (7am - 3pm), EKG tech also 24/7 coverage, Dietary support aid Day and Evening coverage, Transporters 24/7 coverage. Supervisor on duty 24/7 Coverage. Medical Doctors 24/7 coverage, Respiratory therapist 24/7 coverage.</p>

<p>4th Floor Medical and Surgical Unit - 24 beds with 15 beds tele capacity.</p>	<p>Unit Secretary - Day (7am to 3pm) and Evening Shift (3pm to 11pm), Phlebotomist are 24 hour/ 7 day coverage, Dietician/Nutritionist Day (7am - 3pm), EKG tech also 24/7 coverage, Dietary support aid Day and Evening coverage, Transporters 24/7 coverage. Supervisor on duty 24/7 Coverage. Medical Doctors 24/7 coverage, Respiratory therapist 24/7 coverage.</p>
<p>3rd Floor Medical and Surgical Unit. Total 41 Bed Capacity with 15 Tele Bed Capacity.</p>	<p>Unit Secretary - Day (7am to 3pm) and Evening Shift (3pm to 11pm), Phlebotomist are 24 hour/ 7 day coverage, Dietician/Nutritionist Day (7am - 3pm), EKG tech also 24/7 coverage, Dietary support aid Day and Evening coverage, Transporters 24/7 coverage. Supervisor on duty 24/7 Coverage. Medical Doctors 24/7 coverage, Respiratory therapist 24/7 coverage.</p>

<p>2nd Floor Medical and Surgical Unit - 41 total beds capacity with 15 beds tele capacity.</p>	<p>Unit Secretary - Day (7am to 3pm) and Evening Shift (3pm to 11pm), Phlebotomist are 24 hour/ 7 day coverage, Dietician/Nutritionist Day (7am - 3pm), EKG tech also 24/7 coverage, Dietary support aid Day and Evening coverage, Transporters 24/7 coverage. Supervisor on duty 24/7 Coverage. Medical Doctors 24/7 coverage, Respiratory therapist 24/7 coverage.</p>
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EVENING SHIFT CONSENSUS INFORMATION

<p>Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.</p>	<p>Our Clinical Staffing Committee reached consensus on the clinical staffing plan for this unit:</p>	<p>If no, Chief Executive Officer Statement in support of clinical staffing plan for this unit:</p>	<p>Statement by members of clinical staffing committee selected by the general hospital administration (management members):</p>	<p>Statement by members of clinical staffing committee that were registered nurses, licensed practical nurses, and ancillary members of the frontline team (employee members):</p>
<p>OR (Operating Room)</p>	<p>Yes</p>			
<p>PCU - Progressive care Unit - 12 bed Capacity</p>	<p>Yes</p>			
<p>ICU - 7 Bed Capacity</p>	<p>Yes</p>			

<p>911 Receiving ED-29 Bays in the main ED and 6 Chairs in the Fast Track</p>	<p>No</p>	<p>Yes</p>	<p>providing safe and effective care to the patients of its community. The propose staffing ratios for nurses, PCA and NSA staff takes in account all the additional ancillary support staff that is providing safe and optimum care at MMCH. A long side of nurses and PCA's, MMCH provides phlebotomist techs, EKG techs and IV team that reduces the burden of the front-line Nurses and PCA to manage the above tasks. The ratios proposed takes into account the lower CMI the institution has been experiencing, which reflects the overall acuity of the facilities patients. The frontline managers are constantly evaluating and assessing the clinical operation ensure patients are getting safe and</p>	<p>for patient care and safety. Management's recommendation for minimal staffing is not consistent with the legislation NYSHCS Law 2805-t. Sufficient staffing ensures patients receive the attention, expertise, and support they need. It allows for swift responses to emergencies, reduces the risk of errors, and improves outcomes. Insufficient staffing jeopardizes lives and compromises care quality. Management's suggestion prioritizes cost-cutting over patients. To achieve our goal, we must recognize that adequate staffing is non-negotiable. It is essential for optimal care and patient well-being. Patient safety depends on it, and management must acknowledge the</p>
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<p>4th Floor Medical and Surgical Unit - 24 beds with 15 beds tele capacity.</p>	<p>No</p>	<p>Yes</p>	<p>providing safe and effective care to the patients of its community. The propose staffing ratios for nurses, PCA and NSA staff takes in account all the additional ancillary support staff that is providing safe and optimum care at MMCH. A long side of nurses and PCA's, MMCH provides phlebotomist techs, EKG techs and IV team that reduces the burden of the front-line Nurses and PCA to manage the above tasks. The ratios proposed takes into account the lower CMI the institution has been experiencing, which reflects the overall acuity of the facilities patients. The frontline managers are constantly evaluating and assessing the clinical operation ensure patients are getting safe and</p>	<p>for patient care and safety. Management's recommendation for minimal staffing is not consistent with the legislation NYSHCS Law 2805-t. Sufficient staffing ensures patients receive the attention, expertise, and support they need. It allows for swift responses to emergencies, reduces the risk of errors, and improves outcomes. Insufficient staffing jeopardizes lives and compromises care quality. Management's suggestion prioritizes cost-cutting over patients. To achieve our goal, we must recognize that adequate staffing is non-negotiable. It is essential for optimal care and patient well-being. Patient safety depends on it, and management must acknowledge the</p>
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<p>3rd Floor Medical and Surgical Unit. Total 41 Bed Capacity with 15 Tele Bed Capacity.</p>	<p>No</p>	<p>Yes</p>	<p>providing safe and effective care to the patients of its community. The propose staffing ratios for nurses, PCA and NSA staff takes in account all the additional ancillary support staff that is providing safe and optimum care at MMCH. A long side of nurses and PCA's, MMCH provides phlebotomist techs, EKG techs and IV team that reduces the burden of the front-line Nurses and PCA to manage the above tasks. The ratios proposed takes into account the lower CMI the institution has been experiencing, which reflects the overall acuity of the facilities patients. The frontline managers are constantly evaluating and assessing the clinical operation ensure patients are getting safe and</p>	<p>for patient care and safety. Management's recommendation for minimal staffing is not consistent with the legislation NYSHCS Law 2805-t. Sufficient staffing ensures patients receive the attention, expertise, and support they need. It allows for swift responses to emergencies, reduces the risk of errors, and improves outcomes. Insufficient staffing jeopardizes lives and compromises care quality. Management's suggestion prioritizes cost-cutting over patients. To achieve our goal, we must recognize that adequate staffing is non-negotiable. It is essential for optimal care and patient well-being. Patient safety depends on it, and management must acknowledge the</p>
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<p>2nd Floor Medical and Surgical Unit - 41 total beds capacity with 15 beds tele capacity.</p>	<p>No</p>	<p>Yes</p>	<p>providing safe and effective care to the patients of its community. The propose staffing ratios for nurses, PCA and NSA staff takes in account all the additional ancillary support staff that is providing safe and optimum care at MMCH. A long side of nurses and PCA's, MMCH provides phlebotomist techs, EKG techs and IV team that reduces the burden of the front-line Nurses and PCA to manage the above tasks. The ratios proposed takes into account the lower CMI the institution has been experiencing, which reflects the overall acuity of the facilities patients. The frontline managers are constantly evaluating and assessing the clinical operation ensure patients are getting safe and</p>	<p>for patient care and safety. Management's recommendation for minimal staffing is not consistent with the legislation NYSHCS Law 2805-t. Sufficient staffing ensures patients receive the attention, expertise, and support they need. It allows for swift responses to emergencies, reduces the risk of errors, and improves outcomes. Insufficient staffing jeopardizes lives and compromises care quality. Management's suggestion prioritizes cost-cutting over patients. To achieve our goal, we must recognize that adequate staffing is non-negotiable. It is essential for optimal care and patient well-being. Patient safety depends on it, and management must acknowledge the</p>
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RN NIGHT SHIFT STAFFING

Name of Clinical Unit:	Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Planned average number of Registered Nurses (RN) on the unit providing direct patient care per day on the Night Shift? (Please provide a number with up to 5 digits. Ex: 101.50)	Planned total hours of RN nursing care per patient including adjustment for case mix and acuity on the Night Shift (Please provide a number with up to 5 digits. Ex: 101.50)	Planned average number of patients on the unit per day on the Night Shift? (Please provide a number with up to 5 digits. Ex: 101.50)
Stepdown	PCU - Progressive Care Unit - 12 bed Capacity	4	4.2	10.08
Critical Care	ICU - 7 Bed capacity	3	6.25	5.8
Emergency Department	911 Receiving ED - 29 Bays in the main ED and 6 Chairs in the Fast Track	6	1.8	70
Medical/Surgical	4th Floor -Medical and Surgical Unit - 24 total beds capacity with 15 beds tele capacity.	3	1.8	19.82
Medical/Surgical	3rd Floor -Medical and Surgical Unit - 41 total beds capacity with 15 beds tele capacity.	4	1.8	28.41
Medical/Surgical	2nd floor -Medical and Surgical Unit - 41 total beds capacity with 15 beds tele capacity.	4	1.8	26.55

LPN NIGHT SHIFT STAFFING

Name of Clinical Unit:	What is the planned average number of patients for which one RN on the unit will provide direct patient care per day on the Night Shift (Please provide a number with up to 5 digits. Ex: 101.50)?	Planned average number of Licensed Practical Nurses (LPN) on the unit providing direct patient care per day on the Night Shift? (Please provide a number with up to 5 digits. Ex: 101.50)
Stepdown	3	0
Critical Care	2	0
Emergency Department	7	0
Medical/Surgical	7	0
Medical/Surgical	7	0
Medical/Surgical	7	0

NIGHT SHIFT ANCILLARY STAFF

Name of Clinical Unit:	Planned total hours of LPN care per patient including adjustment for case mix and acuity on the Night Shift (Please provide a number with up to 5 digits. Ex: 101.50)	Planned average number of ancillary members of the frontline team on the unit per day on the Night Shift? (Please provide a number with up to 5 digits. Ex: 101.50)
Stepdown	0	0
Critical Care	0	0
Emergency Department	0	1
Medical/Surgical	0	0
Medical/Surgical	0	0
Medical/Surgical	0	0

NIGHT SHIFT UNLICENSED STAFFING

Name of Clinical Unit:	Planned total hours of ancillary members of the frontline team including adjustment for case mix and acuity on the Night Shift (Please provide a number with up to 5 digits. Ex: 101.50)	Planned average number of unlicensed personnel on the unit providing direct patient care per day on the Night Shift? (Please provide a number with up to 5 digits. Ex: 101.50)
Stepdown	0	2
Critical Care	0	1
Emergency Department	8	3
Medical/Surgical	0	3
Medical/Surgical	0	4
Medical/Surgical	0	4

NIGHT SHIFT ADDITIONAL RESOURCES

Name of Clinical Unit:	Planned total hours of unlicensed personnel care per patient including adjustment for case mix and acuity on the Night Shift (Please provide a number with up to 5 digits. Ex: 101.50)
Stepdown	1.6
Critical Care	1.3
Emergency Department	1.14
Medical/Surgical	1.14
Medical/Surgical	1.14
Medical/Surgical	1.14

NIGHT SHIFT CONSENSUS INFORMATION

<p>Name of Clinical Unit:</p>	<p>Description of additional resources available to support unit level patient care on the Night Shift. These resources include but are not limited to unit clerical staff, admission/discharge nurse, and other coverage provided to registered nurses, licensed practical nurses, and ancillary staff.</p>	<p>Our Clinical Staffing Committee reached consensus on the clinical staffing plan for this unit:</p>	<p>If no, Chief Executive Officer Statement in support of clinical staffing plan for this unit:</p>	<p>Statement by members of clinical staffing committee selected by the general hospital administration (management members):</p>
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Stepdown	<p>Unit Secretary - Day (7am to 3pm) and Evening Shift (3pm to 11pm), Phlebotomist are 24 hour/ 7 day coverage, Dietician/Nutritionist Day (7am - 3pm), EKG tech also 24/7 coverage, Dietary support aid Day and Evening coverage, Transporters 24/7 coverage. Supervisor on duty 24/7 Coverage. Medical Doctors 24/7 coverage, Respiratory therapist 24/7 coverage.</p>	Yes		
Critical Care	<p>Phlebotomist are 24 hour/ 7 day coverage, Dietician/Nutritionist Day (7am - 3pm), EKG tech also 24/7 coverage, Dietary support aid Day and Evening coverage, Transporters 24/7 coverage. Supervisor on duty 24/7 Coverage. Medical Doctors 24/7 coverage, Respiratory therapist 24/7 coverage.</p>	Yes		

Emergency Department	<p>Phlebotomist are 24 hour/ 7 day coverage, Dietician/Nutritionist Day (7am - 3pm), EKG tech also 24/7 coverage, Dietary support aid Day and Evening coverage, Transporters 24/7 coverage. Supervisor on duty 24/7 Coverage. Medical Doctors 24/7 coverage, Respiratory therapist 24/7 coverage.</p>	No	Yes	<p>providing safe and effective care to the patients of its community. The propose staffing ratios for nurses, PCA and NSA staff takes in account all the additional ancillary support staff that is providing safe and optimum care at MMCH. A long side of nurses and PCA's, MMCH provides phlebotomist techs, EKG techs and IV team that reduces the burden of the front-line Nurses and PCA to manage the above tasks. The ratios proposed takes into account the lower CMI the institution has been experiencing, which reflects the overall acuity of the facilities patients. The frontline managers are constantly evaluating and assessing the clinical operation ensure patients are getting safe and</p>
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<p>Medical/Surgical</p>	<p>Unit Secretary - Day (7am to 3pm) and Evening Shift (3pm to 11pm), Phlebotomist are 24 hour/ 7 day coverage, Dietician/Nutritionist Day (7am - 3pm), EKG tech also 24/7 coverage, Dietary support aid Day and Evening coverage, Transporters 24/7 coverage. Supervisor on duty 24/7 Coverage. Medical Doctors 24/7 coverage, Respiratory therapist 24/7 coverage.</p>	<p>No</p>	<p>Yes</p>	<p>providing safe and effective care to the patients of its community. The propose staffing ratios for nurses, PCA and NSA staff takes in account all the additional ancillary support staff that is providing safe and optimum care at MMCH. A long side of nurses and PCA's, MMCH provides phlebotomist techs, EKG techs and IV team that reduces the burden of the front-line Nurses and PCA to manage the above tasks. The ratios proposed takes into account the lower CMI the institution has been experiencing, which reflects the overall acuity of the facilities patients. The frontline managers are constantly evaluating and assessing the clinical operation ensure patients are getting safe and</p>
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<p>Medical/Surgical</p>	<p>Unit Secretary - Day (7am to 3pm) and Evening Shift (3pm to 11pm), Phlebotomist are 24 hour/ 7 day coverage, Dietician/Nutritionist Day (7am - 3pm), EKG tech also 24/7 coverage, Dietary support aid Day and Evening coverage, Transporters 24/7 coverage. Supervisor on duty 24/7 Coverage. Medical Doctors 24/7 coverage, Respiratory therapist 24/7 coverage.</p>	<p>No</p>	<p>Yes</p>	<p>providing safe and effective care to the patients of its community. The propose staffing ratios for nurses, PCA and NSA staff takes in account all the additional ancillary support staff that is providing safe and optimum care at MMCH. A long side of nurses and PCA's, MMCH provides phlebotomist techs, EKG techs and IV team that reduces the burden of the front-line Nurses and PCA to manage the above tasks. The ratios proposed takes into account the lower CMI the institution has been experiencing, which reflects the overall acuity of the facilities patients. The frontline managers are constantly evaluating and assessing the clinical operation ensure patients are getting safe and</p>
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<p>Medical/Surgical</p>	<p>Unit Secretary - Day (7am to 3pm) and Evening Shift (3pm to 11pm), Phlebotomist are 24 hour/ 7 day coverage, Dietician/Nutritionist Day (7am - 3pm), EKG tech also 24/7 coverage, Dietary support aid Day and Evening coverage, Transporters 24/7 coverage. Supervisor on duty 24/7 Coverage. Medical Doctors 24/7 coverage, Respiratory therapist 24/7 coverage.</p>	<p>No</p>	<p>Yes</p>	<p>providing safe and effective care to the patients of its community. The propose staffing ratios for nurses, PCA and NSA staff takes in account all the additional ancillary support staff that is providing safe and optimum care at MMCH. A long side of nurses and PCA's, MMCH provides phlebotomist techs, EKG techs and IV team that reduces the burden of the front-line Nurses and PCA to manage the above tasks. The ratios proposed takes into account the lower CMI the institution has been experiencing, which reflects the overall acuity of the facilities patients. The frontline managers are constantly evaluating and assessing the clinical operation ensure patients are getting safe and</p>
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CBA INFORMATION

<p>We have one or more collective bargaining agreements:</p>	<p>Yes</p>
<p>If yes, then:</p> <p>Our general hospital has a collective bargaining agreement with the following organizations that represent clinical staff (Select all that apply):</p> <p>**Please select association and identify staff (e.g. nurses, ancillary staff, etc.)</p>	<p>SEIU 1199</p>
<p>Our general hospital's collective bargaining agreement with SEIU 1199 expires on the following date:</p>	<p>09/01/2024 12:00 AM</p>

**The number of hospital employees
represented by SEIU 1199 is:**

600