



CLINICAL NURSE STAFFING PLAN

DEVELOPED BY: CLINICAL NURSE
STAFFING COMMITTEE

PFI Number: 0798

Health Commerce System Name: Claxton-Hepburn
Medical Center

TABLE OF CONTENTS

I. PURPOSE	3
II. LEADERSHIP RESPONSIBILITY	3
III. INTEGRATION OF PATIENT CARE AND SUPPORT SERVICE	4
A. Definition of Patient Services, Patient Care, and Patient Support	4
B. Integration of Patient Care and Support Services	4
IV. SCOPE OF SERVICE	5
A. Department of Patient Care Services	5
B. Medical/Surgical	7
C. ICU	9
D. Obstetrics	12
E. Emergency Department	14
F. Surgical Services	14
G. Adult Mental Health Unit	19
H. Children/Adolescent Mental Health Unit	24
I. Renal Services	26
J. Cancer Treatment Services	27

I. PURPOSE

The purpose of the Clinical Nurse Staffing Plan is to define, develop, implement and evaluate the hospital plan for patient care. The committee will be responsible for reviewing, assessing, and responding to complaints regarding potential violations of the adopted staffing plan, staffing variations or other concerns regarding the implementation of the staffing plan. This plan is based on the needs and rights of the patients served, and the Mission and Vision of Claxton-Hepburn Medical Center. It is applicable throughout the hospital whenever patient care is provided.

The plan contains a description of the scope of services of each department providing patient care, hours of operation, parameters governing staffing, patient assessment, care planning and patient/family/significant other education activities and collaborative efforts with other departments providing nursing services. Orientation, continuing education and proficiency of staff providing patient care is also addressed.

The Clinical Nurse Staffing Plan is reviewed at a minimum on an annual basis. A review of Performance Improvement and Risk Management findings in areas of standards compliance and problem identification and resolution; an analysis of actual staffing patterns existing and proposed patient care programs offered by the facility; information from patient, staff and physician satisfaction questionnaires and external legal and regulatory requirements are all considered.

II. LEADERSHIP RESPONSIBILITY

In collaboration with the Board of Directors and the medical staff, the administrative staff with input from the department managers is responsible for the planning, organization, direction, control and coordination of the organization. This includes coordination of financial resources, including but not limited to operating and capital budget preparation, ongoing resource allocation and monitoring of financial resources for the facility. This also includes coordination and education of medical center employees and those non-employees providing services within the facility.

The CNO - V.P., Patient Care Services is a registered nurse who is the chief nurse officer that is accountable for the planning, organization, direction, control, coordination and evaluation of patient care activities including, but not limited to the following:

1. Development of hospital-wide patient care program, policies and procedures that describe how the nursing needs of patients are assessed, evaluated and met.
2. Development and implementation of the Hospital's plan for providing nursing care.
3. Implementation of an effective and ongoing program to monitor, evaluate and improve the quality of nursing care delivered to patients.

The CNO - V.P., Patient Care Services is qualified through appropriate licensure, advanced education and management experience to assume executive authority and responsibility for directing and evaluating the hospital plan for patient care.

The chief financial officer is responsible for the planning, direction and coordination of the Medical Center's fiscal resources, including but not limited to operating and capital budget preparation, ongoing resource allocation/ monitoring and the expert resource. The chief financial officer works

collaboratively with the Board of Directors, the medical staff and all departments within the Medical Center. The responsibilities of the chief financial officer may be delegated to relevant, qualified individuals. The chief financial officer is qualified through advanced education and management experience to assume executive authority and responsibility for directing the organization's planning efforts and resource utilization.

III. INTEGRATION OF PATIENT CARE AND SUPPORT SERVICE

A. DEFINITION OF PATIENT SERVICES, PATIENT CARE AND PATIENT SUPPORT

Patient services at Claxton-Hepburn Medical Center occur through organized and systematic processes designed to ensure the delivery of safe, effective and timely care and treatment. Providing patient services and the delivery of patient care requires specialized knowledge, judgment, and skill derived from the principles of biological, physical, behavioral, psychological and medical sciences. As such, patient services will be planned, coordinated, provided, delegated and supervised by professional health care providers who recognize the unique physical, emotional and spiritual (body, mind, and spirit) needs of each person. Patient care encompasses the recognition of disease and health, patient teaching, patient advocacy, spirituality and research.

In the strictest sense, patient services are limited to those departments that have direct contact with patients providing either patient care or patient support. The full scope of patient care is provided only by those professionals who are also charged with the additional functions of patient assessment and planning patient care based on findings from the assessment. Patient care is provided primarily by licensed staff. Patient support is provided by a variety of individuals and departments, which may or may not have direct contact with the patients, but who support the care provided by the hands-on care providers.

Claxton-Hepburn Medical Certified Beds:

- Medical - Surgical - 67
- Intensive Care Unit - 10
- Obstetrics Department – 10
- Mental Health Unit – 28
- Children/Adolescent Mental Health Unit – 12

B. INTEGRATION OF PATIENT CARE AND SUPPORT SERVICES

The importance of a collaborative multi-disciplinary team approach, which takes into account the unique knowledge, judgment and skills of a variety of disciplines in achieving desired patient outcomes serves as a foundation for integration. Open lines of communication need to exist between all departments providing patient care, patient services and support services within the hospital, and as appropriate with community agencies to ensure efficient, effective and continuous patient care.

To facilitate effective interdepartmental relationships, problem solving is encouraged at the lowest levels possible within the organization. Staff should have a comfort level and be open to addressing one

another's issues and concerns and seeking mutually acceptable solutions. Managers have the authority to mutually solve problems and seek solutions within their span of control; positive interdepartmental communications are strongly encouraged as part of our philosophy.

Employees from all departments are encouraged and need to maintain open communication channels and forums with one another to ensure continuity of patient care maintenance of the patient's environment and positive patient outcomes. Regular contact should occur between all departments ensuring open lines of communication.

IV. SCOPE OF SERVICE

A. DEPARTMENT OF PATIENT CARE SERVICES

Patient Care Services is under the direction of the CNO – V.P. Patient Care Services.

Nursing care is defined as an organized and systematic process provided by or under the direction of a registered nurse. The practice of nursing encompasses providing to patients and their significant others, care that requires specialized knowledge, judgment and skill derived from the principles of biological, physical, behavioral, social and nursing sciences. As a profession, nursing serves as a foundation for health: optimizing/restoring/maintaining the balance of body, mind and spirit of our patients. As such, nursing encompasses the recognition of priority health care needs, health care teaching, and patient advocacy. Nursing care is accomplished through the execution of the nursing process; patient teaching, administering, supervising, delegating, and evaluating nursing care and practice; implementation of nursing standards of patient care.

Nursing services are provided in inpatient “nursing” units as well as in a variety of settings throughout the organization. Nursing's services are delegated to and from (interdependent and independent) other health care services to assure an interdisciplinary approach. Some nursing care services are provided in departments that do not have direct line accountability to the vice president for Patient Care Services. In as much as the CNO - V.P., Patient Care Services is held accountable for the standards of care, performance improvement, policies and procedures, staff competency and nursing licensure in all areas where nursing care is provided, collaborative activities have been established to ensure that this occurs.

STAFFING PLAN: It is the responsibility of the CNO - V.P., Patient Care Services in conjunction with the department managers and the clinical nurse staffing committee to develop, approve and implement guidelines for assignment of nursing staff members. The mechanism used for determining staffing and assignment of nursing staff among units and departments includes consideration of:

1. Requirements and qualifications for employment as a nursing staff member.
2. The process used and elements considered when assigning patient care responsibilities
3. National statistics and benchmarking data.
4. The mechanism used for determining the deployment of nursing staff members among departments.

MINIMUM STAFFING REQUIREMENTS Each general nursing unit must be staffed with at least one Registered Nurse. Special Care Units must be staffed with a minimum of two staff members with at least one Registered Nurse. Support staff are assigned to units to complement the professional staff assigned. This mix serves as a base for and is integrated into unit-based standards.

ASSIGNMENT OF PERSONNEL

1. **Responsibility** It is the responsibility of the vice president for Patient Care Services, nursing supervisors, nurse manager/directors or clinical coordinator (where appropriate) to make the nurse/patient shift assignments.
2. **Considerations** Patient care responsibilities are assigned to nursing staff based on four variables: the patient acuity, the environment in which nursing care is provided, staff competency and supervision required by and available to each nursing staff member.

These four variables translate in to specific considerations for assignment which collectively revolve around a central theme: Insuring that staff only care for patients they are competent to care for. The following considerations influence assignments:

- Complexity of patient's condition and nursing care needs.
- Dynamics of the patient's status and frequency of nursing care activities.
- Complexity of assessment required by the patient, including the knowledge and skills required of a nursing staff member to effectively complete the required assessment.
- Type of technology required for care as defined in patient care protocols such as chest tubes, ventilators, artificial airways, invasive lines and as communicated in shift report.
- Supervisory requirements of the assigned personnel determined by performance monitoring, performance appraisal and PI findings.
- Relevant infection control and safety issues, including availability of staff to respond to emergency situations, codes blue, etc.
- Age of the population served. Ages served by the Department of Nursing include neonates, pediatrics, adolescent, adult and geriatric.

SUFFICIENT STAFFING: Staffing, both in numbers and competency will be sufficient at all items to insure that: A registered nurse assesses, prescribes, delegates and coordinates care of all patients; all patients assigned to a non-RN team member are also co-assigned to an RN to assure the following mechanisms are in place:

- a. Assessment and meeting of patient care needs occurs on admission, reassessment, during stay, on transfer and at discharge;
- b. Assessment of patients takes place prior to assignment of staff;
- c. Infection control measures are strictly adhered to in staff assignments;
- d. Staff capability is matched to patient needs;
- e. Emergency and safety patient requirements are met.

Adequate resources in the form of support services will be available to allow nursing staff to meet the nursing care needs of patients, significant others and family members. The usual form of these support services is both human and material. Staff will have the following resources for support:

- Nutritional Services
- Unit Clerk
- Pharmacy
- Admitting
- Laboratory
- Respiratory Therapist
- Volunteer Services
- Cardiology
- Radiology
- Physical therapy
- Wound/Ostomy
- Occupational therapy
- Phlebotomy

B. MEDICAL/SURGICAL

SCOPE OF CARE: The Medical/Surgical unit located on the second floor of the hospital. The unit is divided into two pods: “2 West” has the capability to house 21 patients and “2 East” has the capability to house 22 patients. The unit serves pediatric and adult patients with medical and surgical needs, Alternate level of care and/or swing bed patients requiring skilled or custodial care, observation patients and hospice patients requiring end-of-life care. The total Medical/Surgical average daily census is 23, average length of stay is approximately 4 days.

The units are staffed with RNs, LPNs, CNAs, NAs, ward clerks who work collaboratively with the Education Department, Medical Staff, Dietary, Cardiology, Respiratory Therapy, Case Management, Radiology, Pharmacy, and Rehabilitation Services in addition to the resources described above to provide individualized patient care. Staffing is determined by census and patient care needs.

Census	Time	RN	LPN	C.N.A.	WC	Total Staff	HPPD 19	HPPD 20	HPPD 21	HPPD 22
19 to 22	0700-1930	4		3	1	8				
	1900-0730	3	2	3	0	8				
	Hours	80.5	23	69	11.5	184	9.68	9.2	8.76	8.36
Census	Time	RN	LPN	C.N.A.	WC	Total Staff	HPPD 16	HPPD 17	HPPD 18	
16 to 18	0700-1930	4		2	1	7				
	1900-0730	2	2	2	0	6				
	Hours	69	23	46	11.5	149.5	9.34	8.79	8.3	

Census	Time	RN	LPN	C.N.A.	WC	Total Staff	HPPD 12	HPPD 13	HPPD 14	HPPD 15
12 to 15	0700-1930	3		2	1	6				
	1900-0730	2	2	2	0	6				
	Hours	57.5	23	46	11.5	138	11.5	10.61	9.8	9.2

Census	Time	RN	LPN	C.N.A.	WC	Total Staff	HPPD 9	HPPD 10	HPPD 11
9 to 11	0700-1930	2		1	1	4			
	1900-0730	2		2	0	4			
	Hours	46	0	34.5	11.5	92	10.22	9.2	8.36

Census	Time	RN	LPN	C.N.A.	WC	Total Staff	HPPD 7	HPPD 8
7 to 8	0700-1930	2		1	0	3		
	1900-0730	2		1	0	3		
	Hours	46	0	23	0	69	9.85	8.6

Census	Time	RN	LPN	C.N.A.	WC	Total Staff	HPPD 1	HPPD 2	HPPD 3	HPPD 4	HPPD 5	HPPD 6
1 to 6	0700-1930	1		1		2						
	1900-0730	1		1	0	2						
	Hours	23		23	0	46	46	23	15.3	11.5	9.2	7.6

STAFFING PATTERNS

- a. **Number of Staff:** Nursing units are staffed according to the average daily census of the unit and the hours of nursing care budgeted for each patient.
- b. **Staffing Mix:** Consideration is given in the staffing plan to the utilization of registered nurses, licensed practical nurses and nursing attendants according to identified patient requirements for nursing care and the scope of nursing practice permitted by applicable law and regulation. The care of all patients will be prescribed, delegated and coordinated by an RN, even though the care itself may be provided by another team member. Staffing patterns are used to insure optimum patient care over a 24 hour period.

C. INTENSIVE CARE UNIT

SCOPE OF CARE: The ICU is a 10 bed unit. The ICU provides highly skilled nursing care to patients of various age groups under the direction of the attending physician. A comprehensive assessment is completed by the assigned RN on admission and patient needs are identified. Ongoing skilled nursing assessment and reassessment is provided during the patient’s length of stay in ICU. Nursing staff are responsible for coordinating the interdisciplinary aspects of the patient’s care as well as providing evidence based nursing interventions as appropriate to the identified needs of the patient. Patients needing more intensive services not provided by CHMC will be transferred to tertiary care.

Staffing Matrix

Census	Time	RN	CCT	Total Staff	Direct HPPD
10	0700-1900	5/6	1/0	6	
	1900-0700	5/6	1/0	6	
		120-144 Hours	24-0 Hours	144 Hours	14.4 Hours

Census	Time	RN	CCT	Total Staff	Direct HPPD
9	0700-1930	5	1/0	6/5	
	1900-0730	5	1/0	6/5	
		120 Hours	24-0 Hours	144-120 Hours	16-13.3 Hours

Census	Time	RN	CCT	Total Staff	Direct HPPD
8	0700-1930	4/5	1/0	5	
	1900-0730	4/5	1/0	5	

		96-120 Hours	24-0 Hours	120	15 Hours
--	--	--------------	------------	-----	----------

Census	Time	RN	CCT	Total Staff	Direct HPPD
7	0700-1930	4	1/0	5/4	
	1900-0730	4	1/0	5/4	
		96 Hours	24-0 Hours	120-96 Hours	17.1 - 13.7

Census	Time	RN	CCT	Total Staff	Direct HPPD
6	0700-1930	3/4	1/0	4	
	1900-0730	3/4	1/0	4	
		72-96 Hours	24-0 Hours	96 Hours	16 Hours

Census	Time	RN	CCT	Total Staff	Direct HPPD
5	0700-1930	3	1/0	4/3	
	1900-0730	3	1/0	4/3	
		72 Hours	24-0 Hours	96-72 Hours	19.2-14.4

Census	Time	RN	CCT	Total Staff	Direct HPPD
4	0700-1930	2/3	1/0	3	

	1900-0730	2/3	1/0	3	
		48-72 Hours	24-0 Hours	72 Hours	18 Hours

Census	Time	RN	CCT	Total Staff	Direct HPPD
3	0700-1930	2	1/0	3/2	
	1900-0730	2	1/0	3/2	
		48 Hours	24-0 Hours	72-48 Hours	24-16 Hours

Census	Time	RN	CCT	Total Staff	Direct HPPD
2	0700-1930	1/2	1/0	2	
	1900-0730	1/2	1/0	2	
		24-48 Hours	24-0 Hours	48 Hours	24 Hours

Census	Time	RN	CCT	Total Staff	Direct HPPD
1	0700-1930	1/2	1/0	2	
	1900-0730	1/2	1/0	2	
		24-48 Hours	24-0 Hours	48 Hours	48 Hours

Census	Time	RN	CCT	Total Staff	Direct HPPD
--------	------	----	-----	-------------	-------------

0	0700-1930	1	0	1	
	1900-0730	1	0	1	
		24 HOURS	0 Hours	2 Hours	N.A

Staffing Patterns:

- 1 RN to 2 ICU patients
- 1 RN to 1 ICU patient and 2 Med/Surg Convenience patients
- 1 RN to 4 Med/Surg Convenience patients
- 1 RN to 1 ICU patient and monitors
- 1 RN to 1 Med/Surg Convenience patient and monitors

Notes to Consider:

- 1 to 1 patients must be 1 to 1 for both physical and psychiatric patients (To be determined by manager/supervisor and charge nurse/staff nurse and patient’s orders)
- Changing assignments to accommodate staffing changes (not changing assignments during the shift to accommodate staffing)
- Staff breaks coverage

STAFFING PLAN: The ICU is staffed according to a 1 RN to 2 patient ratio. On occasion, the RN to patient ratio changes to 1:3, or 1: 4 if the patient’s status has changed from “ICU, and/or is being boarded in ICU for hospital convenience. Monitor Tech/Ward Clerks are utilized for the observation of patients on telemetry.

D. OBSTETRICS

SCOPE OF CARE: The Obstetric unit and Nursery are located on the fourth floor of the Hospital. The unit serves pregnant and postpartum women, infants under 28 days of life and Patients having gynecologic surgery. The unit has three birthing suites, two observation rooms, and nine postpartum beds available. Average stay range is two to four days.

The unit is staffed with two RNs who work collectively with Pharmacy, Radiology, Dietary, Respiratory Therapy, Medical Staff, the Education department and Case management to provide customized individual care to meet the needs of our patients.

The nursing staff provide the following services under the direction of the physician: assessment of outpatients that have reached 20 weeks or more gestation, outpatient injections, testing and IV therapy for pregnant women, assessment and continued surveillance of maternal and fetal status during the labor, delivery and recovery process, assessment and care during the postpartum period, assessment and support for breastfeeding dyads and assessment and care of post-operative gynecology patients.

As a Level 1 Nursery our scope of care allows us to provide assessment and care for normal newborns. Newborns requiring specialty care will be stabilized and transport will be facilitated to

the appropriate level of care. Also provided for newborns under 28 days; readmission for noninfectious conditions ie: jaundice requiring phototherapy or failure to thrive. Repeat audiology testing is also available for outpatient newborns.

OB Staffing:

Number to patient ratio guidelines are based on regional and national standards. CHMC has adopted these guidelines from AWHONN

- 2 Nurses are scheduled 12 hour shifts
- Unit assignments are made based on the number and acuity needs of the patient and experience levels of the nursing staff
- Outpatient services in collaboration with physician are completed when clinic resources are exceeded
- Supervisor must be kept up-to-date regarding patient census and activity when determining staffing needs

Antepartum:

- Hospitalized patients in stable condition 1:3
- Hospitalized patients in unstable condition 1:1, as a level 1 facility, unstable patients should be reviewed for potential transport to higher level

Intrapartum:

- Patient in labor with minimal or no pharmacologic pain relief 1:1
- Patient in second stage labor 1:1
- Patient with medical or obstetrical complications 1:1
- Induction or augmentation of labor 1:1
- Coverage for initiating epidural and maintaining epidural 1:1

Postpartum:

- Immediate post-partum 1:1 for the mother, second 1:1 for baby. Once critical elements of care completed mother nurse may accept care of newborn
- Critical elements for mother: initial assessment, repair of the perineum, and hemodynamically stable
- Critical elements for newborn: initial assessment and Apgar with normal limits, initial newborn medication, identification bracelets

Newborns and Couplet Care:

- Recently born infants and those requiring close observation 1:4
- Unstable infants and infants waiting transport 1:1
- Stable mother-newborn couplet care 1:3 couplets

STAFFING PLAN: Obstetrics is staffed with 2 registered nurses each shift. Variations in census or acuity are addressed by the charge nurse, nurse manager or supervisor.

E. EMERGENCY DEPARTMENT (ED)

SCOPE OF CARE: The Claxton-Hepburn Medical Center Emergency Department is a 16 bed unit (with a 3 bed Mental Health area). This Emergency Department is the 939 hospital for St. Lawrence County. This is not a designated trauma center, patients needing a higher level of care are transferred to a tertiary care center. This unit is a non-census driven unit with a basic staffing plan based on prior

history visits. When required additional staffing is readily available for ER assistance.

	0700-1100	11:00- 16:00	16:00-1900	1900-2300	23:00-04:00	04:00-0700
Ward Clerk	0	1	1	1	0	0
ESA	1	1	1	1	1	1
Charge RN/Triage/Patient assignment	1	1	1	1	0	0
ER Registered RN	2	3	3	2	2	2
Mental Health RN	1	1	1	0	0	0
Mental Health Workers	2	2	2	2	2	2
Psychosocial Assessor	1	1*	1*	1*	1*	1

F. SURGICAL SERVICES:

SCOPE OF CARE: Surgical services is divided into three separate floors within the facility. 1st floor surgical unit contains 3 OR room and 6 ACU/PACU bays. 1nd floor endoscopy unit contains 2 OR Rooms and 8 ACU rooms with capacity for 16 beds. 3rd floor surgical unit contains 3 OR rooms and 4 ACU rooms with capacity of 8 beds. PACU capacity is 4 bays. All ACU RN’s are skilled cover pre-op, post-op, special procedures, and PACU as needed. All OR RN’s, scrub techs and LPN’s are skilled to ocver OR and special procedures. OR Scheduled cases are finalized the day prior and all assignments are made accordingly. There is also a PAS (Pre-admission screener) staffed. RN’s, OR Scrub Tech’s, LPN’s and central sterile take call after hours and on weekends on a rotational basis. PACU on call commitment is 1:10 weekends/ 2 shifts per 4 weeks. OR Runs a 3 block schedule on a 4 week rotation. OR runs a 4 block schedule on Friday of week 4. OR block schedule is reviewed every month in SEC (surgical executive committee). If the blocks change, the schedule would fluctuate accordingly. Surgical services consults with radiology, lab, cardiology, PT, respiratory, renal, Cancer Treatment Center, and Diabetes/Wound.

OR Week 1	Monday		Tuesday		Wednesday		Thursday		Friday		Saturday	Sunday
Staff	Day	On Call	Day	On Call	Day	On Call	Day	On Call	Day	On Call	On Call	On Call
RN 0730 -1715	6	2	8	2	7	2	6	2	6	2	2	2
LPN 0645-1715	1		1		1		1		1			
Scrub Tech 0645-1715	1		1		1		1		1			
ORA 0700-1500	2		2		2		2		2			
Central Sterile 0730-1530	2		2		2		2		2		1	1

Central Sterile 1000-1800	1		1		1		1		1			
Central Sterile 1200-2000	1		1		1		1		1			
Chart Preparation Clerk	1		1		1		1		1			
Total Staff	15	2	17	2	16	2	15	2	15	2	3	3
Total staff Hours Worked	128 Hours	28.5	146.5 Hours	28.5	132.25 Hours	28.5	128 Hours	28.5	128 Hours	28.5	72 Hours	72 Hours

OR Week 2	Monday		Tuesday		Wednesday		Thursday		Friday		Saturday	Sunday
Staff	Day	On Call	Day	On Call	Day	On Call	Day	On Call	Day	On Call	On Call	On Call
RN 0730 -1715	6	2	7	2	6	2	6	2	7	2	2	2
LPN 0645-1715	1		1		1		1		1			
Scrub Tech 0645-1715	1		1		1		1		1			
ORA 0700-1500	2		2		2		2		2			
Central Sterile 0730-1530	2		2		2		2		2		1	1
Central Sterile 1000-1800	1		1		1		1		1			
Central Sterile 1200-2000	1		1		1		1		1			
Chart Preparation Clerk	1		1		1		1		1			
Total Staff	15	2	16	2	15	2	15	2	16	2	3	3
Total staff Hours Worked	128 Hours	28.5	132.5 Hours	28.5	128 Hours	28.5	128 Hours	28.5	132.5 Hours	28.5	72 Hours	72 Hours

OR Week 3	Monday		Tuesday		Wednesday		Thursday		Friday		Saturday	Sunday
Staff	Day	On Call	Day	On Call	Day	On Call	Day	On Call	Day	On Call	On Call	On Call
RN 0730 -1715	6	2	7	2	6	2	5	2	6	2	2	2
LPN 0645-1715	1		1		1		1		1			
Scrub Tech 0645-1715	1		1		1		1		1			
ORA 0700-1500	2		2		2		2		2			

Central Sterile 0730-1530	2		2		2		2		2		1	1
Central Sterile 1000-1800	1		1		1		1		1			
Central Sterile 1200-2000	1		1		1		1		1			
Chart Preparation Clerk	1		1		1		1		1			
Total Staff	15	2	16	2	15	2	14	2	15	2	3	3
Total staff Hours Worked	128 Hours	28.5	132.5 Hours	28.5	128 Hours	28.5	118.75 Hours	28.5	128 Hours	28.5	72 Hours	72 Hours

OR Week 4	Monday		Tuesday		Wednesday		Thursday		Friday		Saturday	Sunday
Staff	Day	On Call	Day	On Call	Day	On Call	Day	On Call	Day	On Call	On Call	On Call
RN 0730 -1715	6	2	8	2	7	2	6	2	8	2	2	2
LPN 0645-1715	1		1		1		1		1			
Scrub Tech 0645-1715	1		1		1		1		1			
ORA 0700-1500	2		2		2		2		2			
Central Sterile 0730-1530	2		2		2		2		2		1	1
Central Sterile 1000-1800	1		1		1		1		1			
Central Sterile 1200-2000	1		1		1		1		1			
Chart Preparation Clerk	1		1		1		1		1			
Total Staff	15	2	17	2	16	2	15	2	17	2	3	3
Total staff Hours Worked	128 Hours	28.5	146. Hours	28.5	132.25 Hours	28.5	128 Hours	28.5	146.5 Hours	28.5	72 Hours	72 Hours

ACU Week 1	Monday		Tuesday		Wednesday		Thursday		Friday		Saturday	Sunday
Staff	Day	On Call	Day	On Call	Day	On Call	Day	On Call	Day	On Call	On Call	On Call
RN 0700-1645	7	1	7	1	6	1	6	1	6	1	1	1
RN 0800-1600 PAS	2		2		2		2		2			
RN 0815-1800	2		2		2		2		2			
NA 0800-1600	2		2		2		2		2			

Total Staff	13	1	13	1	12	1	12	1	12	1		
Total staff Hours Worked	113.25 Hours	14.25	113.25 Hours	14.25	104 Hours	14.25	104 Hours	14.25	104 Hours	14.25	24 Hours	24 Hours

ACU Week 2	Monday		Tuesday		Wednesday		Thursday		Friday		Saturday	Sunday
Staff	Day	On Call	Day	On Call	Day	On Call	Day	On Call	Day	On Call	On Call	On Call
RN 0700-1645	7	1	7	1	7	1	8	1	7	1	1	1
RN 0800-1600 PAS	2		2		2		2		2			
RN 0815-1800	2		2		2		2		2			
NA 0800-1600	2		2		2		2		2			
Total Staff	13	1	13	1	13	1	14	1	13	1		
Total staff Hours Worked	113.25 Hours	14.25	113.25 Hours	14.25	113.25 Hours	14.25	122.5 Hours	14.25	113.25 Hours	14.25	24 Hours	24 Hours

ACU Week 3	Monday		Tuesday		Wednesday		Thursday		Friday		Saturday	Sunday
Staff	Day	On Call	Day	On Call	Day	On Call	Day	On Call	Day	On Call	On Call	On Call
RN 0700-1645	7	1	7	1	6	1	6	1	6	1	1	1
RN 0800-1600 PAS	2		2		2		2		2			
RN 0815-1800	2		2		2		2		2			
NA 0800-1600	2		2		2		2		2			
Total Staff	13	1	13	1	12	1	12	1	12	1		
Total staff Hours Worked	113.25 Hours	14.25	113.25 Hours	14.25	104 Hours	14.25	104 Hours	14.25	104 Hours	14.25	24 Hours	24 Hours

ACU Week 4	Monday		Tuesday		Wednesday		Thursday		Friday		Saturday	Sunday
Staff	Day	On Call	Day	On Call	Day	On Call	Day	On Call	Day	On Call	On Call	On Call
RN 0700-1645	7	1	7	1	6	1	6	1	7	1	1	1
RN 0800-1600 PAS	2		2		2		2		2			
RN 0815-1800	2		2		2		2		2			
NA 0800-1600	2		2		2		2		2			
Total Staff	13	1	13	1	12	1	12	1	13	1		
Total staff Hours Worked	113.25 Hours	14.25	113.25 Hours	14.25	104 Hours	14.25	104 Hours	14.25	113.25 Hours	14.25	24 Hours	24 Hours

G. ADULT MENTAL HEALTH INPATIENT UNIT:

SCOPE CARE: The Mental Health Unit is a 28-bed acute care inpatient psychiatric unit. The unit is certified by the New York State Office of Mental Health and is authorized to accept voluntary, involuntary, and emergency adult admissions. The unit works collaboratively with the Emergency Department personnel to provide 24-hour emergency mental health services. The Mental Health Unit provides psychiatric evaluations and treatment of patients age 18 and older who suffer from a mental illness. The Mean Health Unit provides a safe and comfortable environment where confidentiality and privacy are maintained. The Mental Health Unit’s goal is to assist each individual to return to the community as soon as possible with increased self-confidence and coping abilities. A team approach includes a psychiatrist who leads the treatment team, a treatment coordinator, and a registered nurse. The team conducts individual psychotherapy, group peer therapy, recreational activities and medication management. The unit is staffed with licensed psychiatrists, consulting psychologists, nurse practitioner, registered nurses, licensed practical nurses, treatment coordinators, and mental health workers.

Census	Time	RN	LPN	MHW	Total Staff	HPPD 28
28	0730-2000	2	2	4	8	
	1100-2330	1	-	-	1	
	1930-0800	2	0	4	6	
	Hours	57.5	23	92	172.5	6.16

Census	Time	RN	LPN	MHW	Total Staff	HPPD 27
27	0730-2000	2	2	4	8	
	1100-2330	1	-	-	1	
	1930-0730	2	0	4	6	
	Hours	57.5	23	92	172.5	6.39

Census	Time	RN	LPN	MHW	Total Staff	HPPD 26
26	0730-2000	2	2	4	8	
	1100-2330	1	-	-	1	
	1930-0730	2	0	4	6	
	Hours	57.5	23	92	172.5	6.63

Census	Time	RN	LPN	MHW	Total Staff	HPPD 25
25	0730-2000	2	2	4	8	
	1100-2330	1	-	-	1	
	1930-0730	2	0	4	6	
	Hours	57.5	23	92	172.5	6.9

Census	Time	RN	LPN	MHW	Total Staff	HPPD 24
24	0730-2000	2	2	4	8	
	1100-2330	1	-	-	1	
	1930-0730	2	0	4	6	
	Hours	57.5	23	92	172.5	7.19

Census	Time	RN	LPN	MHW	Total Staff	HPPD 23
23	0730-2000	2	2	4	8	
	1100-2330	1	-	-	1	
	1930-0730	2	0	4	6	
	Hours	57.5	23	92	172.5	7.5

Census	Time	RN	LPN	MHW	Total Staff	HPPD 22
22	0730-2000	2	2	4	8	
	1100-2330	1	-	-	1	
	1930-0730	2	0	4	6	
	Hours	57.5	23	92	172.5	7.84

Census	Time	RN	LPN	MHW	Total Staff	HPPD 21
21	0730-2000	2	1	3	6	
	1100-2330	0	-	-	0	
	1930-0730	2	0	3	5	
	Hours	46	11.5	69	126	6

Census	Time	RN	LPN	MHW	Total Staff	HPPD 20
20	0730-2000	2	1	3	6	
	1100-2330	0	-	-	0	
	1930-0730	2	0	3	5	
	Hours	46	11.5	69	126	6.3

Census	Time	RN	LPN	MHW	Total Staff	HPPD 19
19	0730-2000	2	1	3	6	
	1100-2330	0	-	-	0	
	1930-0730	2	0	3	5	
	Hours	46	11.5	69	126	6.63

Census	Time	RN	LPN	MHW	Total Staff	HPPD 18
18	0730-2000	2	1	3	6	
	1100-2330	0	-	-	0	

	1930-0730	2	0	3	5	
	Hours	46	11.5	69	126	7
Census	Time	RN	LPN	MHW	Total Staff	HPPD 17
17	0730-2000	2	1	3	6	
	1100-2330	0	-	-	0	
	1930-0730	2	0	3	5	
	Hours	46	11.5	69	126	7.41
Census	Time	RN	LPN	MHW	Total Staff	HPPD 16
16	0730-2000	2	1	3	6	
	1100-2330	0	-	-	0	
	1930-0730	2	0	3	5	
	Hours	46	11.5	69	126	7.87
Census	Time	RN	LPN	MHW	Total Staff	HPPD 15
15	0730-2000	2	1	3	6	
	1100-2330	0	-	-	0	
	1930-0730	2	0	3	5	
	Hours	46	11.5	69	126	8.4
Census	Time	RN	LPN	MHW	Total Staff	HPPD 14
14	0730-2000	2	0	2	4	
	1100-2330	0	-	-	0	
	1930-0730	2	0	3	5	
	Hours	46	0	57.5	103.5	7.39
Census	Time	RN	LPN	MHW	Total Staff	HPPD 13
13	0730-2000	2	0	2	4	
	1100-2330	0	-	-	0	
	1930-0730	2	0	3	5	
	Hours	46	0	57.5	103.5	7.96
Census	Time	RN	LPN	MHW	Total Staff	HPPD 12
12	0730-2000	2	0	2	4	
	1100-2330	0	-	-	0	
	1930-0730	2	0	3	5	
	Hours	46	0	57.5	103.5	8.62

Census	Time	RN	LPN	MHW	Total Staff	HPPD 11
11	0730-2000	2	0	2	4	
	1100-2330	0	-	-	0	
	1930-0730	2	0	3	5	
	Hours	46	0	57.5	103.5	9.4
Census	Time	RN	LPN	MHW	Total Staff	HPPD 10
10	0730-2000	2	0	2	4	
	1100-2330	0	-	-	0	
	1930-0730	2	0	3	5	
	Hours	46	0	57.5	103.5	10.35
Census	Time	RN	LPN	MHW	Total Staff	HPPD 9
9	0730-2000	2	0	2	4	
	1100-2330	0	-	-	0	
	1930-0730	2	0	3	5	
	Hours	46	0	57.5	103.5	11.5
Census	Time	RN	LPN	MHW	Total Staff	HPPD 8
8	0730-2000	2	0	2	4	
	1100-2330	0	-	-	0	
	1930-0730	2	0	3	5	
	Hours	46	0	57.5	103.5	12.93
Census	Time	RN	LPN	MHW	Total Staff	HPPD 7
7	0730-2000	2	0	1	3	
	1100-2330	0	-	-	0	
	1930-0730	2	0	2	4	
	Hours	46	0	34.5	80.5	11.5
Census	Time	RN	LPN	MHW	Total Staff	HPPD 6
6	0730-2000	2	0	1	3	
	1100-2330	0	-	-	0	
	1930-0730	2	0	2	4	
	Hours	46	0	34.5	80.5	13.4
Census	Time	RN	LPN	MHW	Total Staff	HPPD 5

5	0730-2000	2	0	0	2	
	1100-2330	0	-	-	0	
	1930-0730	2	0	1	3	
	Hours	46	0	11.5	57.5	11.5
Census	Time	RN	LPN	MHW	Total Staff	HPPD 4
4	0730-2000	2	0	0	2	
	1100-2330	0	-	-	0	
	1930-0730	2	0	1	3	
	Hours	46	0	11.5	57.5	14.4
Census	Time	RN	LPN	MHW	Total Staff	HPPD 3
3	0730-2000	2	0	0	2	
	1100-2330	0	-	-	0	
	1930-0730	2	0	1	3	
	Hours	46	0	11.5	57.5	19.2
Census	Time	RN	LPN	MHW	Total Staff	HPPD 2
2	0730-2000	2	0	0	2	
	1100-2330	0	-	-	0	
	1930-0730	2	0	0	2	
	Hours	46	0	0	46	23
Census	Time	RN	LPN	MHW	Total Staff	HPPD 1
1	0730-2000	2	0	0	2	
	1100-2330	0	-	-	0	
	1930-0730	2	0	0	2	
	Hours	46	0	0	46	46

STAFFING PLAN: The Mental Health Center is fully staffed with licensed psychiatrists, consulting psychologist, registered nurses, licensed practical nurses, treatment coordinators, mental health workers an activities coordinator.

H. CHILDREN/ADOLESCENT MENTAL HEALTH INPATIENT UNIT:

Scope of Care: The Children and Adolescent Behavioral Health Unit is a 12 bed secure, acute inpatient psychiatric unit licensed by the NY State Office of Mental Health. Our Unit serves patients ages 5-17 who are expecting a crisis which is serious enough to influence his/her safety or the safety of others. The Children and Adolescent unit has the authority to admit child and adolescent patients on a voluntary, involuntary or an

emergency legal basis. We treat a variety of psychiatric conditions, including but not limited to, Major Depression, ADHD, Anxiety Disorders, Bipolar Disorder, Oppositional Defiant Disorder, and Schizophrenia.

Our program focuses on patient and family centered care while utilizing evidence based Trauma Informed Care. Our multidisciplinary team will focus on providing the best care to your child. Treatment will include group and individual counseling, education, family therapy, recreational, skill building and discharge planning. We will focus on providing treatment through skill-building, problem solving, and building life skills. The Children and Adolescent Behavioral Health Unit utilizes Cognitive Behavioral Therapy and well as Dialectical Behavioral Therapy. Groups will be used to teach coping skills, addressing safety issues and learning alternative ways to deal with feelings and emotions.

Treatment team includes the following:

- Psychiatrist/Psychiatric NP
- Social Worker's
- Occupational Therapist
- Family Peer Advocate
- Utilization Review/Discharge Planner
- Teacher
- Psychiatric Nurses
- Mental Health Workers

The Children and Adolescent Behavioral Health Unit utilizes LearnWell Education who provides the educational component to our program. LearnWell coordinates with the child's home school to ensure the patient continues with his/her educational requirements while admitted to CHMC Children and Adolescent Behavioral Health Unit.

Census	Time	RN	LPN	MHW	Total Staff	HPPD 12	HPPD 11	HPPD 10
12-10	0700-1930	2	0.75	4	6.75			
	1900-0730	2	0.25	3	5.25			
	Hours	46	11.5	80.5	138	11.5	12.5	13.8
Census	Time	RN	LPN	MHW	Total Staff	HPPD 10	HPPD 9	HPPD 8
10-8	0700-1930	2	0.75	4	6.75			
	1900-0730	2	0.25	3	5.25			
	Hours	46	11.5	80.5	138	13.8	15.3	17.25
Census	Time	RN	LPN	MHW	Total Staff	HPPD 8	HPPD 7	HPPD 6

8-6	0700-1930	2	0	3	5			
	1900-0730	2	0	3	5			
	Hours	46	0	69	115	14.37	16.4	19.16
Census	Time	RN	LPN	MHW	Total Staff	HPPD 6	HPPD 5	HPPD 4
6-4	0700-1930	2	0	3	4.75			
	1900-0730	2	0	2	3.75			
	Hours	46	0	57.5	103.5	17.25	20.7	25.8
Census	Time	RN	LPN	MHW	Total Staff	HPPD 4	HPPD 3	HPPD 2
4-2	0700-1930	2	0	2	3			
	1900-0730	2	0	2	3			
	Hours	46	0	46	92	23	31.3	46
Census	Time	RN	LPN	MHW	Total Staff	HPPD 2	HPPD 1	HPPD 0
2-0	0700-1930	2	0	1	2			
	1900-0730	2	0	1	2			
	Hours	46	0	23	46	23	46	46

STAFFING PLAN: The Mental Health Center is fully staffed with licensed psychiatrists, consulting psychologist, registered nurses, licensed practical nurses, treatment coordinators, mental health workers and a psycho-education coordinator.

I. RENAL SERVICES:

Hemodialysis	Monday		Tuesday		Wednesday		Thursday		Friday		Saturday		Sunday
	Day	On Call	Day	On Call	Day	On Call	Day	On Call	Day	On Call	Day	On Call	On Call
Staff													
RN 0600-1600	3	1	3	1	3	1	3	1	3	1	3	1	1
LPN 0600-1600	3		3		3		4		4		4		
PCT 0600-1600	1		1		1		0		0		0		0
PCT 0430-1230	1		1		1		1		1		1		
Secretary 0600-1400	1		1		1		1		1				
Social Worker 0700-1500	1		1		1		1		1				

Dietician 0700-1500	1		1		1		1		1				
CAPD 0700-1500RN	1		1		1		1		1				
Home Nxst RN 0700-1500	1		1	1	1	1	1	1	1	1			
Mini Unit RN 0600-1600	1		1		1		1		1				
											1		
Total Staff	14	14	14	14	14	14	14	14	14	14	6	14	24
Total Staff Hours	112		112		112		112		112		72		24

Renal Center Staffing: Renal Center has at present time 82 patients, 23 on a home modality, 59 are chronic in center patients. Dialysis coverage 24/7 for emergent care. Mini-unit that covers hospitalized patients. Last year over 560 treatments. Coverage not only our patients but St. Lawrence County. Staffing consists of Director, 2 Nephrologists, Patient Coordinator, Dietician, Social Workers, RN, LPN, Patient Care Technician, and NxStage RN. All Full-time and part-time RN's are trained to work in the mini-unit and cover the on-call. Patient Care Technician's open the unit at 04:30am, RN and LPN's start at 6am, the day ends at 14:00pm. Days of operations are Monday-Saturday, closed on Sunday's.

J. CANCER TREATMENT:

Radiation							
Staff	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
RN	1	1	1	1	1	0	0
Radiation Therapist	2	2	2	2	2	0	0
Dosimetrist	1	1	1	1	1	0	0
Total Staff:	4	4	4	4	4	0	0
Medical Oncology							
Staff	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
RN	4	4	4	4	4	0	0
Medical Assistant	2	2	2	2	2	0	0
Total Staff:	6	6	6	6	6	0	0
Infusion							
Staff	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

RN	5	5	5	5	5	0	0
Total Staff:	5	5	5	5	5	0	0
Support Staff							
Staff	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Clerical	11	11	11	11	11	0	0
Social Services	1	1	1	1	1		
Pharmacy	2	2	2	2	2	0	0
Dietician	1	1	1	1	1	0	0
Environmental	1	1	1	1	1	0	0
Total Staff:	16	16	16	16	16	0	0
TOTAL CENTER STAFF:	31	31	31	31	31	0	0

Cancer Treatment Staffing: The Cancer Treatment Center is comprised for 4 distinct service areas: Medical Oncology, Infusion, Radiation Oncology, and Radiation Treatment. The center is open Monday-Friday and maintains a full schedule on all modalities from 7:00 am - 4:00 pm with additional appointments in the evening hours as needed. The center is closed on weekends and holidays but does make special arrangements for treatments on the off hours as needed. There are 13 chemotherapy chairs, two of which are in a private bedroom. Infusion treatments can last anywhere from 15 minutes to 6 hours depending on the treatment type. We provide all cancer related infusions and injections, but also a wide variety of additional hematology and other non-chemo treatments such as blood and iron transfusions, treatments for Cohn’s, Multiple Sclerosis, Arthritis, etc. For safety purposes and toxicities of drugs we strive to staff at a ratio of 1 nurse: 3 chairs but make adjustments as needed and appropriate. There are 6 medical oncology exam rooms and 2 radiation oncology exam rooms in which patients are seen throughout the entirety of the day. There is 1 radiation machine for treatments and the staff also utilize the CT scanner in Radiology for new radiation treatment planning. Radiation treatments run on average every 30 minutes throughout the entirety of the day. Due to the complexity of the treatments it is required to have two therapists manning the station; our Dosimitrest doubles as a therapist in the event one is not able to make it in. The center also houses its own compounding pharmacy which requires 2 pharmacy staff to man at all times during treatment; this typically consists of 1 pharmacist and 1 pharmacy technician provided by the hospital pharmacy department. There are currently 3 medical oncologists, 1 radiation oncologist, 1 physicist, and 2 nurse practitioners on staff. All RN's report to their designated areas each day but float to other areas if needed for staffing and safety purposes. On average the center sees approximately 300

new chemotherapy patients per year and 150 new radiation patients, in addition to non-chemo treatments. We also have a large number of Hematology cases in which we average around 15 new referrals per week. The center shares a registered dietician with the hospital who sees all new patients at the start of their treatments and again as needed/consulted. There is 1 social services coordinator who follows all patients as needed. The center is accredited through the Commissions on Cancer and requires several support staff as a stipulation of the accreditation. Additionally the Cancer Center houses the portable PET Scan machine which is on-site weekly on Wednesdays as well as some additional Fridays. Our providers also provide off-site clinics in Waddington once per week, Alex Bay once per month, and our High Risk Clinic at the Connection for Women two days per week. One provider and one staff (RN or MA) travel to these clinics together.