

HOSPITAL INFORMATION

Region	Metropolitan Area Regional Office
County	Kings
Council	New York City
Network	NYC H+H
Reporting Organization	Woodhull Medical & Mental Health Center
Reporting Organization Id	1692
Reporting Organization Type	Hospital (pfi)
Data Entity	Woodhull Medical & Mental Health Center

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) ?
Psych Emergency, Adult services located on 5th floor	3	1.85	13	4
Medicine Clinic:derm, asthma, cardiology, nephrology, rheumatology, pulmonary. Adults, 2nd fl	20	0.54	296	14.8
Specialty Clinics:ortho, bariatrics, derm, endo, urology, plastics, podiatry,vascular. Adult. 2nd fl	9	0.59	1.23	13
Pediatric Clinic	7	0.6	93	13
OBGN Clinic, serves adults located 8th floor	8	0.8	80	10
Radiological Services: CT scan, X-RAY, MRI & Nuclear medicine, adult and peds. Located 3rd floor	3	0.41	59	19
Geriatric Clinic, Geriatric patient population located on the 2nd floor	2	0.8	20	10

GI\Endoscopy, adult service, located on 2nd floor	5	5.71	7	1.4
Peds ED, Located on 2nd floor	2	0.36	22	10
Adult Emergency located 2nd floor.	12	0.59	163	2.3
Cancer /Infusion Clinic providing care to adults. Located on 2nd floor	2	1.23	13	6.5
Behavioral Health Clinic includes OPC, ACT & OPD serves adult patients, located on 5th & 9th floors	3	0.22	37	12
Dental Clinic provides services to adult and Peds. Located on 2nd floor.	1	0.07	110	5
Day Surgery under the Periop Services. Adult and Peds. Location 3rd floor	3	3.43	7	2.3
PSY5 PSYCH	3.29	1.39	23	7
PSY4 PSYCH	3.43	1.33	24	7
PSY3 PSYCH	3.43	1.33	22	7
PSY2 PSYCH	3.29	1.39	22	7
7200 MOTHER / BABY	2.27	2.89	8.3	3
7100 NICU	1.85	4.32	3.7	2
6300 PEDS	0.43	3.08	2.6	6
9-PCU STEPDOWN	2.4	2.5	9.6	4
8ICU - ICU	4.2	4.76	8.4	2
8200 - Med/Surg	5.67	1.41	34	6
8100 Step-down	1.55	2.58	6.2	4
8100 - Med/Surg/Telemetry	4.53	1.47	27.2	6
6100 - Med/Surg	3.23	1.65	19.4	6

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)
Psych Emergency, Adult services located on 5th floor	0	0
Medicine Clinic:derm, asthma, cardiology, nephrology, rheumatology, pulmonary. Adults, 2nd fl	15	0.41
Specialty Clinics:ortho, bariatrics, derm, endo, urology, plastics, podiatry,vascular. Adult. 2nd fl	5	0.33
Pediatric Clinic	2	0.17
OBGN Clinic, serves adults located 8th floor	2	0.2
Radiological Services: CT scan, X-RAY, MRI & Nuclear medicine, adult and peds. Located 3rd floor	0	0
Geriatric Clinic, Geriatric patient population located on the 2nd floor	0	0

GI\Endoscopy, adult service, located on 2nd floor	1	1.14
Peds ED, Located on 2nd floor	0	0
Adult Emergency located 2nd floor.	0	0
Cancer /Infusion Clinic providing care to adults. Located on 2nd floor	0	0
Behavioral Health Clinic includes OPC, ACT & OPD serves adult patients, located on 5th & 9th floors	0	0
Dental Clinic provides services to adult and Peds. Located on 2nd floor.	0	0
Day Surgery under the Periop Services. Adult and Peds. Location 3rd floor	0	0
PSY5 PSYCH	0	0
PSY4 PSYCH	0	0
PSY3 PSYCH	0	0
PSY2 PSYCH	0	0
7200 MOTHER / BABY	0	0
7100 NICU	0	0
6300 PEDS	0	0
9-PCU STEPDOWN	0	0
8ICU - ICU	0	0
8200 - Med/Surg	0	0
8100 Step-down	0	0
8100 - Med/Surg/Telemetry	0	0
6100 - Med/Surg	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)
Psych Emergency, Adult services located on 5th floor	3	1.85
Medicine Clinic:derm, asthma, cardiology, nephrology, rheumatology, pulmonary. Adults, 2nd fl	15	0.41
Specialty Clinics:ortho, bariatrics, derm, endo, urology, plastics, podiatry,vascular. Adult. 2nd fl	3	0.2
Pediatric Clinic	5	0.43
OBGN Clinic, serves adults located 8th floor	4	0.4
Radiological Services: CT scan, X-RAY, MRI & Nuclear medicine, adult and peds. Located 3rd floor	1	0.14
Geriatric Clinic, Geriatric patient population located on the 2nd floor	2	0.8
GI\Endoscopy, adult service, located on 2nd floor	2	2.29

Peds ED, Located on 2nd floor	2	0.36
Adult Emergency located 2nd floor.	5	0.25
Cancer /Infusion Clinic providing care to adults. Located on 2nd floor	2	2
Behavioral Health Clinic includes OPC, ACT & OPD serves adult patients, located on 5th & 9th floors	0	0
Dental Clinic provides services to adult and Peds. Located on 2nd floor.	0	0
Day Surgery under the Periop Services. Adult and Peds. Location 3rd floor	1	0.91
PSY5 PSYCH	2.27	0
PSY4 PSYCH	2.27	0
PSY3 PSYCH	2.27	0
PSY2 PSYCH	2.27	0
7200 MOTHER / BABY	0.69	0
7100 NICU	0.31	0
6300 PEDS	0.22	0
9-PCU STEPDOWN	0.8	0
8ICU - ICU	0.7	0
8200 - Med/Surg	2.83	0
8100 Step-down	1	1
8100 - Med/Surg/Telemetry	3	2.27
6100 - Med/Surg	1.62	0

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)
Psych Emergency, Adult services located on 5th floor	5	3.08
Medicine Clinic:derm, asthma, cardiology, nephrology, rheumatology, pulmonary. Adults, 2nd fl	15	0.41
Specialty Clinics:ortho, bariatrics, derm, endo, urology, plastics, podiatry,vascular. Adult. 2nd fl	3	0.2
Pediatric Clinic	5	0.43
OBGN Clinic, serves adults located 8th floor	4	0.4
Radiological Services: CT scan, X-RAY, MRI & Nuclear medicine, adult and peds. Located 3rd floor	1	0.14
Geriatric Clinic, Geriatric patient population located on the 2nd floor	2	0.8

GI\Endoscopy, adult service, located on 2nd floor	2	2.29
Peds ED, Located on 2nd floor	2	0.36
Adult Emergency located 2nd floor.	5	0.25
Cancer /Infusion Clinic providing care to adults. Located on 2nd floor	2	1.23
Behavioral Health Clinic includes OPC, ACT & OPD serves adult patients, located on 5th & 9th floors	0	0
Dental Clinic provides services to adult and Peds. Located on 2nd floor.	0	0
Day Surgery under the Periop Services. Adult and Peds. Location 3rd floor	1	0.8
PSY5 PSYCH	3	24
PSY4 PSYCH	3	24
PSY3 PSYCH	3	24
PSY2 PSYCH	3	24
7200 MOTHER / BABY	1	8
7100 NICU	1	8
6300 PEDS	1	8
9-PCU STEPDOWN	1	8
8ICU - ICU	1	8
8200 - Med/Surg	3	24
8100 Step-down	0	8
8100 - Med/Surg/Telemetry	0	24
6100 - Med/Surg	2	16

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>Psych Emergency, Adult services located on 5th floor</p>	<p>Dedicated clerical and HN resources for this unit</p>
<p>Medicine Clinic:derm, asthma, cardiology, nephrology, rheumatology, pulmonary. Adults, 2nd fl</p>	<p>Dedicated clerical and HN resources for this unit</p>
<p>Specialty Clinics:ortho, bariatrics, derm, endo, urology, plastics, podiatry,vascular. Adult. 2nd fl</p>	<p>Dedicated clerical and HN resources for this unit</p>
<p>Pediatric Clinic</p>	<p>Dedicated clerical and HN resources for this unit</p>
<p>OBN Clinic, serves adults located 8th floor</p>	<p>Dedicated clerical and HN resources for this unit are planned as submitted.</p>

<p>Radiological Services: CT scan, X-RAY, MRI & Nuclear medicine, adult and peds. Located 3rd floor</p>	<p>Dedicated clerical and HN resources for this unit. Additional resources such as patient navigators, radiological techs are available to support the planned number of patients on this unit.</p>
<p>Geriatric Clinic, Geriatric patient population located on the 2nd floor</p>	<p>Dedicated clerical and HN resources for this unit are planned</p>
<p>GI\Endoscopy, adult service, located on 2nd floor</p>	<p>Dedicated clerical and HN resources for this unit are planned</p>
<p>Peds ED, Located on 2nd floor</p>	<p>Dedicated clerical and HN resources for this unit are planned</p>
<p>Adult Emergency located 2nd floor.</p>	<p>Dedicated clerical and HN resources for this unit</p>
<p>Cancer /Infusion Clinic providing care to adults. Located on 2nd floor</p>	<p>There is dedicated clerical and HN resources for this unit.</p>
<p>Behavioral Health Clinic includes OPC, ACT & OPD serves adult patients, located on 5th & 9th floors</p>	<p>Dedicated clerical and HN resources for units.</p>

<p>Dental Clinic provides services to adult and Peds. Located on 2nd floor.</p>	<p>There are dedicated clerical and HN resources for this unit. Additional resources such as dental hygienist, pharmacists, respiratory therapists, anesthesiologist, and social workers are available to support the planned number of patients on this unit.</p>
<p>Day Surgery under the Periop Services. Adult and Peds. Location 3rd floor</p>	<p>Dedicated clerical staff are assigned to the unit per shift.</p>
<p>PSY5 PSYCH</p>	<p>Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.</p>
<p>PSY4 PSYCH</p>	<p>Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.</p>

PSY3 PSYCH	Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.
PSY2 PSYCH	Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.
7200 MOTHER / BABY	Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.

7100 NICU	Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.
6300 PEDS	Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.
9-PCU STEPDOWN	Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.

81CU - ICU	Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.
8200 - Med/Surg	Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.
8100 Step-down	Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.

8100 - Med/Surg/Telemetry	<p>Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.</p>
6100 - Med/Surg	<p>Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.</p>

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>
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Psych Emergency, Adult services located on 5th floor	No	Upon careful review of both employee's and management proposals provided, I agree with management's proposal and their rationale to maintain the current staffing ratio listed above.	In summary, management members found that experience at the hospital and the literature on safe staffing models supported staffing on this unit.	In summary, employee members did not find that the staffing ratio would provide a sufficient number of patient care hours per day. Requesting a more detailed review
Medicine Clinic:derm, asthma, cardiology, nephrology, rheumatology, pulmonary. Adults, 2nd fl	No	Upon careful review of both employee's and management proposals provided, I agree with management's proposal and their rationale to maintain the current staffing ratio listed above.	In summary, management members found that experience at the hospital and the literature on safe staffing models supported staffing on this unit.	In summary, employee members did not find that the staffing ratio would provide a sufficient number of patient care hours per day. Requesting a more detailed review
Specialty Clinics:ortho, bariatrics, derm, endo, urology, plastics, podiatry,vascular. Adult. 2nd fl	No	Upon careful review of both employee's and management proposals provided, I agree with management's proposal and their rationale to maintain the current staffing ratio listed above	In summary, management members found that experience at the hospital and the literature on safe staffing models supported staffing on this unit.	In summary, employee members did not find that the staffing ratio would provide a sufficient number of patient care hours per day. Requesting a more detailed review
Pediatric Clinic	No	Upon careful review of both employee's and management proposals provided, I agree with management's proposal and their rationale to maintain the current staffing ratio listed above.	In summary, management members found that experience at the hospital and the literature on safe staffing models supported staffing on this unit.	In summary, employee members did not find that the staffing ratio would provide a sufficient number of patient care hours per day. Requesting a more detailed review

<p>OBGN Clinic, serves adults located 8th floor</p>	<p>No</p>	<p>Upon careful review of both employee's and management proposals provided, I agree with management's proposal and their rationale to maintain the current staffing ratio listed above.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported staffing on this unit.</p>	<p>In summary, employee members did not find that the staffing ratio would provide a sufficient number of patient care hours per day. Requesting a more detailed review</p>
<p>Radiological Services: CT scan, X-RAY, MRI & Nuclear medicine, adult and peds. Located 3rd floor</p>	<p>No</p>	<p>Upon careful review of both employee's and management proposals provided, I agree with management's proposal and their rationale to maintain the current staffing ratio listed above.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported staffing on this unit.</p>	<p>In summary, employee members did not find that the staffing ratio would provide a sufficient number of patient care hours per day. Requesting a more detailed review</p>
<p>Geriatric Clinic, Geriatric patient population located on the 2nd floor</p>	<p>No</p>	<p>Upon careful review of both employee's and management proposals provided, I agree with management's proposal and their rationale to maintain the current staffing ratio listed above.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported staffing on this unit.</p>	<p>In summary, employee members did not find that the staffing ratio would provide a sufficient number of patient care hours per day. Requesting a more detailed review</p>
<p>GI\Endoscopy, adult service, located on 2nd floor</p>	<p>No</p>	<p>Upon careful review of both employee's and management proposals provided, I agree with management's proposal and their rationale to maintain the current staffing ratio listed above.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported staffing on this unit.</p>	<p>In summary, employee members did not find that the staffing ratio would provide a sufficient number of patient care hours per day. Requesting a more detailed review</p>

Peds ED, Located on 2nd floor	No	Upon careful review of both employee's and management proposals provided, I agree with management's proposal and their rationale to maintain the current staffing ratio listed above.	In summary, management members found that experience at the hospital and the literature on safe staffing models supported staffing on this unit.	In summary, employee members did not find that the staffing ratio would provide a sufficient number of patient care hours per day. Requesting a more detailed review
Adult Emergency located 2nd floor.	No	Upon careful review of both employee's and management proposals provided, I agree with management's proposal and their rationale to maintain the current staffing ratio listed above.	In summary, management members found that experience at the hospital and the literature on safe staffing models supported staffing on this unit.	In summary, employee members did not find that the staffing ratio would provide a sufficient number of patient care hours per day. Requesting a more detailed review
Cancer /Infusion Clinic providing care to adults. Located on 2nd floor	No	Upon careful review of both employee's and management proposals provided, I agree with management's proposal and their rationale to maintain the current staffing ratio listed above.	In summary, management members found that experience at the hospital and the literature on safe staffing models supported staffing on this unit.	In summary, employee members did not find that the staffing ratio would provide a sufficient number of patient care hours per day. Requesting a more detailed review
Behavioral Health Clinic includes OPC, ACT & OPD serves adult patients, located on 5th & 9th floors	No	Upon careful review of both employee's and management proposals provided, I agree with management's proposal and their rationale to maintain the current staffing ratio listed above.	In summary, management members found that experience at the hospital and the literature on safe staffing models supported staffing on this unit.	In summary, employee members did not find that the staffing ratio would provide a sufficient number of patient care hours per day. Requesting a more detailed review

<p>Dental Clinic provides services to adult and Peds. Located on 2nd floor.</p>	<p>No</p>	<p>Upon careful review of both employee's and management proposals provided, I agree with management's proposal and their rationale to maintain the current staffing ratio listed above.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported staffing on this unit.</p>	<p>In summary, employee members did not find that the staffing ratio would provide a sufficient number of patient care hours per day. Requesting a more detailed review</p>
<p>Day Surgery under the Periop Services. Adult and Peds. Location 3rd floor</p>	<p>No</p>	<p>Upon careful review of both employee's and management proposals provided, I agree with management's proposal and their rationale to maintain the current staffing ratio listed above.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported staffing on this unit.</p>	<p>In summary, employee members did not find that the staffing ratio would provide a sufficient number of patient care hours per day. Requesting a more detailed review</p>
<p>PSY5 PSYCH</p>	<p>No</p>	<p>In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, employee members did not find that the auxiliary staff ratio would provide a sufficient number of patient care hours per day. Please see staffing plan submission from 7/1/2022 for the full statement.</p>

PSY4 PSYCH	No	<p>In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, employee members did not find that the auxiliary staff ratio would provide a sufficient number of patient care hours per day. Please see staffing plan submission from 7/1/2022 for the full statement.</p>
PSY3 PSYCH	No	<p>In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, employee members did not find that the auxiliary staff ratio would provide a sufficient number of patient care hours per day. Please see staffing plan submission from 7/1/2022 for the full statement.</p>
PSY2 PSYCH	No	<p>In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, employee members did not find that the auxiliary staff ratio would provide a sufficient number of patient care hours per day. Please see staffing plan submission from 7/1/2022 for the full statement.</p>

7200 MOTHER / BABY	No	<p>In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, employee members did not find that the auxiliary staff ratio would provide a sufficient number of patient care hours per day. Please see staffing plan submission from 7/1/2022 for the full statement.</p>
7100 NICU	No	<p>In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, employee members did not find that the auxiliary staff ratio would provide a sufficient number of patient care hours per day. Please see staffing plan submission from 7/1/2022 for the full statement.</p>
6300 PEDS	No	<p>In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, employee members did not find that the auxiliary staff ratio would provide a sufficient number of patient care hours per day. Please see staffing plan submission from 7/1/2022 for the full statement.</p>

9-PCU STEPDOWN	No	<p>In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, employee members did not find that the auxiliary staff ratio would provide a sufficient number of patient care hours per day. Please see staffing plan submission from 7/1/2022 for the full statement.</p>
8ICU - ICU	No	<p>In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, employee members did not find that the auxiliary staff ratio would provide a sufficient number of patient care hours per day. Please see staffing plan submission from 7/1/2022 for the full statement.</p>
8200 - Med/Surg	No	<p>In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, employee members did not find that the auxiliary staff ratio would provide a sufficient number of patient care hours per day. Please see staffing plan submission from 7/1/2022 for the full statement.</p>

8100 Step-down	No	<p>In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, employee members did not find that the auxiliary staff ratio would provide a sufficient number of patient care hours per day. Please see staffing plan submission from 7/1/2022 for the full statement.</p>
8100 - Med/Surg/Telemetry	No	<p>In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, employee members did not find that the auxiliary staff ratio would provide a sufficient number of patient care hours per day. Please see staffing plan submission from 7/1/2022 for the full statement.</p>
6100 - Med/Surg	No	<p>In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, employee members did not find that the auxiliary staff ratio would provide a sufficient number of patient care hours per day. Please see staffing plan submission from 7/1/2022 for the full statement.</p>

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)?
Psych ER, adult services located on 5th floor	3	1.85	13	4.3
Medicine Clinic	0	0	0	0
Specialty Clinics:ortho, bariatrics, dermatology, endo, urology, plastics, podiatry,vascular. Adult. 2nd fl	0	0	0	0
Peds Clinic	0	0	0	0
OBGYN Clinic, adults, 8th floor,	7	2.33	24	3.4
Radiological Services-Nuclear, MRI, CT Scan, Scan & Xray, 3rd floor	0	0	0	0
Geri Clinic, adults, 2nd floor	0	0	0	0
GI/ENDO Clinic	2	4	7	2
Peds Emergency Services, 2nd floor	2	0.36	44	11
Adult Emergency Services	11	0.54	163	14.8
Cancer Clinic	0	0	0	0
opc, opd,	0	0	0	0
Dental Clinic, adults and peds. 2nd floor	0	0	0	0

Day Surgery, Adult Services, 3rf floor	3	3.43	7	2.3
PSY5 PSYCH	3.29	1.39	23	7
PSY4 PSYCH	3.43	1.33	23	7
PSY3 PSYCH	3.43	1.33	23	7
PSY2 PSYCH	3.29	1.39	23	7
7200 MOTHER / BABY	2.27	2.89	8.3	3
7100 NICU	1.85	4.32	3.7	2
6300 PEDS	0.43	3.08	2.6	6
8100 Med/Surg/Stepdown	1.55	2.58	6.2	4
9PCU	2.4	2.5	9.6	4
8ICU - ICU	5	4.76	8.4	2
8200	5.67	1.41	34	6
8100 Med/Surg/Tele	4.53	1.47	27.2	6
6100 - Med/Surg	3.23	1.65	19.4	6

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)
Psych ER, adult services located on 5th floor	0	0
Medicine Clinic	0	0
Specialty Clinics:ortho, bariatrics, derm, endo, urology, plastics, podiatry,vascular. Adult. 2nd fl	0	0
Peds Clinic	0	0
OBGYN Clinic, adults, 8th floor,	2	0.67

Radiological Services- Nuclear, MRI, CT Scan, Scan & Xray, 3rd floor	0	0
Geriatric Clinic, adults, 2nd floor	0	0
GI/ENDO Clinic	0	0
Peds Emergency Services, 2nd floor	0	0
Adult Emergency Services	0	0
Cancer Clinic	0	0
opc, opd,	0	0
Dental Clinic, adults and peds. 2nd floor	0	0
Day Surgery, Adult Services, 3rd floor	0	0
PSY5 PSYCH	0	0
PSY4 PSYCH	0	0
PSY3 PSYCH	0	0
PSY2 PSYCH	0	0
7200 MOTHER / BABY	0	0
7100 NICU	0	0
6300 PEDS	0	0
8100 Med/Surg/Stepdown	0	0
9PCU	0	0
8ICU - ICU	0	0
8200	0	0
8100 Med/Surg/Tele	0	0
6100 - Med/Surg	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)
Psych ER, adult services located on 5th floor	5	3.08
Medicine Clinic	0	0
Specialty Clinics:ortho, bariatrics, derm, endo, urology, plastics, podiatry,vascular. Adult. 2nd fl	0	0
Peds Clinic	0	0
OBGYN Clinic, adults, 8th floor,	2	0.67
Radiological Services-Nuclear, MRI, CT Scan, Scan & Xray, 3rd floor	0	0
Geri Clinic, adults, 2nd floor	0	0
GI/ENDO Clinic	1	2
Peds Emergency Services, 2nd floor	2	0.36
Adult Emergency Services	5	0.25
Cancer Clinic	0	0
opc, opd,	0	0
Dental Clinic, adults and peds. 2nd floor	0	0
Day Surgery, Adult Services, 3rd floor	0.2	0.23
PSY5 PSYCH	2.27	0
PSY4 PSYCH	2.27	0
PSY3 PSYCH	2.27	0

PSY2 PSYCH	2.27	0
7200 MOTHER / BABY	0.69	0
7100 NICU	0.31	0
6300 PEDS	0.22	0
8100 Med/Surg/Stepdown	1	0
9PCU	0.8	0
8ICU - ICU	1	0
8200	2.83	0
8100 Med/Surg/Tele	2.27	0
6100 - Med/Surg	1.62	0

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)
Psych ER, adult services located on 5th floor	5	3.08
Medicine Clinic	0	0
Specialty Clinics:ortho, bariatrics, derm, endo, urology, plastics, podiatry,vascular. Adult. 2nd fl	0	0
Peds Clinic	0	0
OBGYN Clinic, adults, 8th floor,	2	0.67
Radiological Services- Nuclear, MRI, CT Scan, Scan & Xray, 3rd floor	0	0
Geriatric Clinic, adults, 2nd floor	0	0

GI/ENDO Clinic	1	2
Peds Emergency Services, 2nd floor	2	0.36
Adult Emergency Services	5	0.25
Cancer Clinic	0	0
opc, opd,	0	0
Dental Clinic, adults and peds. 2nd floor	0	0
Day Surgery, Adult Services, 3rd floor	0.2	1.14
PSY5 PSYCH	3	24
PSY4 PSYCH	3	24
PSY3 PSYCH	3	24
PSY2 PSYCH	3	24
7200 MOTHER / BABY	1	8
7100 NICU	1	8
6300 PEDS	1	8
8100 Med/Surg/Stepdown	1	8
9PCU	1	8
8ICU - ICU	1	8
8200	3	24
8100 Med/Surg/Tele	3	24
6100 - Med/Surg	2	16

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>
Psych ER, adult services located on 5th floor	Dedicated clerical and HN resources for this unit
Medicine Clinic	n/a
Specialty Clinics:ortho, bariatrics, derm, endo, urology, plastics, podiatry,vascular. Adult. 2nd fl	n/a
Peds Clinic	n/a
OBGYN Clinic, adults, 8th floor,	Dedicated clerical and HN resources for this unit
Radiological Services- Nuclear, MRI, CT Scan, Scan & Xray, 3rd floor	n/a
Geri Clinic, adults, 2nd floor	n/a
GI/ENDO Clinic	Dedicated clerical and HN resources for this unit

Peds Emergency Services, 2nd floor	Dedicated clerical and HN resources for this unit
Adult Emergency Services	Dedicated clerical and HN resources for this unit
Cancer Clinic	n/a
opc, opd,	n/a
Dental Clinic, adults and peds. 2nd floor	n/a
Day Surgery, Adult Services, 3rd floor	Dedicated clerical and HN resources for this unit
PSY5 PSYCH	Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.
PSY4 PSYCH	Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.

PSY3 PSYCH	Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.
PSY2 PSYCH	Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.
7200 MOTHER / BABY	Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.

7100 NICU	Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.
6300 PEDS	Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.
8100 Med/Surg/Stepdown	Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.

9PCU	Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.
8ICU - ICU	Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.
8200	Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.

8100 Med/Surg/Tele	Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.
6100 - Med/Surg	Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.

EVENING SHIFT CONSENSUS INFORMATION

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.	Our Clinical Staffing Committee reached consensus on the clinical staffing plan for this unit:	If no, Chief Executive Officer Statement in support of clinical staffing plan for this unit:	Statement by members of clinical staffing committee selected by the general hospital administration (management members):	Statement by members of clinical staffing committee that were registered nurses, licensed practical nurses, and ancillary members of the frontline team (employee members):
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Psych ER, adult services located on 5th floor	No	Upon careful review of both employee's and management proposals provided, I agree with management's proposal and their rationale to maintain the current staffing ratio listed above.	In summary, management members found that experience at the hospital and the literature on safe staffing models supported staffing on this unit.	In summary, employee members did not find that the staffing ratio would provide a sufficient number of patient care hours per day. Requesting a more detailed review
Medicine Clinic	Yes			
Specialty Clinics:ortho, bariatrics, dermatology, endo, urology, plastics, podiatry,vascular. Adult. 2nd fl	Yes			
Peds Clinic	Yes			
OBGYN Clinic, adults, 8th floor,	No	Upon careful review of both employee's and management proposals provided, I agree with management's proposal and their rationale to maintain the current staffing ratio listed above.	In summary, management members found that experience at the hospital and the literature on safe staffing models supported staffing on this unit.	In summary, employee members did not find that the staffing ratio would provide a sufficient number of patient care hours per day. Requesting a more detailed review
Radiological Services-Nuclear, MRI, CT Scan, Scan & Xray, 3rd floor	Yes			
Geri Clinic, adults, 2nd floor	Yes			
GI/ENDO Clinic	No	Upon careful review of both employee's and management proposals provided, I agree with management's proposal and their rationale to maintain the current staffing ratio listed above.	In summary, management members found that experience at the hospital and the literature on safe staffing models supported staffing on this unit.	In summary, employee members did not find that the staffing ratio would provide a sufficient number of patient care hours per day. Requesting a more detailed review

Peds Emergency Services, 2nd floor	No	Upon careful review of both employee's and management proposals provided, I agree with management's proposal and their rationale to maintain the current staffing ratio listed above.	In summary, management members found that experience at the hospital and the literature on safe staffing models supported staffing on this unit.	In summary, employee members did not find that the staffing ratio would provide a sufficient number of patient care hours per day. Requesting a more detailed review
Adult Emergency Services	No	Upon careful review of both employee's and management proposals provided, I agree with management's proposal and their rationale to maintain the current staffing ratio listed above.	In summary, management members found that experience at the hospital and the literature on safe staffing models supported staffing on this unit.	In summary, employee members did not find that the staffing ratio would provide a sufficient number of patient care hours per day. Requesting a more detailed review
Cancer Clinic	Yes			
opc, opd,	Yes			
Dental Clinic, adults and peds. 2nd floor	Yes			
Day Surgery, Adult Services, 3rf floor	No	Upon careful review of both employee's and management proposals provided, I agree with management's proposal and their rationale to maintain the current staffing ratio listed above.	In summary, management members found that experience at the hospital and the literature on safe staffing models supported staffing on this unit.	In summary, employee members did not find that the staffing ratio would provide a sufficient number of patient care hours per day. Requesting a more detailed review

PSY5 PSYCH	No	<p>In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, employee members did not find that the auxiliary staff ratio would provide a sufficient number of patient care hours per day. Please see staffing plan submission from 7/1/2022 for the full statement.</p>
PSY4 PSYCH	No	<p>In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, employee members did not find that the auxiliary staff ratio would provide a sufficient number of patient care hours per day. Please see staffing plan submission from 7/1/2022 for the full statement.</p>
PSY3 PSYCH	No	<p>In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, employee members did not find that the auxiliary staff ratio would provide a sufficient number of patient care hours per day. Please see staffing plan submission from 7/1/2022 for the full statement.</p>

PSY2 PSYCH	No	<p>In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, employee members did not find that the auxiliary staff ratio would provide a sufficient number of patient care hours per day. Please see staffing plan submission from 7/1/2022 for the full statement.</p>
7200 MOTHER / BABY	No	<p>In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, employee members did not find that the auxiliary staff ratio would provide a sufficient number of patient care hours per day. Please see staffing plan submission from 7/1/2022 for the full statement.</p>
7100 NICU	No	<p>In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, employee members did not find that the auxiliary staff ratio would provide a sufficient number of patient care hours per day. Please see staffing plan submission from 7/1/2022 for the full statement.</p>

6300 PEDS	No	<p>In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, employee members did not find that the auxiliary staff ratio would provide a sufficient number of patient care hours per day. Please see staffing plan submission from 7/1/2022 for the full statement.</p>
8100 Med/Surg/Stepdown	No	<p>In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, employee members did not find that the auxiliary staff ratio would provide a sufficient number of patient care hours per day. Please see staffing plan submission from 7/1/2022 for the full statement.</p>
9PCU	No	<p>In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, employee members did not find that the auxiliary staff ratio would provide a sufficient number of patient care hours per day. Please see staffing plan submission from 7/1/2022 for the full statement.</p>

8ICU - ICU	No	<p>In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, employee members did not find that the auxiliary staff ratio would provide a sufficient number of patient care hours per day. Please see staffing plan submission from 7/1/2022 for the full statement.</p>
8200	No	<p>In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, employee members did not find that the auxiliary staff ratio would provide a sufficient number of patient care hours per day. Please see staffing plan submission from 7/1/2022 for the full statement.</p>
8100 Med/Surg/Tele	No	<p>In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, employee members did not find that the auxiliary staff ratio would provide a sufficient number of patient care hours per day. Please see staffing plan submission from 7/1/2022 for the full statement.</p>

6100 - Med/Surg	No	In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.	In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.	In summary, employee members did not find that the auxiliary staff ratio would provide a sufficient number of patient care hours per day. Please see staffing plan submission from 7/1/2022 for the full statement.
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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)
Emergency Department	Psych Emergency, Adult services located on 5th floor	3	1.85	13
Other	Medicine Clinic:derm, asthma, cardiology, nephrology, rheumatology, pulmonary. Adults, 2nd fl	0	0	0
Other	Specialty Clinics:ortho, bariatrics, derm, endo, urology, plastics, podiatry,vascular. Adult. 2nd fl	0	0	0
Pediatric	Pediatric Clinic, PEDS. Located on 2nd floor	0	0	0
Obstetrics/Gynecology	OBGN Clinic, serves adults located 8th floor	0	0	0
Magnetic Resonance Imaging	Radiological Services: CT scan, X-RAY, MRI & Nuclear medicine, adult and peds. Located 3rd floor	0	0	0
Geriatric	Geriatric Clinic, Geriatric patient population located on the 2nd floor	0	0	0
Endoscopy	GI\Endoscopy, adult service, located on 2nd floor	0	0	0

Emergency Department	Peds ED, Located on 2nd floor	2	0.36	44
Emergency Department	Adult Emergency located 2nd floor.	10	0.49	163
Oncology	Cancer /Infusion Clinic providing care to adults. Located on 2nd floor	0	0	0
Mental Health Services O/P	Behavioral Health Clinic includes OPC, ACT & OPD serves adult patients, located on 5th & 9th floors	0	0	0
Dental O/P	Dental Clinic provides services to adult and Peds. Located on 2nd floor.	0	0	0
Ambulatory Surgery	Day Surgery under the Periop Services. Adult and Peds. Location 3rd floor	0	0	0
Psychiatry	PSY5 PSYCH	3.29	1.39	22
Psychiatry	PSY4 PSYCH	3.43	1.33	22
Psychiatry	PSY3 PSYCH	3.43	1.33	22
Psychiatry	PSY2 PSYCH	3.29	1.39	23
Obstetrics/Gynecology	7200 MOTHER / BABY	2.77	2.89	8.3
Intensive Care	7100 NICU	1.85	4.32	3.7
Pediatric	6300 PEDS	0.43	3.08	2.6
Stepdown	9PCU - Step- down	3	2.5	9.6
Intensive Care	8ICU - ICU	4.2	4.76	8.4
Medical/Surgical	8200 med/surg	5.67	1.41	34
Medical/Surgical	8100 - Step-down	1.55	2.58	6.2
Medical/Surgical	8100 Med/Surg/Tele	4.53	1.47	27.2
Medical/Surgical	6100 Med/Surg	3.23	1.65	19.4

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)
Emergency Department	4	0
Other	0	0
Other	0	0
Pediatric	0	0
Obstetrics/Gynecology	0	0
Magnetic Resonance Imaging	0	0
Geriatric	0	0
Endoscopy	0	0
Emergency Department	11	0
Emergency Department	16.3	0
Oncology	0	0
Mental Health Services O/P	0	0
Dental O/P	0	0
Ambulatory Surgery	0	0
Psychiatry	7	0
Psychiatry	7	0
Psychiatry	7	0
Psychiatry	7	0
Obstetrics/Gynecology	3	0
Intensive Care	2	0
Pediatric	6	0
Stepdown	4	0
Intensive Care	2	0
Medical/Surgical	6	0
Medical/Surgical	4	0
Medical/Surgical	6	0
Medical/Surgical	6	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)
Emergency Department	0	5
Other	0	0
Other	0	0
Pediatric	0	0
Obstetrics/Gynecology	0	0
Magnetic Resonance Imaging	0	0
Geriatric	0	0
Endoscopy	0	0
Emergency Department	0	2
Emergency Department	0	5
Oncology	0	0
Mental Health Services O/P	0	0
Dental O/P	0	0
Ambulatory Surgery	0	0
Psychiatry	0	2.27
Psychiatry	0	2.27
Psychiatry	0	2.27
Psychiatry	0	2.27
Obstetrics/Gynecology	0	0.69
Intensive Care	0	0.31
Pediatric	0	0.22
Stepdown	0	0.8
Intensive Care	0	1
Medical/Surgical	0	2.83
Medical/Surgical	0	1

Medical/Surgical	0	2.27
Medical/Surgical	0	1.62

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)
Emergency Department	3.08	5
Other	0	0
Other	0	0
Pediatric	0	0
Obstetrics/Gynecology	0	0
Magnetic Resonance Imaging	0	0
Geriatric	0	0
Endoscopy	0	0
Emergency Department	0.36	2
Emergency Department	0.25	5
Oncology	0	0
Mental Health Services O/P	0	0
Dental O/P	0	0
Ambulatory Surgery	0	0
Psychiatry	0	3
Psychiatry	0	3
Psychiatry	0	3
Psychiatry	0	3
Obstetrics/Gynecology	0	1
Intensive Care	0	1
Pediatric	0	1
Stepdown	0	1
Intensive Care	0	1
Medical/Surgical	0	3

Medical/Surgical	0	1
Medical/Surgical	0	3
Medical/Surgical	0	2

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)
Emergency Department	3.08
Other	0
Other	0
Pediatric	0
Obstetrics/Gynecology	0
Magnetic Resonance Imaging	0
Geriatric	0
Endoscopy	0
Emergency Department	0.36
Emergency Department	0.25
Oncology	0
Mental Health Services O/P	0
Dental O/P	0
Ambulatory Surgery	0
Psychiatry	24
Psychiatry	2.27
Psychiatry	24
Psychiatry	24
Obstetrics/Gynecology	8
Intensive Care	8
Pediatric	8
Stepdown	8

Intensive Care	8
Medical/Surgical	24
Medical/Surgical	8
Medical/Surgical	24
Medical/Surgical	16

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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Emergency Department	Dedicated clerical resources	No	Upon careful review of both employee's and management proposals provided, I agree with management's proposal and their rationale to maintain the current staffing ratio listed above.	In summary, management members found that experience at the hospital and the literature on safe staffing models supported staffing on this unit.
Other	n/a	Yes		
Other	n/a	Yes		
Pediatric	n/a	Yes		
Obstetrics/Gynecology	n/a	Yes		
Magnetic Resonance Imaging	n/a	Yes		
Geriatric	n/a	Yes		
Endoscopy	n/a	Yes		

Emergency Department	Dedicated clerical support. for the unit	No	Upon careful review of both employee's and management proposals provided, I agree with management's proposal and their rationale to maintain the current staffing ratio listed above.	In summary, management members found that experience at the hospital and the literature on safe staffing models supported staffing on this unit.
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Emergency Department	Dedicated clerical staff	No	Upon careful review of both employee's and management proposals provided, I agree with management's proposal and their rationale to maintain the current staffing ratio listed above.	In summary, management members found that experience at the hospital and the literature on safe staffing models supported staffing on this unit.
Oncology	n/a	Yes		
Mental Health Services O/P	n/a	Yes		
Dental O/P	n/a	Yes		
Ambulatory Surgery	n/a	Yes		

Psychiatry	Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.	No	In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.	In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.
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Psychiatry	Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.	No	In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.	In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.
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<p>Obstetrics/Gynecology</p>	<p>Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.</p>	<p>No</p>	<p>In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.</p>
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<p>Intensive Care</p>	<p>Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.</p>	<p>No</p>	<p>In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.</p>
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Pediatric	Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.	No	In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.	In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.
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Stepdown	Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.	No	In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.	In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.
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Intensive Care	Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.	No	In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.	In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.
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Medical/Surgical	Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.	No	In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.	In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.
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Medical/Surgical	Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.	No	In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.	In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.
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<p>Medical/Surgical</p>	<p>Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.</p>	<p>No</p>	<p>In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.</p>	<p>In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.</p>
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Medical/Surgical	Dedicated clerical and HN resources for this unit are planned as submitted. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.	No	In summary, after thoughtful review of both proposals, hospital administration agreed with management's proposal and their explanation for auxiliary staff ratios. Please see staffing plan submission from 7/1/2022 for the full statement.	In summary, management members found that experience at the hospital and the literature on safe staffing models supported the ratio for auxiliary staff on this unit. Please see staffing plan submission from 7/1/2022 for the full statement.
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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>DC 37,New York State Nurses Associatio n,SEIU 1199</p>
<p>Our general hospital's collective bargaining agreement with New York State Nurses Association expires on the following date:</p>	<p>09/01/20 28 12:00 AM</p>

<p>The number of hospital employees represented by New York State Nurses Association is:</p>	<p>453</p>
<p>Our general hospital's collective bargaining agreement with SEIU 1199 expires on the following date:</p>	<p>04/09/2022 12:00 AM</p>
<p>The number of hospital employees represented by SEIU 1199 is:</p>	<p>104</p>

<p>Our general hospital's collective bargaining agreement with DC 37 expires on the following date:</p>	<p>11/06/20 26 12:00 AM</p>
<p>The number of hospital employees represented by DC37 is:</p>	<p>1068</p>