

William Hicks, M.S., R.T., D.H.L. (Hon)
Chief Executive Officer
Executive Administration
462 First Avenue & 27<sup>th</sup> Street
Suite ME-8
New York, NY 10016
William.Hicks@nychhc.org
212-562-4132

Bellevue Hospital Center Staffing Plan 2023 PFI# 001438

- 1. Bellevue Hospital Center's Final Staffing Plan 2023 See attached
- 2. Union's Proposal and rationale for areas where there was no consensus *Moira Dolan, DC37*:

Good Afternoon Omar,

We are writing in response to the staffing meeting and proposals from management on the ratios for clerical, ancillary and behavioral health staff for 2024 year.

Med Surgical Units - We are restating our 2022 proposal of 1:8 for PCA /Nurse Aide staffing on the medical surgical units. The timing ratio of 52 minutes per day versus 35 minutes per day, as we stated last year is much better for patient safety and quality of care. It also allows for coverage for lunch and breaks more effectively. Last year Bellevue indicated the Average Daily Census was often below 12 patients. Since those figures are no longer published at HH Board meetings it is not clear to us how often that is true. If it is true, it should make the case that the effective daily ratio is lower than 1:12 and should be maintained rather than risking problems when the census does increase. We all acknowledge the difficulty in hiring and retention but one factor in retention is stress and overwork.

Behavioral Health Units - we understand that in BH 2.0, additional headcount in the form of Psych Techs or PCA's where available will be added to the BH units. The Bellevue proposal is 3 BHA's and 2 PCA's per unit. This is two additional people compared to the 2023 proposal and is an improvement.

However, the Union proposal is 4 BHA's per unit, 2 Psych Techs and 2 PCAs for this particular Bellevue population. Additionally, the Union feels strongly that BHA's should have assigned patients, or particular sides of the floor, to the greatest extent possible, in order to more closely monitor and assist individual patients in order to safely provide care.

Clerical - we are in agreement with the 1 clerical per Tour 2 and Tour 3 per major medical units, with the exception of the medical monitoring lines part of Telemetry. We support the continuation of the 14 identified units for Tour 1 as in the 2023 proposal. The float pool for day and evening coverage is referenced on the 2023 proposal but not on the chart. We would like to see that represented on the chart as well.

We are in support of all proposals made by NYSNA.

Thank you for your attention to this matter.

Regards, Moira Dolan Sr. Assistant Director Research & Negotiations DC 37 AFSCME 212-815-7507

# 3. Bellevue Hospital Center's Management's Proposal and rationale for areas without consensus:

# **PCAs**

Bellevue Hospital Center does not have consensus with DC37 regarding the staffing model for PCAs.

Bellevue proposes a Nursing Support (PCA) ratio of one (1) nursing support person to twelve (12) patients. A review of the average daily census and bed count at Bellevue indicates that nursing support staff will often have fewer than twelve patients. Bellevue's rationale for selecting the 1:12 nursing support (PCA) ratio is that staffing studies and literature support a 1:12 ratio where the RN ratio is 1:6, as it is in all of Bellevue's Med/Surg units. Our Stepdown, ICU and other critical care units supports a ratio of 1:2 and 1:4.

#### **BHAs**

- Behavioral Health Associates (BHAs) at Bellevue Hospital work primarily in behavioral health units. They perform crisis and de-escalation interventions, therapeutic observations, and patient supervision. As a public health care hospital that sees some of New York City's most acute psychiatric patients, our BHAs are essential to the functioning of our behavioral health units.
- Our proposal for BHAs is 2 per unit for the following reasons:
  - 3 Psych Techs on the unit in support
  - BHAs are not assigned to specific patients, but rather perform de- escalation functions and routine observations

## **BHAs in the ED**

Bellevue Hospital Center strongly believes that two (2) BHAs per tour in the Emergency Department is satisfactory. Additionally, staffing is enhanced with additional support nurse staffing to reinforce the BHA's ability to perform deescalation and routine observation functions. As noted above, BHAs are not assigned to individual patients but as unit support.

Bellevue believes that the proposed model for BHA staffing in the ED is adequate.

## Clerical

Bellevue Hospital Center supports staffing of one (1) Clerical staff on Tour 2 and Tour 3. The facility also has strategically added clerical staff on our patient-care units on Tour 1.

We believe that Bellevue surpasses DC37 requests.

# 4. CEO's written submission explaining the elements that did not gain consensus and brief explanation of determination.

Bellevue Hospital Center provides care and services to diverse and complex patient population which requires a nurse staffing model that addresses the needs of our patients. As a Level 1 Trauma Center, Level 2 Pediatric Trauma Center and one of the largest providers of psychiatric services in New York City, Bellevue is committed to providing safe care to our patients by allocating appropriate resources, including safe staffing ratios, since appropriate staffing levels lead to improved quality of care, nurse recruitment and retention in hospitals.

Since February 2022, the leadership of Bellevue Hospital Center has met with frontline nursing staff to discuss and harmonize appropriate staffing models for RNs, PCAs, BHAs and other Support Services staff. Similar meetings were held with bargaining partners. A Facility Staffing Committee was also convened to gauge consensus and vote on staffing ratios.

Below is the CEO's rational that supports Bellevue's determination:

#### RNs

Bellevue Hospital Center reached consensus with our bargaining partners on the RN staffing model.

Bellevue has a robust RN staff ratio as reflected in our staffing plan. RN ratios were agreed upon by frontline staff, union and management alike. At Bellevue, RNs and nursing support work as a team. By ensuring strong RN ratios of 1:6, our model enables RNs to aid nursing support staff.

#### **PCAs**

Bellevue was unable to achieve consensus with bargaining partners DC 37, Local 420 and Local 1549 on Nursing Support (PCAs) ratios. DC37 believes that a 1:12 ratio for Support Staff (PCA) is insufficient to provide a safe level of care for our patients. DC37 recommends a 1:8 ratio which they believe would increase PCAs' ability to appropriately provide patient care.

Bellevue Hospital Center agrees with DC37 that PCAs perform many vital functions including obtaining specimen, performing specimen screening tests and other important tasks, however, Bellevue proposes a Nursing Support (PCA) ratio of one (1) nursing support person to twelve (12) patients.

A review of the average daily census and bed count at Bellevue indicate that nursing support staff will often have fewer than twelve patients. The rationale behind the 1:12 nursing support ratio is as follows:

Staffing studies and literature support a 1:12 ratio where the RN ratio is 1:6, as it is in Bellevue's Med/Surg units, with Stepdown, ICU and other critical care units being 1:2 and 1:4. The most robust study of RNs and supporting frontline staff has reinforced a model of two (2) non-RN nursing personnel for every 25 patients, equating to a 1:12.5 ratio. A study 'Health Workforce Baseline and Surge Ratio', conducted by the Health force Center at the University of California San Francisco in March 21, 2020 concluded that the "the effect of substituting one nurse assistant for one professional nurse to care for every 25 patients— reduces the skill mix from 66.7% to 50%, or by 16.7%—increases the odds-on mortality by 21%."

Bellevue is committed to ensuring that nursing support staff does not exceed twelve (12) patients and is creating a nursing support pool that would address any unforeseen surges and assures additional coverage during one-to-one assignments on our clinical units.

#### **BHAs**

- Behavioral Health Associates (BHAs) at Bellevue Hospital work primarily in behavioral health units. They perform crisis and de-escalation interventions, therapeutic observations, and patient supervision. As a public health care hospital that sees some of New York City's most acute psychiatric patients, our BHAs are essential to the functioning of our behavioral health units.
- Our proposal for BHAs is 2 per unit for the following reasons:
  - 3 Psych Techs on the unit in support
  - BHAs are not assigned to specific patients, but rather perform de- escalation functions and routine observations

BHAs in the ED

Bellevue Hospital Center disagrees with DC37's assertion that the Emergency

Department requires 3 BHAs to ensure appropriate staffing.

Bellevue strongly believes that two (2) BHAs per tour in the Emergency

Department is satisfactory. Additionally, staffing is enhanced with additional support nurse staffing to reinforce the BHA's ability to perform de-escalation and

routine observation functions. As noted above, BHAs are not assigned to

individual patients but as unit support.

Bellevue believes that the proposed model for additional BHA staffing in the ED

is adequate.

**Clerical Staff** 

Bellevue Hospital Center supports staffing of one (1) Clerical staff on Tour 2 and Tour 3. The facility will also strategically add clerical staff on our patient-care

units on Tour 1.

We believe that Bellevue surpasses DC37 requests.

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Williams Hicks William Hicks, CEO *Omar Abedalıhman*Omar Abedalıhman, CNO

D.F.						NA.		Normalina Comma			DUA			LIN			Classical		1
BE			Physical Bed	1	Shift 1	Shift 2	Shift 1	Nursing Suppo Shift 2	Shift 3	Shift 1	BHA Shift 2	Shift 3	Shift 1	HN Shift 2	Shift 3	Shift 1	Clerical Shift 2	Shift 3	Concensus Reached
Dept Name	Service	Functional Service	Count	ADC	Ratio	Ratio	Ratio	Ratio	Ratio	Ratio	Ratio	Ratio	Ratio	Ratio	Ratio	Ratio	Ratio	Ratio	Concensus Reacheu
BE IP 15E SURG	Med/Surg	Med/Surg	32.0	EPIC	1:6	1:6	1:12	1:12	1:12	N/A	N/A	N/A	11000	1: Unit		N/A	1: Unit	1: Unit	
		Med/Surg		EPIC	1:6	1:6					,	<u> </u>							
BE IP 15N TRAUMA	Med/Surg	Stepdown	30.0	45% of ADC	1:4	1:4	1:12	1:12	1:12	N/A	N/A	N/A		1: Unit		1: Unit	1 : Unit	1: Unit	
		Med/Surg		EPIC	1:6	1:6	1:12	1:12	1:12	N/A	N/A	N/A		1 : Unit		N/A	1: Unit	1: Unit	
BE IP 15W GENERAL SURG	Med/Surg	Stepdown	38.0		1:4	1:4				,	,	<u> </u>				,			
		Med/Surg		EPIC	1:6	1:6													
BE IP 16E NEURO/MED	Med/Surg	Stroke/EEG	34.0	12% of ADC	1:4	1:4	1:12	1:12	1:12	N/A	N/A	N/A		1: Unit		1: Unit	1 : Unit	1: Unit	
·		,					2 per shift	2 per shift	2 per shift	N/A	N/A	N/A		N/A		N/A	N/A	N/A	
BE IP 16 N ACUTE MED	Med/Surg	Med/Surg	38.0	EPIC	1:6	1:6	1:12	1:12	1:12	N/A	N/A	N/A		1 : Unit		N/A	1 : Unit	1 : Unit	
BE IP 16S MED STEPDOWN	Stepdown	Stepdown	14.0	EPIC	1:4	1:4	2 per shift	2 per shift	2 per shift	N/A	N/A	N/A		1: Unit		N/A	1 : Unit	1 : Unit	
BE IP 16W ONCOLOGY/MED	Med/Surg	Med/Surg	34.0	EPIC	1:6	1:6	1:12	1:12	1:12	N/A	N/A	N/A		1 : Unit		N/A	1 : Unit	1 : Unit	
BE IP 17S ICU/SDU STEPDOWN	Stepdown	Stepdown	11.0	EPIC	1:4	1:4	2 per shift	2 per shift	2 per shift	N/A	N/A	N/A		1 : Unit		1: Unit	N/A	N/A	
BE IP 17W MEDICINE	Med/Surg	Med/Surg	24.0	EPIC	1:6	1:6	1:12	1:12	1:12	N/A	N/A	N/A		1 : Unit		N/A	1 : Unit	1 : Unit	
BE IP 19S PRIS HEALTH	Med/Surg	Prison Medicine	34.0	EPIC	1:4	1:4	1:4	1:4	1:4	2 : Shift	2 : Shift	2 : Shift		1 : Unit		1: Unit	1 : Unit	1 : Unit	
	,	Rehab/TBI		EPIC	1:6	1:6				N/A	N/A	N/A		1: Unit					
BE IP 6S REHAB	Med/Surg		30.0			1	1:12	1:12	1:12	.,	-,	,				N/A	1 : Unit	1 : Unit	
	,		1				2 per shift	2 per shift	2 per shift							1		1	
BE IP 6W REHAB/MED	Med/Surg	REHAB/MED	16.0	EPIC	1:6	1:6	2 per shift	2 per shift	2 per shift	N/A	N/A	N/A		1: Unit		N/A	1: Unit	1: Unit	
BELIP 7W MEDICINE	Med/Surg	Med/Surg	19.0	EPIC	1:6	1:6	1:12	1:12	1:12	.,,,,	,,,	,,,		1: Unit		1: Unit	1: Unit	1: Unit	
BE IP 7N MEDICINE	Med/Surg	Med/Surg	38.0	EPIC	1:6	1:6	1:12	1:12	1:12	N/A	N/A	N/A		1: Unit		1: Unit	1: Unit	N/A	
DE II /II WEDICITE	Wica/Suig	Cardiac Telemetry			1:4	1:4	1:12	1:12	1:12	N/A	N/A	N/A		1: Unit		N/A	1: Unit	1: Unit	
BE IP 17E MED/TELE	Med/Surg	Monitor Tech	26.0	EPIC	N/A	N/A	1 : Unit	1 : Unit	1: Unit	14/71	11,77	11,77		1.01110		11,71	1.01110	1.0	
	ivicu/suig	Cardiac Telemetry	†		1:4	1:4	1:12	1:12	1:12	N/A	N/A	N/A		1: Unit		1: Unit	1 : Unit	1 : Unit	
BE IP 17N MED/TELE	Med/Surg	Monitor Tech	48.0	EPIC	N/A	N/A	1 : Unit	1 : Unit	1: Unit	IV/A	IN/A	IV/A		1.01110		Closed	1.01110	1.01110	
BE IP 10E/N ICU/SDU	ICU	Cardiac CCU	20.0	EPIC	1:1.5	1:1.5	1:12	1:12	1:12	N/A	N/A	N/A		1: Unit		1 : Unit	1 : Unit	1 : Unit	
BE IP 10E/S MICU	ICU	ICU	18.0	EPIC	1:13	1:1.3	1:12	1:12	1:12	N/A	N/A	N/A		1: Unit		1: Unit	1: Unit	1: Unit	
BEL01 10Sw MED/SURG ICU	ICU	ICU	0.0	EPIC	Closed	Closed	Closed	Closed	Closed	Closed	Closed	Closed	Closed	Closed	Closed	N/A	Closed	Closed	
BE IP 10W/N SICU	ICU	ICU	18.0	EPIC	1:2	1:2	1:12	1:12	1:12	N/A	N/A	N/A	Closed	1: Unit	Closed	1:UNIT	1 : Unit	1 : Unit	
BE IP 15S SUR STEPDOWN	ICU	ICU	10.0	EPIC	1:2	1:2	1:12	1:12	1:12	N/A	N/A	N/A		1: Unit		N/A	N/A	N/A	
BE IP 11N CV	ICU	Cardiac ICU	8.0	EPIC	1:1.5	1:1.5	1:12	1:12	1:12	N/A	N/A	N/A		1: Unit		1: Unit	1: Unit	N/A	
BE IP 8N PEDIATRICS	Mat/Child	PEDS	15.0	EPIC	1:6	1:6	1:12	1:12	1:12	N/A	N/A	N/A		N/A		1: Unit	1: Unit	1: Unit	
BE IP 8S PICU	Mat/Child	PICU	7.0	EPIC	1:2	1:2	1:12	1:12	1:12	N/A	N/A	N/A		N/A		N/A	N/A	N/A	
BE IP 9E MOTHER BABY	Mat/Child	Mat/Child	22.0	EPIC	1:3	1:3	1:12	1:12	1:12	N/A	N/A	N/A		1: Unit		1: Unit	1: Unit	1: Unit	
BE IP 9N NICU	Mat/Child	NICU Lv 4	25.0	EPIC	1:1.5	1:1.5	1:12	1:12	1:12	N/A	N/A	N/A		1: Unit		1: Unit	1: Unit	1: Unit	
BE IP 8N PICU	Mat/Child	PICU SD	4.0	EPIC	Closed	Closed	Closed	Closed	Closed	Closed	Closed	Closed	Closed	Closed	Closed	N/A	Closed	Closed	
BE IPP 12S ADULT PSYCH	BH	Adult Med Psych	28.0	EPIC	1:6	1:6	3 : Unit	3 : Unit	3 : Unit	3 : Unit	3 : Unit	3 : Unit	Closed	1: Unit	Closed	N/A	1: Unit	1: Unit	
BE IPP 18N ADULT PSYCH	BH	Extended Care Psych	30.0	EPIC	1:6	1:6	2 : Unit	2 : Unit	2 : Unit	3 : Unit	3 : Unit	3 : Unit		1: Unit		N/A	1: Unit	1: Unit	
BE IPP 18S ADULT PSYCH	BH	Adult Psych	30.0	EPIC	1:7	1:7	2 : Unit	2 : Unit	2 : Unit	3 : Unit	3 : Unit	3 : Unit		1: Unit		N/A	1: Unit	1: Unit	
BE IPP 18W ADULT PSYCH	BH	Adult Psych	30.0	EPIC	1:7	1:7	2 : Unit	2 : Unit	2 : Unit	3 : Unit	3: Unit	3 : Unit		1: Unit		N/A	1: Unit	1: Unit	
BE IPP 19N FOREN PSY	BH	Prison Psych	29.0	EPIC	1:6	1:6	3 : Unit	3 : Unit	3 : Unit	3: Unit	3: Unit	3 : Unit		1: Unit		N/A	1: Unit	1: Unit	
BE IPP 19W FOREN PSY	ВН	Prison Psych	39.0	EPIC	1:6	1:6	3 : Unit	3 : Unit	3 : Unit	3 : Unit	3 : Unit	3 : Unit		1: Unit		N/A N/A	1: Unit	1: Unit	
BE IPP 20E ADULT PSYCH	BH	Adult Psych	27.0	EPIC	1:7	1:7	2 : Unit	2 : Unit	2 : Unit	3 : Unit	3 : Unit	3 : Unit		1: Unit		N/A	1: Unit	1: Unit	
BE IPP 20N ADULT PSYCH	BH	Adult Psych	19.0	EPIC	1:7	1:7	2 : Unit	2 : Unit	2 : Unit	3: Unit	3 : Unit	3 : Unit		1: Unit		N/A	1: Unit	1: Unit	
BE IPP 20W ADULT PSYCH	BH	Adult Psych	28.0	EPIC	1:5	1:5	2: Unit	2 : Unit	2 : Unit	3 : Unit	3 : Unit	3: Unit		1: Unit		N/A	1: Unit	1: Unit	
BE IPP 21N ADOL PSYCH	BH	Child Psych	15.0	EPIC	1:5	1:5	2 : Unit	2 : Unit	2 : Unit	2 : Unit	2 : Unit	2 : Unit		1: Unit		N/A	1: Unit	1: Unit	
BE IPP 21S PEDS PSYCH	BH	Child Psych	15.0	EPIC	1:5	1:5	2 : Unit	2 : Unit	2 : Unit	2 : Unit	2 : Unit	2 : Unit		1: Unit		N/A	1: Unit	1: Unit	
BE IPP 21W ADOL PSYCH	BH	Child Psych	15.0	EPIC	1:5	1:5	2: Unit	2 : Unit	2 : Unit	2 : Unit	2: Unit	2 : Unit		1: Unit		N/A	1: Unit	1: Unit	
BE IP 9S L&D	L&D	Labor and Delivery	15.0	EPIC	1:3	1:2	1:12	1:12	1:12	N/A	N/A	N/A	N/A	1: Unit	N/A	N/A	N/A	N/A	
IP EBOLA	Other	Eddor and Delivery	N/A	N/A	4 : Unit	4 : Unit	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
ECT ECT	Other		N/A	N/A	N/A	1: Unit	N/A	N/A	N/A	N/A	1: Unit	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
BE IPP 1 to 1 Patient Coverage Pool	Staff Pool	1 to 1 Patient Coverage Assignments	N/A	EPIC	N/A	N/A	1:1**	1:1**	1:1**	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
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							J					<del>                                     </del>			-				
Nursing Support Titles			+													+			
PCA																			
PCT			+													+			
Nurse Aide			+													+			
PSHT			+									-				+			
FJIII		1												I.	1			1	

#### **Adult Emergency Department**

		RN		
		Shift 1 Ratio	Shift 2 Ratio	
Amplicate All Adult	ESI 1	1:1	1:1	
Applies to All Adult Emergency Departments	ESI 2	1:2	1:2	
	ESI 3	1:5	1:5	
	ESI 4 + 5	1:8	1:8	

Nursing Support					
Shift 1 Ratio	Shift 2 Ratio	Shift 3 Ratio			
1: 12	1: 12	1: 12			

вна				
Shift 1 Ratio	Shift 2 Ratio	Shift 3 Ratio		
2: Shift	2: Shift	2: Shift		

Ratio does not change based on ESI

# **PEDS Emergency Department**

		R	iN .
		Shift 1 Ratio	Shift 2 Ratio
Annilla de All DEDa	ESI 1	1:1	1:1
Applies to All PEDs	ESI 2	1:2	1:2
Emergency	ESI 3	1:5	1:5
Departments	ESI 4 + 5	1:8	1:8

Nursing Support					
Shift 1 Ratio	Shift 2 Ratio	Shift 3 Ratio			
1:12	1:12	1:12			

вна					
Shift 1 Ratio	Shift 2 Ratio	Shift 3 Ratio			
N/A	N/A	N/A			

Ratio does not change based on ESI

# Adult Psychiatric Emergency Department

- opa	ь	RN
	Shift 1 Ratio	Shift 2 Ratio
	8: Shift	8: Shift

Nursing Support					
Shift 1 Ratio	Shift 2 Ratio	Shift 3 Ratio			
NA	NA	NA			

ВНА					
Shift 1 Ratio	Shift 2 Ratio	Shift 3 Ratio			
16: Shift	16: Shift	16: Shift			

### **Pediatric Psychiatric Emergency Department**

	R	N
	Shift 1 Ratio	Shift 2 Ratio
	3: Shift	3: Shift

Nursing Support				
Shift 1 Ratio	Shift 2 Ratio	Shift 3 Ratio		
2: Shift	2: Shift	2: Shift		

	ВНА	
Shift 1 Ratio	Shift 2 Ratio	Shift 3 Ratio
2: Shift	2: Shift	2: Shift

**Nursing Support Titles** 

PCA

PCT

PSHT

Nurse Aide

# **Operating Room**

Operating Room

R	RN
Shift 1	Shift 2
Ratio	Ratio
1:1	1:1

	Surgical Tech	
Shift 1 Ratio	Shift 2 Ratio	Shift 3 Ratio
1:1	1:1	1:1

	Nursing Support	t
Shift 1 Ratio	Shift 2 Ratio	Shift 3 Ratio
N/A	N/A	N/A

**Nursing Support Titles** 

PCA

PCT

PSHT

Nurse Aide

Second Control Contr	E 1111	I	1	I	1	1		1	1	1				1		1		ı				1		1	1	1	1		1		1	1		
Common	Facility Name:	Bellevue																																
Solity   S	. tallic.							†																							+			
Column   C	Facility																																	
Part	Contact:	CNO																																
Part																																		
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Part																															Additio		Additio	
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Surgery   Surg						Shift		shift	t):	shift	y):	Shift	ng):	shift	t):	shift	(Day):	Shift	ng):	g shift	:	shift		Shift	+	g shift	(Night):	shift	(Day):	Shift	g):	g shift	:	shift
Cartifactor   California   Cartifology   Part   Cartifology   Part   P		-	1			6		2	N/A	N/A	NI/A	N/A	NI/A	N/A	N/A	NI/A	NI/A	N/A	NI/A	N/A	N/A	NI/A	1	1	1	1	N/A	NI/A	NI/A	NI/A	NI/A	N/A	N/A	N/A
Cardiac Collected: CARDIAC CATTOUTHER   CARDIACTER   CA	y Surgery	Surgery	CIIC	Juigery		"	J.30p		IV/A	IN/A	IV/A	IV/A	N/A	N/A	IN/A	IV/A	N/A	IN/A	IV/A	N/A	N/A	N/A	- Zp	-	Jp	-	IV/A	N/A	IV/A	IV/A	IV/A	IV/A	N/A	IV/A
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Second Control   Seco					7:30																		1											
Surgical Cardiacter Catheter's						1		-															4:30p	1							-			
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Table   Tabl	ation	LAB	ent	Cardiology		1	N/A	N/A	call	2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	2:30p	1	N/A	N/A	N/A	N/A	4р	1	N/A	N/A	N/A	N/A
P   6   P   6   P   6   P   7   7   7   7   7   7   7   7   7																							7.200											
93-30					1	6																	1	1										
P   Z   P   Z   P   Z   P   P   P   P					<del></del>																													
Table   Tabl																							8a-											
7:30						2																	4:30p	1										
P   6   9a- 9:30   9a- 9:30   P   2   P   6   P   P   6   P   P   P   P   P					7a-																		7.200											
Sample   S						6																	4p	1										
Second					9a-			1																							1			
O.R. GASTROENTER OLOGY o																																		
Endoscopy   GASTROENTER   Outpati   GASTROENTER   Oldgy   California					р	2																	4:30p	1										
Endoscopy   GASTROENTER   Outpati   GASTROENTER   Oldgy   California																																		
Endoscopy OLOGY ent OLOGY a-4p 2 N/A																																		
8a- 4:30 p 1 8a- 6:30 p 2 p 2 s 30 p 2 s 30 p 2 s 30 p 30 p 30 p 30 p 30 p 30 p 30 p 30 p	Endosconii		Outpati			,	NI/A	NI/A	NI/A	NI/A	NI/A	NI/A	NI/A	NI/A	NI/A	NI/A	NI/A	NI/A	NI/A	NI/A	NI/A	NI/A		1	NI/A	NI/A	NI/A	NI/A	NI/A	NI/A	NI/A	NI/A	NI/A	NI/A
	Endoscopy	OLOGY	ent	OLOGY	8a-		N/A	N/A	IN/A	IN/A	N/A	IN/A	IN/A	N/A	IN/A	IN/A	N/A	IN/A	IN/A	IN/A	N/A	N/A	4:50p	1	IN/A	N/A	IN/A	N/A	IN/A	IN/A	N/A	N/A	N/A	IN/A
					4:30																		8:30a-											
6:30   9a-   5:30p 1					р																			2										
8:30 a-5p 2 9:30					6:30	2																		1										
9:30 9:30 9:30 9:30 9:30 9:30 9:30 9:30								+										1	<del> </del>				5:5UP	-						+	+			
9:30 a-6p 1					a-5p	2																												
a-6p 1					9:30																													
					а-6р	1																												

Depart - DOH Required Geriatric	Facility Depart Part of Medical Clinic	Inpatie nt or Outpati ent Outpati ent	Service Line Ambulato ry Care	RN Shift Tim e (Day ): 8:30 a-5p	duri ng Day Shift	RN Shift Time (Eveni ng):	# of RN durin g eveni ng shift	RN Shift Time (Nigh t):	# of RN duri ng nigh t shift	LPN Shif t Tim e (Da y):	# of LPN duri ng Day Shift	LPN Shift Time (Eveni ng):	# of LPN durin g eveni ng shift	LPN Shift Time (Nigh t):	# of LPN duri ng nigh t shift	Ancilla ry Memb ers Shift Time (Day):	# of Ancilla ry Memb ers during Day Shift	Ancilla ry Memb ers Shift Time (Eveni ng):	# of Ancilla ry Memb ers during evenin g shift	Ancilla ry Memb ers Shift Time (Night) :	# of Ancilla ry Memb ers during night shift	unlicen sed person nel Shift Time (Day):  8a- 4:30p 8:30a- 5p	# of unlicen sed person nel during Day Shift	unlicen sed person nel Shift Time (Evenin g):	# of unlicen sed person nel during evening shift	unlicen sed person nel Shift Time (Night):	# of unlicen sed person nel during night shift	Additio nal Resour ce Suppor t Shift Time (Day):	# of Additio nal Resour ce Suppor t during Day Shift	Additio nal Resour ce Suppor t Shift Time (Evenin g): N/A	# of Additio nal Resour ce Suppor t during evenin g shift	Additio nal Resour ce Suppor t Shift Time (Night):	# of Additio nal Resour ce Suppor t during night shift
Obstetrics/Gyne cology	GYNECOL OGY	Outpati ent	AMBULAT ORY CARE	8a- 4:30 p 8:30 a-5p 9a- 5:30	3	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	8a- 4:30p 8:30a- 5p	4	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
				p 10a- 6:30 p	2																	5:30p 9:30a- 6p 10a- 6:30p	1 1										
Dental O/P	DENTISTR Y	Outpati ent	DENTISTR Y	8a- 4:30 p	3	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	8a- 4:30p 8:30a- 5p	2	N/A N/A	N/A N/A	N/A N/A	N/A N/A	Dental Assista nt - 8a- 4:30p	3	N/A	N/A	N/A	N/A
Dialysis - Acute	Outsourc ed to River Renal	Outpati ent	Dialysis	On Call - 7a- 7:30 p		N/A	N/A	On call - 7p- 7:30a	1						N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Dialysis O/P	Outsourc ed to River Renal	Outpati ent	Dialysis	7a- 6:30 p		N/A	N/A	6p- 6a	1 - on call	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Infusion Center	CS MED ONCOLOG Y	Outpati ent	AMBULAT ORY CARE	8a- 4:30 p 8:30 a-5p 9a- 5:30 p	3	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	8a- 4:30p 8:30a- 5p 9a- 5:30p	5 2 1	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Lithotripsy	CYSTOSC OPY	Outpati ent	OR	7a- 3:30 p		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	9:30a- 6p 7a- 3:30p	2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
MRI	MRI	Outpati ent	Radiology	7a- 7:30 p		N/A	N/A	7p- 7:30a 8p- 8:30a		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	7a- 3:30p	1	11a-7p 12:30p- 9p	1	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

Depart - DOH		Inpatie nt or Outpati	Service	RN Shift Tim e (Day	# of RN duri ng Day	RN Shift Time (Eveni	# of RN durin g eveni ng	RN Shift Time (Nigh	# of RN duri ng nigh t	LPN Shif t Tim e (Da	# of LPN duri ng Day	LPN Shift Time (Eveni	# of LPN durin g eveni ng	LPN Shift Time (Nigh	# of LPN duri ng nigh t	Ancilla ry Memb ers Shift Time	# of Ancilla ry Memb ers during Day	Ancilla ry Memb ers Shift Time (Eveni	# of Ancilla ry Memb ers during evenin	Ancilla ry Memb ers Shift Time (Night)	# of Ancilla ry Memb ers during night	unlicen sed person nel Shift Time	# of unlicen sed person nel during Day	unlicen sed person nel Shift Time (Evenin	# of unlicen sed person nel during evening	unlicen sed person nel Shift Time	# of unlicen sed person nel during night	Additio nal Resour ce Suppor t Shift Time	# of Additio nal Resour ce Suppor t during Day	Additio nal Resour ce Suppor t Shift Time (Evenin	# of Additio nal Resour ce Suppor t during evenin	Additio nal Resour ce Suppor t Shift Time	# of Additio nal Resour ce Suppor t during night
Required  Mental Health Services O/P	Facility Depart  METHADONE	ent Outpati ent	Line Mental Health Services	): 7a- 3:30 p	Shift 5	ng): 10:30a -7p	shift 2	t):	shift N/A	y): N/A	Shift N/A	ng): N/A	shift N/A	t):	shift N/A	(Day):	Shift N/A	ng): N/A	g shift N/A	: N/A	shift N/A	7a- 3:30p	Shift 1	g): N/A	shift N/A	(Night):	shift N/A	(Day):	Shift N/A	g): N/A	g shift N/A	(Night):	shift N/A
Mental Health Services O/P	ACT PROGRAM 1	Outpati ent	Mental Health Services	8a- 6:30 p	2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Mental Health Services O/P	CHEMICAL DEPENDENCY	Outpati ent	Mental Health Services	8a- 4:30 p	1	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Nuclear Medicine/Radi ology	INTERVENTIO NAL RADIOLOGY	Outpati ent	Radiolog y	7a- 5:30 p	3	N/A	N/A	On call - 7p- 7:30a	2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Outpatient Clinics	Dermatology	Outpati ent	Ambulat ory Care	7a- 3:30 p	1	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	8a- 4:30p	2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
				8a- 4:30 p 8:30	2																	8:30a- 5p 9a-	1										
				a-5p 9a- 5:30	1																	5:30p 10a-	1										
	Ophthalmolog			р 7а-	2																	6:30p	1										
	y/Ear Nose & Throat	Outpati ent	Ambulat ory Care	3:30	1	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	8a- 4:30p 9a-	1	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
				a-4p 8a- 4:30 p 8:30	2																	5:30p	1										
				9a- 5:30 p	2											4 4001 50		spital Cen															

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- DOH Requir ed	Facilit y Depar t Medic	Inpatien t or Outpati ent	Service Line	RN Shift Tim e (Day ):	# of RN duri ng Day Shift	RN Shift Time (Evenin g):	# of RN durin g eveni ng shift	RN Shift Time (Nigh t):	# of RN duri ng nigh t	LPN Shift Tim e (Day	# of LPN duri ng Day Shift	LPN Shift Time (Evenin g):	# of LPN durin g eveni ng shift	LPN Shift Time (Nigh t):	# of LPN duri ng nigh t	Ancilla ry Memb ers Shift Time (Day):	# of Ancilla ry Memb ers during Day Shift	Ancillar y Membe rs Shift Time (Evenin g):	# of Ancilla ry Memb ers during evenin g shift	Ancilla ry Memb ers Shift Time (Night)	# of Ancilla ry Memb ers during night shift	unlicens ed personn el Shift Time (Day):	# of unlicens ed personn el during Day Shift	unlicens ed personn el Shift Time (Evenin g):	# of unlicens ed personn el during evening shift	unlicens ed personn el Shift Time (Night):	# of unlicens ed personn el during night shift	Additio nal Resourc e Support Shift Time (Day):	# of Additio nal Resourc e Support during Day Shift	Additio nal Resourc e Support Shift Time (Evenin g):	# of Additio nal Resourc e Support during evening shift	Additio nal Resourc e Support Shift Time (Night):	# of Additio nal Resourc e Support during night shift
	al Clinic	Outpati ent	AMBULAT ORY CARE	4:30 p	1	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	8a- 4:30p	2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	-			8:30			,	,	,	,	14/1	.,,	,	14/11	.,,,,	,	,	,		1.47.1	,//	8:30a-		,		14/11	,//	,	,	.47.	.,,,,	,	,
				a-5p 9a-	1																	5р	2										
				5:30 p	1																	9a- 5:30p	3										
				9:30 a-6p	1																												
	Prima ry Care Clinic	Outpati ent	Ambulator y Care	7a- 3:30 p	1	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	8a- 4:30p	5	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
				8a- 4:30 p	2																	8:30a- 5p	11										
				8:30 a-5p	14																	10:30a- 7p	7										
	Surgic al Clinic Adult	Outpati ent	Ambulator y Care	7a- 3:30 p	1	N/A	N/A	N/A	N/A	9a- 5:30 p	1	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	7a- 3:30p	1			N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
				7:30 a-4p	1																	7:30a- 4p	3										
				8a- 4:30 p	3																	8a- 4:30p	3										
				9a- 5:30 p	1																	8:30a- 5p	1										
																						9a- 5:30p	5										
	Virolo gy Adult	Outpati ent	Ambulator y Care	8a- 4:30 p	1	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	8a- 4:30p	1	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
				8:30 a-5p	2																	8:30a- 5p	2										

Depart - DOH Requir ed	Facility Depart	Inpatien t or Outpati ent	Service Line	RN Shift Tim e (Day	# of RN duri ng Day Shift	RN Shift Time (Evenin g):	# of RN durin g eveni ng shift	RN Shift Time (Nigh t):	# of RN duri ng nigh t	LPN Shift Tim e (Day	# of LPN duri ng Day Shift	LPN Shift Time (Evenin g):	# of LPN durin g eveni ng shift	LPN Shift Time (Nigh t):	# of LPN duri ng nigh t	Ancilla ry Memb ers Shift Time (Day):	# of Ancilla ry Memb ers during Day Shift	Ancillar y Membe rs Shift Time (Evenin g):	# of Ancilla ry Memb ers during evenin g shift	Ancilla ry Memb ers Shift Time (Night) :	# of Ancilla ry Memb ers during night shift	unlicens ed personn el Shift Time (Day):	# of unlicens ed personn el during Day Shift	unlicens ed personn el Shift Time (Evenin g):	# of unlicens ed personn el during evening shift	unlicens ed personn el Shift Time (Night):	# of unlicens ed personn el during night shift	Additio nal Resourc e Support Shift Time (Day): Nurse	# of Additio nal Resourc e Support during Day Shift	Additio nal Resourc e Support Shift Time (Evenin g):	# of Additio nal Resourc e Support during evening shift	Additio nal Resourc e Support Shift Time (Night):	# of Additio nal Resourc e Support during night shift
	WTC NON - RESPON DER GRANT	Outpati ent	Ambulator y Care	8:30 a-5p 9a- 5:30	2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	8a- 4:30p 9a- 5:30p	2	N/A	N/A	N/A	N/A	Aide - Patient Transpo rt - 9a- 3:45p	1	N/A	N/A	N/A	N/A
																						3.30р											
	PEDS primary care	Outpati ent	AMBULAT ORY CARE	8a- 4:30 p 8:45	2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	8a- 4:30p	2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
				a- 5:15 p	6																	8:30a- 5p	2										
				9:30 a-6p	1																	8:45a- 5:15p	5										
																						9a- 5:30p	3										
				8:45 a-																													
				5:15																		8:30a-											
				9:30	6																	5p 8:45a-	2										
				a-6p	1																	5:15p	5										
																						9a- 5:30p	3										
	Pulmona	Outpati	Ambulator																			8:30a-											
	ry	ent	y Care	a-5p	2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	5p	2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Stress																																	
Lab																																	
(non- invasiv	Radiolog	Outpati		7:30																		7a-											
e)	У	ent	Radiology	а-6р	3	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	3:30p	1	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
CT scan	Radiolog y	Outpati ent	Radiology	7:30 a-6p	6	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	7:30a- 4p	2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	

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				RN	# of		# of RN		# of RN	LPN	# of		# of LPN		# of LPN	Ancilla ry	# of Ancilla ry	Ancillar y Memb	# of Ancilla ry	Ancilla ry Memb	# of Ancilla ry	unlicens	# of unlicens ed	unlicens ed	# of unlicens ed	unlicens	# of unlicens ed	Additio nal Resourc	# of Additio nal Resourc	Additio nal Resourc e	# of Additio nal Resourc	Additio nal Resourc	# of Additio nal Resourc
		Innation		Shift Tim	RN	RN Shift	durin	RN Shift	duri	Shift	LPN	LPN Shift	durin	LPN Shift	duri	Memb	Memb	ers Shift	Memb	ers	Memb	ed	personn	personn	personn	ed	personn	e Cummont	e Cummont	Support Shift	e Cummont	e Cummont	e Cummont
Depart -		Inpatien t or		e	duri	Time	g eveni	Time	ng nigh	Tim e	duri	Time	g eveni	Time	ng nigh	ers Shift	ers during	Time	ers during	Shift Time	ers during	personn el Shift	el during	el Shift Time	ei during	personn el Shift	el during	Support Shift	Support during	Time	Support during	Support Shift	Support during
DOH	Facility	Outpati	Service	(Day	ng Day	(Evenin	ng	(Nigh	t	(Day	ng Day	(Evenin	ng	(Nigh	t	Time	Day	(Evenin	evenin	(Night)	night	Time	Day	(Evenin	evening	Time	night	Time	Day	(Evenin	evening	Time	night
Required	Depart	ent	Line	):	Shift	g):	shift	t):	shift	):	Shift	g):	shift	t):	shift	(Day):	Shift	g):	g shift	:	shift	(Day):	Shift	g):	shift	(Night):	shift	(Day):	Shift	g):	shift	(Night):	shift
	·	Outpati		7:30		10a-		7p-		<u> </u>		- 07				. ,,		- 0,				7:30a-		3p-		11p-		. ,,		- 0,		, ,	
PACU	Peri Op	ent	Peri Op	a-8p	7	10:30p	1	7:30a	2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	4р	2	11:30p	1	7:30a	1	N/A	N/A	N/A	N/A	N/A	N/A
				9a- 9:30 p	3	11a- 11:30p	1																										
Occupatio																																	
nal				6a-																													
Health	Ambulat	Outpati	Ambulat	2:30																		6a-											
Services	ory Care	ent	ory Care	р	1	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	2:30pm	2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
				7a- 3:30 p	2																	7a- 3:30p	2										
				8a-																													
				4:30																		8a-											
				р	4																	4:40p	3										
Cardiac	Ambulat	Outpati	Cardiac	7a- 3:30																		7a-											
Rehab	ory Care	ent	Rehab	p.3.30	1	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	3:30p	3	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

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