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The following is the comprehensive hospital staffing plan for Astria Sunnyside Hospital submitted to the Washington State Department of Health in accordance with Revised Code of Washington 70.41.420 for the year 2025 .

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Washington State Department of HEALTH

Hospital Staffing Form

Attestation

Date: 12/26/20

I, the undersigned with responsibility for Astria Sunnyside Hospital attest that the attached hospital staffing plan and matrix are in accordance with RCW 70.41.420 for 2025 , and includes all units covered under our hospital license under RCW 70.41.

As approved by: Brian P Gibbons Jr., CEO & President

Hospital Information

Name of Hospital: Astria Sunnyside Hospital			
Hospital License #: HAC.FS.00000198			
Hospital Street Address: 1016 Tacoma Ave			
City/Town: Sunnyside	State: WA	Zip code: 98944	
Is this hospital license affiliated with more than one location?	☐ Yes	☑ No	
If "Yes" was selected, please provide the location name and address			
Review Type:	☑ Annual	Review Date: 12/2024	
	☐ Update	Next Review Date: 12/2025	
Effective Date: 1/1/2025			
Date Approved: 9/3/2024			

Hospital Information Continued (Optional)

Factors Considered in the Development of the Hospital Staffing Plan (check all that apply):

☑ Staffing guidelines adopted or published by national nursing professional associations, specialty nursing organizations, and other health professional organizations

Description:
AACN (American Association of Critical-Care Nurses); AMSN (Association of Medical-Surgical Nurses); ENA (Emergency Nurses Association); SIR (Society of Interventional Radiology); OWCN (Organization of Wound Care Nurses & Allied Healthcare Professionals); ONS (Oncology Nursing Society); AORN (Assoication of Peroperative Registered Nurses); AWHONN (Association of Women's Health, Obstetric and Neonatal Nurses); NAHC (National Association for Home Care & Hospice); NHPCO (National Hospice and Palliative Care Organization)

☑ Terms of applicable collective bargaining agreement

Description:
2021-2024 Collective Bargaining Agreement by and Between Astria Sunnyside Hospital and Washington STate Nurses Association. Currently in negotiations.

☑ Relevant state and federal laws and rules including those regarding meal and rest breaks and use of overtime and on-call shifts

Description:
WAC 296-126-092; Adminstrative Policy ES.C.6.1; RCW 49.12.480-19.12.483; Administrative PolicyHLS.A.2;SB 5236

☑ Hospital finances and resources

Description:

☐ Other

Description:

Signature

CEO & Co-chairs Name:	Signature:	Date:
Brian P. Gibbons		9/3/2024
Lovella Flores	L. Flores	9/3/2024

Total Votes	
# of Approvals	# of Denials
19	0

Access unit staffing matrices here.

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Washington State Department of HEALTH

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Patient Volume-based Staffing Matrix Formula Template

Minimum means the minimum number of RNs, LPNs, CNAs, and UAPs per shift based on the average needs of the unit such as patient acuity, staff skill level, and patient care activities. If a unit does not utilize certain staff for that shift please put "0", do not leave it blank.

Unit/ Clinic Name:	**Intensive Care Unit**		
Unit/ Clinic Type:	**Combination of Intensive Care Unit/Intermediate Care/Med/Surg status**		
Unit/ Clinic Address:	**1016 Tacoma Ave, Sunnyside WA, 98944**		
Average Daily Census:	**4**	**Maximum # of Beds:**	**7**
Effective as of:	**1/1/2025**		
Census			

Census	Shift Type	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's	Min # of RN HPUS	Min # of LPN HPUS	Min # of CNA HPUS	Min # of UAP HPUS	Total Minimum Direct Pt. Care HPUS (hours per unit of service)
7	Day (0700-1930)	12.00	3.00	0.00	1.00	0.00	5.14	0.00	1.71	0.00	13.71
	Night (1900-0730)	12.00	3.00	0.00	1.00	0.00	5.14	0.00	1.71	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
6	Day (0700-1930)	12.00	3.00	0.00	1.00	0.00	6.00	0.00	2.00	0.00	16.00
	Night (1900-0730)	12.00	3.00	0.00	1.00	0.00	6.00	0.00	2.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	

		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
5	Day (0700-1930)	12.00	3.00	0.00	1.00	0.00	7.20	0.00	2.40	0.00	19.20
	Night (1900-0730)	12.00	3.00	0.00	1.00	0.00	7.20	0.00	2.40	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
4	Day (0700-1930)	12.00	2.00	0.00	1.00	0.00	6.00	0.00	3.00	0.00	18.00
	Night (1900-0730)	12.00	2.00	0.00	1.00	0.00	6.00	0.00	3.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
3	Day (0700-1930)	12.00	2.00	0.00	1.00	0.00	8.00	0.00	4.00	0.00	20.00
	Night (1900-0730)	12.00	2.00	0.00	0.00	0.00	8.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
2	Day (0700-1930)	12.00	2.00	0.00	0.00	0.00	12.00	0.00	0.00	0.00	24.00

	Night (1900-0730)	12.00	2.00	0.00	0.00	0.00	12.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
1	Day (0700-1930)	12.00	2.00	0.00	0.00	0.00	24.00	0.00	0.00	0.00	48.00
	Night (1900-0730)	12.00	2.00	0.00	0.00	0.00	24.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
0	Day (0700-1930)	1.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
	Night (1900-0730)	1.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	

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Unit Information

Additional Care Team Members

Occupation	Shift Coverage			
	Day	Evening	Night	Weekend
Respiratory Therapy	1	1	1	1
Hospitalist	1	1	1	1
Social Services	1			
Utilization Review	1			
Speech Therapy	1			
Occupational Therapy	1			
Physical Therapy	1			1
Dietician	1			

Unit Information

Factors Considered in the Development of the Unit Staffing Plan (Check all that apply):

☑ Activity such as patient admissions, discharges, and transfers

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

☑ Patient acuity level, intensity of care needs, and the type of care to be delivered on each shift

Staffing based on patient acuity or status

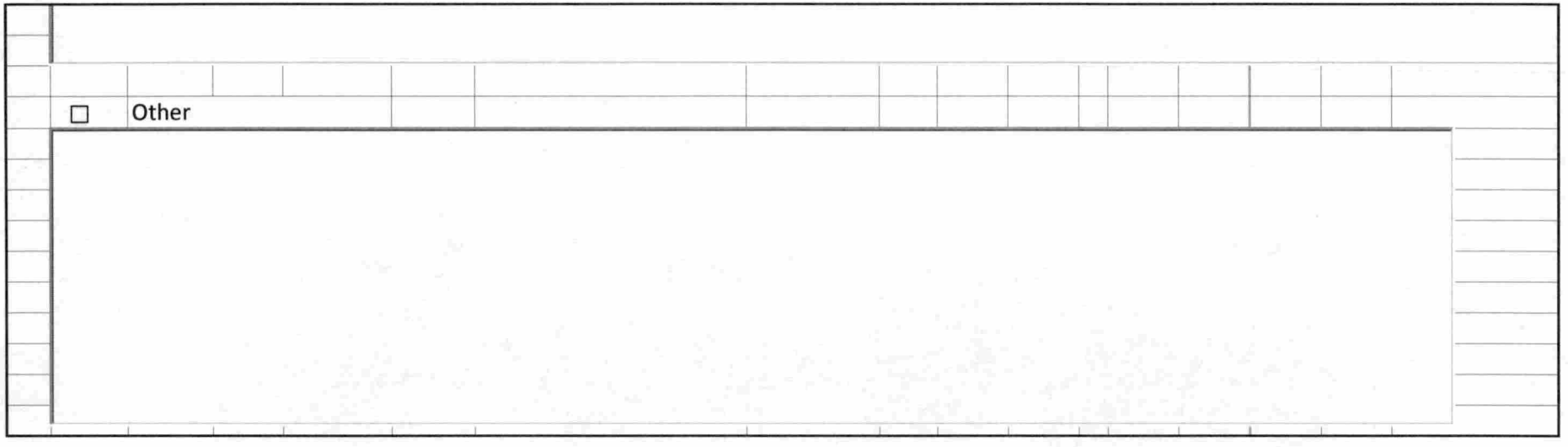
☑ Skill mix

ICU patient is 2:1 patient: nurse ratio; Intermediate status patients is 3:1 patient:nurse ratio; Med/Surg patient:nurse ratio 5:1 day shift; 6:1 night shift; Note: if with 2 ICU and 3 IMC, may have 2 RN's based on pateint:nurse ratio

☐ Level of experience of nursing and patient care staff

☐ Need for specialized or intensive equipment

☐ Architecture and geography of the unit such as placement of patient rooms, treatment areas, nursing stations, medication preparation areas, and equipment


Other

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Patient Volume-based Staffing Matrix Formula Template

Minimum means the minimum number of RNs, LPNs, CNAs, and UAPs per shift based on the average needs of the unit such as patient acuity, staff skill level, and patient care activities. If a unit does not utilize certain staff for that shift please put "0". do not leave it blank.

Unit/ Clinic Name:	**Medical/Surgical Services**		
Unit/ Clinic Type:	**Combination of Med-Surg/Pediatric/Telemetry/Intermediate status**		
Unit/ Clinic Address:	**1016 Tacoma Ave, Sunnyside, WA 98944**		
Average Daily Census:	**17**	**Maximum # of Beds:**	**20**
Effective as of:	**1/1/2025**		

Census

Census	Shift Type	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's	Min # of RN HPUS	Min # of LPN HPUS	Min # of CNA HPUS	Min # of UAP HPUS	Total Minimum Direct Pt. Care HPUS (hours per unit of service)
20	Day(0700-1930)	12.00	2.00	2.00	2.00	0.00	1.20	1.20	1.20	0.00	7.20
	Night(1900-0730)	12.00	2.00	2.00	2.00	0.00	1.20	1.20	1.20	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
19	Day(0700-1930)	12.00	2.00	2.00	2.00	0.00	1.26	1.26	1.26	0.00	7.58
	Night(1900-0730)	12.00	2.00	2.00	2.00	0.00	1.26	1.26	1.26	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	

		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
18	Day(0700-1930)	12.00	2.00	2.00	2.00	0.00	1.33	1.33	1.33	0.00	7.33
	Night(1900-0730)	12.00	1.00	2.00	2.00	0.00	0.67	1.33	1.33	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
17	Day(0700-1930)	12.00	2.00	2.00	2.00	0.00	1.41	1.41	1.41	0.00	7.76
	Night(1900-0730)	12.00	1.00	2.00	2.00	0.00	0.71	1.41	1.41	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
16	Day(0700-1930)	12.00	2.00	2.00	2.00	0.00	1.50	1.50	1.50	0.00	8.25
	Night(1900-0730)	12.00	1.00	2.00	2.00	0.00	0.75	1.50	1.50	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
15	Day(0700-1930)	12.00	1.00	2.00	2.00	0.00	0.80	1.60	1.60	0.00	8.00

	Night(1900-0730)	12.00	1.00	2.00	2.00	0.00	0.80	1.60	1.60	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
14	Day(0700-1930)	12.00	1.00	2.00	2.00	0.00	0.86	1.71	1.71	0.00	8.57
	Night(1900-0730)	12.00	1.00	2.00	2.00	0.00	0.86	1.71	1.71	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
13	Day(0700-1930)	12.00	1.00	2.00	2.00	0.00	0.92	1.85	1.85	0.00	9.23
	Night(1900-0730)	12.00	1.00	2.00	2.00	0.00	0.92	1.85	1.85	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
12	Day(0700-1930)	12.00	1.00	2.00	1.00	0.00	1.00	2.00	1.00	0.00	7.00
	Night(1900-0730)	12.00	1.00	1.00	1.00	0.00	1.00	1.00	1.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	

		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
11	Day(0700-1930)	12.00	1.00	2.00	1.00	0.00	1.09	2.18	1.09	0.00	7.64
	Night(1900-0730)	12.00	1.00	1.00	1.00	0.00	1.09	1.09	1.09	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
10	Day(0700-1930)	12.00	1.00	1.00	1.00	0.00	1.20	1.20	1.20	0.00	7.20
	Night(1900-0730)	12.00	1.00	1.00	1.00	0.00	1.20	1.20	1.20	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
9	Day(0700-1930)	12.00	1.00	1.00	1.00	0.00	1.33	1.33	1.33	0.00	8.00
	Night(1900-0730)	12.00	1.00	1.00	1.00	0.00	1.33	1.33	1.33	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
8	Day(0700-1930)	12.00	1.00	1.00	1.00	0.00	1.50	1.50	1.50	0.00	9.00
	Night(1900-0730)	12.00	1.00	1.00	1.00	0.00	1.50	1.50	1.50	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	

		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
7	Day(0700-1930)	12.00	1.00	1.00	1.00	0.00	1.71	1.71	1.71	0.00	8.57
	Night(1900-0730)	12.00	1.00	1.00	0.00	0.00	1.71	1.71	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
6	Day(0700-1930)	12.00	1.00	1.00	0.00	0.00	2.00	2.00	0.00	0.00	8.00
	Night(1900-0730)	12.00	1.00	1.00	0.00	0.00	2.00	2.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
5	Day(0700-1930)	12.00	1.00	1.00	0.00	0.00	2.40	2.40	0.00	0.00	9.60
	Night(1900-0730)	12.00	1.00	1.00	0.00	0.00	2.40	2.40	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
4	Day(0700-1930)	12.00	1.00	1.00	0.00	0.00	3.00	3.00	0.00	0.00	12.00
	Night(1900-0730)	12.00	1.00	1.00	0.00	0.00	3.00	3.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	

		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
3	Day(0700-1930)	12.00	1.00	1.00	0.00	0.00	4.00	4.00	0.00	0.00	16.00
	Night(1900-0730)	12.00	1.00	1.00	0.00	0.00	4.00	4.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
2	Day(0700-1930)	12.00	1.00	1.00	0.00	0.00	6.00	6.00	0.00	0.00	24.00
	Night(1900-0730)	12.00	1.00	1.00	0.00	0.00	6.00	6.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
1	Day(0700-1930)	12.00	1.00	1.00	0.00	0.00	12.00	12.00	0.00	0.00	48.00
	Night(1900-0730)	12.00	1.00	1.00	0.00	0.00	12.00	12.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
0	Day(0700-1930)	12.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
	Night(1900-0730)	12.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	

Washington State Department of HEALTH

DOH 346-154

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Unit Information

Additional Care Team Members

Occupation	Shift Coverage			
	Day	Evening	Night	Weekend
Respiratory Therapy	1	1	1	1
Hospitalist	1	1	1	1
Social Services	1			
Utilization Review	1			
Speech Therapy	1			
Occupational Therapy	1			
Physical Therapy	1			1
Dietician	1			

Unit Information

Factors Considered in the Development of the Unit Staffing Plan (Check all that apply):

☑ Activity such as patient admissions, discharges, and transfers

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

☑ Patient acuity level, intensity of care needs, and the type of care to be delivered on each shift

Staffing based on patient acuity or status

☑ Skill mix

Med/Surg patient:nurse ratio is 5:1 day shift and 6:1 night shift; Intermediate patient:nurse ratio is 3:1 day and night shift; Pediatric patient:nurse ratio is 4:1 on day shift and 5:1 on night shift

☐ Level of experience of nursing and patient care staff

☐ Need for specialized or intensive equipment

☐ Architecture and geography of the unit such as placement of patient rooms, treatment areas, nursing stations, medication preparation areas, and equipment

☐ Other

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Fixed Staffing Matrix

Minimum means the minimum number of RNs, LPNs, CNAs, and UAPs per shift based on the average needs of the unit such as patient acuity, staff skill level, and patient care activities. If a unit does not utilize certain staff for that shift please put "0", do not leave it blank.

Unit/ Clinic Name:	**Emergency Department Services**
Unit/ Clinic Type:	**Emergency Department**
Unit/ Clinic Address:	**1016 Tacoma Ave, Sunnyside, WA 98944**
Effective as of:	**1/1/2025**

Day of the week

Day of the week	Shift Type	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's
Monday	Day (7 am - 7 pm)	12.00	2.00	0.00	1.00	1.00
	Day (9 am - 5 pm)	8.00	1.00	0.00	0.00	0.00
	Evening (11 am - 11 pm)	12.00	1.00	0.00	0.00	0.00
	Evening (2 pm - 2 am)	12.00	1.00	0.00	0.00	0.00
	Evening (3 pm - 11 pm)	8.00	0.00	0.00	1.00	0.00
	Evening (5 pm - 5 am)	8.00	1.00	0.00	0.00	0.00
	Night (7 pm - 7 am)	12.00	2.00	0.00	1.00	1.00

Tuesday	Day (7 am - 7 pm)	12.00	2.00	0.00	1.00	1.00
	Day (9 am - 5 pm)	8.00	1.00	0.00	0.00	0.00
	Evening (11 am - 11 pm)	12.00	1.00	0.00	0.00	0.00
	Evening (2 pm - 2 am)	12.00	1.00	0.00	0.00	0.00
	Evening (3 pm - 11 pm)	8.00	0.00	0.00	1.00	0.00
	Evening (5 pm - 5 am)	8.00	1.00	0.00	0.00	0.00
	Night (7 pm - 7 am)	12.00	2.00	0.00	1.00	1.00
Wednesday	Day (7 am - 7 pm)	12.00	2.00	0.00	1.00	1.00
	Day (9 am - 5 pm)	8.00	1.00	0.00	0.00	0.00
	Evening (11 am - 11 pm)	12.00	1.00	0.00	0.00	0.00
	Evening (2 pm - 2 am)	12.00	1.00	0.00	0.00	0.00
	Evening (3 pm - 11 pm)	8.00	0.00	0.00	1.00	0.00
	Evening (5 pm - 5 am)	8.00	1.00	0.00	0.00	0.00
	Night (7 pm - 7 am)	12.00	2.00	0.00	1.00	1.00
Thursday	Day (7 am - 7 pm)	12.00	2.00	0.00	1.00	1.00
	Day (9 am - 5 pm)	8.00	1.00	0.00	0.00	0.00
	Evening (11 am - 11 pm)	12.00	1.00	0.00	0.00	0.00
	Evening (2 pm - 2 am)	12.00	1.00	0.00	0.00	0.00
	Evening (3 pm - 11 pm)	8.00	0.00	0.00	1.00	0.00
	Evening (5 pm - 5 am)	8.00	1.00	0.00	0.00	0.00
	Night (7 pm - 7 am)	12.00	2.00	0.00	1.00	1.00
Friday	Day (7 am - 7 pm)	12.00	2.00	0.00	1.00	1.00
	Day (9 am - 5 pm)	8.00	1.00	0.00	0.00	0.00
	Evening (11 am - 11 pm)	12.00	1.00	0.00	0.00	0.00

	Evening (2 pm - 2 am)	12.00	1.00	0.00	0.00	0.00
	Evening (3 pm - 11 pm)	8.00	0.00	0.00	1.00	0.00
	Evening (5 pm - 5 am)	8.00	1.00	0.00	0.00	0.00
	Night (7 pm - 7 am)	12.00	2.00	0.00	1.00	1.00
Saturday	Day (7 am - 7 pm)	12.00	2.00	0.00	1.00	1.00
	Day (9 am - 5 pm)	8.00	1.00	0.00	0.00	0.00
	Evening (11 am - 11 pm)	12.00	1.00	0.00	0.00	0.00
	Evening (2 pm - 2 am)	12.00	1.00	0.00	0.00	0.00
	Evening (3 pm - 11 pm)	8.00	0.00	0.00	1.00	0.00
	Evening (5 pm - 5 am)	8.00	1.00	0.00	0.00	0.00
	Night (7 pm - 7 am)	12.00	2.00	0.00	1.00	1.00
Sunday	Day (7 am - 7 pm)	12.00	2.00	0.00	1.00	1.00
	Day (9 am - 5 pm)	8.00	1.00	0.00	0.00	0.00
	Evening (11 am - 11 pm)	12.00	1.00	0.00	0.00	0.00
	Evening (2 pm - 2 am)	12.00	1.00	0.00	0.00	0.00
	Evening (3 pm - 11 pm)	8.00	0.00	0.00	1.00	0.00
	Evening (5 pm - 5 am)	8.00	1.00	0.00	0.00	0.00
	Night (7 pm - 7 am)	12.00	2.00	0.00	1.00	1.00

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Unit Information

Additional Care Team Members

Occupation	Shift Coverage			
	Day	Evening	Night	Weekend
Respiratory Therapy	1	1	1	1
Hospitalist	1	1	1	1
Social Services	1			
Utilization Review	1			
Speech Therapy	1			
Occupational Therapy	1			
Physical Therapy	1			1
Dietician	1			
Emergency Room Physician	1	1	1	1

Unit Information

Factors Considered in the Development of the Unit Staffing Plan (Check all that apply):

☑ Activity such as patient admissions, discharges, and transfers

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

☑ Patient acuity level, intensity of care needs, and the type of care to be delivered on each shift

Consider patient acuity, review with Charge RN before making staffing adjustments when possible. Before sending staff home on-call, confirm there aren't unmet needs elsewhere in house with the House Supervisor. If the acuity/census does not support all available resources/positions listed above, flex according to match the demands of the patient needs/care level.

☐ Skill mix

☐ Level of experience of nursing and patient care staff

☐ Need for specialized or intensive equipment

☐ Architecture and geography of the unit such as placement of patient rooms, treatment areas, nursing stations, medication preparation areas, and equipment

☐ Other

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Fixed Staffing Matrix

Minimum means the minimum number of RNs, LPNs, CNAs, and UAPs per shift based on the average needs of the unit such as patient acuity, staff skill level, and patient care activities. If a unit does not utilize certain staff for that shift please put "0", do not leave it blank.

Unit/ Clinic Name:	**Interventional Radiology Services**
Unit/ Clinic Type:	**Interventional Radiology**
Unit/ Clinic Address:	**1016 Tacoma Ave, Sunnyside, WA 98944**
Effective as of:	**1/1/2025**

Day of the week

Day of the week	Shift Type	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's
Monday	Day (6:30 am - 6:30 pm)	12.00	1.00			

Tuesday	Day (5:30 am - 4 pm)	8.00	1.00			
	Day (6:30 am - 6:30 pm)	12.00	1.00			
Wednesday	Day (5:30 am - 4 pm)	8.00	1.00			
	Day (6:30 am - 6:30 pm)	12.00	1.00			
Thursday	Day (5:30 am - 4 pm)	8.00	1.00			
Friday	Day (5:30 am - 4 pm)	8.00	1.00			

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Unit Information

Additional Care Team Members

Occupation	Shift Coverage			
	Day	Evening	Night	Weekend
Respiratory Therapy	1	1	1	1
Hospitalist	1	1	1	1
Social Services	1			
Utilization Review	1			
Speech Therapy	1			
Occupational Therapy	1			
Physical Therapy	1			1
Dietician	1			
Physicians	1	1		
Emergency Physician	1	1	1	1

Unit Information

Factors Considered in the Development of the Unit Staffing Plan (Check all that apply):

☑ Activity such as patient admissions, discharges, and transfers

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

☑ Patient acuity level, intensity of care needs, and the type of care to be delivered on each shift

Staffing based on pateint acuity or status

☑ Skill mix

The days of the week the staff have off when working 10 hours shifts may change due to covering vacations and time off, as well as meeting physician and patient needs.

☐ Level of experience of nursing and patient care staff

☐ Need for specialized or intensive equipment

☐ Architecture and geography of the unit such as placement of patient rooms, treatment areas, nursing stations, medication preparation areas, and equipment

☐ Other

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Fixed Staffing Matrix

Minimum means the minimum number of RNs, LPNs, CNAs, and UAPs per shift based on the average needs of the unit such as patient acuity, staff skill level, and patient care activities. If a unit does not utilize certain staff for that shift please put "0", do not leave it blank.

Unit/ Clinic Name:	**Wound Care Services**
Unit/ Clinic Type:	**Wound Care**
Unit/ Clinic Address:	**1016 Tacoma Ave, Sunnyside, WA 98944**
Effective as of:	**1/1/2025**

Day of the week

Day of the week	Shift Type	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's
Monday	Day (8 am - 4 pm)	8.00	2.00	0.00	0.00	0.00

Tuesday	Day (8 am - 4 pm)	8.00	2.00	0.00	0.00	0.00
Wednesday	Day (8 am - 4 pm)	8.00	2.00	0.00	0.00	0.00
Thursday	Day (8 am - 4 pm)	8.00	1.00	0.00	0.00	0.00
Friday	Day (8 am - 4 pm)	8.00	1.00	0.00	0.00	0.00

Saturday	Closed					
Sunday	Closed					

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Unit Information

Additional Care Team Members

Occupation	Shift Coverage			
	Day	Evening	Night	Weekend
Hospitalist	1	1	1	1
Emergency Room Physician	1	1	1	1
General Surgeon	1	1	1	1

Unit Information

Factors Considered in the Development of the Unit Staffing Plan (Check all that apply):

☑ Activity such as patient admissions, discharges, and transfers

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

☐ Patient acuity level, intensity of care needs, and the type of care to be delivered on each shift

☐ Skill mix

☐ Level of experience of nursing and patient care staff

☐ Need for specialized or intensive equipment

☐ Architecture and geography of the unit such as placement of patient rooms, treatment areas, nursing stations, medication preparation areas, and equipment

☐ Other

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Fixed Staffing Matrix

Minimum means the minimum number of RNs, LPNs, CNAs, and UAPs per shift based on the average needs of the unit such as patient acuity, staff skill level, and patient care activities. If a unit does not utilize certain staff for that shift please put "0", do not leave it blank.

Unit/ Clinic Name:	**Oncology Services**
Unit/ Clinic Type:	**Oncology**
Unit/ Clinic Address:	**1016 Tacoma Ave, Sunnyside, WA 98944**
Effective as of:	**1/1/2025**
Day of the week	

Day of the week	Shift Type	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's
Monday	Day (8 am - 4 pm)	8.00	3.00	0.00	2.00	0.00

Tuesday	Day (8 am - 4 pm)	8.00	3.00	0.00	2.00	0.00
Wednesday	Day (8 am - 4 pm)	8.00	3.00	0.00	2.00	0.00
Thursday	Day (8 am - 4 pm)	8.00	3.00	0.00	2.00	0.00
Friday	Day (8 am - 4 pm)	8.00	3.00	0.00	2.00	0.00

Saturday	Closed					
Sunday	Closed					

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Unit Information

Additional Care Team Members

Occupation	Shift Coverage			
	Day	Evening	Night	Weekend
Hospitalist	1	1	1	1
Emergency Room physician	1	1	1	1
Pharmacy	1	1	1	1
Laboratory	1	1	1	1
Dietician	1			
Financial navigator	1			
Social Services	1			

Unit Information

Factors Considered in the Development of the Unit Staffing Plan (Check all that apply):

☑ Activity such as patient admissions, discharges, and transfers

If chemotherapy patient requires teaching; if patient is first time treatment; medical assistant and receptionist staffing is based on clinical schedule

☑ Patient acuity level, intensity of care needs, and the type of care to be delivered on each shift

Level of risk of medication/chemotherapy/immunotherapy; current condition of patient; how many medication/chemotherapy agents will be given including pre-medications

☐ Skill mix

☐ Level of experience of nursing and patient care staff

☐ Need for specialized or intensive equipment

☐ Architecture and geography of the unit such as placement of patient rooms, treatment areas, nursing stations, medication preparation areas, and equipment

☐ Other

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Patient Volume-based Staffing Matrix Formula Template

Minimum means the minimum number of RNs, LPNs, CNAs, and UAPs per shift based on the average needs of the unit such as patient acuity, staff skill level, and patient care activities. If a unit does not utilize certain staff for that shift please put "0", do not leave it blank.

Unit Name:	**Family Birth Center Services**		
Unit Type:	**Family Birth Center Services**		
Unit Address:	**1016 Tacoma Ave, Sunnyside, WA 98944**		
Average Daily Census:	**1**	**Maximum # of Beds:**	**10**
Effective as of:	**1/1/2025**		

Census

Census	Shift Type	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's	Min # of RN HPUS	Min # of LPN HPUS	Min # of CNA HPUS	Min # of UAP HPUS	Total Minimum Direct Pt. Care HPUS (hours per unit of service)
3	0700-1930	12.00	2.00	0.00	1.00	0.00	8.00	0.00	4.00	0.00	24.00
	1900-0730	12.00	2.00	0.00	1.00	0.00	8.00	0.00	4.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
2	0700-1930	12.00	2.00	0.00	1.00	0.00	12.00	0.00	6.00	0.00	36.00
	1900-0730	12.00	2.00	0.00	1.00	0.00	12.00	0.00	6.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	

		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
1	0700-1930	12.00	2.00	0.00	0.00	0.00	24.00	0.00	0.00	0.00	48.00
	1900-0730	12.00	2.00	0.00	0.00	0.00	24.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

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Unit Information

Additional Care Team Members

Occupation	Shift Coverage			
	Day	Evening	Night	Weekend
Physicians	1	1	1	1
Respiratory Therapy	1	1	1	1
Pharmacy	1	1	1	1
Laboratory	1	1	1	1
Social Services	1			
Dietician	1			
CRNA	1	1	1	1

Unit Information

Factors Considered in the Development of the Unit Staffing Plan (Check all that apply):

☐ Activity such as patient admissions, discharges, and transfers

☑ Patient acuity level, intensity of care needs, and the type of care to be delivered on each shift

A NAC will be scheduled depending on pateint census and/or acuity. Matrices are developed as a guide ONLY for shift-by-shift unit based staffing decisions and are adjusted up or down based on patient acuity and skill-mix of hospital staff.

☑ Skill mix

Continued from "other" section: Delivery: 2:1 one nurse responsible for the mother and one nurse for the baby. Recovery-1:1 continuous bedside attendance in immediate recovery (at least 2 hours, for vaginal delivery or C-Section); 1:1 initial transition of newborn after delivery (up to 1 hour or longer, if with complications). postpartum and Newborn care-1:3 Mother-baby couplets after the 2-hour recovery period(with consideration for assignments with mixed acuity); 1:2 patients on the immediate postoperative day who are recovering from cesarean birth as part of the nurse-to-patient ratio of 1 nurse to 3 mother-baby couplets; 1:2 Post postpartum patients with complications (on Magnesium sulfate, blood suger, etc); 1:3 recently born infants and those requiring close observation; 1:3 stable mother baby couplets; 1:3 postpartum patients with complications, but in stable condition; 1:3-4 newborns needing only routine care. Transports-1:1 stabilizing newborns for transport; 1:1 stabilizing women for transport to higher level care facility

☑ Level of experience of nursing and patient care staff

a minimum of 2 labor trained nurses will be scheduled. Staff may be floated to other departments if there are no

pateints on the floor.

☐ Need for specialized or intensive equipment

☐ Architecture and geography of the unit such as placement of patient rooms, treatment areas, nursing stations, medication preparation areas, and equipment

☑ Other

Labor & Deliver care: minimum staffing 2 RN's. Antepartum: 1:2-3 -patients during nonstress testing; 1:1 patients for initial obstetric triage; 1:2-3 patients in obstetric triage after initial assessment and in stable condition; 1:1 a patient with antepartum complications who are unstable; 1:1 continuous bedside attendance for patients receiving magnesium sulfate for the first hour of administration. No more than one additional couplet or woman for a nurse caring for a woman receiving IV magnesium sulfate in a maintenance dose; 1:2 patients receiving pharmacologic agents for cervical ripening. Intrapartum: 1:1 laboring patients with medical or obstetrical complications; 1:1 laboring patient receiving oxytocin; 1:1 laboring patient with minimal to no pain relief or medical interventions; 1:1 laboring patient being

	monitored via intermittent auscultation; 1:1 regional anesthesia: continuous bedside nursing attendance during initiation until condition is stable (at least 30 minutes after initial dose); 1:2 premature labor patients being stablized on tocolytics; 1:1 laboring patients in second stage.									

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Fixed Staffing Matrix

Minimum means the minimum number of RNs, LPNs, CNAs, and UAPs per shift based on the average needs of the unit such as patient acuity, staff skill level, and patient care activities. If a unit does not utilize certain staff for that shift please put "0", do not leave it blank.

Unit/ Clinic Name:	**Operating Room**
Unit/ Clinic Type:	**Surgical Services**
Unit/ Clinic Address:	**1016 Tacoma Ave, Sunnyside, WA 98944**
Effective as of:	**1/1/2025**

Day of the week

Day of the week	Shift Type	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's
Monday	Day (6 am - 2 pm)	8.00	1.00	0.00	0.00	0.00
	Day(6 am - 4 pm)	10.00	1.00	0.00	0.00	0.00
	Day (7am - 3 pm)	8.00	4.00	0.00	0.00	0.00

Tuesday	Day (6 am - 2 pm)	8.00	1.00	0.00	0.00	0.00
	Day (6 am - 4 pm)	10.00	1.00	0.00	0.00	0.00
	Day (7 am - 3 pm)	8.00	4.00	0.00	0.00	0.00
	Day (7am - 5 pm)	10.00	1.00	0.00	0.00	0.00
Wednesday	Day(6 am - 4 pm)	10.00	1.00	0.00	0.00	0.00
	Day (7 am - 3 pm)	8.00	4.00	0.00	0.00	0.00
	Day (7am - 5 pm)	10.00	1.00	0.00	0.00	0.00
Thursday	Day (6 am - 2 pm)	8.00	1.00	0.00	0.00	0.00
	Day(6 am - 4 pm)	10.00	1.00	0.00	0.00	0.00
	Day (7 am - 3 pm)	8.00	4.00	0.00	0.00	0.00
	Day (7am - 5 pm)	10.00	1.00	0.00	0.00	0.00
Friday	Day (6 am - 2 pm)	8.00	1.00	0.00	0.00	0.00
	Day (7 am - 3 pm)	8.00	4.00	0.00	0.00	0.00
	Day (7am - 5 pm)	1.00	1.00	0.00	0.00	0.00

Saturday	Closed					
Sunday	Closed					

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Fixed Staffing Matrix

Minimum means the minimum number of RNs, LPNs, CNAs, and UAPs per shift based on the average needs of the unit such as patient acuity, staff skill level, and patient care activities. If a unit does not utilize certain staff for that shift please put "0", do not leave it blank.

Unit/ Clinic Name:	**ACU**
Unit/ Clinic Type:	**Surgical Services**
Unit/ Clinic Address:	**1016 Tacoma Ave, Sunnyside, WA 98944**
Effective as of:	**1/1/2025**
Day of the week	

Day of the week	Shift Type	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's
Monday	Day (6 am - 6 pm)	12.00	1.00	0.00	0.00	0.00
	Day (7am - 3 pm)	8.00	1.00	0.00	0.00	0.00
	Day (8 am - 4 pm)	8.00	1.00	0.00	0.00	0.00

Tuesday	Day (6 am - 6 pm)	12.00	1.00	0.00	0.00	0.00
	Day (7am - 3 pm)	8.00	1.00	0.00	0.00	0.00
	Day (8 am - 4 pm)	8.00	1.00	0.00	0.00	0.00
	Day (9 am - 5 pm)	8.00	0.00	1.00	0.00	0.00
	Day (9 am - 7 pm)	10.00	1.00	0.00	0.00	0.00
Wednesday	Day (6 am - 6 pm)	12.00	2.00	0.00	0.00	0.00
	Day (7am - 3 pm)	8.00	1.00	0.00	0.00	0.00
	Day (8 am - 4 pm)	8.00	1.00	0.00	0.00	0.00
	Day (9 am - 5 pm)	8.00	0.00	1.00	0.00	0.00
	Day (9 am - 7 pm)	10.00	1.00	0.00	0.00	0.00
Thursday	Day (6 am - 6 pm)	12.00	1.00	0.00	0.00	0.00
	Day (7am - 3 pm)	8.00	1.00	0.00	0.00	0.00
	Day (8 am - 4 pm)	8.00	1.00	0.00	0.00	0.00
	Day (9 am - 5 pm)	8.00	0.00	1.00	0.00	0.00
	Day (9 am - 7 pm)	10.00	1.00	0.00	0.00	0.00
Friday	Day (6 am - 6 pm)	12.00	1.00	0.00	0.00	0.00
	Day (7am - 3 pm)	8.00	1.00	0.00	0.00	0.00
	Day (8 am - 4 pm)	8.00	1.00	0.00	0.00	0.00

	Day (9am - 5 pm)	8.00	0.00	1.00	0.00	0.00
Saturday	Closed					
Sunday	Closed					

Washington State Department of HEALTH

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Fixed Staffing Matrix

Minimum means the minimum number of RNs, LPNs, CNAs, and UAPs per shift based on the average needs of the unit such as patient acuity, staff skill level, and patient care activities. If a unit does not utilize certain staff for that shift please put "0", do not leave it blank.

Unit/ Clinic Name:	**PACU**
Unit/ Clinic Type:	**Surgical Services**
Unit/ Clinic Address:	**1016 Tacoma Ave, Sunnyside, WA 98944**
Effective as of:	**1/1/2025**

Day of the week

Day of the week	Shift Type	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's
Monday	Day (7 am - 7 pm)	12.00	1.00	0.00	0.00	0.00
	Day (8am - 4 pm)	8.00	1.00	0.00	0.00	0.00

Tuesday	Day (7 am - 7 pm)	12.00	1.00	0.00	0.00	0.00
	Day (8am - 4 pm)	8.00	1.00	0.00	0.00	0.00
Wednesday	Day (7 am - 7 pm)	12.00	2.00	0.00	0.00	0.00
	Day (8am - 4 pm)	8.00	1.00	0.00	0.00	0.00
Thursday	Day (7 am - 7 pm)	12.00	1.00	0.00	0.00	0.00
	Day (8am - 4 pm)	8.00	1.00	0.00	0.00	0.00
Friday	Day (7 am - 7 pm)	12.00	1.00	0.00	0.00	0.00
	Day (8am - 4 pm)	8.00	1.00	0.00	0.00	0.00

Saturday	Closed					
Sunday	Closed					

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Unit Information

Additional Care Team Members

Occupation	Shift Coverage			
	Day	Evening	Night	Weekend
Surgeons - all specialties	1	1	1	1
Environmental services	1	1	1	1
Supply chain coordinator	1			
Scheduler	1			

Unit Information

Factors Considered in the Development of the Unit Staffing Plan (Check all that apply):

☐ Activity such as patient admissions, discharges, and transfers

☑ Patient acuity level, intensity of care needs, and the type of care to be delivered on each shift

PACU/ACU - Pre anesthesia Phase: Staffing is adjusted up or down depending on # of 0730 start time cases, volume of surgical cases, PAT's and recur patients. Post anesthesia Phase 2: Staffing should reflect patient acuity and complexity of care. In general, a 1:3 nurse:patient ratio allows for appropriate assessment, planning, implementing care, and evaluation for discharge as well as increasing efficiency and flow of patients through Phase 2 area. PACU - staffing should reflect patient acuity and complexity of care. In general, a 1:2 nurse:patient ratio in Phase 1 allows for appropriate assessment, planning, implementing, and evaluation for discharge as well as increased efficiency and flow of patients through Phase 1 area. RN Circulator-There are 4 potential rooms with 4 potential needs of an RN clirculator. An additional Circulator is needed as a float to give braks and lunch relief. This role could be a charge nurse. Scub tech: serveral procedures require two surgical techs to include but not limited to lap chole's, neuro fusions, robotic procedures, major ENT procedures, and Total joint procedures. Three rooms all at once could require six surgical scrub techs depending on the procedures going

☑ Skill mix

Sterile process department: three sterile processing techs during the day and one for the evening to cover daily tasks and late day clinic instrumentation workups. Anesthesia: We have 4 operating rooms with 4 potential needs of an anesthesia provider.

☐ Level of experience of nursing and patient care staff

☐ Need for specialized or intensive equipment

☐ Architecture and geography of the unit such as placement of patient rooms, treatment areas, nursing stations, medication preparation areas, and equipment

☐ Other