COVER PAGE

The following is the comprehensive hospital staffing plan for Astria Toppenish 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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DOH 346-151 April 2024

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Hospital Staffing Form

Attestation

Date: 11/20/24

I, the undersigned with responsibility for Astria Toppenish 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: Cathy Bambrick, Administrator

Hospital Information

Astria Toppenish Hospital Name of Hospital:										
Hospital License #: HAC.FS.60790220										
Hospital Street Address: 502 W. 4th Ave.										
_{City/Town:} Toppenish	City/Town: Toppenish State: WA. Zip code: 98948									
Is this hospital license affiliated v	Is this hospital license affiliated with more than one location?									
If "Yes" was selected, please provious for the second seco	vide the									
Review Type:	Anr	nual Review Date: 12/3			1					
review type.	Upc	Update		12/ w Date:	/31/25					
Effective Date: 1/1/25										
Date Approved: 12/11/2024										

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: American Nurses Association American Association of Critical Nurses Emergency Nurses Association The American Society for Gastrointestinal Endoscopy American Perioperative Registered Nurses American Psychiatric Nurses Association
 Terms of applicable collective bargaining agreement
Description: WSNA Collective Bargaining Agreement April 1, 2022 - March 31, 2025
Relevant state and federal laws and rules including those regarding meal and rest breaks and use of overtime and on-call shifts Description: Astria Toppenish Hospital ensures staff are able to take meal and rest breaks required by RCW 49.12.480.
Hospital finances and resources
Description:
✓ Other
Description: The optimal staffing plan represents a partnership between nursing leadership and direct nursing care staff. In order to meet high quality, effective, safe patient care, variables such as, acuity, staff skill mix, census, the need for specialized or intensive equipment, and patient care activities must be considered.

Signature

CEO & Co-chairs Name:	Signature:	Date:
Cathy Bambrick, Administrator	Capacity Daminnice	12.31.2024
Melissa Waggoner, CNO HSC Co-Chair	neeussaaawaaaanur	12.31.2024
Julia Barcott, RN HSC Co-Chair	SEDON CON-	12.31.2024
1		

Total Votes								
# of Denials								
0								
0								

Access unit staffing matrices here.

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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: Unit/ Clinic Type:		Acute Care										
		Medical/Surgical										
Unit/ Clinic Ac	ldress:	502 W. 4th Ave. Toppenish, Washington 98948										
Average Daily	Census:	12				Maximu	m # of Beds:		18			
Effective as of	:	1/1/2025							<u> </u>			
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)	
18	Day (0700-1900)	12.00	4.00	0.00	2.00	0.00	2.67	0.00	1.33	0.00	7.33	
	Night (1900-0700)	12.00	3.00	0.00	2.00	0.00	2.00	0.00	1.33	0.00	-	
17	Day (0700-1900)	12.00	4.00	0.00	2.00	0.00	2.82	0.00	1.41	0.00	7.76	
	Night (1900-0700)	12.00	3.00	0.00	2.00	0.00	2.12	0.00	1.41	0.00	-	
16	Day (0700-1900)	12.00	4.00	0.00	2.00	0.00	3.00	0.00	1.50	0.00	8.25	
	Night (1900-0700)	12.00	3.00	0.00	2.00	0.00	2.25	0.00	1.50	0.00		
15	Day (0700-1900)	12.00	3.00	0.00	2.00	0.00	2.40	0.00	1.60	0.00	8.00	
	Night (1900-0700)	12.00	3.00	0.00	2.00	0.00	2.40	0.00	1.60	0.00		
14	Day (0700-1900)	12.00	3.00	0.00	2.00	0.00	2.57	0.00	1.71	0.00	8.57	
	Night (1900-0700)	12.00	3.00	0.00	2.00	0.00	2.57	0.00	1.71	0.00		
13	Day (0700-1900)	12.00	3.00	0.00	2.00	0.00	2.77	0.00	1.85	0.00	8.31	
	Night (1900-0700)	12.00	3.00	0.00	1.00	0.00	2.77	0.00	0.92	0.00		
12	Day (0700-1900)	12.00	3.00	0.00	2.00	0.00	3.00	0.00	2.00	0.00	8.00	
	Night (1900-0700)	12.00	2.00	0.00	1.00	0.00	2.00	0.00	1.00	0.00		
11	Day (0700-1900)	12.00	3.00	0.00	2.00	0.00	3.27	0.00	2.18	0.00	8.73	
	Night (1900-0700)	12.00	2.00	0.00	1.00	0.00	2.18	0.00	1.09	0.00		

10	Day (0700-1900)	12.00	2.00	0.00	1.00	0.00	2.40	0.00	1.20	0.00	7.20
	Night (1900-0700)	12.00	2.00	0.00	1.00	0.00	2.40	0.00	1.20	0.00	
9	Day (0700-1900)	12.00	2.00	0.00	1.00	0.00	2.67	0.00	1.33	0.00	8.00
	Night (1900-0700)	12.00	2.00	0.00	1.00	0.00	2.67	0.00	1.33	0.00	
8	Day (0700-1900)	12.00	2.00	0.00	1.00	0.00	3.00	0.00	1.50	0.00	9.00
	Night (1900-0700)	12.00	2.00	0.00	1.00	0.00	3.00	0.00	1.50	0.00	
7	Day (0700-1900)	12.00	2.00	0.00	1.00	0.00	3.43	0.00	1.71	0.00	10.29
	Night (1900-0700)	12.00	2.00	0.00	1.00	0.00	3.43	0.00	1.71	0.00	
6	Day (0700-1900)	12.00	2.00	0.00	0.00	0.00	4.00	0.00	0.00	0.00	8.00
	Night (1900-0700)	12.00	1.00	0.00	1.00	0.00	2.00	0.00	2.00	0.00	
5	Day (0700-1900)	12.00	1.00	0.00	1.00	0.00	2.40	0.00	2.40	0.00	9.60
	Night (1900-0700)	12.00	1.00	0.00	1.00	0.00	2.40	0.00	2.40	0.00	
4	Day (0700-1900)	12.00	1.00	0.00	1.00	0.00	3.00	0.00	3.00	0.00	12.00
	Night (1900-0700)	12.00	1.00	0.00	1.00	0.00	3.00	0.00	3.00	0.00	
3	Day (0700-1900)	12.00	1.00	0.00	1.00	0.00	4.00	0.00	4.00	0.00	16.00
	night (1900-0700)	12.00	1.00	0.00	1.00	0.00	4.00	0.00	4.00	0.00	
2	Day (0700-1900)	12.00	1.00	0.00	1.00	0.00	6.00	0.00	6.00	0.00	24.00
	Night (1900-0700)	12.00	1.00	0.00	1.00	0.00	6.00	0.00	6.00	0.00	
1	Day (0700-1900)	12.00	1.00	0.00	1.00	0.00	12.00	0.00	12.00	0.00	36.00
	Night (1900-0700)	12.00	1.00	0.00	0.00	0.00	12.00	0.00	0.00	0.00	



Unit Information

	Additional Care Team Members										
	Shift Coverage										
Occupation	Day	Evening	Night	Weekend							
Hospitalist	1	1	1	1							
Acute Care Director	1	0	0	0							
UR/Social Services	1	0	0	0							
Occupational Therapy	1	0	0	0							
Physical Therapy	1	0	0	0							
Speech Therapy	1	0	0	0							
Dietician	1	0	0	0							
Radiology Technician	1	1	1	1							
Laboratory	1	1	1	1							
Pharmacy	1	0	0	0							
Respiratory Therapy	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

Skill mix

Level of experience of nursing and patient care staff

☑ Need for specialized or intensive equipment

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

✓ Other

Matricies are developed as a guide for shift-to-shift unit based staffing decisions. Matricies may be adjusted based on the patient's intensity of care needs, acutiy, the skill-mix, geographical location, and utilization of specialized equipment. Additional staff may be added to help support patient safety and quality of care.



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:		Acute Care											
Unit/ Clinic Typ	be:	Intermediate C	Intermediate Care										
Unit/ Clinic Ad	dress:	502 W. 4th Ave	502 W. 4th Ave. Toppenish, Washington 98948										
Average Daily	Census:	1				Maximu	m # of Beds:		6				
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)		
6	Day (0700-1900)	12.00	2.00	0.00	1.00	0.00	4.00	0.00	2.00	0.00	12.00		
	Night (1900-0700)	12.00	2.00	0.00	1.00	0.00	4.00	0.00	2.00	0.00			
5	Day (0700-1900)	12.00	2.00	0.00	0.00	0.00	4.80	0.00	0.00	0.00	9.60		
, , , , , , , , , , , , , , , , , , ,	Night (1900-0700)	12.00	2.00	0.00	0.00	0.00	4.80	0.00	0.00	0.00	0.00		
4	Day (0700-1900)	12.00	1.00	0.00	1.00	0.00	3.00	0.00	3.00	0.00	12.00		
	Night (1900-0700)	12.00	1.00	0.00	1.00	0.00	3.00	0.00	3.00	0.00			
3	Day (0700-1900)	12.00	1.00	0.00	1.00	0.00	4.00	0.00	4.00	0.00	16.00		
3	Night (1900-0700)	12.00	1.00	0.00	1.00	0.00	4.00	0.00	4.00	0.00	10.00		
										0.00			
2	Day (0700-1900)	12.00	1.00	0.00	1.00	0.00	6.00	0.00	6.00	0.00	24.00		
	Night (1900-0700)	12.00	1.00	0.00	1.00	0.00	6.00	0.00	6.00	0.00			
1	Day (0700-1900)	12.00	1.00	0.00	1.00	0.00	12.00	0.00	12.00	0.00	48.00		
	Night (1900-0700)	12.00	1.00	0.00	1.00	0.00	12.00	0.00	12.00	0.00			



Unit Information

Additional Care Team Members											
	Shift Coverage										
Occupation	Day	Evening	Night	Weekend							
Hospitalist	1	1	1	1							
Acute Care Director	1	0	0	0							
UR/Social Services	1	0	0	0							
Occupational Therapy	1	0	0	0							
Physical Therapy	1	0	0	0							
Speech Therapy	1	0	0	0							
Dietician	1	0	0	0							
Radiology Technician	1	1	1	1							
Laboratory	1	1	1	1							
General Surgeon	1	1	1	1							
Respiratory Therapy	1	1	1	1							
Pharmacy	1	0	0	0							
-											

Unit Information

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

 \checkmark

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

Skill mix

✓ Level of experience of nursing and patient care staff

✓ Need for specialized or intensive equipment

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

✓ Other

Matricies are developed as a guide for shift-to-shift unit based staffing decisions. Matricies may be adjusted based on the patient's intensity of care needs, acutiy, the skill-mix, geographical location, and utilization of specialized equipment. Additional staff may be added or floated from other unit's to help support patient safety and quality of care.



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:		Acute Care											
Unit/ Clinic Ty	pe:	Intensive Care Unit											
Unit/ Clinic Ad	dress:	502 W. 4th Ave	502 W. 4th Ave. Toppenish, Washington 98948										
Average Daily	Census:	1				Maximu	m # of Beds:		6				
Effective as of:		1/1/2025				1			1				
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)		
6	Day (0700-1900)	12.00	3.00	0.00	1.00	0.00	6.00	0.00	2.00	0.00	16.00		
	Night (1900-0700)	12.00	3.00	0.00	1.00	0.00	6.00	0.00	2.00	0.00			
		40.00			1.00						19.20		
5	Day (0700-1900) Night (1900-0700)	12.00 12.00	3.00 3.00	0.00 0.00	1.00	0.00	7.20	0.00	2.40 2.40	0.00	19.20		
	Night (1900-0700)	12.00	5.00	0.00	1.00	0.00	7.20	0.00	2.40	0.00			
4	Day (0700-1900)	12.00	2.00	0.00	1.00	0.00	6.00	0.00	3.00	0.00	18.00		
	Night (1900-0700)	12.00	2.00	0.00	1.00	0.00	6.00	0.00	3.00	0.00			
											0.1.00		
3	Day (0700-1900)	12.00	2.00	0.00	1.00	0.00	8.00	0.00	4.00	0.00	24.00		
	Night (1900-0700)	12.00	2.00	0.00	1.00	0.00	8.00	0.00	4.00	0.00			
2	Day (0700-1900)	12.00	1.00	0.00	1.00	0.00	6.00	0.00	6.00	0.00	24.00		
	Night (1900-0700)	12.00	1.00	0.00	1.00	0.00	6.00	0.00	6.00	0.00			
1	Day (0700-1900)	12.00	1.00	0.00	1.00	0.00	12.00	0.00	12.00	0.00	48.00		
	Night (1900-0700)	12.00	1.00	0.00	1.00	0.00	12.00	0.00	12.00	0.00			



Unit Information

Additional Care Team Members								
	Shift Coverage							
Occupation	Day	Evening	Night	Weekend				
Hospitalist	1	1	1	1				
Acute Care Director	1	0	0	0				
UR/Social Services	1	0	0	0				
Occupational Therapy	1	0	0	0				
Physical Therapy	1	0	0	0				
Speech Therapy	1	0	0	0				
Dietician	1	0	0	0				
Radiology Technician	1	1	1	1				
Laboratory	1	1	1	1				
General Surgeon	1	1	1	1				
Respiratory Therapy	1	1	1	1				
Pharmacy	1	0	0	0				

Unit Information

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

Activity such as patient admissions, discharges, and transfers

, F	Patient acuity	level, intensity	of care needs,	and the type of	care to be de	livered on each shift
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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

✓ Other

Matricies are developed as a guide for shift-to-shift unit based staffing decisions. Matricies may be adjusted based on the patient's intensity of care needs, acutiy, the skill-mix, geographical location, and utilization of specialized equipment. Additional staff may be added or floated from other unit's to help support patient safety and quality of care.



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 Na	ime:	Behavioral Hea	ehavioral Health Unit								
Unit/ Clinic Ty	pe:	Behavioral Hea	havioral Health Unit								
Unit/ Clinic Ad	ldress:	502 W. 4th Ave	e. Toppeni	sh, Washi	ington 989	48					
Average Daily	Census:	14				Maximu	m # of Beds:		15		
Effective as of:	:	1/1/2025									
Census											
Census	Shift Type	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNAs	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)
15	Day (0700-1900)	12.00	2.00	0.00	0.00	0.00	1.60	0.00	0.00	0.00	3.20
	Night (1900-0700)	12.00	2.00	0.00	0.00	0.00	1.60	0.00	0.00	0.00	
14	Day (0700-1900)	12.00	2.00	0.00	0.00	0.00	1.71	0.00	0.00	0.00	3.43
	Night (1900-0700)	12.00	2.00	0.00	0.00	0.00	1.71	0.00	0.00	0.00	
13	Day (0700-1900)	12.00	2.00	0.00	0.00	0.00	1.85	0.00	0.00	0.00	3.69
	Night (1900-0700)	12.00	2.00	0.00	0.00	0.00	1.85	0.00	0.00	0.00	
12	Day (0700-1900)	12.00	2.00	0.00	0.00	0.00	2.00	0.00	0.00	0.00	4.00
	Night (1900-0700)	12.00	2.00	0.00	0.00	0.00	2.00	0.00	0.00	0.00	

11	Day (0700-1900)	12.00	2.00	0.00	0.00	0.00	2.18	0.00	0.00	0.00	4.36
	Night (1900-0700)	12.00	2.00	0.00	0.00	0.00	2.18	0.00	0.00	0.00	
10	Day (0700-1900)	12.00	1.00	0.00	0.00	0.00	1.20	0.00	0.00	0.00	2.40
	Night (1900-0700)	12.00	1.00	0.00	0.00	0.00	1.20	0.00	0.00	0.00	
9	Day (0700-1900)	12.00	1.00	0.00	0.00	0.00	1.33	0.00	0.00	0.00	2.67
	Night (1900-0700)	12.00	1.00	0.00	0.00	0.00	1.33	0.00	0.00	0.00	
											7.50
8	Day (0700-1900)	12.00	3.00	0.00	0.00	0.00	4.50	0.00	0.00	0.00	7.50
	Night (1900-0700)	12.00	2.00	0.00	0.00	0.00	3.00	0.00	0.00	0.00	
	D (0700 (000)	40.00					0.40				0.00
7	Day (0700-1900)	12.00	2.00	0.00	0.00	0.00	3.43	0.00	0.00	0.00	6.86
	Night (1900-0700)	12.00	2.00	0.00	0.00	0.00	3.43	0.00	0.00	0.00	
6	Day (0700-1900)	12.00	2.00	0.00	0.00	0.00	4.00	0.00	0.00	0.00	8.00
0	Night (1900-0700)	12.00	2.00	0.00	0.00	0.00	4.00	0.00	0.00	0.00	0.00
	Night (1900-0700)	12.00	2.00	0.00	0.00	0.00	4.00	0.00	0.00	0.00	
5	Day (0700-1900)	12.00	2.00	0.00	0.00	0.00	4.80	0.00	0.00	0.00	9.60
	Night (1900-0700)	12.00	2.00	0.00	0.00	0.00	4.80	0.00	0.00	0.00	
	, , , , , , , , , , , , , , , , , , ,										
4	Day (0700-1900)	12.00	2.00	0.00	0.00	0.00	6.00	0.00	0.00	0.00	12.00
	Night (1900-0700)	12.00	2.00	0.00	0.00	0.00	6.00	0.00	0.00	0.00	
3	Day (0700-1900)	12.00	2.00	0.00	0.00	0.00	8.00	0.00	0.00	0.00	12.00
	Night (1900-0700)	12.00	1.00	0.00	0.00	0.00	4.00	0.00	0.00	0.00	
2	Day (0700-1900)	12.00	1.00	0.00	0.00	0.00	6.00	0.00	0.00	0.00	12.00
	Night (1900-0700)	12.00	1.00	0.00	0.00	0.00	6.00	0.00	0.00	0.00	
										ļ	
1	Day (0700-1900)	12.00	1.00	0.00	0.00	0.00	12.00	0.00	0.00	0.00	24.00
	Night (1900-0700)	12.00	1.00	0.00	0.00	0.00	12.00	0.00	0.00	0.00	



Unit Information

Additional Care Team Members									
	Shift Coverage								
Occupation	Day	Evening	Night	Weekend					
Psychiatric Provider	1	1	1	1					
BHU Program Director	1	1	0	0					
BHU Nurse Manager	1	0	0	0					
Therapist(s)	1	0	0	1					
ITA Coordinator	1	0	0	0					
Discharge Coordinator	1	0	0	0					
SUDP	1	0	0	0					
Security	1	1	1	1					
Hospital staff (other units)	5	5	5	5					
Peer Specialist	1	0	0	0					
Mental Health Workers	2	1	2	5					

Unit Information

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

 \checkmark

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

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

Matricies are developed as a guide for shift-to-shift unit based staffing decisions. Matricies may be adjusted based on the patient's intensity of care needs, acutiy, the skill-mix, geographical location, and utilization of specialized equipment. Additional staff may be added or floated from other unit's to help support patient safety and quality of care. For 11-15 patients: in the event of a situation that leaves the unit with 1 nurse on shift, the following contingencies will be implemented: Arrangements will be made for 2 nurses for the first 2 hours of each shift for medication pass and unit support. Arrangements will be made for a second nurse to be available during an active admission process. The time will vary based on the needs of the unit. Every effort will be made to add an additional Mental Health Worker.



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	mergency Department								
Unit/ Clinic Type:	Emergency Department									
Unit/ Clinic Address:	502 W. 4th Ave. Toppenish, Washington 98948									
Effective as of:	1.1.2025	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				
Sunday	0700-1900	12.00	2.00		2.00					
	0900-2100	12.00	1.00							
	1400-0200	12.00	1.00							
	1900-0700	12.00	2.00		1.00					
Monday	0700-1900	12.00	2.00		2.00					
	0900-2100	12.00	1.00							
	1400-0200	12.00	1.00							
	1900-0700	12.00	2.00		1.00					
Tuesday	0700-1900	12.00	2.00		2.00					
	0900-2100	12.00	1.00							

	1400-0200	12.00	1.00	
	1900-0700	12.00	2.00	1.00
	1900-0700	12.00	2.00	1.00
Monday	0700-1900	12.00	2.00	2.00
	0900-2100	12.00	1.00	
	1400-0200	12.00	1.00	
	1900-0700	12.00	2.00	1.00
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			+ +	
Wednesday	0700-1900	12.00	2.00	2.00
cullesudy	0900-2100	12.00	1.00	2.00
			1.00	
	1400-0200	12.00		1.00
	1900-0700	12.00	2.00	1.00
Thursday	0700-1900	12.00	2.00	2.00
	0900-2100	12.00	1.00	
	1400-0200	12.00	1.00	
	1900-0700	12.00	2.00	1.00
Friday	0700-1900	12.00	2.00	2.00
. Hody	0900-2100	12.00	1.00	2.00
	1400-0200	12.00	1.00	
	1900-0700	12.00	2.00	1 00
	1900-0700	12.00	2.00	1.00
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Saturday	0700-1900	12.00	2.00	2.00

0900-2100	12.00	1.00		
1400-0200	12.00	1.00		
1900-0700	12.00	2.00	1.00	



Unit Information

Additional Care Team Members									
	Shift Coverage								
Occupation	Day	Evening	Night	Weekend					
ED Physician	1	1	1	1					
ED Director	1	0	0	0					
Radiology Technician	1	1	1	1					
Laboratory	1	1	1	1					
General Surgeon	1	1	1	1					
Respiratory Therapy	1	1	1	1					
Pharmacy	1	0	0	0					

Unit Information

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

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Activity such as patient admissions, discharges, and transfers

Description:

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

Description:

Skill mix

Description:

Level of experience of nursing and patient care staff

Description:

Need for specialized or intensive equipment

Description:

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

Description:	
✓ Other	
Description:	
Matricies are developed as a guide for shift-to-shift unit based staffing decisions. Matricies may be adjusted based on the patient's inter	
of care needs, acutiy, the skill-mix, geographical location, and utilization of specialized equipment. Additional staff may be added to help)
support patient safety and quality of care.	

 \checkmark



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:	Endoscopy									
Unit/ Clinic Type:	Endoscopy 502 W.4th Ave. Toppenish, Washington 98948									
Unit/ Clinic Address:										
Effective as of:		1.1.202	25							
Room assignment										
Room assignment	Shift Type	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's				
	Day Shift (0700-1730)	10.5	3		3					
1 Procedural Room										
	Day Shift (0700-1730)	10.5	7		5					
2 Procedural Rooms										

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Unit Information

	Additional Care Tea	Im Members		
		Shift Coverage		
Occupation	Day	Evening	Night	Weekend
Gastroenterologist	1	closed	closed	closed
Nurse Manager	1	closed	closed	closed
Respirastory Therapist	1	closed	closed	closed
Laboratory	1	closed	closed	closed
Radiology Technician	1	closed	closed	closed
Pharmacy	1	closed	closed	closed

Unit Information

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

 \checkmark

Activity such as patient admissions, discharges, and transfers

Description:

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

Description:

✓ Skill mix

Description:

Level of experience of nursing and patient care staff

Description:

✓ Need for specialized or intensive equipment

Description:

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

Description:

Other \checkmark

Description:

If one procedure room is in operation and one provider is scheduled on a procedure day, there will be at least 1 ACLS certified procedural RN, at least 1 pre-op RN minimum, 1 RN to assist when available, at least 1 procedural technician minimum in the proceudral room, at least 1 CS technician minimum, at least 1 to 2 technicians to assist, the Nurse Manager can count as 1 RN, and no less than 7 staff on the unit. If there are two procedural rooms in operation and two providers scheduled on a procedure day, there will be at least 2 ACLS certified RNs minimum in the procedural rooms, at least 2 pre-op RNs minimum, at least 2 post-op RNs minimum, 1 RN to assist when available, at least 2 procedural technicians minimum in the the procedural rooms, at least 2 CS technicians minimum, at least 1 to 2 technicians to assist, the Nurse Manager can count as 1 RN, and no less tham 12 staff. If two procedural rooms are being utilized at the same time, an additional RN will be staffed as a interdepartmental float nurse. Additionally, a 6th endoscopy techician will be secheduled if available.



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:		Surger	у			
Unit/ Clinic Type:	e: Surgery					
Unit/ Clinic Address:	502 W. 4t	h Ave. Toppenis	h, Washin	gton 9894	18	
Effective as of:		1.1.202	25			
Room assignment						
Room assignment	Shift Type	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's
	Dayshift (0630-1700)	10.5	1		1	
1 Room						
	Dayshift (0630-1700)	10.5	2		2	
			_		_	
		_				
2 Rooms						
	Dayshift (0630-1700)	10.5	3		3	

3 Rooms			
3 KUOITIS			



Unit Information

	Additional Care Tea	m Members		
		Shift Coverage		
Occupation	Day	Evening	Night	Weekend
Surgeon	1	1	1	1
Surgical Services Director	1	0	0	0
Anesthesia Provider	1	1	1	1
Respiratory Therapy	1	1	1	1
Administrative Nursing Supervisor	1	1	1	1
Radiology Technician	1	1	1	1
Laboratory	1	1	1	1
Pharmacy	1	0	0	0

Unit Information

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

 \checkmark

Activity such as patient admissions, discharges, and transfers

Description:

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

Description:

✓ Skill mix

Description:

Level of experience of nursing and patient care staff

Description:

✓ Need for specialized or intensive equipment

Description:

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

Description:

✓ Other

Description:

Matricies are developed as a guide for shift-to-shift unit based staffing decisions. Matricies may be adjusted based on the patient's intensity of care needs, acutiy, the skill-mix, geographical location, and utilization of specialized equipment. Additional staff may be added to help support patient safety and quality of care. Call hours: Monday-Friday 1700-0630 and Saturday/Sunday 0630-0630



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	I			
Unit/ Clinic Type:	Pre-Op/Post-Op					
Unit/ Clinic Address:	502 W.	4th Toppenish,	Washingto	on 98948		
Effective as of:		1.1.202	25			
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
		On-Call				
Sunday						
	Dayshift (0700-1700)	10	1			
Monday						
	Dayshift (0700-1700)	10	1			

	r	1	1	1	1	
Tuesday						
Tuesday						
	Dayshift (0700-1700)	10	1			
Wednesday						
		1				
	Dayshift (0700-1700)	10	1			
Thursday						
,						
	Davenift (0700 1700)	10	1			
	Dayshift (0700-1700)	10	1			
Friday						
Friday						
		+				
		+				
		On-Call				
			1			
Saturday		1				
		+	<u> </u>			
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Unit Information

	Additional Care Tea	m Members		
		Shift Coverage		
Occupation	Day	Evening	Night	Weekend
Surgeon	1	1	1	1
Surgical Services Director	1	0	0	0
Anesthesia Provider	1	1	1	1
Respiratory Therapy	1	1	1	1
Administrative Nursing Supervisor	1	1	1	1
Radiology Technician	1	1	1	1
Laboratory	1	1	1	1
Pharmacy	1	0	0	0
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Unit Information

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

Activity such as patient admissions, discharges, and transfers

Description:

Matricies are developed as a guide for shift-to-shift unit based staffing decisions. Matricies may be adjusted based on the patient's intensity of care needs, acutiy, the skill-mix, geographical location, and utilization of specialized equipment. Additional staff may be added or floated from other unit's to help support patient safety and quality of care

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

Description:

✓ Skill mix

Description:

Level of experience of nursing and patient care staff

Description:

✓ Need for specialized or intensive equipment

Description:

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

Description:

Other \checkmark

Description:

PACU will be staffted based on number of anticipated surgeries, PATs, and outpatient appointments. Phase 1 (Recovery Portion) 1:1 Nursing with a 2nd RN readily available in the unit. Phase 2 (Observation Portion): 1 RN to 1 patient if unstable. 1 RN to 2 patients if <8 years awake and stable without parent present or initial admission of patient. 1 RN to 3 patients for 1.5 hours post Phase 1 or if patient <8 years with parent or discharge from Phase 1 with family present. 1 RN to 4 patients if awake and stable, <8 years and stable with parent present. In the event that only 1 RN is available for Phase 2, close PACU and move observation patient to the appropriate inpatient department for further support. All Administrative Nursing Supervisors will be crossed trained to PACU and can be utilized to provide primary or secondary nursing in Phase 1 and Phase 2. Call hours: Monday-Friday 1700-0630 and Saturday/Sunday 0630-0630