Washington State Department of HEALTH

Hospital Staffing Semiannual Compliance/Non-Compliance Form

Each hospital needs to ensure that its policies and procedures, when implemented, result in accurate information being reported.

Hospital Information

Name of Hospital	MultiCare Capital Medical Center
Address	3900 Capital Mall Dr SW
City, State, and ZIP	Olympia, WA 98502
Email	Shanon.Watkins@multicare.org
Phone	360-706-6531
Hospital License #	HAC.FS.61279406
Date Submitted	7/31/26
Six-month Reporting Period	1/1/2026 - 06/30/2026

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DOH 346-171 September 2024

Compliance

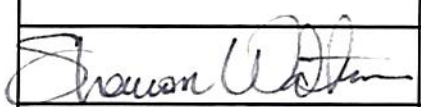
For compliance reporting and calculation purposes, hospitals are to measure compliance on a shift-by-shift basis for each patient care unit nursing staff assignment. Compliance is to be maintained throughout each shift.

1. Total number of nurse staffing assignments in the reporting period. 11,519

2. Total number of nurse staffing assignments out of compliance with the staffing assignments in the hospital staffing plan during the reporting period. 616

3. Total rate of non-compliance:
(Total # of nurse staffing assignments out of compliance/ Total # of nurse staffing assignments in staffing plan) X 100 = Non-compliance %). 5.35%

Confirmation

Hospital Staffing Committee Cochair Signatures	I believe that the validity of this report should be investigated by the Department of Health	The data contained in this form is accurate, valid, and has not been manipulated or modified
	☐	☑
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