

1201 S. Miller St. Wenatchee, WA 98801 509.662.1511 confluencehealth.org

December 17, 2024

Dear members of the Hospital Staffing Committee (HSC),

I am pleased to inform you that after review, Confluence Health (CH) administration is accepting the 2025 staffing proposal as submitted by the committee. The committees work demonstrates an understanding of the hospitals needs and future goals. This two-part report will be delivered to Washington State Department of Health by January 1, 2025, along with your staffing plan.

Implementation of the 2024 staff plan was a success on many levels. Nurse sensitive quality indicators provide a snapshot of the care we are providing for our patients. This data is part of the HSC charter and presented at scheduled times throughout the year. Please see Appendix A for current report.

In recent evaluations using Press Ganey, the hospital has shown notable improvements in patient experiences related to nurse staffing. The overall rating for nurses increased from 89.60 in December 2023 to 90.52 in November 2024, reflecting enhanced patient satisfaction with nursing care. Additionally, the likelihood of patients recommending the hospital rose significantly from 78.75 in December 2023 to 83.72 in November 2024. These positive trends indicate the hospital's ongoing commitment to improving the quality of care and patient satisfaction.

Confluence Health actively engages in various recruiting efforts to attract top talent in the healthcare field. We participate in nursing career fairs across Washington, Oregon, and Idaho to promote Confluence Health and connect with potential nurse hires. Our partnership with ZipRecruiter over the past year has significantly increased the visibility of our job postings, resulting in a higher number of out-of-state nursing applicants. Additionally, we maintain a strong presence in the local community by visiting the Wenatchee High School Medical Occupations program annually to conduct mock interviews and discuss healthcare careers and the hiring process with students. These initiatives reflect our commitment to building a skilled and dedicated workforce.

Confluence Health is dedicated to retaining its employees through a comprehensive approach that includes a robust Total Rewards program, wellness initiatives, and a focus on staff engagement and development. The Total Rewards program offers extensive benefits such as medical, prescription, vision, and dental coverage, retirement benefits with company match, paid time off, disability and life insurance, and employee assistance programs. Additionally, Confluence Health's Wellness program encourages healthy lifestyles through financial incentives for preventive care, wellness challenges, and health risk assessments, along with gym membership reimbursements.

To foster a positive work environment, Confluence Health utilizes Gallup surveys to measure staff engagement and collaborates with leaders to create tailored action plans. The organization also invests

in local education by partnering with Wenatchee Valley College and local high schools to support workforce development. Competitive pay is ensured through regular market salary analyses, aiming to match the 50th percentile of market wages.

Furthermore, Confluence Health is committed to diversity and equity, having established a Diversity, Equity, Inclusion, and Belonging (DEI/B) Council to drive meaningful actions and enhance the workplace culture. Confluence Health is committed to workforce development through a variety of residency, apprenticeship, and educational opportunities. We offer an RN residency program and a CNA trainee program to support the growth of our nursing staff. Both of which boast impressive retention rates, with 97% of residents staying after one year and 74% after two years. In 2024 36 nursing residents were hired and deployed across various inpatient units.

Our Career Pathways Coordinator plays a crucial role in connecting with employees who are looking to advance their careers within Confluence Health, providing personalized career services and highlighting job opportunities in different departments. This year, we have invested \$210,000 in tuition reimbursement for 85 employees pursuing degrees such as AA, BSN, MSN, MBA, and technical degrees like Pharm Tech and Rad Tech. Additionally, we offer 10 competitive \$3,000 scholarships annually to high school seniors within our service area, supporting their pursuit of higher education since 2016. These initiatives demonstrate our dedication to fostering professional growth and development among our staff.

In summary, I would like to extend my gratitude to each member of the committee for your hard work and commitment to our critical initiatives and contribution to this staffing plan. Your efforts are instrumental in ensuring that our hospital remains true to our mission to provide local care by and for our community.

Thank you,

Dr. Andrew Jones, CEO



	Campur	Monthly	2023	2024 YTD or Average	Jan-24	Fob-24	Mar-24	Apr-24	Max-24	Jun-24	Jul-24	Aug-24	Sop-24	Oct-24	Neu-24	Dec-24	2024 YTD
	Compa	Goal		Performanc	04011-04	100 24	1101 24		110) 24				500 64	00.04	1.00 54	00004	LOCATIO
NIAHO QM.7 SR.4e Threats to Patient Safety				T DTT DTT DTT DTT DT													
Faile																	
ED Fall Rate per 1000 Encounters	СНН	0.42	0.48	0.29	0.00	0.22	0.00	0.00	0,39	0.42	0.61	0.64	0.42	0.22			
Patient Falls per 1000 Patient Days (CH Inpatient Units)	СНН	2.70	2.75	2.70	3.31	2.28	2.12	3.02	1.89	3.27	3.30	3.58	2,56	2,46			
Harpital Acquired Pressure Injuries (HAPI)																	
Total number HAPI	СНН	21	247 (21/ma)	128	19	18	17	15	13	13	5	12	16				128
Modical Dovico Rolatod		7	85 (7/ma)	36	6	3	1	4	5	*	3	z	4				36
NIAHO QM.7 SR.46 Medication Therapy/Medication Use																	
Medication Scanning Compliance Rate		96.9%	96.2%	95.7%	95%	96%	95.4%	96.12	96.0%	95.9%	95.8%	95.8%	95.9%	95.5%			95.7×
Medication Scanning Compliance Rate	Herer	96.9%	95.5%	95.4%	95%	95%	95.4%	95.3%	94.3%	95.2%	95.4%	95.6%	96.0%	96.7%			
Time to Pharmacy Medication Reconciliation Complete	СНН	5.5	nta	5.21	6.78	5.47	4.64	3.45	3.99	6.00	5.3	5.26	5.62	5.6			
MIAHO QM.7 SR.44 Anorthoria/Mudorato Sodatian Advorra																	
× of all Aldroto Scoros Completed (all units/departments)	СНН	92%	nta	93%	2024 0	Rarultz	92%	2024 02	Rarultz	95×	2024 03	Rosults	88X	2024 Q4 R	arultr		92%
HIAHO QM.7 SR.4s Bland and Bland Components-Adverse E																	
Number of Transfusion Reactions	СНН	nta 🗋	7	9	1	0	0	1	1	1	2	1	0	2			9
Number of Transfusion Never Events	- Vnn	0	0	0	0	0	0	0	0	0	0	0	0	0			0
HIAHO QM.7 SR.4q Effectiveness of Pain Management Syst	ta i																
Pain Arrorsmont DocumontationPro-Arrorsmont within 30 minutor	CHH	91.97%	90.67%	92.45%	92.74%	93.04%	93.60%	94.10%	93.09%	91.33%	91.69%	91.52%	91.35%	91,99%			92%
SR.4b(2) Antimicrobial Stauardzhip																	
Anti-proudomonal bota-lactam uro por 1,000 pationt days	Centr	< 99.4	99.86	99.31	\$5.37	116.12	114	100.5	107.5	96.4	99.9	101.24	92.3	79.8			99.31
Anti-proudomonal bota-lactam we por 1,000 pationt days	Herer	< 40	44.44	23.93	52.63	20.75	17	21.74	20.7	2.2	35.9	24.75	19	24.6			
NIAHO QM.7 SR.4i Utilizatian Managament System																	
SR.4i(1) Reedmirrinar																	
30 Day Roadmirsion (65+)	СНН	12.08%	12.08%	11.39%	15,15%	11.75%	11.93%	14.55%	9.40%	12.53%	9.88%	8.38%	8.95%				11.39%
Seprir Readmirsion Rate	CHH	11.00×	11.25%	10.58%	13,10%	8.22%	8.08%	17.20%	10.89%	10.84%	13.70%	10.39%	2.82%				
SR.4i(2) Aggregated Findings/Trends From UR Committee															1		
Important Merrage from Medicare (IMM) signed	Centrel	93%	90%	92%	91%	93%	93%	92%	\$7×	93%	94%	93%	90%	92%	1		92%
Important Morrago from Modicaro (IMM) signed	Herer	93%	nta	87%	53%	712	91%	95%	93%	90%	93%	94%	100%	93%			
Maan Delivered	CHH	93%	nta	95%	93%	84%	100%	100%	94%	97%	91%	100%	95%	100%			
NIAHO QM.7 SR.4j Patient Flau Izzaez																	
\$ of Patients in the ED > 4 Hours After Bed Request	Centr	nta 🗋	nta	65	118	150	58	57	37	34	113	25	19	42			65
\$ of Patients in the ED > 4 Hours After Bed Request	Herer	nta	nta	6	10	21	1	7	0	10	0	1	1	12			
Admit Decirion to Admit Time (Minr)		389.7 min	nta	94	116	122	88	101	82	85	103	78	77	85			94
Admit Decirion to Admit Time (Minr)	Herer	- 	nta	109	118	119	89	102	107	100	147	84	100	127			
NIAHO QM.7 SR.4k Curtamer Satirfaction, Bath Clinical a															-	·	_
Press Genes Patient Satisfaction Scares																	
Ability to Got Desired Appointment, All Medical Practice		84.75	\$3.71	85.29	84.33	85.71	85.73	85.66	\$5.25	85.82	85.13	85.13	84.87	85.07			
Inpatient-Nurse Overall		90.44	nta	91.83	91.87	91.88	92.89	92.30	91.05	89.51	92.00	91.06	91.64	94.44			91.86
Inpatient-Staff Worked Well Together	СНН	92.10	nta	92.50	91.53	92.23	93.79	93.31	92.69	91.01	92.28	92.86	90.69	94.47			92.49
Outpatient-Staff Worked Well Together	1	94.75	nta	94.37	94.36	94.07	94.44	94.50	94.43	94.53	94.45	93.99	94.36	94.56			94.37
Ambulatory Surgery-Staff Worked Well Together		97.16	nta	96.89	98.21	97.01	96.52	97.47	97.26	96.51	96.65	97.62	96,15	96.06			96.95
ED-Staff Worked Well Together	Centr	84.69	nta	86.55	85.74	85.61	88.67	81.25	N.D. 7	85.88	85.00	85.96	89.44	\$7.75			
ED-Staff Worked Well Together	Herer	90.39	nta	89.50	\$8.35	90.81	\$7.72	95.83	N.D.	88.75	89.49	90.54	90.58	90.91			

COVER PAGE

The following is the comprehensive hospital staffing plan for Confluence Health Hospitals 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: 12/23/24

I, the undersigned with responsibility for Confluence Health Hospitals 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: Dr. Andrew JOnes

Hospital Information

Name of Hospital: Confluence	Health He	ospitals			
Hospital License #: HAC.FS	S.0000	0168			
Hospital Street Address: 120*	1 S. Mi	iller St	(Centi	ral Car	mpus)
City/Town: Wenatchee		_{State:} W	A		Zip code: 98801
Is this hospital license affiliated w	ith more tha	an one locat	ion?	Ves	No No
		820 N. C	helan (Ma	res Camp	ous)
If "Yes" was selected, please provi	ide the				
location name and address					
Review Type:	🖌 Ani	nual	Review Dat	:e: 12/23/2	4
	Upc	late	Next Revie	w Date: 7/3	30/25
Effective Date: 1/1/25					
Date Approved: 10/21/24					

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: Confluence Health Hospitals (CCH) uses the most recent data published by professional nursing organizations and other health professionals
Terms of applicable collective bargaining agreement
Description: CCH follows all applicable portions of the collective bargaining agreement when developing our hospital staffing plans
Relevant state and federal laws and rules including those regarding meal and rest breaks and use of overtime and on-call shifts
Description: CHH follows all state and local laws when developing the staffing plan and has eliminated/reconfigured staffing to address the use of overtime and on-call shifts.
Hospital finances and resources
Description: The CFO participates in the HSC and collaborates with the CNO to address staffing financial needs.
Other
Description:

Signature

CEO & Co-chairs Name:	Signature:	Date:
Andrew Jones	Abd -	12/23/24
Kelly Allen	hall	12/23/24
Simon Morton	Ain Maca	12/23/21

Total Votes											
# of Approvals	# of Denials										
22	0										

Access unit staffing matrices here.

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Patient Volume-based Staffing Matrix Formula Template

Unit/ Clinic Na	me:					Conflu	ence Health				
Jnit/ Clinic Typ	pe:			Cen	tral Camp	us - Prog	ressive Care	e Unit - 1s	t floor		
Jnit/ Clinic Ad	dress:			1	201 South	n Miller S	t Wenatche	e Wa. 98	801		
Average Daily (Census:		13			Maxim	um # of Bed	s:		17	
ffective as of:		1/1/2025									
t of Rooms											
# of Rooms	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)
1	07-1530	8	2	0	0	0.00	16.00	0.00	0.00	0.00	48.00
STATES OF	15-1930	4	2	0	0	0.00	8.00	0.00	0.00	0.00	
	1900-2330	4	2	0	0	0.00	8.00	0.00	0.00	0.00	Real M
	2300-0730	8	2	0	0	0.00	16.00	0.00	0.00	0.00	1926
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	125300
1		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
2012 30 3		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
없이 언제 모양 문		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	D单 578 音
Lange Langerty P.		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	E. (120.
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	100000
	07-1530	8	2	0	0	0.00	8.00	0.00	0.00	0.00	24.00
Here Topland	15-1930	4	2	0	0	0.00	4.00	0.00	0.00	0.00	
	1900-2330	4	2	0	0	0.00	4.00	0.00	0.00	0.00	
	2300-0730	8	2	0	0	0.00	8.00	0.00	0.00	0.00	The all
2		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	W. Cat
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St. 5 84.		0	0	0	0	0.00	0.00	0.00	0.00	0.00	But said
132.36		0	0	0	0	0.00	0.00	0.00	0.00	0.00	STUDY
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
	07-1530	8	2	0	0	0.00	5.33	0.00	0.00	0.00	16.00
LOSSE NO.	15-1930	4	2	0	0	0.00	2.67	0.00	0.00	0.00	O TRANS
	1900-2330	4	2	0	0	0.00	2.67	0.00	0.00	0.00	L. Amilie
Statistics (2300-0730	8	2	0	0	0.00	5.33	0.00	0.00	0.00	A THE BUILT
3		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
VS ANALL .		0	0	0	0	0.00	0.00	0.00	0.00	0.00	A State of the second
Sala And		0	0	0	0	0.00	0.00	0.00	0.00	0.00	- 30 S.J L
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	1. M. C. (5)

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Nelling		0	0	0	0	0.00	0.00	0.00	0.00	0.00	ant a
	07-1530	8	2	0	1	0.00	4.00	0.00	2.00	0.00	15.00
	15-1930	4	2	0	1	0.00	2.00	0.00	1.00	0.00	
	1900-2330	4	2	0	0	0.00	2.00	0.00	0.00	0.00	
	2300-0730	8	2	0	0	0.00	4.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
4		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
Julia.		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
	07-1530	8	2	0	1	0.00	3.20	0.00	1.60	0.00	14.40
	15-1930	4	2	0	1	0.00	1.60	0.00	0.80	0.00	
	1900-2330	4	2	0	1	0.00	1.60	0.00	0.80	0.00	
	2300-0730	8	2	0	1	0.00	3.20	0.00	1.60	0.00	
5		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
-		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
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		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
102 3	07-1530	8	3	0	1	0.00	4.00	0.00	1.33	0.00	14.00
	15-1930	4	3	0	1	0.00	2.00	0.00	0.67	0.00	
	1900-2330	4	2	0	1	0.00	1.33	0.00	0.67	0.00	
	2300-0730	8	2	0	1	0.00	2.67	0.00	1.33	0.00	
6		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
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		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
	07-1530	8	3	0	1	0.00	3.43	0.00	1.14	0.00	13.71
	15-1930	4	3	0	1	0.00	1.71	0.00	0.57	0.00	
	1900-2330	4	3	0	1	0.00	1.71	0.00	0.57	0.00	
	2300-0730	8	3	0	1	0.00	3.43	0.00	1.14	0.00	
7		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
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	07-1530	8	3	0	1	0.00	3.00	0.00	1.00	0.00	12.00
	15-1930	4	3	0	1	0.00	1.50	0.00	0.50	0.00	
	1900-2330	4	3	0	1	0.00	1.50	0.00	0.50	0.00	
	2300-0730	8	3	0	1	0.00	3.00	0.00	1.00	0.00	
8		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
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		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
	07-1530	8	4	0	1	0.00	3.56	0.00	0.89	0.00	13.33
	15-1930	4	4	0	1	0.00	1.78	0.00	0.44	0.00	

-	1900-2330	4	4	0	1	0.00	1.78	0.00	0.44	0.00	Inc. Of your
	2300-0730	8	4	0	1	0.00	3.56	0.00	0.89	0.00	Subir.
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
9		0	0	0	0	0.00	0.00	0.00	0.00	0.00	12.000
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		0	0	0	0	0.00	0.00	0.00	0.00	0.00	178 112
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	18202
A	07-1530	8	4	0	2	0.00	3.20	0.00	1.60	0.00	14.40
	15-1930	4	4	0	2	0.00	1.60	0.00	0.80	0.00	
	1900-2330	4	4	0	2	0.00	1.60	0.00	0.80	0.00	
	2300-0730	8	4	0	2	0.00	3.20	0.00	1.60	0.00	1.131
	2300-0730	0	0	0	0	0.00	0.00	0.00	0.00	0.00	
10		0	0	0	0	0.00	0.00	0.00	0.00	0.00	128113
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	Dan Kin
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	2 (J 841)
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	경사업 12
0.00	07-1530	8	4	0	2	0.00	2.91	0.00	1.45	0.00	13.09
	15-1930	4	4	0	2	0.00	1.45	0.00	0.73	0.00	10.09
	1900-2330	4	4	0	2	0.00	1.45	0.00	0.73	0.00	
	2300-0730		4	0	2	0.00	2.91	0.00	1.45	0.00	Donal III
	2500-0750	0	0	0	0	0.00	0.00	0.00	0.00	0.00	STATES IN
11		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	THE ALLE
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	+	0	0	0	0	0.00	0.00	0.00	0.00	0.00	
	07-1530	8	4	0	2	0.00	2.67	0.00	1.33	0.00	12.00
	15-1930	4	4	0	2	0.00	1.33	0.00	0.67	0.00	12.00
	1900-2330	4 4	4	0	2	0.00	1.33	0.00	0.67	0.00	
	2300-0730	8	4	0	2	0.00	2.67	0.00	1.33	0.00	2000
	2300-0750	0	- 4	0	0	0.00	0.00	0.00	0.00	0.00	3 1403
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	15-1930	4	5	0	2	0.00	1.54	0.00	0.62	0.00	122/62
	1900-2330	4	5	0	2	0.00	1.54	0.00	0.62	0.00	10 12 12 12 12 12 12 12 12 12 12 12 12 12
	2300-0730	8	5	0	2	0.00	3.08	0.00	1.23	0.00	1. Ballers
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	07-1530	8	5	0	2	0.00	2.86	0.00	1.14	0.00	12.00
	15-1930	4	5	0	2	0.00	1.43	0.00	0.57	0.00	1.5
	1900-2330	4	5	0	2	0.00	1.43	0.00	0.57	0.00	11138 73
	2300-0730	8	5	0	2	0.00	2.86	0.00	1.14	0.00	A Relies
14		0	0	0	0	0.00	0.00	0.00	0.00	0.00	3251 (10-1
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	07-1530	8	5	0	2	0.00	2.67	0.00	1.07	0.00	11.20
	15-1930	4	5	0	2	0.00	1.33	0.00	0.53	0.00	
	1900-2330	4	5	0	2	0.00	1.33	0.00	0.53	0.00	
	2300-0730	8	5	0	2	0.00	2.67	0.00	1.07	0.00	
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	07-1530	8	5	0	2	0.00	2.50	0.00	1.00	0.00	10.50
	15-1930	4	5	0	2	0.00	1.25	0.00	0.50	0.00	
	1900-2330	4	5	0	2	0.00	1.25	0.00	0.50	0.00	
	2300-0730	8	5	0	2	0.00	2.50	0.00	1.00	0.00	
16		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
16		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
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11 2 3 A		0	0	0	0	0.00	0.00	0.00	0.00	0.00	10.39622 L
Trained.	07-1530	8	6	0	2	0.00	2.82	0.00	0.94	0.00	11.29
	15-1930	4	6	0	2	0.00	1.41	0.00	0.47	0.00	
	1900-2330	4	6	0	2	0.00	1.41	0.00	0.47	0.00	
	2300-0730	8	6	0	2	0.00	2.82	0.00	0.94	0.00	
17		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
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		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/01	#DIV/01	
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Washington State Department of HEALTH	Unit Informatic		format, call 1- of hearing c (Washi	this document in another -800-525-0127. Deaf or hard customers, please call 711 ington Relay) or email rrmation@doh.wa.gov.
	Additional Care Team Me	mbers		
		Shift Coverage		
Occupation Case Management	Day x	Evening	Night	Weekend
Physical Therapy Occupational Therapy	X			
Speech Therapy	X	_		
Respiratory Therapy	X	X	X	X
SAME & SECTION AND AND	Unit Informatio	n		in the state of the
Contract of Contra	and in the Development of	Cabo Haita Ca	offine Dien	
	Considered in the Development o (Check all that apply)		anng Plan	
Activity such as patient adm	issions, discharges, and transfers			
Patient acuity level intensity of	f care needs, and the type of care to be de	livered on each	shift	
	for shift by shift unit based staffing de	· · · · · · · · · · · · · · · · · · ·		, down based on patient

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	Skill mix																			
										210.02							- 101			_
2	Level of	experi	ence of r	nursing	and pa	atient c	are staff			- 15	- 10	-	_	_				_		
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J	Need for	specia	alized or	intensi	ive equ	upment				_										_
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Patient Volume-based Staffing Matrix Formula Template

Unit/ Clinic Nar	ne:					Conflu	ence Health				
Unit/ Clinic Typ	e:			Cent	tral Camp	us - Prog	ressive Care	Unit (3rd	l floor)		
Unit/ Clinic Add	fress:			1	201 South	Miller S	it Wenatche	e Wa. 98	801		
Average Daily (Census:		20			Maxim	um # of Bed	s:		34	
Effective as of:		1/1/2025									
# of Rooms											
# of Rooms	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)
1	07-1530	8.00	1.00	0.00	1.00	0.00	8.00	0.00	8.00	0.00	48.00
Resident St	15-1930	4.00	1.00	0.00	1.00	0.00	4.00	0.00	4.00	0.00	- Automation
Alter D. M.	1900-2330	4.00	1.00	0.00	1.00	0.00	4.00	0.00	4.00	0.00	No. Con
	2300-0730	8.00	1.00	0.00	1.00	0.00	8.00	0.00	8.00	0.00	
NY YANG BE		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	A LOSSER
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	In Cruch St
Some To PA		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.3°° U.578
With the Contest		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	westings
TTTT: ALL ST		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Markin 2		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	defer mile
2	07-1530	8.00	1.00	0.00	1.00	0.00	4.00	0.00	4.00	0.00	24.00
	15-1930	4.00	1.00	0.00	1.00	0.00	2.00	0.00	2.00	0.00	
ALL MARKED	1900-2330	4.00	1.00	0.00	1.00	0.00	2.00	0.00	2.00	0.00	125-53 17 3
	2300-0730	8.00	1.00	0.00	1.00	0.00	4.00	0.00	4.00	0.00	- Starting
A STORE		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
102 341 3		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	The second second
ACAL STR		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Internet and		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	THE SHEET
And the second second		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
3	07-1530	8.00	1.00	0.00	1.00	0.00	2.67	0.00	2.67	0.00	16.00
	15-1930	4.00	1.00	0.00	1.00	0.00	1.33	0.00	1.33	0.00	
Star Star	1900-2330	4.00	1.00	0.00	1.00	0.00	1.33	0.00	1.33	0.00	1 MILLING
Tana 19	2300-0730	8.00	1.00	0.00	1.00	0.00	2.67	0.00	2.67	0.00	C. C. Town
331513 30		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	Con Star Park
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	Sulli
TANT BUE		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
en miller		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	THE REAL PROPERTY OF

		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	TRA LEAD
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
4	07-1530	8.00	2.00	0.00	0.00	0.00	4.00	0.00	0.00	0.00	12.00
	15-1930	4.00	2.00	0.00	0.00	0.00	2.00	0.00	0.00	0.00	
	1900-2330	4.00	2.00	0.00	0.00	0.00	2.00	0.00	0.00	0.00	
	2300-0730	8.00	2.00	0.00	0.00	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	
THE R. CO.		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
5	07-1530	8.00	2.00	0.00	1.00	0.00	3.20	0.00	1.60	0.00	11.20
	15-1930	4.00	2.00	0.00	0.00	0.00	1.60	0.00	0.00	0.00	
	1900-2330	4.00	2.00	0.00	0.00	0.00	1.60	0.00	0.00	0.00	
	2300-0730	8.00	2.00	0.00	0.00	0.00	3.20	0.00	0.00	0.00	
	L	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	L	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	L	0.00	0.00	0.00	0.00	0.00	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	07 1520	8.00	2.00		1.00	0.00	2.67	0.00	1.33	0.00	10.00
	07-1530	4.00	2.00	0.00	0.00	0.00	1.33	0.00	0.00	0.00	10.00
	1900-2330	4.00	2.00	0.00	1.00	0.00	1.33	0.00	0.67	0.00	
	2300-0730	8.00	2.00	0.00	0.00	0.00	2.67	0.00	0.00	0.00	
	2300 0730	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	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	07-1530	8.00	2.00	0.00	1.00	0.00	2.29	0.00	1.14	0.00	10.29
	15-1930	4.00	2.00	0.00	1.00	0.00	1.14	0.00	0.57	0.00	
	1900-2330	4.00	2.00	0.00	1.00	0.00	1.14	0.00	0.57	0.00	
	2300-0730	8.00	2.00	0.00	1.00	0.00	2.29	0.00	1.14	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Chine Series		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	TRANSFER IN
8	07-1530	8.00	3.00	0.00	1.00	0.00	3.00	0.00	1.00	0.00	12.00
	15-1930	4.00	3.00	0.00	1.00	0.00	1.50	0.00	0.50	0.00	
	1900-2330	4.00	3.00	0.00	1.00	0.00	1.50	0.00	0.50	0.00	
	2300-0730	8.00	3.00	0.00	1.00	0.00	3.00	0.00	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	
Menne	07-1530	8	4	0	0	0.00	3.56	0.00	0.00	0.00	10.67

To an and	1900-2330	4	4	0	0	0.00	1 78	0.00	0.00	0.00	
	2300-0730	8	4	0	0	0.00	3.56	0.00	0.00	0.00	
	2300-0730	0	0	0	0	0.00	0.00	0.00	0.00	0.00	
9		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
No. III Perso	07-1530	8	4	0	1	0.00	3.20	0.00	0.80	0.00	12.00
	15-1930	4	4	0	1	0.00	1.60	0.00	0.40	0.00	12.00
	1900-2330	4	4	0	1	0.00	1.60	0.00	0.40	0.00	
	2300-0730	8	4	0	1	0.00	3.20	0.00	0.80	0.00	
	2300-0730	0	0	0	0	0.00	0.00	0.00	0.00	0.00	
10		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
-	07 1520		<u> </u>					0.00	0.73	0.00	13.09
	07-1530	8	5	0	1	0.00	3.64 1.82	0.00	0.73	0.00	13.09
	15-1930		+			0.00		0.00	0.36	0.00	
	1900-2330	4	S	0	1		1.82	0.00		0.00	
	2300-0730	8	5	0	1 0	0.00	3.64	+	0.73	0.00	
11		0	0		0	0.00	0.00	0.00	0.00	0.00	
		0	0		0	0.00	0.00	0.00	0.00	0.00	
		0	0	<u> </u>					0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	+	<u> </u>	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
	07.4530				-			+			12.00
	07-1530	8	5	0	1	0.00	3.33	0.00	0.67	0.00	12.00
	15-1930	4	5	0	1	0.00	1.67	0.00	0.33	0.00	
	1900-2330	4	5	0	1	0.00	1.67	0.00	0.33	0.00	
	2300-0730	8	5	0	1	0.00	3.33	0.00	0.67	0.00	
12		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						0.00					10.00
	07-1530	8	5	0	2	0.00	3.08	0.00	1.23	0.00	12.92
	15-1930	4	5	0	2	0.00	1.54	0.00	0.62	0.00	
	1900-2330	4	5	0	2	0.00	1.54	0.00	0.62	0.00	
	2300-0730	8	5	0	2	0.00	3.08	0.00	1.23	0.00	
13		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	1999
	07-1530	8	5	0	2	0.00	2.86	0.00	1.14	0.00	12.00
	15-1930	4	5	0	2	0.00	1.43	0.00	0.57	0.00	
	1900-2330	4	5	0	2	0.00	1.43	0.00	0.57	0.00	
	2300-0730	8	5	0	2	0.00	2.86	0.00	1.14	0.00	
14		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
14		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
							0.00		1		

1000		0	0	0	0	0.00	0.00	0.00	0.00	0.00	NIL STOLL
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	Bill and
19.000 - 19.01Q	07-1530	8	5	0	2	0.00	2.67	0.00	1.07	0.00	11.20
	15-1930	4	5	0	2	0.00	1.33	0.00	0.53	0.00	
	1900-2330	4	5	0	2	0.00	1.33	0.00	0.53	0.00	Charles and States
	2300-0730	8	5	0	2	0.00	2.67	0.00	1.07	0.00	a Time NI
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
15		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	Ser Aven
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	1000 H
nn lice.u	07-1530	8	6	0	2	0.00	3.00	0.00	1.00	0.00	12.00
	15-1930	4	6	0	2	0.00	1.50	0.00	0.50	0.00	12.00
	1900-2330	4	6	0	2	0.00	1.50	0.00	0.50	0.00	
	2300-0730	8	6	0	2	0.00	3.00	0.00	1.00	0.00	
	2300-0730	0	0	0	0	0.00	0.00	0.00	0.00	0.00	
16		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0		0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
1	07.1530		+	0						0.00	11.00
	07-1530	8	6		2	0.00	2.82	0.00	0.94		11.29
	15-1930	4	6	0	2	0.00	1.41	0.00	0.47	0.00	
	1900-2330	4	6	0	2	0.00	1.41	0.00	0.47	0.00	
	2300-0730	8	6	0	2	0.00	2.82	0.00	0.94	0.00	
17		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
12-12-12-12	07.4530		+	-	ļ						10.07
	07-1530	8	6	0	2	0.00	2.67	0.00	0.89	0.00	10.67
	15-1930	4	6	0	2	0.00	1.33	0.00	0.44	0.00	
	1900-2330	4	6	0	2	0.00	1.33	0.00	0.44	0.00	
	2300-0730	8	6	0	2	0.00	2.67	0.00	0.89	0.00	
18		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
	L	0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
100 C		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
	07-1530	8	6	0	3	0.00	2.53	0.00	1.26	0.00	11.37
	15-1930	4	6	0	3	0.00	1.26	0.00	0.63	0.00	
	1900-2330	4	6	0	3	0.00	1.26	0.00	0.63	0.00	
	2300-0730	8	6	0	3	0.00	2.53	0.00	1.26	0.00	
19		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	- market
State of	07-1530	8	7	0	3	0.00	2.80	0.00	1.20	0.00	12.00

	L 15 1000		<u> </u>				1	1 0.00	0.00		
	15-1930	4	7	0	3	0.00	1.40	0.00	0.60	0.00	
	1900-2330	4	7	0	3	0.00	1.40	0.00	0.60	0.00	
	2300-0730	8	7	0	3	0.00	2.80	0.00	1.20	0.00	
20		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
WINA THE		-				1					
	07-1530	8	7	0	3	0.00	2.67	0.00	1.14	0.00	11.43
	15-1930	4	7	0	3	0.00	1.33	0.00	0.57	0.00	
	1900-2330	4	7	0	3	0.00	1.33	0.00	0.57	0.00	Filking.
	2300-0730	8	7	0	3	0.00	2.67	0.00	1.14	0.00	
21		0	0	0	0	0.00	0.00	0.00	0.00	0.00	a INARAAN
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
	├	0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
	07-1530	8	7	0	3	0.00	2.55	0.00	1.09	0.00	10.91
	15-1930	4	7	0	3	0.00	1.27	0.00	0.55	0.00	
	1900-2330	4	7	0	3	0.00	1.27	0.00	0.55	0.00	
	2300-0730	8	7	0	3	0.00	2.55	0.00	1.09	0.00	S. D. R.
22		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
	07-1530	8	7	0	3	0.00	2.43	0.00	1.04	0.00	10.43
	15-1930	4	7	0	3	0.00	1.22	0.00	0.52	0.00	
	1900-2330	4	7	0	3	0.00	1.22	0.00	0.52	0.00	
	2300-0730	8	7	0	3	0.00	2.43	0.00	1.04	0.00	
23		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	=/(0.00
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	12000000000
Ser Alle	07-1530	8	8	0	3	0.00	2.67	0.00	1.00	0.00	11.00
	15-1930	4	8	0	3	0.00	1.33	0.00	0.50	0.00	Man and an
	1900-2330	4	8	0	3	0.00	1.33	0.00	0.50	0.00	
	2300-0730	8	8	0	3	0.00	2.67	0.00	1.00	0.00	
24		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
	07-1530	8	8	0	3	0.00	2.56	0.00	0.96	0.00	10.56
	15-1930	4	8	0	3	0.00	1.28	0.00	0.48	0.00	
	1900-2330	4	8	0	3	0.00	1.28	0.00	0.48	0.00	
	2300-0730	8	8	0	3	0.00	2.56	0.00	0.96	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
25											

A CONTRACT		0	0	0	0	0.00	0.00	0.00	0.00	0.00	All Street Low Law
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	120 87 88
	07-1530	8	8	0	4	0.00	2.46	0.00	1.23	0.00	11.08
	15-1930	4	8	0	4	0.00	1.23	0.00	0.62	0.00	11.00
	1900-2330	4	8	0	4	0.00	1.23	0.00	0.62	0.00	
	2300-0730	8	8	0	4	0.00	2.46	0.00	1.23	0.00	
	2300-0730	0	0	0	0	0.00	0.00	0.00	0.00	0.00	
26		0	0	0	0	0.00	0.00	0.00	0.00	0.00	131245
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	Tito multers
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	1 11 2-2-
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	Plane Hell
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
	07-1530	8	9	0	4	0.00	2.67	0.00	1.19	0.00	11.56
	15-1930	4	9	0	4	0.00	1.33	0.00	0.59	0.00	11.50
	1900-2330	4	9	0	4	0.00	1.33	0.00	0.59	0.00	
	2300-0730	8	9	0	4	0.00	2.67	0.00	1.19	0.00	
	2300-0730	0	0	0	0	0.00	0.00	0.00	0.00	0.00	
27		0	0	0	0	0.00	0.00	0.00	0.00	0.00	104 - Horand
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	ALL PROPERTY
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	Wet Barren
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	A Rotan
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
11 12 1 - 2 1/2 - 2	07-1530	8	9	0	4	0.00	2.57	0.00	1.14	0.00	11.14
	15-1930	4	9	0	4	0.00	1.29	0.00	0.57	0.00	11.14
	1900-2330	4	9	0	4	0.00	1.29	0.00	0.57	0.00	and a state of the state
	2300-0730	8	9	0	4	0.00	2.57	0.00	1.14	0.00	102102220
	2300-0730	0	0	0	0	0.00	0.00	0.00	0.00	0.00	
28		0	0	0	0	0.00	0.00	0.00	0.00	0.00	理由のなどのない
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	N- LIVER
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	NSSE AND
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	OF LEAN
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	11, 10 2, 14
I State	07-1530	8	9	0	4	0.00	2.48	0.00	1.10	0.00	10.76
	15-1930	4	9	0	4	0.00	1.24	0.00	0.55	0.00	10.76
		4	9	0	4	0.00	1.24	0.00	0.55	0.00	5-1200
	1900-2330 2300-0730	8	9	0	4	0.00	2.48	0.00	1.10	0.00	LI VERMON
	2300-0730	0	0	0	0	0.00	0.00	0.00	0.00	0.00	7.11.573
29		0	0	0	0	0.00	0.00	0.00	0.00	0.00	Time the
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	R. California
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	1. E
	07.1530			Į	4				1.07	0.00	10.40
	07-1530	8	9	0		0.00	2.40	0.00	0.53	0.00	10.40
	15-1930	4	+		4	0.00	1.20	0.00			2000
	1900-2330	4	9	0	4	0.00	1.20	0.00	0.53	0.00	and the second second
	2300-0730	8	9	0	4	0.00	2.40	0.00	1.07	0.00	
30	├ ────┤	0	0	0	0	0.00	0.00	0.00	0.00	0.00	- 11-10-10-10-
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	A DE TRUNCA
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	NOS Cardo
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	and the second
and the second second		0	0	0	0	0.00	0.00	0.00	0.00	0.00	and the second second

	07-1530	8	10	0	4	0.00	2.58	0.00	1.03	0.00	10.84
Yelling Really	15-1930	4	10	0	4	0.00	1.29	0.00	0.52	0.00	
	1900-2330	4	10	0	4	0.00	1.29	0.00	0.52	0.00	
	2300-0730	8	10	0	4	0.00	2.58	0.00	1.03	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
31		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
39 m 10		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
a fatha d		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
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1018 # 789		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
12000	07-1530	8	10	0	4	0.00	2.50	0.00	1.00	0.00	10.50
	15-1930	4	10	0	4	0.00	1.25	0.00	0.50	0.00	
A MARCH 18	1900-2330	4	10	0	4	0.00	1.25	0.00	0.50	0.00	
	2300-0730	8	10	0	4	0.00	2.50	0.00	1.00	0.00	
32		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
32		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
A CONTRACT	-	0	0	0	0	0.00	0.00	0.00	0.00	0.00	
- State Short		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
A South		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
THE SHALL AND A		0	0	0	0	0.00	0.00	0.00	0.00	0.00	201
The second	07-1530	8	10	0	5	0.00	2.42	0.00	1.21	0.00	10.91
Page 1	15-1930	4	10	0	5	0.00	1.21	0.00	0.61	0.00	
And the second second	1900-2330	4	10	0	5	0.00	1.21	0.00	0.61	0.00	
	2300-0730	8	10	0	5	0.00	2.42	0.00	1.21	0.00	
33		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
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		0	0	0	0	0.00	0.00	0.00	0.00	0.00	40.50
	07-1530	8	10	0	5	0.00	2.35	0.00	1.18	0.00	10.59
	15-1930	4	10	0	5	0.00	1.18	0.00	0.59	0.00	
	2300-0730	4	10	0	5	0.00	1.18	0.00	0.59	0.00	
	2300-0730	8	10 0	0	5	0.00	2.35 0.00	0.00	0.00	0.00	
34		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
	·	0	0	0	0	0.00	0.00	0.00	0.00	0.00	
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	Unit Informat	ion			
	Additional Care Team M	lembers			
		Shift Coverage			
Occupation Unit Secretary	Day	Evening	Night	Weekend x	
Case Management	X			^	
Physical Therapy	x				
Occupational Therapy	x				
Speech Therapy Respiratory Therapy	x	x	x	X	[
Respiratory merapy	^		^	^	
		-			
				· · · · · ·	
	- Unit Informat	ion	eccombio	Shows of contemporation of	
			and the second se		Charles and a local sector
Factors C	onsidered in the Development (Check all that app		affing Plan		
Activity such as patient adm	issions, discharges, and transfers				
	Dest and statistics				
					-
					i i
Patient acuity level, intensity of	care needs, and the type of care to be d	elivered on each s	hift		
	for shift by shift unit based staffing o	lecisons and are	adjusted un	, down based on patient	

<u> </u>			
-			
	2	Skill mix	
			- 57
		Level of experience of nursing and patient care staff	
			1.45
			100
-			
	7	Need for specialized or intensive equipment	
-			
-			
-			
			**
			and modication
	I		ons, medication
		preparation areas, and equipment	
	Unit	nit can utilize ICU swing beds (if not being used by ICU) to get to max census of 34.	
	•		

☑ Other			
In addition, the unit utilize which might alter the num			icuity



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Patient Volume-based Staffing Matrix Formula Template

Unit/ Clinic Nar	ne:	Pediatric Unit									
Unit/ Clinic Typ	e:	Inpatient Con	fluence H	lealth Ce	ntral Cam	pus					
Unit/ Clinic Add	dress:	1201 S. Miller	, Wenatc	hee, WA	98801						
Average Daily 0	ensus:	3				Maxim	um # of Bed	le:	6		
Effective as of:		1/1/2025		_							
# of Roams									_		
# of Rooms	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. Can HPUS (hours per unit of service)
0	0700-1530	8.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/01	#DIV/01	#DIV/0!	#DIV/0!
	1500-1930	4.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/01	#DIV/0!	#DIV/0!	
	1900-2330	4.00	0.00	0.00	0.00	0.00	#DIV/01	#DIV/01	#DIV/0!	#DIV/0!	SHORE.
	2300-0730	8.00	0.00	0.00	0.00	0.00	#DIV/01	#DIV/0!	#DIV/01	#DIV/0!	IN STAT
1000		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	It as Tan
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/01	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/01	
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/01	#DIV/0!	#DIV/0!	A serie
		0.00	0.00	0.00	0.00	0.00	#0IV/0!	#DIV/01	#0IV/0!	#DIV/0!	-Linhanger
		0.00	0.00	0.00	0.00	0.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	1 1788 W
1	0700-1530	8.00	1.00	0.00	0.00	0.00	8.00	0.00	0.00	0.00	24.00
Start Same	1500-1930	4.00	1.00	0.00	0.00	0.00	4.00	0.00	0.00	0.00	, 35 QA
17-13-2-	1900-2330	4.00	1.00	0.00	0.00	0.00	4.00	0.00	0.00	0.00	Se William
	2300-0730	8.00	1.00	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	1. 23%
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	and the
The second		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	Tubic and
A CONTRACTOR		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	RARDI F
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	and the
2	0700-1530	8.00	1.00	0.00	0.00	0.00	4.00	0.00	0.00	0.00	12.00
1000	1500-1930	4.00	1.00	0.00	0.00	0.00	2.00	0.00	0.00	0.00	1. 1. 1.
	1900-2330	4.00	1.00	0.00	0.00	0.00	2.00	0.00	0.00	0.00	
0.745	2300-0730	8.00	1.00	0.00	0.00	0.00	4.00	0.00	0.00	0.00	
STREET, STREET, ST		0.00	0.00	0.00	0.00	0.00		0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
In the Party of th		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Contraction of		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
and the second		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
3	0700-1530	8.00				_					0.00
A REAL ROOM		4.00	1.00	0.00	0.00	0.00	2.67	0.00	0.00	0.00	8.00
H STATISTICS	1500-1930	4.00	1.00	0.00	0.00	0.00	1.33	0.00	0.00	0.00	
	2300-0730	8.00	1.00	0.00	0.00	0.00	1.33 2.67	0.00 0.00	0.00	0.00	
The state of the second	2300-0730	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	

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		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	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	0700-1530	8.00	2.00	0.00	0.00	0.00	4.00	0.00	0.00	0.00	12.00
	1500-1930	4.00	2.00	0.00	0.00	0.00	2.00	0.00	0.00	0.00	
	1900-2330	4.00	2.00	0.00	0.00	0.00	2.00	0.00	0.00	0.00	
	2300-0730	8.00	2.00	0.00	0.00	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	
5	0700-1530	8.00	2.00	0.00	0.00	0.00	3.20	0.00	0.00	0.00	9.60
	1500-1930	4.00	2.00	0.00	0.00	0.00	1.60	0.00	0.00	0.00	
	1900-2330	4.00	2.00	0.00	0.00	0.00	1.60	0.00	0.00	0.00	
	2300-0730	8.00	2.00	0.00	0.00	0.00	3.20	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	
AL-CIMPTON		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	Allan 10
6	0700-1530	8.00	2.00	0.00	0.00	0.00	2.67	0.00	0.00	0.00	8.00
	1500-1930	4.00	2.00	0.00	0.00	0.00	1.33	0.00	0.00	0.00	
	1900-2330	4.00	2.00	0.00	0.00	0.00	1.33	0.00	0.00	0.00	
	2300-0730	8.00	2.00	0.00	0.00	0.00	2.67	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
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	Unit Information	on			
	Additional Care Team Me				
]		Shift Coverage			
	Dev	Evening	hliotha	Montrood	
Occupation Respiratory Therapist	Day yes	Evening	Night	Weekend	
Unit Secretary	yes	yes yes	yes yes	yes 1 day	
Dietician	yes	no	no	yes	
Lactation Consultant	yes	15-19	no	yes	
Physical Therapist	yes	no	no	yes	
Occupational Therapist	yes	по	по	no	
CNA	yes	yes	yes	yes	
				· · · · ·	
	Unit Informatio	on			
Factors Co	onsidered in the Development o (Check all that apply		affing Plan		
Activity such as patient admi	ssions, discharges, and transfers				
					-
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Patient acuity level, intensity of	care needs, and the type of care to be de	livered on each	shift		
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1		Level of experience of nursing and patient care staff											
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+		Need for specialized or intensive equipment	1				-	-					-
÷	-	Need for specialized or intensive equipment											
	1-4-4 matrix fallows												
						- 0y							-
		Architecture and geography of the unit such as place	ement of pat	ient roor	ns, trea	tment	areas,	nursin	g statio	ons, m	edicatio	'n	-
		Architecture and geography of the unit such as place preparation areas, and equipment	ement of pat	ient roor	ns, trea	tment	areas,	nursin	g statio	ons, m	edicatio	'n	-
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Patient Volume-based Staffing Matrix Formula Template

Unit/ Clinic Nam	ie:					Conflu	ence Health				
Unit/ Clinic Type	1:				Central	Campus	- Intensive	Care Unit			
Unit/ Clinic Add	ress:		801								
Average Daily Co	ensus:		9			Maxim	um # of Bed	s:		20	
Effective as of:						1/	1/2025				
t of Rooms											
# of Rooms	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 Minimun Direct Pt. Care HPUS (hours per unit of service)
Coll Coll Theorem	07-1530	8	2	0	0	0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/01	100 C 100 C
	15-1930	4	2	0	0	0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/01	HE SAN
	1900-2330	4	2	0	0	0	#DIV/01	#DIV/01	#DIV/0!	#DIV/0!	P
	2300-0730	8	2	0	0	0	#DIV/0!	#DIV/01	#DIV/0!	#DIV/0!	ALL STREET
		0	0	0	0	0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
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Section 2		0	0	0	0	0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/01	#DIV/0!
Constanting of the	07-1530	8	3	0	0	0	24.00	0.00	0.00	0.00	The state
	15-1930	4	3	0	0	0	12.00	0.00	0.00	0.00	A. B. MURA
	1900-2330	4	3	0	0	0	12.00	0.00	0.00	0.00	The second
	2300-0730	8	3	0	0	0	24.00	0.00	0.00	0.00	
1		0	0	0	0	0	0.00	0.00	0.00	0.00	Stren to
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
STOLING BURGE		0	0	0	0	0	0.00	0.00	0.00	0.00	72.00
Str. These	07-1530	8	3	0	0	0	12.00	0.00	0.00	0.00	Basedon -
	15-1930	4	3	0	0	0	6.00	0.00	0.00	0.00	
	1900-2330	4	3	0	0	0	6.00	0.00	0.00	0.00	Nigel Jonale.
	2300-0730	8	3	0	0	0	12.00	0.00	0.00	0.00	
2		0	0	0	0	0	0.00	0.00	0.00	0.00	
the state of the s		0	0	0	0	0	0.00	0.00	0.00	0.00	-
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	Star Star

AND DOUBLE		0	0	0	0	0	0.00	0.00	0.00	0.00	E E EL
		0	0	0	0	0	0.00	0.00	0.00	0.00	36.00
	07-1530	8	3	0	0	0	8.00	0.00	0.00	0.00	
	15-1930	4	3	0	0	0	4.00	0.00	0.00	0.00	ALL CONTRACT
	1900-2330	4	3	0	0	0	4.00	0.00	0.00	0.00	
	2300-0730	8	3	0	0	0	8.00	0.00	0.00	0.00	1000
1		0	0	0	0	0	0.00	0.00	0.00	0.00	i noren
3		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	24.00
City and and	07-1530	8	4	0	0	0	8.00	0.00	0.00	0.00	
	15-1930	4	4	0	0	0	4.00	0.00	0.00	0.00	
	1900-2330	4	4	0	0	0	4.00	0.00	0.00	0.00	
	2300-0730	8	4	0	0	0	8.00	0.00	0.00	0.00	
The Million of Million		0	0	0	0	0	0.00	0.00	0.00	0.00	
4		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	24.00
	07-1530	8	4	0	0	0	6.40	0.00	0.00	0.00	General A
	15-1930	4	4	0	0	0	3.20	0.00	0.00	0.00	
	1900-2330	4	4	0	0	0	3.20	0.00	0.00	0.00	
	2300-0730	8	4	0	0	0	6.40	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
5		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
	8	0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
All and and		0	0	0	0	0	0.00	0.00	0.00	0.00	19.20
11.2 12.40 18.5	07-1530	8	4	0	0	0	5.33	0.00	0.00	0.00	SWEETEN P
	15-1930	4	4	0	0	0	2.67	0.00	0.00	0.00	
	1900-2330	4	4	0	0	0	2.67	0.00	0.00	0.00	
	2300-0730	8	4	0	0	0	5.33	0.00	0.00	0.00	
6		0	0	0	0	0	0.00	0.00	0.00	0.00	
v		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
and the set of the		0	0	0	0	0	0.00	0.00	0.00	0.00	16.00
Maint Sev. Z.	07-1530	8	5	0	0	0	5.71	0.00	0.00	0.00	1 Million Co
	15-1930	4	5	0	0	0	2.86	0.00	0.00	0.00	
	1900-2330	4	5	0	0	0	2.86	0.00	0.00	0.00	
	2300-0730	8	5	0	0	0	5.71	0.00	0.00	0.00	
7		0	0	0	0	0	0.00	0.00	0.00	0.00	
C. Stanly		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
	T	0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
Con con .		0	0	0	0	0	0.00	0.00	0.00	0.00	17.14
	07-1530	8	5	0	0	0	5.00	0.00	0.00	0.00	T NHON TOUR
	15-1930	4	5	0	0	0	2.50	0.00	0.00	0.00	

SINGAL	1900-2330	4	5	0	0	0	2.50	0.00	0.00	0.00	
	2300-0730	8	5	0	0	0	5.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
8		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
	2	0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	15.00
	07-1530	8	6	0	0	0	5.33	0.00	0.00	0.00	Double T
	15-1930	4	6	0	0	0	2.67	0.00	0.00	0.00	
	1900-2330	4	6	0	0	0	2.67	0.00	0.00	0.00	
	2300-0730	8	6	0	0	0	5.33	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
9		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	16.00
1	07-1530	8	6	0	0	0	4.80	0.00	0.00	0.00	12 11 12
	15-1930	4	6	0	0	0	2.40	0.00	0.00	0.00	
	1900-2330	4	6	0	0	0	2.40	0.00	0.00	0.00	
	2300-0730	8	6	0	0	0	4.80	0.00	0.00	0.00	
	15	0	0	0	0	0	0.00	0.00	0.00	0.00	
10		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	14.40
	07-1530	8	7	0	0	0	5.09	0.00	0.00	0.00	III SAL HIVE
	15-1930	4	7	0	0	0	2.55	0.00	0.00	0.00	
	1900-2330	4	7	0	0	0	2.55	0.00	0.00	0.00	
	2300-0730	8	7	0	0	0	5.09	0.00	0.00	0.00	
i de la compañía de la		0	0	0	0	0	0.00	0.00	0.00	0.00	
11		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	15.27
	07-1530	8	7	0	0	0	4.67	0.00	0.00	0.00	1-32.40
	15-1930	4	7	0	0	0	2.33	0.00	0.00	0.00	
	1900-2330	4	7	0	0	0	2.33	0.00	0.00	0.00	
	2300-0730	8	7	0	0	0	4.67	0.00	0.00	0.00	
12		0	0	0	0	0	0.00	0.00	0.00	0.00	
12		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
	2	0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	14.00
	07-1530	8	8	0	0	0	4.92	0.00	0.00	0.00	Here and
	15-1930	4	8	0	0	0	2.46	0.00	0.00	0.00	
	1900-2330	4	8	0	0	0	2.46	0.00	0.00	0.00	
	2300-0730	8	8	0	0	0	4.92	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
13		0	0	0	0	0	0.00	0.00	0.00	0.00	

	[0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	N108.600
		0	0	0	0	0	0.00	0.00	0.00	0.00	Strange St.
		0	0	0	0	0	0.00	0.00	0.00	0.00	14.77
× /// 201	07-1530	8	8	0	0	0	4.57	0.00	0.00	0.00	14.77
	15-1930	4	8	0	0	0	2.29	0.00	0.00	0.00	
	1900-2330	4	8	0	0	0	2.29	0.00	0.00	0.00	10077
	2300-0730	8	8	0	0	0	4.57	0.00	0.00	0.00	
	2300-0730	0	0	0	0	0	0.00	0.00	0.00	0.00	sukan=x
14		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	and the second
		0	0	0	0	0	0.00	0.00	0.00	0.00	SUS (1988)
		0	0	0	0	0	0.00	0.00	0.00	0.00	70-1
	├ ───┼	0	0	0	0	0	0.00	0.00	0.00	0.00	10 71
	07-1530	8	9	0	0	0					13.71
	15-1930	4	9	0	0	0	4.80	0.00	0.00	0.00	S. (219)
		4	9	0	0		2.40	0.00	0.00	0.00	- Alexandre
	1900-2330					0	2.40	0.00	0.00	0.00	
	2300-0730	8	9	0	0	0	4.80	0.00	0.00	0.00	
15		0	0	0	0	0	0.00	0.00	0.00	0.00	
	l	0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
	I	0	0	0	0	0	0.00	0.00	0.00	0.00	in the second
		0	0	0	0	0	0.00	0.00	0.00	0.00	14.40
	07-1530	8	9	0	0	0	4.50	0.00	0.00	0.00	R. L. M.
	15-1930	4	9	0	0	0	2.25	0.00	0.00	0.00	
	1900-2330	4	9	0	0	0	2.25	0.00	0.00	0.00	
	2300-0730	8	9	0	0	0	4.50	0.00	0.00	0.00	
16		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
	1	0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
1 2 4, 130		0	0	0	0	0	0.00	0.00	0.00	0.00	13.50
	07-1530	8	10	0	0	0	4.71	0.00	0.00	0.00	255+ 183*
	15-1930	4	10	0	0	0	2.35	0.00	0.00	0.00	
	1900-2330	4	10	0	0	0	2.35	0.00	0.00	0.00	
	2300-0730	8	10	0	0	0	4.71	0.00	0.00	0.00	
47		0	0	0	0	0	0.00	0.00	0.00	0.00	
17		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	14.12
	07-1530	8	10	0	0	0	4.44	0.00	0.00	0.00	Colling and
	15-1930	4	10	0	0	0	2.22	0.00	0.00	0.00	
	1900-2330	4	10	0	0	0	2.22	0.00	0.00	0.00	
	2300-0730	8	10	0	0	0	4.44	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
18		0	0	0	0	0	0.00	0.00	0.00	0.00	
	+	0	0	0	0	0					
		0	0	0	0	0	0.00	0.00	0.00	0.00	
				11	U 1	- U	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	

C-1	07-1530	8	11	0	0	0	4.63	0.00	0.00	0.00	1.52.520
	15-1930	4	11	0	0	0	2.32	0.00	0.00	0.00	
	1900-2330	4	11	0	0	0	2.32	0.00	0.00	0.00	
	2300-0730	8	11	0	0	0	4.63	0.00	0.00	0.00	
	2300-0730	0	0	0	0	0	0.00	0.00	0.00	0.00	
19		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0					
		0	0		<u> </u>	+	0.00	0.00	0.00	0.00	
	II	0	0	0	0	0	0.00	0.00	0.00	0.00	10.00
	07.4530			<u> </u>	<u> </u>			+	<u> </u>	+ +	13.89
	07-1530	8	11	0	0	0	4.40	0.00	0.00	0.00	
	15-1930	4	11	0	0	0	2.20	0.00	0.00	0.00	
	1900-2330	4	11	0	0	0	2.20	0.00	0.00	0.00	
	2300-0730	8	11	0	0	0	4.40	0.00	0.00	0.00	
20		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
and the second second second		0	0	0	0	0	0.00	0.00	0.00	0.00	13.20
		0	0	0	0	0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/01	A STREET
		0	0	0	0	0	#DIV/0!	#DIV/0!	#DIV/01	#DIV/0!	
		0	0	0	0	0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0	0	0	0	0	#DIV/01	#DIV/0!	#DIV/0!	#DIV/0!	
		0	0	0	0	0	#DIV/01	#DIV/0!	#DIV/0!	#DIV/0!	
		0	0	0	0	0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0	0	0	0	0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
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		0	0	0	0	0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0	0	0	0	0	#DIV/0!	#DIV/0!	#DIV/01	#DIV/01	#DIV/0!
· TYON		0	0	0	0	0	#DIV/0!	#DIV/01	#DIV/0!	#DIV/01	
		0	0	0	0	0	#DIV/0!	#DIV/01	#DIV/0!	#DIV/0!	
		0	0	0	0	0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0	0	0	0	0	#DIV/01	#DIV/0!	#DIV/0!	#DIV/0!	
		0	0	0	0	0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0	0	0	0	0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
	l	0	0	0	0	0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
	+	0	0	0	0	0	#DIV/0!	#DIV/0!	#DIV/01	#DIV/01	
		0	0	0	0	0	#DIV/0!	#DIV/01	#DIV/01	#DIV/01	
		0	0	0	0	0	#DIV/0!	#DIV/01	#DIV/0!	#DIV/0!	#DIV/0!
2120 C.12		0	0	0	0	0	#DIV/01	#DIV/01	#DIV/0!	#DIV/0!	#DIV/UI
		0	0	0	0	0	#DIV/01 #DIV/01		#DIV/0!		
		0	0					#DIV/01		#DIV/01	
	} −−−+			0	0	0	#DIV/01	#DIV/0!	#DIV/0!	#DIV/0!	
	 −−−+	0	0	0	0	0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0	0	0	0	0	#DIV/0!	#DIV/0!	#DIV/01	#DIV/0!	
	⊩ ∔	0	0	0	0	0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
		0	0	0	0	0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
	⊢ −−+	0	0	0	0	0	#DIV/0!	#DIV/0!	#DIV/01	#DIV/0!	
	ļ	0	0	0	0	0	#DIV/0!	#DIV/01	#DIV/01	#DIV/01	
L SELLINE DI		0	0	0	0	0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/01	#DIV/0!
		0	0	0	0	0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	The second
		0	0	0	0	0	#DIV/0!	#DIV/01	#DIV/0!	#DIV/0!	
		0	0	0	0	0	#DIV/0!	#DIV/01	#DIV/0!	#DIV/0!	
		0	0	0	0	0	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	



To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email doh.information@doh.wa.gov.

Unit Information

Additional Care Team Members											
Shift Coverage											
Occupation	Day	Evening	Night	Weekend							
Case Management	X										
Physical Therapy	x										
Occupational Therapy	х										
Speech Therapy	Х										
Respiratory Therapy	X	x	X	x							
I											

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:

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

Description:

Matrices are developed as a guideline for shift by shift unit based decisions and are adjusted up, down based on patient factors. Staffing is 1:2 or 1:1 depending in acuity. Intensity of care needs is a factor following these guidelines; Open Heart patients are staffed as a 1:1 until extubation unless on a intra aortic ballon pump or Impella. First case Open Heart Patients may need to be counted in census at 0700 depending on planned arrival time, example a patient arriving to unit at or before 1100. Impella patients are 1:1 and may need to be 2:1 for the first hour. Pneumonectomys patients may be 1:1 if they come directly from the OR for the first hour. TEVAR's with lumbar drains may be 1:1 for the first four hours. Hyponatremia patients may be 1:1 until they move to Q2 hour labs.

Skill mix

Description:

There needs to be two ICU RN in house at all times. If there are zero patients in ICU these RNs can be assigned as a house/floor float.

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:

Max census can be lower based on census of Progressive Care.

Other

Description:

Based on unit request, a critical response nurse will be staffed when available.



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Patient Volume-based Staffing Matrix Formula Template

Unit/ Clinic Nar	ne:					Conflu	ence Health	ř.			
Unit/Clinic Typ	e:				Central	Campus	- Surgical O	rthopedic			
Unit/ Clinic Add	Iress:			1	201 Sout	Miller S	t Wenatche	e Wa. 98	801		
Average Daily G	lensus:		25			Maxim	um # of Bed	5:		42	
Effective as of:		1/1/2025									
# of Rooms		-									
# of Rooms	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. Car HPUS (hours per unit of service)
1	07-1530	8	2	0	0	0.00	16.00	0.00	0.00	0.00	48.00
Prove all all	15-1930	4	2	0	0	0.00	8.00	0.00	0.00	0.00	
	1900-2330	4	2	0	0	0.00	8.00	0.00	0.00	0.00	1618-2
Sec. Sec. S.	2300-0730	8	2	0	0	0.00	16.00	0.00	0.00	0.00	alim Entr
1. States and the		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11 Better
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	TY IS - N
FAMORES ()		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	HALLING !!
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1/2 Film
2017 - N 25		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	THE SECURE
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	Contraction in
2	07-1530	8	2	0	0	0.00	8.00	0.00	0.00	0.00	24.00
ASSECTION AND ASS	15-1930	4	2	0	0	0.00	4.00	0.00	0.00	0.00	A PARTY OF
1234(13)(5)	1900-2330	4	2	0	0	0.00	4.00	0.00	0.00	0.00	JUERNAR
	2300-0730	8	2	0	0	0.00	8.00	0.00	0.00	0.00	E19.48 97
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.1.1.1.1.1
Sand Strategy		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	Min land
3 State		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	William Basis
10.12 28.11		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	UR BRAN
S. Bridges		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2012
a alleria		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	Same Care
3	07-1530	8	2	0	0	0.00	5.33	0.00	0.00	0.00	16.00
A STREET	15-1930	4	2	0	0	0.00	2.67	0.00	0.00	0.00	
The second	1900-2330	4	2	0	0	0.00	2.67	0.00	0.00	0.00	
1000	2300-0730	8	2	0	0	0.00	5.33	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
1.0 5 - 0		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	PUTY ASIA TUR
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Contraction of the second		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	

	1	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	115/18 20
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
4	07-1530	8	2	0	0	0.00	4.00	0.00	0.00	0.00	12.00
	15-1930	4	2	0	0	0.00	2.00	0.00	0.00	0.00	
	1900-2330	4	2	0	0	0.00	2.00	0.00	0.00	0.00	1111 8 3
	2300-0730	8	2	0	0	0.00	4.00	0.00	0.00	0.00	Shell a
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1393.9
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	David Same
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	I LONGLE
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	A. C.
Auro		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	ANE BUIL
5	07-1530	8	2	0	1	0.00	3.20	0.00	1.60	0.00	14.40
	15-1930	4	2	0	1	0.00	1.60	0.00	0.80	0.00	
	1900-2330	4	2	0	1	0.00	1.60	0.00	0.80	0.00	着 雙明
	2300-0730	8	2	0	1	0.00	3.20	0.00	1.60	0.00	#
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2 3 2
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	844
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
- Misin		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	12111
6	07-1530	8	2	0	2	0.00	2.67	0.00	2.67	0.00	13.33
	15-1930	4	2	0	1	0.00	1.33	0.00	0.67	0.00	
	1900-2330	4	2	0	1	0.00	1.33	0.00	0.67	0.00	
	2300-0730	8	2	0	1	0.00	2.67	0.00	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	
and the second		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	Monta Kil
7	07-1530	8	3	0	1	0.00	3.43	0.00	1.14	0.00	13.71
	15-1930	4	3	0	1	0.00	1.71	0.00	0.57	0.00	13 Permit
	1900-2330	4	3	0	1	0.00	1.71	0.00	0.57	0.00	
	2300-0730	8	3	0	1	0.00	3.43	0.00	1.14	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	No. 1475 Mal
		0.00	0.00	0.00	0.00	0.00	0.00	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 Balt
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	A DESCRIPTION OF
8	07-1530	8	3	0	1	0.00	3.00	0.00	1.00	0.00	12.00
	15-1930	4	3	0	1	0.00	1.50	0.00	0.50	0.00	
	1900-2330	4	3	0	1	0.00	1.50	0.00	0.50	0.00	
	2300-0730	8	3	0	1	0.00	3.00	0.00	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	
5 115		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	A STATE
9	07-1530	8	3	0	2	0.00	2.67	0.00	1.78	0.00	12.00
	15-1930	4	3	0	1	0.00	1.33	0.00	0.44	0.00	

- 1. Marcal	1000 3330	4	2		1 2	0.00	3 a a a	0.00	0.00	0.00	
Starting his	1900-2330	4	3	0	2	0.00	1.33	0.00	0.89	0.00	
al (11 - 1986)	2300-0730	8	3	0	1	0.00	2.67	0.00	0.89		
THE REAL PROPERTY AND		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	and had been
23.37.4.52	<u> </u>	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
19 Salep		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
ED IN COST		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Gen Mader		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
10	07.1530								 		10.00
10	07-1530	8	3	0	2	0.00	2.40	0.00	1.60	0.00	10.80
1991 2010 202	15-1930	4	3	0	1	0.00	1.20	0.00	0.40	0.00	1000300 12
The second second	1900-2330	4	3	0	2	0.00	1.20	0.00	0.80	0.00	120 10 100
1. 12 6-	2300-0730	8	3	0	1	0.00	2.40	0.00	0.80	0.00	
ALL THE REAL		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	M RECENT
RES PA		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	And an and a second
7001=0.3003		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
E	L	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Mr. Klank		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	a waters
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
11	07-1530	8	4	0	2	0.00	2.91	0.00	1.45	0.00	12.00
DEC. MAR	15-1930	4	4	0	1	0.00	1.45	0.00	0.36	0.00	Séru Stura:
Rest Distant	1900-2330	4	4	0	2	0.00	1.45	0.00	0.73	0.00	Call Com
THE REAL PROPERTY	2300-0730	8	4	0	1	0.00	2.91	0.00	0.73	0.00	
Barry State		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	Standard St.
San Bartin		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	S LORGE UN STREET
The second second		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
and the second		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	Sandara
Straight -		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2128/09/05
72000		0.00	0.00	0.00	. 0.00	0.00	0.00	0.00	0.00	0.00	- Annis - P
12	07-1530	8	4	0	2	0.00	2.67	0.00	1.33	0.00	11.33
and the second	15-1930	4	4	0	2	0.00	1.33	0.00	0.67	0.00	- 2010 124
	1900-2330	4	4	0	2	0.00	1.33	0.00	0.67	0.00	122 1212
CALL TON	2300-0730	8	4	0	1	0.00	2.67	0.00	0.67	0.00	T Care Charge
A Contractor		0	0	0	0	0.00	0.00	0.00	0.00	0.00	2015 2002 6
LESS ANTILA		0	0	0	0	0.00	0.00	0.00	0.00	0.00	State The N
TERMINAL ST	L	0	0	0	0	0.00	0.00	0.00	0.00	0.00	531138 W.S.
	-	0	0	0	0	0.00	0.00	0.00	0.00	0.00	F. BAR Second
The loss of the		0	0	0	0	0.00	0.00	0.00	0.00	0.00	2 Subserver
All and an and the		0	0	0	0	0.00	0.00	0.00	0.00	0.00	W. Manaral
13	07-1530	8	4	0	2	0.00	2.46	0.00	1.23	0.00	10.46
A CONTRACTOR OF STREET	15-1930	4	4	0	2	0.00	1.23	0.00	0.62	0.00	FREE THE
They want the	1900-2330	4	4	0	2	0.00	1.23	0.00	0.62	0.00	R. L. Krist
1212111	2300-0730	8	4	0	1	0.00	2.46	0.00	0.62	0.00	Edutar ares
State States		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
Start Fight		0	0	0	0	0.00	0.00	0.00	0.00	0.00	17 AN INCOMENTAL
REPORTED AND		0	0	0	0	0.00	0.00	0.00	0.00	0.00	and the second
With the second		0	0	0	0	0.00	0.00	0.00	0.00	0.00	a line haste
THE R. L. LEWIS CO., LANSING MICH.				0	0	0.00	0.00	0.00	0.00	0.00	
Sale Part		0	0				0.00	0.00	0.00	0.00	And the local division of the local division
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	HEAL HAR IN COLUMN
14	07-1530			0	0	0.00	2.29	0.00	1.14	0.00	10.29
14	07-1530	0	0								10.29
14		0 8	0	0	2	0.00	2.29	0.00	1.14	0.00	10.29
14	15-1930	0 8 4	0 4 4	0	2	0.00	2.29 1.14	0.00 0.00	1.14 0.57	0.00	10.29
14	15-1930 1900-2330	0 8 4 4	0 4 4 4	0 0 0	2 2 2	0.00 0.00 0.00	2.29 1.14 1.14	0.00 0.00 0.00	1.14 0.57 0.57	0.00 0.00 0.00	10.29
14	15-1930 1900-2330	0 8 4 4 8	0 4 4 4 4	0 0 0 0	2 2 2 2	0.00 0.00 0.00 0.00	2.29 1.14 1.14 2.29	0.00 0.00 0.00 0.00	1.14 0.57 0.57 1.14	0.00 0.00 0.00 0.00	10.29

B.L.P		0	0	0	0	0.00	0.00	0.00	0.00	0.00	10 31 2 3
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
15	07-1530	8	5	0	2	0.00	2.67	0.00	1.07	0.00	10.13
	15-1930	4	4	0	2	0.00	1.07	0.00	0.53	0.00	
	1900-2330	4	4	0	2	0.00	1.07	0.00	0.53	0.00	
	2300-0730	8	4	0	2	0.00	2.13	0.00	1.07	0.00	
	2500 0750	0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
16	07-1530	8	5	0	2	0.00	2.50	0.00	1.00	0.00	10.50
10	15-1930	4	5	0	2	0.00	1.25	0.00	0.50	0.00	10.50
	1900-2330	4	5	0	2	0.00	1.25	0.00	0.50	0.00	
	2300-0730		5	0	2	0.00	2.50	0.00	1.00	0.00	
	2300-0730		<u> </u>			- · · · · · · · · · · · · · · · · · · ·		+		0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
					-						
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
17	07-1530	8	5	0	3	0.00	2.35	0.00	1.41	0.00	10.35
	15-1930	4	5	0	2	0.00	1.18	0.00	0.47	0.00	
	1900-2330	4	5	0	2	0.00	1.18	0.00	0.47	0.00	
	2300-0730	8	5	0	2	0.00	2.35	0.00	0.94	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
18	07-1530	8	5	0	3	0.00	2.22	0.00	1.33	0.00	10.00
	15-1930	4	5	0	3	0.00	1.11	0.00	0.67	0.00	
	1900-2330	4	5	0	2	0.00	1.11	0.00	0.44	0.00	
	2300-0730	8	5	0	2	0.00	2.22	0.00	0.89	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
	-	0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
19	07-1530	8	5	0	3	0.00	2.11	0.00	1.26	0.00	9.68
	15-1930	4	5	0	3	0.00	1.05	0.00	0.63	0.00	
	1900-2330	4	5	0	3	0.00	1.05	0.00	0.63	0.00	
	2300-0730	8	5	0	2	0.00	2.11	0.00	0.84	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
	+	0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		~	l v	Ť	Ŭ,	0.00	9.95	5.00	5.00	0.00	and the second second

	15-1930	4	6	0	3	0.00	1.20	0.00	0.60	0.00	
	1900-2330	4	6	0	3	0.00	1.20	0.00	0.60	0.00	
	2300-0730		5	0	2	0.00	2.00	0.00	0.80	0.00	
	2300-0730	0	0	0	0	0.00	0.00	0.00	0.00	0.00	
	-	0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0		0	0.00	0.00	0.00	0.00	0.00	
21	07-1530	8	6	0	3	0.00	2.29	0.00	1.14	0.00	10.29
	15-1930	4	6	0	3	0.00	1.14	0.00	0.57	0.00	10.20
	1900-2330	4	6	0	3	0.00	1.14	0.00	0.57	0.00	
	2300-0730	8	6	0	3	0.00	2.29	0.00	1.14	0.00	
	2300 0130	0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
			0	0	0	0.00	0.00	0.00	0.00	0.00	
22	07-1530	8	6	0	3	0.00	2.18	0.00	1.09	0.00	9.82
	15-1930	4	6	0	3	0.00	1.09	0.00	0.55	0.00	0.02
	1900-2330	4	6	0	3	0.00	1.09	0.00	0.55	0.00	
	2300-0730		6	0	3	0.00	2.18	0.00	1.09	0.00	
	2300 0730	0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
23	07-1530	8	6	0	3	0.00	2.09	0.00	1.04	0.00	9.39
	15-1930	4	6	0	3	0.00	1.04	0.00	0.52	0.00	0.00
	1900-2330	4	6	0	3	0.00	1.04	0.00	0.52	0.00	
	2300-0730	8	6	0	3	0.00	2.09	0.00	1.04	0.00	
	2300 0130	0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
24	07-1530	8	7	0	4	0.00	2.33	0.00	1.33	0.00	10.33
	15-1930	4	7	0	3	0.00	1.17	0.00	0.50	0.00	
	1900-2330	4	7	0	3	0.00	1.17	0.00	0.50	0.00	
	2300-0730	8	7	0	3	0.00	2.33	0.00	1.00	0.00	
	2300 0750	0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
	+	0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
25	07-1530	8	8	0	4	0.00	2.56	0.00	1.28	0.00	10.56
Prate a	15-1930	4	8	0	4	0.00	1.28	0.00	0.64	0.00	10.00
		4	7	0	3	0.00	1.12	0.00	0.48	0.00	
	1900-2330		+		3	0.00	2.24	0.00	0.48	0.00	
	1200 0720	0							1 0.30	U.UU	
	2300-0730	80	7	0	0	0.00	0.00	0.00	0.00	0.00	

		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	() Respire
26	07-1530	8	8	0	4	0.00	2.46	0.00	<u> </u>	0.00	10.62
20			+	0	 	+		+	1.23		10.62
	15-1930	4	8		4	0.00	1.23	0.00	0.62	0.00	
	1900-2330	4	8	0	3	0.00	1.23	0.00	0.46	0.00	
	2300-0730	8	8	0	3	0.00	2.46	0.00	0.92	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
	L	0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
27	07-1530	8	8	0	4	0.00	2.37	0.00	1.19	0.00	10.37
	15-1930	4	8	0	4	0.00	1.19	0.00	0.59	0.00	37.42
	1900-2330	4	8	0	4	0.00	1.19	0.00	0.59	0.00	
	2300-0730	8	8	0	3	0.00	2.37	0.00	0.89	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	Stu Len
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
instanting of		0	0	0	0	0.00	0.00	0.00	0.00	0.00	No. 23/ 12/
28	07-1530	8	8	0	4	0.00	2.29	0.00	1.14	0.00	10.00
	15-1930	4	8	0	4	0.00	1.14	0.00	0.57	0.00	Carrie (La) 1
	1900-2330	4	8	0	4	0.00	1.14	0.00	0.57	0.00	
	2300-0730	8	8	0	3	0.00	2.29	0.00	0.86	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
29	07-1530	8	9	0	4	0.00	2.48	0.00	1.10	0.00	9.93
	15-1930	4	8	0	4	0.00	1.10	0.00	0.55	0.00	
	1900-2330	4	8	0	4	0.00	1.10	0.00	0.55	0.00	
	2300-0730	8	8	0	3	0.00	2.21	0.00	0.83	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
30	07-1530	8	9	0	4	0.00	2.40	0.00	1.07	0.00	10.40
	15-1930	4	9	0	4	0.00	1.20	0.00	0.53	0.00	
	1900-2330	4	9	0	4	0.00	1.20	0.00	0.53	0.00	
	2300-0730	8	9	0	4	0.00	2.40	0.00	1.07	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
	++	0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
	├ ───┤	0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		v	L Ŭ	L	Ľ	0.00	0.00	0.00	0.00	0.00	Particular State States

31	07-1530	8	9	0	5	0.00	2.32	0.00	1.29	0.00	10.32
	15-1930	4	9	0	4	0.00	1.16	0.00	0.52	0.00	10.02
	1900-2330	4	9	0	4	0.00	1.16	0.00	0.52	0.00	
	2300-0730	8	9	0	4	0.00	2.32	0.00	1.03	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
	······	0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	The Read of Street of
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	Les XIL 7
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
32	07-1530	8	10	0	5	0.00	2.50	0.00	1.25	0.00	10.38
	15-1930	4	9	0	5	0.00	1.13	0.00	0.63	0.00	
	1900-2330	4	9	0	4	0.00	1.13	0.00	0.50	0.00	
	2300-0730	8	9	0	4	0.00	2.25	0.00	1.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
33	07-1530	8	10	0	5	0.00	2.42	0.00	1.21	0.00	10.18
	15-1930	4	10	0	5	0.00	1.21	0.00	0.61	0.00	
	1900-2330	4	9	0	4	0.00	1.09	0.00	0.48	0.00	
	2300-0730	8	9	0	4	0.00	2.18	0.00	0.97	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
34	07-1530	8	10	0	5	0.00	2.35	0.00	1.18	0.00	10.00
	15-1930	4	10	0	5	0.00	1.18	0.00	0.59	0.00	
	1900-2330	4	10	0	4	0.00	1.18	0.00	0.47	0.00	
	2300-0730	8	9	0	4	0.00	2.12	0.00	0.94	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
35	07-1530	8	10	0	5	0.00	2.29	0.00	1.14	0.00	9.94
	15-1930	4	10	0	5	0.00	1.14	0.00	0.57	0.00	
	1900-2330	4	10	0	4	0.00	1.14	0.00	0.46	0.00	
	2300-0730	8	10	0	4	0.00	2.29	0.00	0.91	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
36	07-1530	8	11	0	5	0.00	2.44	0.00	1.11	0.00	10.21
	15-1930	4	10	0	5	0.00	1.25	0.00	0.63	0.00	and the second
	1900-2330	4	10	0	5	0.00	1.11	0.00	0.56	0.00	
		8	+	0	l	0.00	2.22	0.00	0.89	0.00	
	2300-0730	0	10	0	4	1 0.00		1 0.00	0.00	U.UU F	

342 6		0	0	0	0	0.00	0.00	0.00	0.00	0.00	S. ALSO
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	ile Min
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	A. Marine
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	ALC N.
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	Sec.
37	07-1530	8	11	0	5	0.00	2.38	0.00	1.08	0.00	10.05
	15-1930	4	11	0	5	0.00	1.19	0.00	0.54	0.00	
	1900-2330	4	10	0	5	0.00	1.08	0.00	0.54	0.00	10 211
	2300-0730	8	10	0	5	0.00	2.16	0.00	1.08	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	al SYE X
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	W. Alk
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	S. Carlos
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	1 South
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	1000
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	A TILE
38	07-1530	8	11	0	5	0.00	2.32	0.00	1.05	0.00	9.89
	15-1930	4	11	0	5	0.00	1.16	0.00	0.53	0.00	
	1900-2330	4	11	0	5	0.00	1.16	0.00	0.53	0.00	
	2300-0730	8	10	0	5	0.00	2.11	0.00	1.05	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	Socar-1
39	07-1530	8	11	0	6	0.00	2.26	0.00	1.23	0.00	10.05
	15-1930	4	11	0	5	0.00	1.13	0.00	0.51	0.00	
	1900-2330	4	11	0	5	0.00	1.13	0.00	0.51	0.00	
	2300-0730	8	11	0	5	0.00	2.26	0.00	1.03	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	1.2.2.1.
40	07-1530	8	12	0	6	0.00	2.40	0.00	1.20	0.00	10.20
	15-1930	4	12	0	6	0.00	1.20	0.00	0.60	0.00	
	1900-2330	4	11	0	5	0.00	1.10	0.00	0.50	0.00	
	2300-0730	8	11	0	5	0.00	2.20	0.00	1.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
41	07.1530										10.05
41	07-1530	8	12	0	6	0.00	2.34	0.00	1.17	0.00	10.05
	15-1930	4	12	0	6	0.00	1.17	0.00	0.59	0.00	
	1900-2330	4	12	0	5	0.00	1.17	0.00	0.49	0.00	
	2300-0730	80	11	0	5	0.00	2.15	0.00	0.98	0.00	
			0	0	0	0.00	0.00	0.00	0.00	0.00	
				~	~	0.00	0.00	0.00	0.00	0.00	
		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
				0 0 0	0 0 0	0.00 0.00 0.00	0.00 0.00 0.00	0.00 0.00 0.00	0.00 0.00 0.00	0.00 0.00 0.00	

- Martinetters		0	0	0	0	0.00	0.00	0.00	0.00	0.00	a general data and the
42	07-1530	8	12	0	6	0.00	2.29	0.00	1.14	0.00	10.10
mit Gim	15-1930	4	12	0	6	0.00	1.14	0.00	0.57	0.00	
=inni	1900-2330	4	12	0	6	0.00	1.14	0.00	0.57	0.00	
Studia	2300-0730	8	12	0	5	0.00	2.29	0.00	0.95	0.00	
8-237 7.1		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
2100213		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
a Vin Ban W.		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
UN STREET		0	0	0	0	0.00	0.00	0.00	0.00	0.00	
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Physical Therapy x			x	x	X
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Unit Information Factors Considered in the Development of the Unit Staffing Plan (Check all that apply):					
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Factors Considered in the Development of the Unit Staffing Plan (Check all that apply):					
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Factors Considered in the Development of the Unit Staffing Plan (Check all that apply):			tion	ALC: NO. OF COMPANY	
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(Check all that apply):			- C.I		
	Factors			atting Plan	
Activity such as patient admissions, discharges, and transfers		(Check all that app	uy):		
Activity such as patient admissions, discharges, and transfers					
	Activity such as patient adm	lissions, discharges, and transfers			
		· · · · · · · · · · · · · · · · · · ·			
Patient acuity level, intensity of care needs, and the type of care to be delivered on each shift	Patient acuity level, intensity of	insta poods, and the type of care to be d	alivered on each s	hift	

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	ailable, when present RN/LI can take 2-4 patients with o	N assignment is 6-8 patient versight from RN.	s based on acuity



To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email doh.information@doh.wa.gov.

Patient Volume-based Staffing Matrix Formula Template

Unit/ Clinic Na	ne:	Confluence H	ealth								
Jnit/ Clinic Typ	e:	Central Camp	us - Medi	cal Onco	logy						
Unit/ Clinic Add	dress:	1201 South M	liller St W	/enatche	e Wa. 988	01					
verage Daily C	ensus:	38				Maxim	um # of Bed	s:	42		
ffective as of:		1/1/2025									
of Rooms											
# of Rooms	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)
1	07-1530	8	2	0	0	0	16.00	0.00	0.00	0.00	48.00
the set of	15-1930	4	2	0	0	0	8.00	0.00	0.00	0.00	
	1900-2330	4	2	0	0	0	8.00	0.00	0.00	0.00	REAGAN
	2300-0730	8	2	0	0	0	16.00	0.00	0.00	0.00	1256 770
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	industri i
ASI Real		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	ale has
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11035103
San Barris		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	THE ME
2	07-1530	8	2	0	0	0	8.00	0.00	0.00	0.00	24.00
AND AN ACCU	15-1930	4	2	0	0	0	4.00	0.00	0.00	0.00	
10000	1900-2330	4	2	0	0	0	4.00	0.00	0.00	0.00	an is a
	2300-0730	8	2	0	0	0	8.00	0.00	0.00	0.00	The second second
Den States		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	She and
SCHOOL SHORE		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	L. A. S. Bh
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
2027304		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	L 112 13 2
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
The second		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
3	07-1530	8	2	0	0	0	5.33	0.00	0.00	0.00	16.00
	15-1930	4	2	0	0	0	2.67	0.00	0.00	0.00	
12 11 11 11	1900-2330	4	2	0	0	0	2.67	0.00	0.00	0.00	A FRANK
375 7	2300-0730	8	2	0	0	0	5.33	0.00	0.00	0.00	- A Contra
STA PLAN		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	- Canal
1 23 3 1 2 3		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	105
All and a second		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	Mar Marsh
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	THE REAL PROPERTY OF

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		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
4	07-1530	8	2	0	0	0	4.00	0.00	0.00	0.00	12.00
1.15	15-1930	4	2	0	0	0	2.00	0.00	0.00	0.00	1.11.116.2
	1900-2330	4	2	0	0	0	2.00	0.00	0.00	0.00	
El sellon	2300-0730	8	2	0	0	0	4.00	0.00	0.00	0.00	
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		0.00	0.00	0.00	0.00	0.00	0.00	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	07-1530	8	2	0	1	0	3.20	0.00	1.60	0.00	14.40
1	15-1930	4	2	0	1	0	1.60	0.00	0.80	0.00	
	1900-2330	4	2	0	1	0	1.60	0.00	0.80	0.00	
EXERCIT:	2300-0730	8	2	0.00	1	0	3.20	0.00	1.60	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
2.8%		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
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		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Sugar 1		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
6	07-1530	8	2	0	2	0	2.67	0.00	2.67	0.00	13.33
	15-1930	4	2	0	1	0	1.33	0.00	0.67	0.00	10.00
	1900-2330	4	2	0	1	0	1.33	0.00	0.67	0.00	
AF INGA	2300-0730	8	2	0	1	0	2.67	0.00	1.33	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
A THE MARK		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
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		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	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	07-1530	8	3	0	1	0	3.43	0.00	1.14	0.00	13.71
3,000	15-1930	4	3	0	1	0	1.71	0.00	0.57	0.00	
CALLSON.	1900-2330	4	3	0	1	0	1.71	0.00	0.57	0.00	
1. States	2300-0730	8	3	0	1	0	3.43	0.00	1.14	0.00	
a globar		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
ALE ALE BALLEY		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
1023 14		0.00	0.00	0.00	0.00	0.00	0.00	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	07-1530	8	3	0	1	0	3.00	0.00	1.00	0.00	12.00
VCET NO TI	15-1930	4	3	0	1	0	1.50	0.00	0.50	0.00	
The second second					1	0	1.50	0.00	0.50	0.00	
	1900-2330	4	3	0						1 0 00 1	
	1900-2330 2300-0730	8	3	0	1	0	3.00	0.00	1.00	0.00	
		8 0.00	3 0.00	0.00	1 0.00	0.00	0.00	0.00	0.00	0.00	
		8 0.00 0.00	3 0.00 0.00	0 0.00 0.00	1 0.00 0.00	0.00	0.00	0.00	0.00 0.00	0.00	
		8 0.00 0.00 0.00	3 0.00 0.00 0.00	0 0.00 0.00 0.00	1 0.00 0.00 0.00	0.00 0.00 0.00	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 0.00 0.00 0.00 0.00	3 0.00 0.00 0.00 0.00	0 0.00 0.00 0.00 0.00	1 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	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 0.00 0.00 0.00 0.00 0.00	3 0.00 0.00 0.00 0.00 0.00	0 0.00 0.00 0.00 0.00 0.00	1 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 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		8 0.00 0.00 0.00 0.00	3 0.00 0.00 0.00 0.00	0 0.00 0.00 0.00 0.00	1 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	12.00

of the state	1900-2330	4	3	0	2	0	1.33	0.00	0.89	0.00	
	2300-0730	8	3	0	1	0	2.67	0.00	0.89	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.27
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10.0
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
10	07-1530	8	3	0	2	0	2.40	0.00	1.60	0.00	10.80
	15-1930	. 4	3	0	1	0	1.20	0.00	0.40	0.00	anatoma a
	1900-2330	4	3	0	2	0	1.20	0.00	0.80	0.00	
	2300-0730	8	3	0	1	0	2.40	0.00	0.80	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
a the second		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	M. Marson
11	07-1530	8	4	0	2	0	2.91	0.00	1.45	0.00	12.00
	15-1930	4	4	0	1	0	1.45	0.00	0.36	0.00	
	1900-2330	4	4	0	2	0	1.45	0.00	0.73	0.00	
	2300-0730	8	4	0	1	0	2.91	0.00	0.73	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
23026-		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	07-1530	8	4	0	2	0	2.67	0.00	1.33	0.00	11.33
	15-1930	4	4	0	2	0	1.33	0.00	0.67	0.00	T Carl
	1900-2330	4	4	0	2	0	1.33	0.00	0.67	0.00	
	2300-0730	8	4	0	1	0	2.67	0.00	0.67	0.00	
12		0	0	0	0	0	0.00	0.00	0.00	0.00	
	<u> </u>	0	0	0	0	0	0.00	0.00	0.00	0.00	
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	L	0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	10.10
	07-1530	8	4	0	2	0	2.46	0.00	1.23	0.00	10.46
	15-1930	4	4	0	2	0	1.23	0.00	0.62	0.00	
	1900-2330	4	4	0	2	0	1.23	0.00	0.62	0.00	
	2300-0730	8	4	0	1	0	2.46	0.00	0.62	0.00	
				0	0	0	0.00	0.00	0.00	0.00	
13		0	0	0			0.00				
13		0	0	0	0	0	0.00	0.00	0.00		
13		0	0	0	0	0	0.00	0.00	0.00	0.00	
13		0 0 0	0 0 0	0	0	0	0.00	0.00	0.00	0.00	
13		0 0 0 0	0 0 0	0 0 0	0 0 0	0 0 0	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	07 1520	0 0 0 0 0	0 0 0 0	0 0 0 0	0 0 0	0 0 0	0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	10.20
13	07-1530	0 0 0 0 0 8	0 0 0 0 0 4	0 0 0 0	0 0 0 0 2	0 0 0 0	0.00 0.00 0.00 0.00 2.29	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 1.14	0.00 0.00 0.00 0.00 0.00	10.29
13	15-1930	0 0 0 0 0 8 4	0 0 0 0 0 4 4	0 0 0 0 0	0 0 0 2 2	0 0 0 0 0	0.00 0.00 0.00 2.29 1.14	0.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 1.14 0.57	0.00 0.00 0.00 0.00 0.00 0.00	10.29
13	15-1930 1900-2330	0 0 0 0 0 8 4 4 4	0 0 0 0 4 4 4	0 0 0 0 0 0 0	0 0 0 2 2 2 2	0 0 0 0 0 0 0	0.00 0.00 0.00 2.29 1.14 1.14	0.00 0.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 1.14 0.57 0.57	0.00 0.00 0.00 0.00 0.00 0.00 0.00	10.29
13	15-1930	0 0 0 0 8 4 4 8	0 0 0 0 4 4 4 4	0 0 0 0 0 0 0 0	0 0 0 2 2 2 2 2 2	0 0 0 0 0 0 0 0	0.00 0.00 0.00 2.29 1.14 1.14 2.29	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	0.00 0.00 0.00 1.14 0.57 0.57 1.14	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	10.29
13	15-1930 1900-2330	0 0 0 0 0 8 4 4 4	0 0 0 0 4 4 4	0 0 0 0 0 0 0	0 0 0 2 2 2 2	0 0 0 0 0 0 0	0.00 0.00 0.00 2.29 1.14 1.14	0.00 0.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 1.14 0.57 0.57	0.00 0.00 0.00 0.00 0.00 0.00 0.00	10.29

		0	0	0	0	0	0.00	0.00	0.00	0.00	1000
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
	07-1530	8	5	0	2	0	2.67	0.00	1.07	0.00	10.13
	15-1930	4	4	0	2	0	1.07	0.00	0.53	0.00	
	1900-2330	4	4	0	2	0	1.07	0.00	0.53	0.00	
	2300-0730	8	4	0	2	0	2.13	0.00	1.07	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
15		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
1	07-1530	8	5	0	2	0	2.50	0.00	1.00	0.00	10.50
	15-1930	4	5	0	2	0	1.25	0.00	0.50	0.00	
	1900-2330	4	5	0	2	0	1.25	0.00	0.50	0.00	
	2300-0730	8	5	0	2	0	2.50	0.00	1.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
16		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
a state	07-1530	8	5	0	3	0	2.35	0.00	1.41	0.00	10.35
	15-1930	4	5	0	2	0	1.18	0.00	0.47	0.00	
	1900-2330	4	5	0	2	0	1.18	0.00	0.47	0.00	
	2300-0730	8	5	0	2	0	2.35	0.00	0.94	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
17		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
ST WITES	07-1530	8	5	0	3	0	2.22	0.00	1.33	0.00	10.00
	15-1930	4	5	0	3	0	1.11	0.00	0.67	0.00	and the state of the second
	1900-2330	4	5	0	2	0	1.11	0.00	0.44	0.00	
	2300-0730	8	5	0	2	0	2.22	0.00	0.89	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
18		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
	07-1530	8	5	0	3	0	2.11	0.00	1.26	0.00	9.68
	15-1930	4	5	0	3	0	1.05	0.00	0.63	0.00	
	1900-2330	4	5	0	3	0	1.05	0.00	0.63	0.00	
	2300-0730	8	5	0	2	0	2.11	0.00	0.84	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
19		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
	+	0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
	+	0	0	0	0	0	0.00	0.00	0.00	0.00	
	07-1530	8	6	0	3	0	2.40	0.00	1.20	0.00	10.00

The second second	15-1930	4	6	0	3	0	1.20	0.00	0.60	0.00	
	1900-2330	4	6	0	3	0	1.20	0.00	0.60	0.00	
	2300-0730	8	5	0	2	0	2.00	0.00	0.80	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
20		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
	07-1530	8	6	0	3	0	2.29	0.00	1.14	0.00	10.29
			6	0	3	0		0.00	0.57	0.00	10.25
	15-1930	4	6	0		0	1.14	+	0.57	0.00	
	1900-2330	4			3		1.14	0.00		<u> </u>	
	2300-0730	8	6	0	3	0	2.29	0.00	1.14	0.00	
21		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
	ļ	0	0	0	0	0	0.00	0.00	0.00	0.00	
37. 201		0	0	0	0	0	0.00	0.00	0.00	0.00	
	07-1530	8	6	0	3	0	2.18	0.00	1.09	0.00	9.82
	15-1930	4	6	0	3	0	1.09	0.00	0.55	0.00	
	1900-2330	4	6	0	3	0	1.09	0.00	0.55	0.00	
	2300-0730	8	6	0	3	0	2.18	0.00	1.09	0.00	
22		0	0	0	0	0	0.00	0.00	0.00	0.00	
**		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
alera en en	07-1530	8	6	0	3	0	2.09	0.00	1.04	0.00	9.39
	15-1930	4	6	0	3	0	1.04	0.00	0.52	0.00	
	1900-2330	4	6	0	3	0	1.04	0.00	0.52	0.00	
	2300-0730	8	6	0	3	0	2.09	0.00	1.04	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
23		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
	07.1530										10.22
	07-1530	8	7	0	4	0	2.33	0.00	1.33	0.00	10.33
	15-1930	4	7	0	3	0	1.17	0.00	0.50	0.00	
	1900-2330	4	7	0	3	0	1.17	0.00	0.50	0.00	
	2300-0730	8	7	0	3	0	2.33	0.00	1.00	0.00	
24		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
Carrier .		0	0	0	0	0	0.00	0.00	0.00	0.00	22101
233 A.B.	07-1530	8	8	0	4	0	2.56	0.00	1.28	0.00	10.56
	15-1930	4	8	0	4	0	1.28	0.00	0.64	0.00	
	1900-2330	4	7	0	3	0	1.12	0.00	0.48	0.00	
	2300-0730	8	7	0	3	0	2.24	0.00	0.96	0.00	
			+				-				
25		0	0	0	0	0	0.00	0.00	0.00	0.00	

100		0	0	0	0	0	0.00	0.00	0.00	0.00	minasta
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
	07-1530	8	8	0	4	0	2.46	0.00	1.23	0.00	10.62
	15-1930	4	8	0	4	0	1.23	0.00	0.62	0.00	
	1900-2330	4	8	0	3	0	1.23	0.00	0.46	0.00	
	2300-0730	8	8	0	3	0	2.46	0.00	0.92	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
26		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
Eg s w	07-1530	8	8	0	4	0	2.37	0.00	1.19	0.00	10.37
	15-1930	4	8	0	4	0	1.19	0.00	0.59	0.00	
	1900-2330	4	8	0	4	0	1.19	0.00	0.59	0.00	
	2300-0730	8	8	0	3	0	2.37	0.00	0.89	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
27		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
1	07-1530	8	8	0	4	0	2.29	0.00	1.14	0.00	10.00
	15-1930	4	8	0	4	0	1.14	0.00	0.57	0.00	
	1900-2330	4	8	0	4	0	1.14	0.00	0.57	0.00	
	2300-0730	8	8	0	3	0	2.29	0.00	0.86	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
28		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
	07-1530	8	9	0	4	0	2.48	0.00	1.10	0.00	9.93
	15-1930	4	8	0	4	0	1.10	0.00	0.55	0.00	
	1900-2330	4	8	0	4	0	1.10	0.00	0.55	0.00	
	2300-0730	8	8	0	3	0	2.21	0.00	0.83	0.00	
20		0	0	0	0	0	0.00	0.00	0.00	0.00	
29		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	Sile and
	07-1530	8	9	0	4	0	2.40	0.00	1.07	0.00	10.40
	15-1930	4	9	0	4	0	1.20	0.00	0.53	0.00	
	1900-2330	4	9	0	4	0	1.20	0.00	0.53	0.00	
	2300-0730	8	9	0	4	0	2.40	0.00	1.07	0.00	
20		0	0	0	0	0	0.00	0.00	0.00	0.00	
30		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	

	07-1530	8	9	0	5	0	2.32	0.00	1.29	0.00	10.32
	15-1930	4	9	0	4	0	1.16	0.00	0.52	0.00	10.52
	1900-2330	4	9	0	4	0	1.16	0.00	0.52	0.00	
	2300-0730	8	9	0	4	0	2.32	0.00	1.03	0.00	그렇게 물 여름
	2300-0730	0	0	0	0		0.00	0.00	0.00	0.00	
31		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	1. S.V.S
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	The me Land
		0	0	0	0	0	0.00	0.00	0.00	0.00	
	07-1530	8	10	0	5	0	2.50	0.00	1.25	0.00	10.38
	15-1930	4	9	0	5	0	1.13	0.00	0.63	0.00	
	1900-2330	4	9	0	4	0	1.13	0.00	0.50	0.00	
	2300-0730	8	9	0	4	0	2.25	0.00	1.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	and the second
32		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	States and
		0	0	0	0	0	0.00	0.00	0.00	0.00	1.16403.
Sant IS.		0	0	0	0	0	0.00	0.00	0.00	0.00	an ago that
N 3 18 - 3		0	0	0	0	0	0.00	0.00	0.00	0.00	
100000000000	07-1530	8	10	0	5	0	2.42	0.00	1.21	0.00	10.18
The second	15-1930	4	10	0	5	0	1.21	0.00	0.61	0.00	
100000	1900-2330	4	9	0	4	0	1.09	0.00	0.48	0.00	
1011-111	2300-0730	8	9	0	4	0	2.18	0.00	0.97	0.00	
1		0	0	0	0	0	0.00	0.00	0.00	0.00	
33		0	0	0	0	0	0.00	0.00	0.00	0.00	
We have the line		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
00.00000		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	REAL S
- The second	07-1530	8	10	0	5	0	2.35	0.00	1.18	0.00	10.00
	15-1930	4	10	0	5	0	1.18	0.00	0.59	0.00	
31.85 B.C	1900-2330	4	10	0	4	0	1.18	0.00	0.47	0.00	
	2300-0730	8	9	0	4	0	2.12	0.00	0.94	0.00	
34		0	0	0	0	0	0.00	0.00	0.00	0.00	
34		0	0	0	0	0	0.00	0.00	0.00	0.00	
CONTRACTOR OF THE OWNER OWNER OF THE OWNER OF THE OWNER OF THE OWNER		0	0	0	0	0	0.00	0.00	0.00	0.00	
100 C		0	0	0	0	0	0.00	0.00	0.00	0.00	
REPORTED L		0	0	0	0	0	0.00	0.00	0.00	0.00	
No. Martiness		0	0	0	0	0	0.00	0.00	0.00	0.00	CONTRACTOR PR
(Barris)	07-1530	8	10	0	5	0	2.29	0.00	1.14	0.00	9.94
	15-1930	4	10	0	5	0	1.14	0.00	0.57	0.00	
The solution	1900-2330	4	10	0	4	0	1.14	0.00	0.46	0.00	
The second	2300-0730	8	10	0	4	0	2.29	0.00	0.91	0.00	
35		0	0	0	0	0	0.00	0.00	0.00	0.00	
L'ALLAN		0	0	0	0	0	0.00	0.00	0.00	0.00	
THE LANGE		0	0	0	0	0	0.00	0.00	0.00	0.00	
A BRIE HOUSE		0	0	0	0	0	0.00	0.00	0.00	0.00	
and the second		0	0	0	0	0	0.00	0.00	0.00	0.00	
and the second second		0	0	0	0	0	0.00	0.00	0.00	0.00	
	07-1530	8	11	0	5	0	2.44	0.00	1.11	0.00	10.00
	15-1930	4	10	0	5	0	1.11	0.00	0.56	0.00	
Contraction in	1900-2330	4	10	0	5	0	1.11	0.00	0.56	0.00	
	2300-0730	8	10	0	4	0	2.22	0.00	0.89	0.00	
26		0	0	0	0	0	0.00	0.00	0.00	0.00	al in second all public

UV.		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0		0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0		0	0	0	0.00	0.00	0.00	0.00	
	07-1530	8	11	0	5	0	2.38	0.00	1.08	0.00	10.05
	15-1930	4	11	0	5	0	1.19	0.00	0.54	0.00	10.05
	1900-2330		10	0	<u> </u>			+	<u> </u>	0.00	
		4	+	+	5	ł	1.08	0.00	0.54		
	2300-0730	8	10	0	5	0	2.16	0.00	1.08	0.00	
37		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
	├ ───┤	0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	1. 34
10.90%		0	0	0	0	0	0.00	0.00	0.00	0.00	
	07-1530	8	11	0	5	0	2.32	0.00	1.05	0.00	9.89
	15-1930	4	11	0	5	0	1.16	0.00	0.53	0.00	
	1900-2330	4	11	0	5	0	1.16	0.00	0.53	0.00	
	2300-0730	8	10	0	5	0	2.11	0.00	1.05	0.00	
38		0	0	0	0	0	0.00	0.00	0.00	0.00	
50		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
Ren erge		0	0	0	0	0	0.00	0.00	0.00	0.00	
135 2	07-1530	8	12	0	6	0	2.46	0.00	1.23	0.00	10.26
	15-1930	4	11	0	5	0	1.13	0.00	0.51	0.00	
	1900-2330	4	11	0	5	0	1.13	0.00	0.51	0.00	
	2300-0730	8	11	0	5	0	2.26	0.00	1.03	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
39		0	0	0	0	0	0.00	0.00	0.00	0.00	
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	07-1530	8	12	0	6	0	2.40	0.00	1.20	0.00	10.30
	15-1930	4	12	0	6	0	1.20	0.00	0.60	0.00	10100
	1900-2330	4	12	0	5	0	1.20	0.00	0.50	0.00	
	2300-0730	8	11	0	5	0	2.20	0.00	1.00	0.00	
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	07-1530	8	12	0	6	0	2.34	0.00	1.17	0.00	10.05
	15-1930	4	12	0	6	0	1.17	0.00	0.59	0.00	
	1900-2330	4	12	0	5	0	1.17	0.00	0.49	0.00	
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	Unit Informa	tion			
	Additional Care Team I	embers	B.A.		
		Shift Coverage			
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Occupation	Day	Evening	Night	Weekend	
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Case Management	×				
Physical Therapy	X				
Occupational Therapy	X				
Speech Therapy Respiratory Therapy	x	x	x	x	
Respiratory merapy	^			<u>^</u>	
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Activity such as patient adr	nissions, discharges, and transfers				
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factors			· · · · · · · · · · · · · · · · · · ·		

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4	✓ Other
	In addition, the unit utilizes LPN staff when they are available, when present RN/LPN assignment is 6-8 patients based on acuity which might alter the number of PNs needed. The LPN can take 2.4 patients with everyight from PN
	which might alter the number of RNs needed. The LPN can take 2-4 patients with oversight from RN.
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DOH 346-154

Fixed Staffing Matrix

Unit/ Clinic Name:	CH Resource Unit					
Unit/ Clinic Type:	Float staff support department 1201 S. Miller St 1-Jul-24					
Unit/ Clinic Address:						
Effective as of:						
Hours of the day				*		
Hour of the day	Shift Type	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's
	Day shift	12	5	0	5	0
7 AM - 7 PM						
	Night shift	12	5	0	5	
7 PM - 7 AM						



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Unit Information

Additional Care Team Members					
		Shift Coverage			
Occupation	Day	Evening	Night	Weekend	
Non-clinical Sitter	1	1	1	2	
Staffing Office	1	1	0	2	
ANS	1	1	1	1	
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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:

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

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

Other

Description:

This a fixed unit that has staff used to support other units within the CH Central hospital



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DOH 346-154

Fixed Staffing Matrix

Unit/ Clinic Name:	Central Emergency Department						
Unit/ Clinic Type:	Emergency Services 1201 S. Miller St						
Unit/ Clinic Address:							
Effective as of:		1-Jul-2	.4	Same and the		N ALANKA K	
Hours of the day							
Hour of the day	Shift Type	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's	
	Midshift	12	7	0	3	1	
12:00 AM							
	Midshift	12	6	0	3	1	
1:00 AM							

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	Midshift	12	6	0	3	1
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	Night shift	12	5	0	2	1
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	Night Shift	12	5	0	2	1
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	Midshift	12	10	0	4	1

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11:00 PM						



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Unit Information

Additional Care Team Members					
		Shift Coverage			
Occupation	Day	Evening	Night	Weekend	
Case management	1			1	
Respiratory Therapy	1	1	1	1	
Social Worker	1			1	
Diagnostic Imaging	1	1	1	1	
Laboratory	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

Description:

Increase staffing during the course of the day to reflect historic patient volumes and then decrease during the overnght hours.

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

Skill mix

Description:

Want a balance of nurses and some techs

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

Other	
Other Description:	



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Fixed Staffing Matrix

Unit/ Clinic Name:	ic Name: CH Mares Emergency Department					
Unit/ Clinic Type:	Emergency Services					
Unit/ Clinic Address:		820 N Chela	an Ave			
Effective as of:		1-Jul-2	4		181	
Hours of the day				V-2		
Hour of the day	Shift Type	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's
	Midshift	12	4	0	1	0
12:00 AM						
	Midshift	12	4	0	1	0
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	Midshift	12	5	0	1	0
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11:00 PM						



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Unit Information

Additional Care Team Members							
Shift Coverage							
Occupation	Day	Evening	Night	Weekend			
Diagnostic Imaging	1	1	1	1			
Laboratory	1	1					
Social Worker	1	1		1			
Case Management	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

Description:

Increase staffing during the day to reflect historic patient volumes and then decrease during the overnight hours. Average number of ED visits Sunday through Saturday ranges from 50 patients to 85 patients per day.

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

Skill mix

Description:

Use a mixture of techs and nurses to complete patient care tasks

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

Other



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Fixed Staffing Matrix

Unit/ Clinic Name:	CH Central Vascular					
Unit/ Clinic Type:	IV Therapy Team					
Unit/ Clinic Address:		1201 S. Mi	ller St		ار ک	
Effective as of:		1-Jul-2	24			
Hours of the day						
Hour of the day	Shift Type	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's
Culorist and	Days	12	1	0	0	(
7 AM - 7pm						
-						
	Night Shift	12	1	0	0	(
7 PM - 7 AM						



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Unit Information

Additional Care Team Members							
		Shift Coverage					
Occupation	Day	Evening	Night	Weekend			
None							

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:

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

Skill mix	
Description:	7
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Level of experience of nursing and patient care staff	
Description:	1
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Need for specialized or intensive equipment

Description:

Nurses working in this department are trained to use ultrasound for PIV, midline, ART line and PICC placement

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

Other

1



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Fixed Staffing Matrix

Unit/ Clinic Name:	IR/ Cath Lab/ EP					
Unit/ Clinic Type:	Inpatient Procedural					
Unit/ Clinic Address:	1201 S Miller, Wenato	chee	1.1			
Effective as of:	7/1/2024					
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
1	D/E	10, 12	1.00			
2	D/E	10, 12	1.00			

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		-				
1 On Call	night	12.00	2.00			
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ED Lab	0/5			<u> </u>		<u> </u>
EP Lab	D/E	10.00	2.00	L		
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Washington State Department of HEALTH DOH 346-154	Unit Informat		format, call 1-80 hearing cus (Washin	his document in another 00-525-0127. Deaf or hard of stomers, please call 711 Igton Relay) or email mation@doh.wa.gov.	
		Shift Coverage			
Occupation Tech Charge RN Unit Scheduler	Day 4 1 1	Evening 4	Night 2	Weekend 2	
	Unit Informat	ion	and she had		
	Considered in the Development (Check all that app		affing Plan		
	nissions, discharges, and transfers care needs, and the type of care to be de	elivered on each s	hift		

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Patient Volume-based Staffing Matrix Formula Template

Unit/ Clinic Nat	ne:					Conflu	ence Health				
Jnit/ Clinic Typ	e:				MC - I	npatient	Rehabilitat	ion Unit			
Init/ Clinic Add	iress:			1	201 Sout	n Miller S	St Wenatche	e Wa. 98	801		
Average Daily (ensus:		4			Maxim	um # of Bed	s:		9	
ffective as of:		1/1/2025									
of Rooms											
# of Rooms	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)
Sec. Mill 73	06-1430	8	1	0	0	0	8.00	0.00	0.00	0.00	24.00
EN LINETA	14-1830	4	1	0	0	0	4.00	0.00	0.00	0.00	A THE PARTY
100000	1800-2230	4	1	0	0	0	4.00	0.00	0.00	0.00	and the second second
a stall a stall	2200-0630	8	1	0	0	0	8.00	0.00	0.00	0.00	E TEA
1		0	0	0	0	0	0.00	0.00	0.00	0.00	. 562 30 UN
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A Survey		0	0	0	0	0	0.00	0.00	0.00	0.00	inter and the
State States	06-1430	8	1	0	0	0	4.00	0.00	0.00	0.00	12.00
A CONTRACT	14-1830	4	1	0	0	0	2.00	0.00	0.00	0.00	7 15 2.976
1000	1800-2230	4	1	0	0	0	2.00	0.00	0.00	0.00	
The second	2200-0630	8	1	0	0	0	4.00	0.00	0.00	0.00	17. S.
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194-2012 (1982-194		0	0	0	0	0	0.00	0.00	0.00	0.00	Markel San Ba
Sec.	06-1430	8	1	0	1	0	2.67	0.00	2.67	0.00	16.00
A Constanting	14-1830	4	1	0	1	0	1.33	0.00	1.33	0.00	
AN THE	1800-2230	4	1	0	1	0	1.33	0.00	1.33	0.00	
1232-124	2200-0630	8	1	0	1	0	2.67	0.00	2.67	0.00	
3 -		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
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West 1		0	0	0	0	0	0.00	0.00	0.00	0.00	Mary S.
- 73 - 12		0	0	0	0	0	0.00	0.00	0.00	0.00	1.22
	06-1430	8	1	0	1	0	2.00	0.00	2.00	0.00	12.00
	14-1830	4	1	0	1	0	1.00	0.00	1.00	0.00	1. Sec. 19
	1800-2230	4	1	0	1	0	1.00	0.00	1.00	0.00	Street Street
	2200-0630	8	1	0	1	0	2.00	0.00	2.00	0.00	
4		0	0	0	0	0	0.00	0.00	0.00	0.00	
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	06-1430	8	2	0	1	0	3.20	0.00	1.60	0.00	14.40
	14-1830	4	2	0	1	0	1.60	0.00	0.80	0.00	
	1800-2230	4	2	0	1	0	1.60	0.00	0.80	0.00	
	2200-0630	8	2	0	1	0	3.20	0.00	1.60	0.00	
5		0	0	0	0	0	0.00	0.00	0.00	0.00	
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	06-1430	8	2	0	1	0	2.67	0.00	1.33	0.00	12.00
	14-1830	4	2	0	1	0	1.33	0.00	0.67	0.00	
	1800-2230	4	2	0	1	0	1.33	0.00	0.67	0.00	
	2200-0630	8	2	0	1	0	2.67	0.00	1.33	0.00	
6		0	0	0	0	0	0.00	0.00	0.00	0.00	
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	06-1430	8	2	0	1	0	2.29	0.00	1.14	0.00	10.29
	14-1830	4	2	0	1	0	1.14	0.00	0.57	0.00	
	1800-2230	4	2	0	1	0	1.14	0.00	0.57	0.00	
	2200-0630	8	2	0	1	0	2.29	0.00	1.14	0.00	
7		0	0	0	0	0	0.00	0.00	0.00	0.00	
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all prover		0	0	0	0	0	0.00	0.00	0.00	0.00	a spine
	06-1430	8	2	0	1	0	2.00	0.00	1.00	0.00	9.00
	14-1830	4	2	0	1	0	1.00	0.00	0.50	0.00	
	1800-2230	4	2	0	1	0	1.00	0.00	0.50	0.00	
	2200-0630	8	2	0	1	0	2.00	0.00	1.00	0.00	
8		0	0	0	0	0	0.00	0.00	0.00	0.00	
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all lines		0	0	0	0	0	0.00	0.00	0.00	0.00	
	06-1430	8	2	0	2	0	1.78	0.00	1.78	0.00	10.67
	14-1830	4	2	0	2	0	0.89	0.00	0.89	0.00	

	1800-2230	4	2	0	2	0	0.89	0.00	0.89	0.00	1
Stern LLY	2200-0630	8	2	0	2	0	1.78	0.00	1.78	0.00	L.Y. L. M.
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	Additional Care Team N	lembers		
	Additional Care Team N	lembers		
		Shift Coverage		
Occupation	Day	Evening	Night	Weekend
Admission Coordinator	X			
Discharge Coordinator	X			
Case Manager	x			x
Occupational Therapy	X			X
Speech Therapy	X			X
Physical Therapy	X	_	-	X
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	Unitis	adjacentt	o anoth	ier unit, son	netimes t	hey share staff depending on	census/aculy	on the	two unit	ts.						
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✓ Other			· · · · · · · · · · · · · · · · · · ·	200 1725 DE
	Itilizes LPN staff when they number of RNs needed. Th		nment is 6-8 patients based from RN.	on acuity



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Patient Volume-based Staffing Matrix Formula Template

Unit/ Clinic Nar	ne:					Conflu	ence Health				
Unit/ Clinic Typ	e:				м	C - Medi	cal Surgical	Unit			
Unit/ Clinic Add	iress:			1	201 South	n Miller S	it Wenatche	e Wa. 98	801		
Average Daily (ensus:		6			Maxim	um # of Bed	s:		11	
Effective as of:		1/1/2025									
# of Rooms							-				
# of Rooms	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)
1	06-1430	8	1	0.00	0.00	0.00	8.00	0.00	0.00	0.00	24.00
ALL STATIST	14-1830	4	1	0.00	0.00	0.00	4.00	0.00	0.00	0.00	A COLUMN STATE
NESSE BUT	1800-2230	4	1	0.00	0.00	0.00	4.00	0.00	0.00	0.00	
MALL STOR	2200-0630	8	1	0.00	0.00	0.00	8.00	0.00	0.00	0.00	Safe I
No. Second		0	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1 2 Martine
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	Te-ST Start
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	06-1430	8	1	0	0	0	4.00	0.00	0.00	0.00	12.00
	14-1830	4	1	0	0	0	2.00	0.00	0.00	0.00	Co.P. Star
Contraction of	1800-2230	4	1	0	0	0	2.00	0.00	0.00	0.00	No.
ELEVALUE .	2200-0630	8	1	0	0	0	4.00	0.00	0.00	0.00	Weine Street
2		0	0	0	0	0	0.00	0.00	0.00	0.00	DINGENE
		0	0	0	0	0	0.00	0.00	0.00	0.00	THE CHARGE
	-	0	0	0	0	0	0.00	0.00	0.00	0.00	N SH-HUN
Strate State of the		0	0	0	0	0	0.00	0.00	0.00	0.00	2210 20
15 TOTOTES		0	0	0	0	0	0.00	0.00	0.00	0.00	10000
		0	0	0	0	0	0.00	0.00	0.00	0.00	Sugar 16
1 200 1000	06-1430	8	1	0	1	0	2.67	0.00	2.67	0.00	16.00
22. 122	14-1830	4	1	0	1	0	1.33	0.00	1.33	0.00	1 Participant
all and the second	1800-2230	4	1	0	1	0	1.33	0.00	1.33	0.00	
S. Carton	2200-0630	8	1	0	1	0	2.67	0.00	2.67	0.00	23 MA
3		0	0	0	0	0	0.00	0.00	0.00	0.00	AND LAND PR
3		0	0	0	0	0	0.00	0.00	0.00	0.00	
and the second		0	0	0	0	0	0.00	0.00	0.00	0.00	
1 233 28 20 3		0	0	0	0	0	0.00	0.00	0.00	0.00	

2003		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
STATISTICS.	06-1430	8	1	0	1	0	2.00	0.00	2.00	0.00	12.00
	14-1830	4	1	0	1	0	1.00	0.00	1.00	0.00	
	1800-2230	4	1	0	1	0	1.00	0.00	1.00	0.00	
	2200-0630	8	1	0	1	0	2.00	0.00	2.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	3=1 X
4		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	D.
		0	0	0	0	0	0.00	0.00	0.00	0.00	
and the	06-1430	8	2	0	1	0	3.20	0.00	1.60	0.00	14.40
	14-1830	4	2	0	1	0	1.60	0.00	0.80	0.00	The second
	1800-2230	4	2	0	1	0	1.60	0.00	0.80	0.00	
	2200-0630	8	2	0	1	0	3.20	0.00	1.60	0.00	
5		0	0	0	0	0	0.00	0.00	0.00	0.00	
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		0	0	0	0	0	0.00	0.00	0.00	0.00	12-02.1
		0	0	0	0	0	0.00	0.00	0.00	0.00	DEN
n Style Star		0	0	0	0	0	0.00	0.00	0.00	0.00	2001 3
	06-1430	8	2	0	1	0	2.67	0.00	1.33	0.00	12.00
	14-1830	4	2	0	1	0	1.33	0.00	0.67	0.00	HIN I.
	1800-2230	4	2	0	1	0	1.33	0.00	0.67	0.00	
	2200-0630	8	2	0	1	0	2.67	0.00	1.33	0.00	San Sei L
6		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
2012 2010		0	0	0	0	0	0.00	0.00	0.00	0.00	
	06-1430	8	2	0	1	0	2.29	0.00	1.14	0.00	10.29
	14-1830	4	2	0	1	0	1.14	0.00	0.57	0.00	
	1800-2230	4	2	0	1	0	1.14	0.00	0.57	0.00	
	2200-0630	8	2	0	1	0	2.29	0.00	1.14	0.00	
7		0	0	0	0	0	0.00	0.00	0.00	0.00	
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	06-1430	8	2	0	2	0	2.00	0.00	2.00	0.00	12.00
	14-1830	4	2	0	2	0	1.00	0.00	1.00	0.00	
	1800-2230	4	2	0	2	0	1.00	0.00	1.00	0.00	
	2200-0630	8	2	0	2	0	2.00	0.00	2.00	0.00	
8	i	0	0	0	0	0	0.00	0.00	0.00	0.00	
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		0	0	0	0	0	0.00	0.00	0.00	0.00	
1000	05 1422	·	1								40.00
	06-1430	8	2	0	2	0	1.78	0.00	1.78	0.00	10.67
	14-1830	4	2	0	2	0	0.89	0.00	0.89	0.00	

	1800-2230	4	2	0	2	0	0.89	0.00	0.89	0.00	
	2200-0630		2	0	2	0	1.78	0.00	1.78	0.00	
	2200-0030		+	0		0		+			1
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		0	0	0	0	0	0.00	0.00	0.00	0.00	STATISTICS.
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	1000
		0	0	0	0	0	0.00	0.00	0.00	0.00	Sol chara.
	06-1430	8	3	0	2	0	2.40	0.00	1.60	0.00	12.00
	14-1830	4	3	0	2	0	1.20	0.00	0.80	0.00	I. Turnet
	1800-2230	4	3	0	2	0	1.20	0.00	0.80	0.00	CANTERIO.
	2200-0630	8	3	0	2	0	2.40	0.00	1.60	0.00	13 00 05
10		0	0	0	0	0	0.00	0.00	0.00	0.00	
10		0	0	0	0	0	0.00	0.00	0.00	0.00	
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15 23		0	0	0	0	0	0.00	0.00	0.00	0.00	
	06-1430	8	3	0	2	0	2.18	0.00	1.45	0.00	10.91
1.88	14-1830	4	3	0	2	0	1.09	0.00	0.73	0.00	10.91
-1-1-1-1-	1800-2230	4									
S.S. MAR			3	0	2	0	1.09	0.00	0.73	0.00	
1938-14	2200-0630	8	3	0	2	0	2.18	0.00	1.45	0.00	
11		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
3. 10.		0	0	0	0	0	0.00	0.00	0.00	0.00	
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HEALTH 346-154			format, call 1-800-525-0127. Deaf or hard hearing customers, please call 711 (Washington Relay) or email doh.information@doh.wa.gov.			
	Unit Informa	tion	204	4		
	Additional Care Team	Members				
		Shift Coverage				
Occupation	Day	Evening	Night	Weekend		
Unit Secretary	×			X		
Case manager	Х					
Physical Therapy	Х					
Occupational Therapy	X					
Speech Therapy	X	_				
		- Companya and Constant Provide				
	Unit Informa	tion				
Factors Co	nsidered in the Development		affing Plan			
	(Check all that app	oly):				
Activity such as patient admis	sions, discharges, and transfers					
1	terreture erreture de la su		· · · · · · · · · · · · · · · · · · ·			
Patient acuity level, intensity of ca	are needs, and the type of care to be o	selivered on each s	hift			

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				4														i -	
	1					the unit such as p	laceme	ent of patient	t roon	ns, trea	atment	area	as, nui	rsing s	tation	s, med	ication		
		prepara	tion ar	eas, and e	quipme	ent													
	Unitis	adjacent	to anoth	ner unit, sor	netimes t	hey share staff depen	nding on	census/acuity	on the	two un	ts								
							-												-
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Other					
In addition th	e unit utilizes LPN staff w	then they are available	when present RN/LP	Nassignment is 6-8 na	tients based on acuity
					dents based off acuity
which might a	lter the number of RNs n	eeded. The LPN can tal	ke 2-4 patients with ov	ersight from RN.	



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DOH 346-154

Fixed Staffing Matrix

Unit/ Clinic Name:	Surgery	Surgery							
Unit/ Clinic Type:	Perioperative (Mandate	ory Call Dept)							
Unit/ Clinic Address:	1201 N Miller, Wenatch	nee			N. I				
Effective as of:	7/1/2024			0.000					
Room assignment									
Room assignment	Day of the week	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's			
OR1	Mon-Friday	10,12	1.00						
OR2	Tues-Thursday	10,12	1.00						
	-								

OR3	Mon-Friday	10,12	1.00	
				_
			+	
			+	
0.04				
OR4	Mon-Friday	10,12	1.00	
			+ +	
			+	
			+	 _
			+	
OR5	Mon, Wed-Friday	10,12	2.00	_
Unis	won, wear naay	10,12	2.00	
	17.		+ +	
			1 1	
			1	
	1			
OR6	Mon, Tues, Thursday	10,12	1.00	
	1 de la companya de la compa			
OR7	Tues-Friday	10,12	1.00	

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OR8	Mon-Friday	10,12	1.00		
				· · · · · · · · · · · · · · · · · · ·	-
		2	+		
			1 1		
		+	+ +		
			+		
	-				
		+	++		
			+		
OR9	Mon-Friday	10,12	1.00		+
UIG	Won-Friday	10,12	1.00		
		1			
			1		
			+		
	-				
	· · · · · · · · · · · · · · · · · · ·				
			+		
OR10	h fan Miada andau	10.12	1.00		1
OKIO	Mon-Wednesday	10,12	1.00		
			1 1		
			+		-
		-			
OR11	Mon-Thursday	10,12	2.00		
OR11	Mon-Thursday	10,12	2.00		
OR11	Mon-Thursday	10,12	2.00		
OR11	Mon-Thursday	10,12	2.00		
OR11	Mon-Thursday	10,12	2.00		
OR11	Mon-Thursday	10,12	2.00		
OR11	Mon-Thursday	10,12	2.00		
OR11	Mon-Thursday	10,12	2.00		
OR11	Mon-Thursday	10,12	2.00		
OR11	Mon-Thursday	10,12	2.00		

On Call OR	Sun-Thur	12.00	1.00		
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	Unit Informati	on			÷=А,
	Additional Care Team M	embers			
		Shift Coverage			
Occupation Certified Scrub Tech Anesthesia Tech	Day Yes Yes	Evening Yes Yes	Night Yes Yes	Weekend Yes Yes	
Surgery Support Tech	Yes	Yes	Yes	163	
Administrative Assistant	Yes				177
Charge RN	Yes	Yes			
Scrub Tech Salaried RN & Tech	Yes	Yes	Yes Yes	Yes Sunday Night	
	Unit Informati	00			And in case
	Unit information				00110101
Factors Co	onsidered in the Development (Check all that appl	y):	2011 C. H		
Activity such as patient admis	sions, discharges, and transfers				
Patient acuity level, intensity of c	are needs, and the type of care to be d	elivered on each	shift		
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	Skill mix							_	_			2.21	
				522		3.7	17						
	Level of experie	ince of nursing	and patient care staff						_				_
	Need for specia	lized or intensi	ve equipment										
	1			1			-				<u></u>		
	Architecture ar	nd geography of	f the unit such as plac	ement of pati	ent rooms, i	reatment	areas, n	ursing	station	ns, me	dication		
	preparation are	as, and equipm	ient										
	Other												
	Other												
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	Other							 					



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Fixed Staffing Matrix

Unit/ Clinic Name:	Pre Op and Post op Unit	Staffing				
Unit/ Clinic Type:	Perioperative					
Unit/ Clinic Address:	1201 S Miller Street Wer	natchee		×		
Effective as of:	7/1/2024					
Hours of the day				0		
Hour of the day	Day of the week	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's
0800-1830 PreAdmit	Mon-Fri	8,10,12	3.00			
		_				
0500-1700 PreOp	Mon-Fri	8,10,12	7.00		3.00	1.00
17 104 124 24						
0800-2100 PostOp	Mon-Fri	8,10,12	7.00		2.00	2.00

Washington State Department of HEALTH			format, call 1-8 of hearing cu (Washin	his document in another 300-525-0127. Deaf or hard ustomers, please call 711 gton Relay) or email mation@doh.wa.gov.	
	Unit Informa	ition	Description	And in traverting where and	12 TIDAY
	Additional Care Team	Members			
		Shift Coverage			
Occupation None	Day	Evening	Night	Weekend	
			[
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	Unit Informa	tion		Sendet all a second set in the sec	Chiefe a
	One mom				
Factors Col	nsidered in the Development (Check all that app		affing Plan		
Activity such as patient admiss	ions, discharges, and transfers				
Patient acuity level, intensity of ca	re 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



DOH 346-154

Fixed Staffing Matrix

Unit/ Clinic Name:	Recovery													
Unit/ Clinic Type:	Perioperative Services													
Unit/ Clinic Address:	1201 N Miller, Wenatchee													
Effective as of:	7/1/2024	an da an												
Hours of the day				, with										
Hour of the day	Day of the week	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's								
0730-2100	Mon-Thur	10,12	8.00											
0730-2100	Friday	10,12	7.00											

0900-2130	Sat-Sun	12.00	2.00	1	1	1
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					<u> </u>	-
2100 0000 0- 0-11						-
2100-0900 On Call	Friday-Sat	12.00	2.00			+
States and States				+	<u> </u>	+
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2100-0730 On Call	Sun-Thursday	10.50	2.00			\vdash
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	Additional Care Team N	tembers			
		Shift Coverage			
Occupation None	Day	Evening	Night	Weekend	
	Unit Informat	tion		Santaria de la manifere	STER
- Factors (Considered in the Development (Check all that app		affing Plan		
Activity such as patient adm	issions, discharges, and transfers				l. Kenner
Patient acuity level, intensity o	f care needs, and the type of care to be	delivered on each	shift		

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	Chill main												-
<u> </u>	Skill mix					_	_		_				1
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	t avail of avail								1				
	Level of exper	Tence of nursin	g and patient care staff						00000000	<u></u>	94		
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	10												
	Need for spec	lalized or inten	sive equipment										1
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									1				
	Architecture	and geography	of the unit such as placem	ent of patie	nt roor	ms, tre	atment	areas,	nursing	statio	ns, me	dication	
	Architecture preparation a	and geography reas, and equip	of the unit such as placem ment	ent of patie	nt roor	ms, tre	atment	areas,	nursing	statio	ns, me	dication	
	Architecture preparation a	and geography reas, and equip	of the unit such as placem ment	ent of patie	nt roor	ns, tre	atment	areas,	nursing	statio	ns, me	dication	
	Architecture preparation a	and geography reas, and equip	of the unit such as placem ment	ent of patie	nt roor	ns, tre	atment	: areas,	nursing	statio	ns, me	dication	
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	Architecture preparation a	and geography reas, and equip	of the unit such as placem ment	ent of patier	nt roor	ns, tre	atment	: areas,	nursing	statio	ns, me	dication	
	Architecture preparation a	and geography reas, and equip	of the unit such as placem ment	ent of patier	nt roor	ms, tre	atment	: areas,	nursing	statio	ns, me	dication	
	Architecture preparation a	and geography reas, and equip	of the unit such as placem ment	ent of patie	nt roor	ms, tre	atment	: areas,	nursing	statio	ns, me	dication	
	Architecture preparation a	and geography reas, and equip	of the unit such as placem ment	ent of patie	nt roor	ns, tre	atment	: areas,	nursing	statio	ns, me	dication	
	Architecture	and geography reas, and equip	of the unit such as placem ment	ent of patier	nt roor	ns, tre	atment	: areas,	nursing	statio	ns, me	dication	
	preparation a	and geography reas, and equip	of the unit such as placem ment	ent of patier	nt roor	ns, tre	atment	areas,	nursing	statio	ns, me	dication	
	Architecture preparation a Other	and geography reas, and equip	of the unit such as placem ment	ent of patie	nt roor	ns, tre	atment	areas,	nursing	statio	ns, me	dication	
	preparation a	and geography reas, and equip	of the unit such as placem ment	ent of patien		ns, tre	atment	areas,	nursing	statio	ns, me	dication	
	preparation a	and geography reas, and equip	of the unit such as placem ment	ent of patien	nt roor	ms, tre	atment	areas,	nursing	statio	ns, me	dication	
	preparation a	and geography reas, and equip	of the unit such as placem ment	ent of patien	nt roor	ms, tre	atment	areas,	nursing	statio	ns, me	dication	
	preparation a	and geography reas, and equip	of the unit such as placem ment	ent of patien		ns, tre	atment	areas,	nursing	statio	ns, me	dication	
	preparation a	and geography reas, and equip	of the unit such as placem ment	ent of patien		ns, tre	atment	: areas,	nursing	statio	ns, me	dication	
	preparation a	and geography reas, and equip	of the unit such as placem ment	ent of patien		ns, tre	atment	: areas,	nursing	statio	ns, me	dication	
	preparation a	and geography reas, and equip	of the unit such as placem ment	ent of patien	nt roor	ms, tre	atment	areas,	nursing	statio	ns, me	dication	



DOH 346-154

Fixed Staffing Matrix

Unit/ Clinic Name:	Mares Campus PreOp/	PostOp/ Recover	У										
Unit/ Clinic Type:	Perioperative (Mandate	ory Call Departm	ent)										
Unit/ Clinic Address:	820 N Chelan												
Effective as of:	7/1/2024												
Hours of the day													
Hour of the day	Day of the week	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's							
0600-1730 PreOp	Mon-Thursday	8,10,12	5.00		1.00	2.00							
0630-1730 PreOp	Friday	8,10,12	4.00		1.00	2.00							

0600-1730 PostOp	Mon-Friday	8,10,12	5.00	2.00	
	Woll-Friday	6,10,12	5.00	2.00	
Bar Barthala	1112-3				
0800-1930 Recovery	Mon-Friday	8,10,12	4.00		
		-			
1930-0730 Recovery on Call	Mon-Thursday	12.00	1.00		
	inter marsady	12:00			
930-0730 Recovery on Call	Friday-Monday	24.00	1.00		
	rituay-wonuay	24.00	1.00		
The survey of the strength of					
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Washington State Department of HEALTH DOH 346-154	Unit informati	ion	format, call 1-8 hearing cu (Washir	this document in another 00-525-0127. Deaf or hard of stomers, please call 711 ngton Relay) or email rmation@doh.wa.gov.
	Additional Care Team M	embers		
		Shift Coverage		
Occupation None	Day	Evening	Night	Weekend
	Unit Informati	ion	HAN BY LOOK SHE	
Factors C	Considered in the Development (Check all that appl	of the Unit St	affing Plan	
Activity such as patient adm	issions, discharges, and transfers			
Patient acuity level, intensity of	care needs, and the type of care to be de	livered on each s	hift	<u> </u>
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DOH 346-154

Fixed Staffing Matrix

Mares Campus Operation	ng Room				
Mandatory Call Departr	ment		TTWE		
820 N Chelan, Wenatch	ee				
7/1/2024					
Day of the week	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's
Mon-Friday	8,9,10	1.00			
Mon-Friday	8,9,10	1.00			
	Mandatory Call Depart 820 N Chelan, Wenatch 7/1/2024 Day of the week	Day of the week Shift Length in Hours Mon-Friday 8,9,10	Mandatory Call Department 820 N Chelan, Wenatchee 7/1/2024 Day of the week Shift Length in Hours Mon-Friday 8,9,10 1.00 Image: Comparison of the week Image: Comparison of the week Image: Comparison of the week Mon-Friday 8,9,10 1.00 Image: Comparison of the week Image: Comparison of the week Image: Comparison of the week Image: Comparison of the week Image: Comparison of the week Image: Comparison of the week Image: Comparison of the week Image: Comparison of the week Image: Comparison of the week Image: Comparison of the week Image: Comparison of the week Image: Comparison of the week Image: Comparison of the week Image: Comparison of the week Image: Comparison of the week Image: Comparison of the week Image: Comparison of the week Image: Comparison of the week Image: Comparison of the week Image: Comparison of the week Image: Comparison of the week Image: Comparison of the week Image: Comparison of the week Image: Comparison of the week Image: Comparison of the week Image: Comparison of the week Image: Comparison of the week Image: Comparison of the week Image: C	Mandatory Call Department 820 N Chelan, Wenatchee 7/1/2024 Day of the week Shift Length in Hours Min # of LPN's Mon-Friday 8,9,10 Image: State of the search	Mandatory Call Department 820 N Chelan, Wenatchee 7/1/2024 Day of the week Shift Length in Hours Min # of CNA's Mon-Friday 8,9,10 Image: String the series of

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OR 4	Mon-Friday	8,9,10	1.00	
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OR 5	Mon-Friday	8,9,10	1.00	
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	Additional Care Team M	embers	l mede		
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Occupation	Day	Evening	Night	Weekend	
OR Tech	Yes	Yes			
Certified Scrub Tech	Yes Yes	Yes	Yes	Yes	
Charge RN	tes		<u>}</u>		
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DOH 346-154

Fixed Staffing Matrix

Unit/ Clinic Name: Surgical Services Dept 7023 Unit/ Clinic Type: PeriOP Case Managers/ Pre anesthesia Department									
Unit/ Clinic Type:	PeriOP Case Managers/ F	Pre anesthesia l	Departme	ent		No.			
Unit/ Clinic Address:	820 N Chelan, Wenatche	e							
Effective as of:	7/1/2024								
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			
Mon-Friday	D	8,10	3.00						
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Washington State Department of HEALTH DOH 346-154			format, call 1- of hearing c (Washii	this document in another 800-525-0127. Deaf or hard ustomers, please call 711 ngton Relay) or email rmation@doh.wa.gov,	
	Unit Informati	on			
	Additional Care Team M	embers			
		Shift Coverage			
Occupation Schedulers Surgical Reviewer	Day 3 1	Evening	Night	Weekend	
	Unit Information	on			
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Activity cush as notions admis	sions, discharges, and transfers				
Patient acuity level, intensity of c	are needs, and the type of care to be de	elivered on each	shift		



DOH 346-154

Fixed Staffing Matrix

Unit/ Clinic Name:	Mares GI					
Unit/ Clinic Type:	Procedural		×			
Unit/ Clinic Address:	820 N Chelan		and the second sec			
Effective as of:	7/1/204					
Room assignment						
Room assignment	Day of the week	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's
Procedure Room 1	Mon-Friday	8.00	1.00			
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Procedure Room 2	Mon-Friday	8.00	1.00			

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Workroom	Mon-Friday	8.00	1.00			
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Washington State Department of HEALTH			format, call 1-8 hearing cu (Washir	this document in another 00-525-0127. Deaf or hard of stomers, please call 711 ngton Relay) or email rmation@doh.wa.gov.
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States wet a set	Additional Care Team N	1embers		
		Shift Coverage		
Occupation	Day	Evening	Night	Weekend
GI Tech	Mon-Friday	3		
	Unit informat	lon		
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Factors (Considered in the Development (Check all that app		affing Plan	
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	care needs, and the type of care to be d	envered on each s		

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DOH 346-154

Patient Volume-based Staffing Matrix Formula Template

nit/ Clinic Name		Case Manage ent									
nity' Clinic Type:		in hosp tal									
mit/ Chinic Address		1201 S Miller St. Wilnat	thee WA 98	801							
werage Daily Census		144				Masimum	s of Beds		170		
Hective as of:		7/1/2024									
of Visits											
# of Booms	Sivilit Type	Shift Length In Hours	Min II of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's	Min # of RN HPUS	Min # of LPN HPUS	Min J of CNA HPUS	Min # of UAP HPUS	Total Minimum Direct Pt. Care HPU: (hours per unit of service)
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-312-23		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.44
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3 6
	G	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3110
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		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	21.2
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DOH 346-154		* *****		ngton Relay) or email rmation@doh.wa.gov.	
	Unit Information	on			
	Additional Care Team Me	embers			
		Shift Coverage			
Occupation N/A	Day	Evening	Night	Weekend	
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Factors (Considered in the Development o	f the Unit St	affing Plan		
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DOH 346-154

Patient Volume-based Staffing Matrix Formula Template

Jnit/ Clinic Name						Wound	Ostomy				
Init/ Clinic Type						C	nīc				
nit/ Clinic Address:					1201 S.	Miller St W	natches V	A 98801			
verage Daily Census:			1	6		Maximum	# of Beds			30	
ffective as of						1.4	1-24				
of Visits 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 HPU (hours pe unit of
a construction of the second second	DAYS	8	1	0	0	0	8,00	0.00	0.00	0.00	service)
		0	0	0	0	0	0.00	0.00	0.00	0.00	1000
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	100	0	0	0	0	0	0.00	0.00	0.00	0.00	
	100	0	0	0	0	0	0.00	0.00	0.00	0.00	22.11
1	1122	0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	2.22
		0	0	0	0	0	0.00	0.00	0.00	0.00	STRONG ST
	-	0	0	0	0	0	0.00	0.00	0.00	0.00	Ruth
		0	0	0	0	0	0.00	0.00	0.00	0.00	8.00
Cel Index	DAYS	8	2	0	0	0	1.60	0.00	0.00	0.00	
	1000	0	0	0	0	0	0.00	0.00	0.00	0.00	200
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	Additional Care Team M	embers			
		Shift Coverage			
Occupation N/A	Day	Evening	Night	Weekend	
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	Unit Informati	on			
Factors C	onsidered in the Development of (Check all that apply)	of the Unit Sta	affing Plan		
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	Archite	cture	and geo	graphy o	f the unit :	such as plac	cement	of patie	nt roor	ns, tre	atmen	it area	s, nursi	ng stati	ons, me	dicatio	n	
	prepara	ation a	reas, an	d equipn	nent			•		-			-		-			
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Patient Volume-based Staffing Matrix Formula Template

Unit/ Clinic Nai	ne:	Home Care Se	rvices								
Unit/ Clinic Typ	e:	Unit									
Jnit/ Clinic Add	iress:	1201 S. Miller	St Wena	atchee W	A 98801						
Verage Daily C	ensus:	40				Maxim	um # of Bed		N/A OP V	isits	
ffective as of:		7/1/2024									
f of Visits											
# of Visits	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)
0	Day	8.00	1.00	0.00	0.00	0.00	0.67	0.00	0.00	0.00	0.67
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	N. W.C.
1. 10 March 10		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	The second second
121211211		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11 Same
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	Bar Miller &
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	I WILLEY
The Country		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	Sala a
12	Day	8.00	1.00	0.00	0.00	0.00	0.67	0.00	0.00	0.00	0.67
Conserver and		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Contraction of the		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
All Harris		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Very the attend		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	M. Carlo
NO. INC.		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Call of Calling		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	A Standard
Section Sector		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Series Station		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	Stang & Stan
24	day	8.00	2.00	0.00	0.00	0.00	0.67	0.00	0.00	0.00	0.67
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13.3		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1
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MENT ST		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10.891100

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		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
30	Day	8.00	3.00	0.00	0.00	0.00	0.80	0.00	0.00	0.00	0.80
10000 1 TO C	1	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
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Unit Information

	Additional Care Tea	m Members		
		Shift Coverage		
Occupation	Day	Evening	Night	Weekend
N/A				
	·····			·····
	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

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
<u> </u>	
	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
	Other

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Patient Volume-based Staffing Matrix Formula Template

Unit/ Clinic Nar	ne:	NICU									
Jnit/ Clinic Typ	e:	Inpatient Con	fluence H	lealth Ce	ntral Cam	pus					
Jnit/ Clinic Add		1201 S. Miller	, Wenatc	hee, WA	98801						
Average Daily C		3				Maxim	um # of Bed	s:	6		
ffective as of:		1/1/2025									
f of Rooms		1									
Or KOOMS								1			
# of Rooms	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)
0	0700-1530	8.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
0.01530.5200	1500-1930	4.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	North T
Merry 131	1900-2330	4.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Esta Ville	2300-0730	8.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	C Bassing All
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	S west
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
CUBS (Marsh		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10.100
and the second		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	Minute Car
1	0700-1530	8.00	1.00	0.00	0.00	0.00	8.00	0.00	0.00	0.00	24.00
	1500-1930	4.00	1.00	0.00	0.00	0.00	4.00	0.00	0.00	0.00	253
	1900-2330	4.00	1.00	0.00	0.00	0.00	4.00	0.00	0.00	0.00	
	2300-0730	8.00	1.00	0.00	0.00	0.00	8.00	0.00	0.00	0.00	
Sel Sugar		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Set Coulors		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
15 08 200 SV		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
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A		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
2	0700-1530	8.00	1.00	0.00	0.00	0.00	4.00	0.00	0.00	0.00	12.00
Contraction of the second	1500-1930	4.00	1.00	0.00	0.00	0.00	2.00	0.00	0.00	0.00	
ne and the	1900-2330	4.00	1.00	0.00	0.00	0.00	2.00	0.00	0.00	0.00	
	2300-0730	8.00	1.00	0.00	0.00	0.00	4.00	0.00	0.00	0.00	
WITH SALF		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
March WE		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
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3	0700-1530	8.00	1.00	0.00	0.00	0.00	2.67	0.00	0.00	0.00	8.00
	1500-1930	4.00	1.00	0.00	0.00	0.00	1.33	0.00	0.00	0.00	
	1900-2330	4.00	1.00	0.00	0.00	0.00	1.33	0.00	0.00	0.00	S. Fine H
	2300-0730	8.00	1.00	0.00	0.00	0.00	2.67	0.00	0.00	0.00	
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4	0700-1530	8.00	2.00	0.00	0.00	0.00	4.00	0.00	0.00	0.00	12.00
	1500-1930	4.00	2.00	0.00	0.00	0.00	2.00	0.00	0.00	0.00	I DESCRIPTION
	1900-2330	4.00	2.00	0.00	0.00	0.00	2.00	0.00	0.00	0.00	
	2300-0730	8.00	2.00	0.00	0.00	0.00	4.00	0.00	0.00	0.00	
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5	0700-1530	8.00	2.00	0.00	0.00	0.00	3.20	0.00	0.00	0.00	9.60
	1500-1930	4.00	2.00	0.00	0.00	0.00	1.60	0.00	0.00	0.00	
	1900-2330	4.00	2.00	0.00	0.00	0.00	1.60	0.00	0.00	0.00	
	2300-0730	8.00	2.00	0.00	0.00	0.00	3.20	0.00	0.00	0.00	
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6	0700-1530	8.00	2.00	0.00	0.00	0.00	2.67	0.00	0.00	0.00	8.00
	1500-1930	4.00	2.00	0.00	0.00	0.00	1.33	0.00	0.00	0.00	
	1900-2330	4.00	2.00	0.00	0.00	0.00	1.33	0.00	0.00	0.00	
	2300-0730	8.00	2.00	0.00	0.00	0.00	2.67	0.00	0.00	0.00	
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	Additional Care Team Me	embers			
		Shift Coverage			
Occupation	Day	Evening	Night	Weekend	
Newborn Admit (Registered Nurse)	yes	yes	yes	yes	
LPN	As needed	as needed	as needed	as needed	
Respiratory Therapist Speech Therapist	yes	yes	yes	yes	
Unit Secretary	yes	no shared	no shared	no	
Lactation Consultant	yes	15-19	no	yes	
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		prepara					it such a	is placer	nent of p	batient r	ooms,	treatm	ent ar	eas, ni	ursing	statio	ns, me	edicati	on		
		prepara					it such a	is placer	nent of p	patient	ooms,	treatm	ent ar	eas, ni	ursing	statio	ns, me	edicati	on		
		prepara					it such a	is placer	nent of p	patient	ooms,	treatm	ient ar	eas, nu	ursing	statio	ns, me	edicati	on		



DOH 346-154

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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 Nar	nei	Labor and Delivery											
Unit/ Clinic Typ	e:	Confluence H	ealth Cen	tral Cam									
Unit/ Clinic Add	lress:	1201 S. Miller	, Wenatc	hee, WA	98801								
Average Daily C	ensus:	7	n a			Maxim	um # of Bed	s:	7				
ffective as of:		1/1/2025											
of Rooms													
# of Rooms	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)		
0	0700-1530	8.00	2.00	0.00	0.00	1.00	16.00	0.00	0.00	8.00	72.00		
States (1500-1930	4.00	2.00	0.00	0.00	1.00	8.00	0.00	0.00	4.00	Stand In		
	1900-2330	4.00	2.00	0.00	0.00	1.00	8.00	0.00	0.00	4.00	A PRIMA		
	2300-0730	8.00	2.00	0.00	0.00	1.00	16.00	0.00	0.00	8.00	Training the		
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00			
Million Concell		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00			
CONTRACTOR		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1 100		
3685		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.22		
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	MARS L. D.S.		
ALLAN C		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	Bills LE.		
1	0700-1530	8.00	2.00	0.00	0.00	1.00	16.00	0.00	0.00	8.00	72.00		
	1500-1930	4.00	2.00	0.00	0.00	1.00	8.00	0.00	0.00	4.00			
Marting of the	1900-2330	4.00	2.00	0.00	0.00	1.00	8.00	0.00	0.00	4.00	San Shine a		
	2300-0730	8.00	2.00	0.00	0.00	1.00	16.00	0.00	0.00	8.00	WWWWWWW		
STORE STORE		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1042,352		
Stall Stall		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	A A A A A A		
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00			
BUT STAT		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00			
12 11		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	State of the second		
ALC: NO.		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	124 1 2 1 2		
2	0700-1530	8.00	2.00	0.00	0.00	1.00	8.00	0.00	0.00	4.00	36.00		
	1500-1930	4.00	2.00	0.00	0.00	1.00	4.00	0.00	0.00	2.00			
NES SERVE	1900-2330	4.00	2.00	0.00	0.00	1.00	4.00	0.00	0.00	2.00	A SWARE		
100 1 1 - 2 -	2300-0730	8.00	2.00	0.00	0.00	1.00	8.00	0.00	0.00	4.00			
NAME TO SER		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13 3 3 h		
12.1282.20		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	- Constanting		
EN APL-		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	Contraction of the second		
STRUKSENT NO.		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	Design and a		

		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	ACTIN NUMBER
2411		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	The William
3	0700-1530	8.00	2.00	0.00	0.00	1.00	5.33	0.00	0.00	2.67	24.00
	1500-1930	4.00	2.00	0.00	0.00	1.00	2.67	0.00	0.00	1.33	
53.83	1900-2330	4.00	2.00	0.00	0.00	1.00	2.67	0.00	0.00	1.33	
104157	2300-0730	8.00	2.00	0.00	0.00	1.00	5.33	0.00	0.00	2.67	
a little		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
S. 1 3		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	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	0700-1530	8.00	3.00	0.00	0.00	1.00	6.00	0.00	0.00	2.00	24.00
	1500-1930	4.00	3.00	0.00	0.00	1.00	3.00	0.00	0.00	1.00	
	1900-2330	4.00	3.00	0.00	0.00	1.00	3.00	0.00	0.00	1.00	
200	2300-0730	8.00	3.00	0.00	0.00	1.00	6.00	0.00	0.00	2.00	
- 10 Store		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
12111		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
332 (0)		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	Laz
5	0700-1530	8.00	3.00	0.00	0.00	1.00	4.80	0.00	0.00	1.60	19.20
8280	1500-1930	4.00	3.00	0.00	0.00	1.00	2.40	0.00	0.00	0.80	
30.8.35	1900-2330	4.00	3.00	0.00	0.00	1.00	2.40	0.00	0.00	0.80	
	2300-0730	8.00	3.00	0.00	0.00	1.00	4.80	0.00	0.00	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	
Booki Hall		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	ALX SIL
6	0700-1530	8.00	4.00	0.00	0.00	1.00	5.33	0.00	0.00	1.33	20.00
	1500-1930	4.00	4.00	0.00	0.00	1.00	2.67	0.00	0.00	0.67	
	1900-2330	4.00	4.00	0.00	0.00	1.00	2.67	0.00	0.00	0.67	
	2300-0730	8.00	4.00	0.00	0.00	1.00	5.33	0.00	0.00	1.33	
120002		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
E. Mark		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
1 Call In car		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
26 131		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
The state		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
and the set		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
7	0700-1530	8.00	4.00	0.00	0.00	1.00	4.57	0.00	0.00	1.14	17.14
UE ALS	1500-1930	4.00	4.00	0.00	0.00	1.00	2.29	0.00	0.00	0.57	
	1900-2330	4.00	4.00	0.00	0.00	1.00	2.29	0.00	0.00	0.57	
	2300-0730	8.00	4.00	0.00	0.00	1.00	4.57	0.00	0.00	1.14	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
State La		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Plan Part		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Contraction .		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Sector States											

Unit Informa	tion		
		-stour a.	
Additional Care Team I	Members		
	Shift Coverage		
Occupation Day	Evening	Night	Weekend
RT yes	yes	yes	yes
Unit Secretary yes Lactation Consultant yes	15-19	no	partial
Lactation Consultant yes	15-19	no	yes
Unit Informa	tion	191313131	
Factors Considered in the Development (Check all that app		affing Plan	
Activity such as patient admissions, discharges, and transfers			
Activity such as patient aumissions, discharges, and transfers			
Dationt aquity loyal intensity of any poods and the time of any taken		hift	
Patient acuity level, intensity of care needs, and the type of care to be o	lenvered on each s	1111L	

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		Level of exper	rience of n	ursing a	ind patient care staff											
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		Need for spec	ialized or i	ntensiv	e equinment											
l – i		need tor spee		inconstru-	e equipitent											
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		Architecture	and geogra	aphy of	the unit such as placeme	ent of patien	t roor	ns, trea	atment	areas	, nursinį	g statior	is, mec	lication		
		preparation a	reas, and e	quipme	ent											
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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 Nan	ne:	Mother-Baby Unit												
Unit/ Clinic Typ	e:	Inpatient Con	fluence H	lealth Ce	ntral Cam	pus								
Unit/ Clinic Add	ress:	1201 S. Miller	, Wenatc	hee, WA	98801									
Average Daily C	ensus:	12				Maxim	um # of Bed	s:	24					
Effective as of:		1/1/2025		1 1000					ht	-				
of Rooms		1,1,2023												
# of Rooms	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)			
0	0700-1530	8.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00			
	1500-1930	4.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2 /3			
	1900-2330	4.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00				
Selling Bar	2300-0730	8.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	Control State			
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	ula // Sa			
Mart WST		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	including.			
1.321.43.8		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00				
and the second second		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	通知主新的			
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00				
and the second second		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00				
1	0700-1530	8.00	1.00	0.00	1.00	1.00	8.00	0.00	8.00	8.00	48.00			
	1500-1930	4.00	1.00	0.00	1.00	1.00	4.00	0.00	4.00	4.00	Laboration of the second			
	1900-2330	4.00	1.00	0.00	0.00	0.00	4.00	0.00	0.00	0.00	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Press 1	2300-0730	8.00	1.00	0.00	0.00	0.00	8.00	0.00	0.00	0.00	C. S. States			
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	SOF REAL			
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	E.S. Alta			
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00				
STUGES		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	Cast Dige			
STAR R		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	S.S. S.			
	0700 4000	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	04.00			
2	0700-1530	8.00	1.00	0.00	1.00	1.00	4.00	0.00	4.00	4.00	24.00			
Wall Light	1500-1930	4.00	1.00	0.00	1.00	1.00	2.00	0.00	2.00	2.00				
- San and	1900-2330	4.00	1.00	0.00	0.00	0.00	2.00	0.00	0.00	0.00				
Constant Par	2300-0730	8.00	1.00	0.00	0.00	0.00	4.00	0.00	0.00	0.00	Participation and the			
To and the set		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	MACH (RAIL			
1 2 Barling		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.0			
Section -		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	The Aller			
NHOUSE C		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00				
AL STREET		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00				
3	0700-1530	8.00	1.00	0.00	1.00	1.00	2.67	0.00	2.67	2.67	16.00			

CONTRACT OF	1500-1930	4.00	1.00	0.00	1.00	1.00	1.33	0.00	1.33	1.33	- 2- X X
	1900-2330	4.00	1.00	0.00	0.00	0.00	1.33	0.00	0.00	0.00	3.1125.
	2300-0730	8.00	1.00	0.00	0.00	0.00	2.67	0.00	0.00	0.00	2
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.1.1.2
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	Sugar St.
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	DA SO
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
4	0700-1530	8.00	1.00	0.00	1.00	1.00	2.00	0.00	2.00	2.00	12.00
	1500-1930	4.00	1.00	0.00	1.00	1.00	1.00	0.00	1.00	1.00	
	1900-2330	4.00	1.00	0.00	0.00	0.00	1.00	0.00	0.00	0.00	1. 44
	2300-0730	8.00	1.00	0.00	0.00	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	
	L	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	No. M
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	Section 1
		0.00	0.00	0.00	0.00	0.00	0.00	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	0700-1530	8.00	1.00	0.00	1.00	1.00	1.60	0.00	1.60	1.60	9.60
	1500-1930	4.00	1.00	0.00	1.00	1.00	0.80	0.00	0.80	0.80	
	1900-2330	4.00	1.00	0.00	0.00	0.00	0.80	0.00	0.00	0.00	
	2300-0730	8.00	1.00	0.00	0.00	0.00	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	
6	0700-1530	8.00	1.00	0.00	1.00	1.00	1.33	0.00	1.33	1.33	8.00
	1500-1930	4.00	1.00	0.00	1.00	1.00	0.67	0.00	0.67	0.67	
	1900-2330	4.00	1.00	0.00	0.00	0.00	0.67	0.00	0.00	0.00	
	2300-0730	8.00	1.00	0.00	0.00	0.00	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	R.L.
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	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	0700-1530	8.00	2.00	0.00	1.00	1.00	2.29	0.00	1.14	1.14	10.29
	1500-1930	4.00	2.00	0.00	1.00	1.00	1.14	0.00	0.57	0.57	
	1900-2330	4.00	2.00	0.00	0.00	0.00	1.14	0.00	0.00	0.00	
	2300-0730	8.00	2.00	0.00	0.00	0.00	2.29	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	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	0700-1530	8.00	2.00	0.00	1.00	1.00	2.00	0.00	1.00	1.00	9.00
	1500-1930	4.00	2.00	0.00	1.00	1.00	1.00	0.00	0.50	0.50	
	1900-2330	4.00	2.00	0.00	0.00	0.00	1.00	0.00	0.00	0.00	
	2300-0730	8.00	2.00	0.00	0.00	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	CONTRACTORS
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	dia wich
9	0700-1530	8.00	2.00	0.00	1.00	1.00	1.78	0.00	0.89	0.89	8.00
	1500-1930	4.00	2.00	0.00	1.00	1.00	0.89	0.00	0.44	0.44	Thursday and the
	1900-2330	4.00	2.00	0.00	0.00	0.00	0.89	0.00	0.00	0.00	Million?
	2300-0730	8.00	2.00	0.00	0.00	0.00	1.78	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	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 June 1
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	St.
10	0700-1530	8.00	2.00	0.00	1.00	1.00	1.60	0.00	0.80	0.80	7.20
	1500-1930	4.00	2.00	0.00	1.00	1.00	0.80	0.00	0.40	0.40	
	1900-2330	4.00	2.00	0.00	0.00	0.00	0.80	0.00	0.00	0.00	
	2300-0730	8.00	2.00	0.00	0.00	0.00	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	223/24
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	intestines
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	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	0700-1530	8.00	2.00	0.00	1.00	1.00	1.45	0.00	0.73	0.73	6.55
	1500-1930	4.00	2.00	0.00	1.00	1.00	0.73	0.00	0.36	0.36	0.00
	1900-2330	4.00	2.00	0.00	0.00					0.36	
						0.00	0.73	0.00	0.00		- Techoni
	2300-0730	8.00	2.00	0.00	0.00	0.00	1.45	0.00	0.00	0.00	Stor State
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1000 TOL
	L	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	10 370
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	St. Smith
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	G. 35.
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	見いまれ
12			0.00								
12	0700-1530	8.00	2.00	0.00	1.00	1.00	1.33	0.00	0.67	0.67	6.00
	1500-1930	4.00	2.00	0.00	1.00	1.00	0.67	0.00	0.33	0.33	Sample C
	1900-2330	4.00	2.00	0.00	0.00	0.00	0.67	0.00	0.00	0.00	Station N
	2300-0730	8.00	2.00	0.00	0.00	0.00	1.33	0.00	0.00	0.00	
	ļ	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	MAR AN
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1999
		0.00	0.00	0.00	0.00	0.00	0.00	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 1 1 1 1
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	C. C. C.
and and and and		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
13	0700-1530	8.00	3.00	0.00	1.00	1.00	1.85	0.00	0.62	0.62	7.38
	1500-1930	4.00	3.00	0.00	1.00	1.00	0.92	0.00	0.31	0.31	
	1900-2330	4.00	3.00	0.00	0.00	0.00	0.92	0.00	0.00	0.00	
	2300-0730	8.00	3.00	0.00	0.00	0.00	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	
14	0700-1530	8.00	3.00	0.00	1.00	1.00	1.71	0.00	0.57	0.57	6.86
	1500-1930	4.00	3.00	0.00	1.00	1.00	0.86	0.00	0.29	0.29	
	1900-2330	4.00	3.00	0.00	0.00	0.00	0.86	0.00	0.00	0.00	
						~.~~		2.44	4.44	5.00	
	2300-0730	8.00	3.00	0.00	0.00	0.00	1.71	0.00	0.00	0.00	

11.000		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	No. The
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	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	0700-1530	8.00	3.00	0.00	1.00	1.00	1.60	0.00	0.53	0.53	6.40
	1500-1930	4.00	3.00	0.00	1.00	1.00	0.80	0.00	0.27	0.27	
	1900-2330	4.00	3.00	0.00	0.00	0.00	0.80	0.00	0.00	0.00	
	2300-0730	8.00	3.00	0.00	0.00	0.00	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	
16	0700-1530	8.00	3.00	0.00	1.00	1.00	1.50	0.00	0.50	0.50	6.00
	1500-1930	4.00	3.00	0.00	1.00	1.00	0.75	0.00	0.25	0.25	
	1900-2330	4.00	3.00	0.00	0.00	0.00	0.75	0.00	0.00	0.00	
	2300-0730	8.00	3.00	0.00	0.00	0.00	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	
17	0700-1530	8.00	3.00	0.00	1.00	1.00	1.41	0.00	0.47	0.47	5.65
	1500-1930	4.00	3.00	0.00	1.00	1.00	0.71	0.00	0.24	0.24	
	1900-2330	4.00	3.00	0.00	0.00	0.00	0.71	0.00	0.00	0.00	
	2300-0730	8.00	3.00	0.00	0.00	0.00	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	
in the last		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	planarola.
18	0700-1530	8.00	3.00	0.00	1.00	1.00	1.33	0.00	0.44	0.44	5.33
	1500-1930	4.00	3.00	0.00	1.00	1.00	0.67	0.00	0.22	0.22	
	1900-2330	4.00	3.00	0.00	0.00	0.00	0.67	0.00	0.00	0.00	
	2300-0730	8.00	3.00	0.00	0.00	0.00	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	
1		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11/100 SN/ 1/2
19	0700-1530	8.00	4.00	0.00	1.00	1.00	1.68	0.00	0.42	0.42	6.32
	1500-1930	4.00	4.00	0.00	1.00	1.00	0.84	0.00	0.21	0.21	
	1900-2330	4.00	4.00	0.00	0.00	0.00	0.84	0.00	0.00	0.00	
	2300-0730	8.00	4.00	0.00	0.00	0.00	1.68	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
and a second		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	A CLASS
20	0700-1530	8.00	4.00	0.00	1.00	1.00	1.60	0.00	0.40	0.40	6.00
	1500-1930	4.00	4.00	0.00	1.00	1.00	0.80	0.00	0.20	0.20	

Constant and the second	1900-2330	4.00	4.00	0.00	0.00	0.00	0.80	0.00	0.00	0.00	
THE REAL	2300-0730	8.00	4.00	0.00	0.00	0.00	1.60	0.00	0.00	0.00	
Marchiel March	2300-0730	<u> </u>		<u> </u>							2000123306
1000000		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	REMESSION.
A. P. S. M.		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	- Martines
R. Sty R. B.		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	60.51 B
Land Village		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	South States
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
21	0700-1530	8.00	4.00	0.00	1.00	1.00	1.52	0.00	0.38	0.38	5.71
117. S.Cak	1500-1930	4.00	4.00	0.00	1.00	1.00	0.76	0.00	0.19	0.19	
	1900-2330	4.00	4.00	0.00	0.00	0.00	0.76	0.00	0.00	0.00	
TANK SA	2300-0730	8.00	4.00	0.00	0.00	0.00	1,52	0.00	0.00	0.00	1:23/232
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	中心的意义。
THE REAL OF		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20010000000
Maria Maria		0.00	0.00	0.00	0:00	0.00	0.00	0.00	0.00	0.00	2 Carlos and a second
NAME OF A	1	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
LYSS, South		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	D. D. Brender
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
22	0700-1530	8.00	4.00	0.00	1.00	1,00	1.45	0.00	0.36	0.36	5.45
	1500-1930	4.00	4.00	0.00	1.00	1.00	0.73	0.00	0.18	0.18	20-10-20-
States and States	1900-2330	4.00	4.00	0.00	0.00	0.00	0.73	0.00	0.00	0.00	1.3181
Second States	2300-0730	8.00	4.00	0.00	0.00	0.00	1.45	0.00	0.00	0.00	
in a line of		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	- N. S. Harristan
She III adams		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	ANTER I
1. A. 1. 1915		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	23000000000
Margaret .		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.
Month and		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Service Burk	-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
23	0700-1530	8.00	4.00	0.00	1.00	1.00	1.39	0.00	0.35	0.35	5.22
	1500-1930	4.00	4.00	0.00	1.00	1.00	0.70	0.00	0.17	0.17	J.22
·····································	1900-2330	4.00	4.00	0.00	0.00	0.00	0.70	0.00	0.00	0.00	
	2300-0730	8.00	4.00	0.00	0.00	0.00	1.39	0.00	0.00	0.00	a Serie Longe
信約元の空心	2300-0730	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
12 2 2 2 2	-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
S- WERE WALL		0.00	0.00	0.00	<u> </u>						
					0.00	0.00	0.00	0.00	0.00	0.00	
1		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
24		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
24	0700-1530	8.00	4.00	0.00	1.00	1,00	1.33	0.00	0.33	0.33	5.00
19 14 14 16 16 16 16 16 16 16 16 16 16 16 16 16	1500-1930	4.00	4.00	0.00	1.00	1.00	0.67	0.00	0.17	0.17	
Wiles and	1900-2330	4.00	4.00	0.00	0.00	0.00	0.67	0.00	0.00	0.00	
ALL NOS	2300-0730	8.00	4.00	0.00	0.00	0.00	1.33	0.00	0.00	0.00	
ALC: NO.		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
ALL		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
A LOR MALL		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
ELLISSEE 3		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	(ABERTINE) ER
Mana Sulfacia		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
CILL CAUZE											S-UTANER
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Washington State Department of			To request	this document in another	
Washington State Department of HEALTH			of hearing o	800-525-0127. Deaf or hard ;ustomers, please call 711 ngton Relay) or email	
DOH 346-154				rmation@doh.wa.gov.	
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	Additional Care Team M	embers			
		Shift Coverage			
		_			
Cccupation LPN	Day yes	Evening yes	Night	Weekend	
PT	yes	no	yes no	yes yes	
Lactation Consultant	yes	15-19	no	yes	
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	Unit Information	on			19
Factors Co	nsidered in the Development o (Check all that apply		affing Plan		
Activity such as patient admiss	sions, discharges, and transfers				
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Patient acuity level, intensity of c	are needs, and the type of care to be de	elivered on each	shift		

Skill mix	
Skill mix	
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	_
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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:	Endoscopy													
Unit/ Clinic Type:	Perioperative Services Mandatory Call Department 1201 S Miller St 7/1/2024													
Unit/ Clinic Address:														
Effective as of:														
Hours of the day					Immun									
Hour of the day	Shift ⊤ype	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's								
Mon-Friday 0700-1900	D/E	10,12	3.00											
Mon-Friday on Call 1930-	E/N	12.00	1.00											
0700	C/N	12.00	1.00											
Sat- Sun 0700-0700 On Call	D/E/N	24.00	1.00											

Washington State Department of HEALTH	Unit Informati		format, call 1-80 hearing cus (Washin	his document in another 0-525-0127. Deaf or hard of tomers, please call 711 gton Relay) or email mation@doh.wa.gov.
	Additional Care Team M	embers		
		Shift Coverage		
Occupation	Day	Evening	Night	Weekend
GI Tech	Yes	Yes	Yes	Yes
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Activity such as natient admiss	sions, discharges, and transfers			
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Patient acuity level, intensity of ca	re needs, and the type of care to be de	livered on each s	hift	
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