

COVER PAGE

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

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Hospital Staffing Form

Attestation

Date: 12/19/24

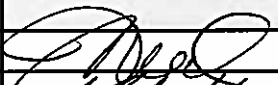
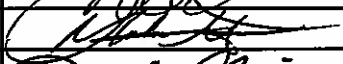
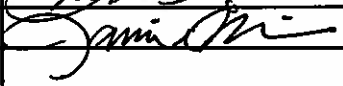
I, the undersigned with responsibility for Ferry County Memorial Hospital attest that the attached hospital staffing plan and matrix are in accordance with RCW 70.41.420 for 2025 , and includes all units covered under our hospital license under RCW 70.41.

As approved by: Jennifer Reed, CEO

Hospital Information

| | | |
|---|--|---|
| Name of Hospital: Ferry County Memorial Hospital | | |
| Hospital License #: HAC.FS.00000167 | | |
| Hospital Street Address: 36 North Klondike Road | | |
| City/Town: Republic | State: Washington | Zip code: 99166 |
| Is this hospital license affiliated with more than one location? | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| If "Yes" was selected, please provide the location name and address | | |
| Review Type: | <input checked="" type="checkbox"/> Annual | Review Date: 6/19/25 |
| | <input type="checkbox"/> Update | Next Review Date: |
| Effective Date: 12/19/24 | | |
| Date Approved: 12/19/24 | | |

Signature

| CEO & Co-chairs Name: | Signature: | Date: |
|--------------------------|--|----------|
| Jennifer Reed, CEO |  | 12/19/24 |
| Mike Martinoli, Co-Chair |  | 12/19/24 |
| Jamie Marin, Co-Chair |  | 12/19/24 |
| | | |
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| Total Votes | |
|----------------|--------------|
| # of Approvals | # of Denials |
| 10 | 0 |
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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:
Emergency Nurses Association ESI Triage Version 5.



Terms of applicable collective bargaining agreement

Description:
UFCW Registered Nurse and Service/Support collective bargaining agreements.



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

Description:
Collaboration with HR Department for Committee representation.



Hospital finances and resources

Description:
Collaboration with CFO for the 2025 budget process overview summary report to the Committee



Other

Description:

Access unit staffing matrices here.

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| | |
|---|---|
| SUBJECT: Nurse Staffing Plan | REFERENCE# 14.1.013 |
| | Page 1 of 3 |
| DEPARTMENT: Nursing (14) | EFFECTIVE: 12/2024 |
| | REVISED: 06/2024 LAST REVIEWED: 12/2024 |
| APPROVED BY: CEO, Hospital Staffing Committee | |

POLICY:

To ensure an adequate and safe number of nursing personnel are available to perform care to the patients and residents on a continuous basis, 24 hours a day, 7 days a week. The hospital provides enough qualified nursing staff members to:

- Assess the patient's and/or resident's nursing needs;
- Plan and provide nursing care interventions;
- Prevent complications and promote improvement in the patient's comfort and wellness; and alert other care professionals to the patient's condition, as appropriate.

DEFINITIONS:

Patient Care Unit: The patient care rooms that include the Emergency Room, Observation, Inpatient, Swing Bed, and Outpatient registered patient census.

RN: Registered Nurse

LPN: Licensed Practical Nurse

NAC: Nurse Assistant Certified

UC: Unit Coordinator/NAC

CNO: Chief Nursing Officer

NM: ER and Acute Care Nurse Manager

RCC: Resident Care Coordinator

SBAR: Situation, Background, Assessment, Recommendation

NURSING COVERAGE:

- Nurse coverage will be provided 24-hours per day.
- RN, LPN and NAC coverage will be based on minimum staffing requirements and current patient census.
- Nursing personnel shall be assigned duties consistent with experience, education and/or training background.
- In times of need, RN and LPN personnel shall be assigned other duties such as the role of NAC, UC, or other duties as determined by the Charge Nurse or Nurse Management.
- The oncoming Charge Nurse will be responsible for leading the team discussion and delegating patient assignments during shift report.
- Active Nurse Assistant Registered (NAR) employees may fill the staffing role of an NAC outlined in this matrix pending completion of state NAC written and skills exam.
- Nursing staff shall prioritize assigned unit tasks from the Charge Nurse and complete department education during periods of decreased patient census.

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|---|---|
| SUBJECT: Nurse Staffing Plan | REFERENCE# 14.1.013 |
| | Page 2 of 3 |
| DEPARTMENT: Nursing (14) | EFFECTIVE: 12/2024 |
| APPROVED BY: CEO, Hospital Staffing Committee | REVISED: 06/2024 LAST REVIEWED: 12/2024 |

EMERGENCY ROOM RATIOS:

- 1-2 RN for one ER patient ESI-1.
- 1-2 RN for one to two simultaneous ER patients with ESI-2.
- 1 RN for one to three simultaneous ER patients with ESI-3.
- 1 RN for one to five simultaneous ER patients with ESI-4.
- 1 RN for one to five simultaneous ER patients with ESI-5.
 - Triage Tool: Emergency Nurse Association ESI Triage
 - 1:1 RN to patient care during moderate IV sedation procedure care

PATIENT CARE UNIT MATRIX:

0600 – 1830:

- 3 – RNs or 2 RNs and 1 LPN assigned to the Patient Care Unit
- 1 – NAC assigned to the Patient Care Unit
- 1 – UC assigned to the Patient Care Unit
- 2 – NACs assigned to the Non-Skilled Swing Bed patients

0700 – 1930:

- 1 – RN or LPN assigned to Non-Skilled Swing Bed patients

1800 – 0630:

- 3 – RNs or 2 RNs and 1 LPN assigned to the Patient Care Unit
- 1 – NAC assigned to the Patient Care Unit
- 1 – UC assigned to the Patient Care Unit
- 2 – NACs assigned to the Non-Skilled Swing Bed patients

SHORT-STAY UNIT MATRIX: per-diem staffing for outpatient endoscopy procedures.

0700-1530:

1–NAC Scope Technician

0800-1630:

1–NAC Scope Technician

0600-1430:

1–RN (Pre-Procedure)

0700-1530:

1–RN (Intra-Procedure)

0800-1630:

1–RN (Post-Procedure)

| | |
|---|---|
| SUBJECT: Nurse Staffing Plan | REFERENCE# 14.1.013 |
| | Page 3 of 3 |
| DEPARTMENT: Nursing (14) | EFFECTIVE: 12/2024 |
| | REVISED: 06/2024 LAST REVIEWED: 12/2024 |
| APPROVED BY: CEO, Hospital Staffing Committee | |

Staffing Variations: Staffing needs are the decision of the Charge Nurse, CNO, NM, or RCC. LPN scope of practice will always be maintained. Additional staff may be necessary for cases requiring 1:1 care like high acuity or behavioral patient needs. When a patient safety concern is identified due to current staffing levels, the Charge Nurse will immediately consult with RN Manager on-call for collaboration to try to confirm additional RN, LPN, NAC, or UC staff members.

On-Call Staff: Voluntary on-call personnel will be utilized for additional staffing needs (ex: sick calls, inter-facility RN transport needs, or other staffing needs as determined by RN Management or the Charge Nurse). Charge Nurse can determine if additional staff are needed during the current shift. Department staff may self-schedule for on-call shifts via the scheduling application in the 'Department on call' section.

Additional Staff: Staff will also consider other internal staffing resources during weekdays like outreach to the Activities Director NAC, Employee Health RN, RCC, NM, and/or the CNO when further assistance in the Patient Care Unit is required. Record keeping of additional staff outreach will be maintained by the UC on the staff call log sheet and will be scanned for electronic records documentation. 'Manager on call' and 'Chief on call' will be maintained in the scheduling application for additional phone support when needed.

Low Census: Low census is defined as a reduction in ER or Patient Care Unit patient volume or care requirements resulting in a need for a temporary reduction in staff. During periods of low census in the Patient Care Unit, the Charge Nurse, CNO, RCC, or NM will first ask for volunteers to clock out. In the event there are no volunteers, RN Manager On-Call will endeavor to rotate low census equitably among staff assigned to each area by shift, subject to competence, ability, and availability.

Breaks: Charge Nurse will monitor daily routine to ensure staff obtain required rest and meal breaks. Nursing staff members are assigned tentative meal breaks at the beginning of each shift by the oncoming Charge Nurse. SBAR report will be verbally delivered to another equally trained co-worker prior to a staff member leaving the unit on break. If patient care needs prohibit time to take a meal break, the employee will document the missed break via the 'edit log' binder and communicate promptly to the Charge Nurse. The Charge Nurse shall inform the RN Manager on-call if patient care duties result in missed breaks.

| | | Ferry County Memorial Hospital | | | | | | | | | |
|-----------------------|------------|--|---------------|----------------|----------------|----------------|--------------------|-------------------|-------------------|-------------------|--|
| Unit/ Clinic Name: | | Patient Care Unit | | | | | | | | | |
| Unit/ Clinic Type: | | Hospital | | | | | | | | | |
| Unit/ Clinic Address: | | 36 North Klondike Road | | | | | | | | | |
| Average Daily Census: | | 9 (ER, Inpatient, and Skilled Swing Bed) | | | | | Maximum # of Beds: | | 13 | | |
| Effective as of: | | 12/9/2024 | | | | | | | | | |
| Census | | | | | | | | | | | |
| Census | Shift Type | Shift Length in Hours | Min # of RN's | Min # of LPN's | Min # of CNA's | Min # of UAP's | Min # of RN HPUS | Min # of LPN HPUS | Min # of CNA HPUS | Min # of UAP HPUS | Total Min Direct Pt. Care HPUS (hours per unit of service) |
| 1 | DAY | 12 | 3 | 0 | 1 | 1 | 36.00 | 0.00 | 12.00 | 12.00 | 120.00 |
| | NIGHT | 12 | 3 | 0 | 1 | 1 | 36.00 | 0.00 | 12.00 | 12.00 | |
| 2 | DAY | 12 | 3 | 0 | 1 | 1 | 18.00 | 0.00 | 6.00 | 6.00 | 60.00 |
| | NIGHT | 12 | 3 | 0 | 1 | 1 | 18.00 | 0.00 | 6.00 | 6.00 | |
| 3 | DAY | 12 | 3 | 0 | 1 | 1 | 12.00 | 0.00 | 4.00 | 4.00 | 40.00 |
| | NIGHT | 12 | 3 | 0 | 1 | 1 | 12.00 | 0.00 | 4.00 | 4.00 | |
| 4 | DAY | 12 | 3 | 0 | 1 | 1 | 9.00 | 0.00 | 3.00 | 3.00 | 30.00 |
| | NIGHT | 12 | 3 | 0 | 1 | 1 | 9.00 | 0.00 | 3.00 | 3.00 | |
| 5 | DAY | 12 | 3 | 0 | 1 | 1 | 7.20 | 0.00 | 2.40 | 2.40 | 24.00 |
| | NIGHT | 12 | 3 | 0 | 1 | 1 | 7.20 | 0.00 | 2.40 | 2.40 | |
| 6 | DAY | 12 | 3 | 0 | 1 | 1 | 6.00 | 0.00 | 2.00 | 2.00 | 20.00 |
| | NIGHT | 12 | 3 | 0 | 1 | 1 | 6.00 | 0.00 | 2.00 | 2.00 | |
| 7 | DAY | 12 | 3 | 0 | 1 | 1 | 5.14 | 0.00 | 1.71 | 1.71 | 17.14 |
| | NIGHT | 12 | 3 | 0 | 1 | 1 | 5.14 | 0.00 | 1.71 | 1.71 | |
| 8 | DAY | 12 | 3 | 0 | 1 | 1 | 4.50 | 0.00 | 1.50 | 1.50 | 15.00 |
| | NIGHT | 12 | 3 | 0 | 1 | 1 | 4.50 | 0.00 | 1.50 | 1.50 | |
| 9 | DAY | 12 | 3 | 0 | 1 | 1 | 4.00 | 0.00 | 1.33 | 1.33 | 13.33 |
| | NIGHT | 12 | 3 | 0 | 1 | 1 | 4.00 | 0.00 | 1.33 | 1.33 | |
| 10 | DAY | 12 | 3 | 0 | 1 | 1 | 3.60 | 0.00 | 1.20 | 1.20 | 12.00 |
| | NIGHT | 12 | 3 | 0 | 1 | 1 | 3.60 | 0.00 | 1.20 | 1.20 | |
| 11 | DAY | 12 | 3 | 0 | 1 | 1 | 3.27 | 0.00 | 1.09 | 1.09 | 10.91 |
| | NIGHT | 12 | 3 | 0 | 1 | 1 | 3.27 | 0.00 | 1.09 | 1.09 | |
| 12 | DAY | 12 | 3 | 0 | 1 | 1 | 3.00 | 0.00 | 1.00 | 1.00 | 10.00 |
| | NIGHT | 12 | 3 | 0 | 1 | 1 | 3.00 | 0.00 | 1.00 | 1.00 | |
| 13 | DAY | 12 | 3 | 0 | 1 | 1 | 2.77 | 0.00 | 0.92 | 0.92 | 9.23 |
| | NIGHT | 12 | 3 | 0 | 1 | 1 | 2.77 | 0.00 | 0.92 | 0.92 | |

| | | Ferry County Memorial Hospital | | | | | | | | | |
|-----------------------|------------|--|---------------|----------------|----------------|--------------------|------------------|-------------------|-------------------|-------------------|--|
| Unit/ Clinic Name: | | Non Skilled Swing Bed Extended Care Census | | | | | | | | | |
| Unit/ Clinic Type: | | Hospital | | | | | | | | | |
| Unit/ Clinic Address: | | 36 North Klondike Road | | | | | | | | | |
| Average Daily Census: | | 10 | | | | Maximum # of Beds: | | | 12 | | |
| Effective as of: | | 12/9/2024 | | | | | | | | | |
| Census | | | | | | | | | | | |
| Census | Shift Type | Shift Length in Hours | Min # of RN's | Min # of LPN's | Min # of CNA's | Min # of UAP's | Min # of RN HPUS | Min # of LPN HPUS | Min # of CNA HPUS | Min # of UAP HPUS | Total Minimum Direct Pt. Care HPUS (hours per unit of service) |
| 1 | DAY | 12 | 0 | 1 | 2 | 0 | 0.00 | 12.00 | 24.00 | 0.00 | 60.00 |
| | NIGHT | 12 | 0 | 0 | 2 | 0 | 0.00 | 0.00 | 24.00 | 0.00 | |
| 2 | DAY | 12 | 0 | 1 | 2 | 0 | 0.00 | 6.00 | 12.00 | 0.00 | 30.00 |
| | NIGHT | 12 | 0 | 0 | 2 | 0 | 0.00 | 0.00 | 12.00 | 0.00 | |
| 3 | DAY | 12 | 0 | 1 | 2 | 0 | 0.00 | 4.00 | 8.00 | 0.00 | 20.00 |
| | NIGHT | 12 | 0 | 0 | 2 | 0 | 0.00 | 0.00 | 8.00 | 0.00 | |
| 4 | DAY | 12 | 0 | 1 | 2 | 0 | 0.00 | 3.00 | 6.00 | 0.00 | 15.00 |
| | NIGHT | 12 | 0 | 0 | 2 | 0 | 0.00 | 0.00 | 6.00 | 0.00 | |
| 5 | DAY | 12 | 0 | 1 | 2 | 0 | 0.00 | 2.40 | 4.80 | 0.00 | 12.00 |
| | NIGHT | 12 | 0 | 0 | 2 | 0 | 0.00 | 0.00 | 4.80 | 0.00 | |
| 6 | DAY | 12 | 0 | 1 | 2 | 0 | 0.00 | 2.00 | 4.00 | 0.00 | 10.00 |
| | NIGHT | 12 | 0 | 0 | 2 | 0 | 0.00 | 0.00 | 4.00 | 0.00 | |
| 7 | DAY | 12 | 0 | 1 | 2 | 0 | 0.00 | 1.71 | 3.43 | 0.00 | 8.57 |
| | NIGHT | 12 | 0 | 0 | 2 | 0 | 0.00 | 0.00 | 3.43 | 0.00 | |
| 8 | DAY | 12 | 0 | 1 | 2 | 0 | 0.00 | 1.50 | 3.00 | 0.00 | 7.50 |
| | NIGHT | 12 | 0 | 0 | 2 | 0 | 0.00 | 0.00 | 3.00 | 0.00 | |
| 9 | DAY | 12 | 0 | 1 | 2 | 0 | 0.00 | 1.33 | 2.67 | 0.00 | 6.67 |
| | NIGHT | 12 | 0 | 0 | 2 | 0 | 0.00 | 0.00 | 2.67 | 0.00 | |
| 10 | DAY | 12 | 0 | 1 | 2 | 0 | 0.00 | 1.20 | 2.40 | 0.00 | 6.00 |
| | NIGHT | 12 | 0 | 0 | 2 | 0 | 0.00 | 0.00 | 2.40 | 0.00 | |
| 11 | DAY | 12 | 0 | 1 | 2 | 0 | 0.00 | 1.09 | 2.18 | 0.00 | 5.45 |
| | NIGHT | 12 | 0 | 0 | 2 | 0 | 0.00 | 0.00 | 2.18 | 0.00 | |
| 12 | DAY | 12 | 0 | 1 | 2 | 0 | 0.00 | 1.00 | 2.00 | 0.00 | 5.00 |
| | NIGHT | 12 | 0 | 0 | 2 | 0 | 0.00 | 0.00 | 2.00 | 0.00 | |

| | | | | | | |
|-----------------------|---|-----------------------|---------------|----------------|----------------|----------------|
| | Ferry County Memorial Hospital | | | | | |
| Unit/ Clinic Name: | Short Stay Procedure Unit | | | | | |
| Unit/ Clinic Type: | Outpatient Endoscopy | | | | | |
| Unit/ Clinic Address: | 36 North Klondike Road, Republic WA 99166 | | | | | |
| Effective as of: | 12/9/2024 | | | | | |
| 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 |
| 0600-1430 | Pre-Procedure | 8 | 1 | 0 | 0 | 0 |
| 0700-1530 | Intra-Procedure | 8 | 1 | 0 | 1 | 0 |
| 0800-1630 | Post-Procedure | 8 | 1 | 0 | 1 | 0 |

Additional Care Team Members

| Occupation | Shift Coverage | | | |
|-----------------------------|----------------|---------|-------|---------|
| | Day | Evening | Night | Weekend |
| Acute Care/ER Nurse Manager | X | | | |
| Resident Care Coordinator | X | | | |
| Chief Nursing Officer | X | | | |
| Infection Prevention RN | X | | | |
| Activities Coordinator NAC | X | | | |
| Manager On-Call RN | | X | X | X |

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

- ☒ Activity such as patient admissions, discharges, and transfers

Staffing Variations: Staffing needs are the decision of the Charge Nurse, CNO, NM, or RCC. LPN scope of practice will always be maintained. Additional staff may be necessary for cases requiring 1:1 care like high acuity or behavioral patient needs. When a patient safety concern is identified due to current staffing levels, the Charge Nurse will immediately consult with RN Manager on-call for collaboration to try to confirm additional RN, LPN, NAC, or UC staff members.

Low Census: Low census is defined as a reduction in ER or Patient Care Unit patient volume or care requirements resulting in a need for a temporary reduction in staff. During periods of low census in the Patient Care Unit, the Charge Nurse, CNO, RCC, or NM will first ask for volunteers to clock out. In the event there are no volunteers, RN Manager On-Call will endeavor to rotate low census equitably among staff assigned to each area by shift, subject to competence, ability, and availability.

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

On-Call Staff: Voluntary on-call personnel will be utilized for additional staffing needs (ex: sick calls, inter-facility RN transport needs, or other staffing needs as determined by RN Management or the Charge Nurse). Charge Nurse can determine if additional staff are needed during the current shift. Department staff may self-schedule for on-call shifts via the scheduling application in the 'Department on call' section.

Additional Staff: Staff will also consider other internal staffing resources during weekdays like outreach to the Activities Director NAC, Employee Health RN, RCC, NM, and/or the CNO when further assistance in the Patient Care Unit is required. Record keeping of additional staff outreach will be maintained by the UC on the staff call log sheet and will be scanned for electronic records documentation. 'Manager on call' and 'Chief on call' will be maintained in the scheduling application for additional phone support when needed.

- ☒ Skill mix

Nursing personnel shall be assigned duties consistent with experience, education and/or training background.

In times of need, RN and LPN personnel shall be assigned other duties such as the role of NAC, UC, or other duties as determined by the Charge Nurse or Nurse Management.

☒ Level of experience of nursing and patient care staff

Additional Staff: Staff will also consider other internal staffing resources during weekdays like outreach to the Activities Director NAC, Employee Health RN, RCC, NM, and/or the CNO when further assistance in the Patient Care Unit is required. Record keeping of additional staff outreach will be maintained by the UC on the staff call log sheet and will be scanned for electronic records documentation. 'Manager on call' and 'Chief on call' will be maintained in the scheduling application for additional phone support when needed.

☒ 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

Patient Care Unit: The patient care rooms that include the Emergency Room, Observation, Inpatient, Swing Bed, and Outpatient registered patient census.

Patient Care Unit NIGHT RNs are within close proximity and remain available for as needed medication pass and assessments for the Non Skilled Swing Bed patient census.

☒ Other

RN: Registered Nurse
LPN: Licensed Practical Nurse
NAC: Nurse Assistant Certified
UC: Unit Coordinator
CNO: Chief Nursing Officer
NM: ER and Acute Care Nurse Manager
RCC: Resident Care Coordinator
SBAR: Situation, Background, Assessment, Recommendation