COVER PAGE

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

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Hospital Staffing Form

Attestation

Date:

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

As approved by:

Hospital Information

Name of Hospital:									
·									
Hospital License #:									
Hospital Street Address:									
City/Town:		State:			Zip code:				
Is this hospital license affiliated with more than one location? Yes No									
IS IIV.	Startlan								
If "Yes" was selected, please provi location name and address	de the								
Review Type:	Anr	nual	Review Date:						
Review Type.	Upo	late	Next Review Date:						
Effective Date:									
Date Approved:									

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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:
Description:
Terms of applicable collective bargaining agreement
Description:
Delevant state and federal laws and rules including these regarding most and rest handle
Relevant state and federal laws and rules including those regarding meal and rest breaks and use of overtime and on-call shifts
Description:
Hospital finances and resources
Description:
·
Other
Description:

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Signature

CEO & Co-chairs Name:	Signature:	Date:
Will Callicoat	Will alles	7/1/2025
Anthony Pansoy	Jun 1	7/1/25
Shanon Watkins	7000	7/1/25
		1.1.

Total Votes							
# of Approvals	# of Denials						
14	0						



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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.

Dilly Cillic	Type:	: Medical / Surgical / Telemetry (10003-1421) Inpatient Services									
Unit/ Clinic					900 Capital		SW, Olymp	a, WA 9850	12		
Average Da Effective as			2	.6		Maximum 1-Ju	# of Beds: II-25			40	
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 P Care HPU (hours pounit of service)
1	Day	12	2	0	0	0	24.00	0.00	0.00	0.00	
	Night Day	12	2	0	0	0	24.00 12.00	0.00	0.00	0.00	48.00
2	Night	12	2	0	0	0	12.00	0.00	0.00	0.00	24.00
3	Day Night	12	2	0	0	0	8.00	0.00	0.00	0.00	16.00
4	Day	12	2	0	0	0	6.00	0.00	0.00	0.00	
	Night Day	12 12	2	0	0	0	6.00 4.80	0.00	0.00 2.40	0.00	12.00
5	Night	12	2	0	1	0	4.80	0.00	2.40	0.00	14.40
6	Day Night	12 12	2	0	1	0	4.00	0.00	2.00	0.00	12.00
7	Day	12	2	0	1	0	3.43	0.00	1.71	0.00	
	Night Day	12 12	2	0	1	0	3.43	0.00	1.71	0.00	10.29
8	Night	12	2	0	1	0	3.00	0.00	1.50	0.00	9.00
9	Day Night	12	2	0	1	0	2.67	0.00	1.33	0.00	8.00
	Day	12	3	0	1	1	3.60	0.00	1.20	1.20	8.00
10	Night Evening	12 4	0	0	0	0	2.40 0.00	0.00	1.20 0.00	0.00	10.00
	Day	12	3	0	2	1	3.27	0.00	2.18	1.09	10.00
11	Night Evening	12 4	2	0	0	0	2.18 0.00	0.00	2.18 0.00	0.00	11.77
	Day	12	3	0	2	1	3.00	0.00	2.00	1.00	11.27
12	Night Evening	12 4	2	0	2	0	2.00 0.00	0.00	2.00 0.00	0.00	10.33
	Day	12	3	0	2	1	2.77	0.00	1.85	0.92	10.3:
13	Night	12 4	3	0	2	0	2.77 0.00	0.00	1.85 0.00	0.00	
	Evening	12	3	0	2	1	2.57	0.00	1.71	0.86	10.46
14	Night	12	3	0	2	0	2.57	0.00	1.71	0.00	
	Evening	12	3	0	2	1	0.00 2.40	0.00	1.60	0.29	9.71
15	Night	12	3	0	2	0	2.40	0.00	1.60	0.00	
	Evening	12	4	0	2	1	3.00	0.00	1.50	0.27	9.07
16	Night	12	3	0	2	0	2.25	0.00	1.50	0.00	
	Evening	12	4	0	2	1	0.00 2.82	0.00	0.00 1.41	0.25	9.25
17	Night	12	3	0	2	0	2.12	0.00	1.41	0.00	
	Evening	12	4	0	2	1	0.00 2.67	0.00	1.33	0.24	8.71
18	Night	12	3	0	2	0	2.00	0.00	1.33	0.00	
	Evening Day	4 12	0	0	2	1	0.00 2.53	0.00	0.00 1.26	0.22	8.22
19	Night	12	4	0	2	0	2.53	0.00	1.26	0.00	
	Evening Day	4 12	0	0	2	1	0.00 2.40	0.00	0.00 1.20	0.21	8.42
20	Night	12	4	0	2	0	2.40	0.00	1.20	0.00	
	Evening Day	4 12	5	0	3	1	0.00 2.86	0.00	0.00 1.71	0.20	8.00
21	Night	12	4	0	3	0	2.29	0.00	1.71	0.00	
	Evening Day	4 12	5	0	3	1	0.00 2.73	0.00	0.00 1.64	0.19	9.33
22	Night	12	4	0	3	0	2.18	0.00	1.64	0.00	
	Evening	12	5	0	3	1	2.61	0.00	1.57	0.18	8.91
23	Night	12	4	0	3	0	2.09	0.00	1.57	0.00	
	Evening Day	12	5	0	3	1	0.00 2.50	0.00	0.00 1.50	0.17	8.52
24	Night	12 4	4	0	3	0	2.00	0.00	1.50	0.00	
	Evening Day	12	3	2	3	1	0.00 1.50	1.00	1.50	0.17	8.17
24	Night Evening	12 4	3	2	3	0	1.50 0.00	1.00	1.50 0.00	0.00 0.17	
	Day	12	3	3	2	1	1.50	1.50	1.00	0.17	8.67
24	Night Evening	12 4	3	3	2	0	1.50 0.00	1.50 0.00	1.00 0.00	0.00	
	Day	12	5	0	3	1	2.40	0.00	1.44	0.17	8.67
25	Night	12 4	5	0	3	0	2.40	0.00	1.44	0.00	
	Evening	12	3	2	3	1	0.00 1.44	0.00	0.00 1.44	0.16	8.32
25	Night	12	3	2	3	0	1.44	0.96	1.44	0.00	
	Evening	12	3	3	2	1	0.00 1.44	0.00 1.44	0.00	0.16	8.32
25	Night	12	3	3	2	0	1.44	1.44	0.96	0.00	
	Evening Day	12	6	0	3	1	0.00 2.77	0.00	0.00 1.38	0.16 0.46	8.32
26	Night	12	5	0	3	0	2.31	0.00	1.38	0.00	
	Evening	12	4	2	3	1	0.00 1.85	0.00	0.00 1.38	0.15	8.46
26	Night	12	3	2	3	0	1.38	0.92	1.38	0.00	
	Evening	4	0	0	0	1	0.00	0.00	0.00	0.15	8.46
	Day	12	4	3	2	1	1.85	1.38	0.92	0.46	

Α	27	Day Night	12	6 5	0	3	0	2.67	0.00	1.33	0.44	
		Evening	4	0	0	0	1	0.00	0.00	0.00	0.15	8.15
	27	Day	12	4	2	3	1	1.78	0.89	1.33	0.44	
В	27	Night Evening	12 4	3 0	0	3	0	1.33 0.00	0.89	1.33	0.00	8.15
		Day	12	4	3	2	1	1.78	1.33	0.89	0.44	0.13
С	27	Night	12	3	3	2	0	1.33	1.33	0.89	0.00	
		Evening Day	12	6	0	3	1	0.00 2.57	0.00	0.00 1.29	0.15	8.15
Α	28	Night	12	5	0	3	0	2.14	0.00	1.29	0.00	
		Evening	4	0	0	0	1	0.00	0.00	0.00	0.14	7.86
В	28	Day Night	12	3	2	3	0	1.71	0.86	1.29	0.43	
В	20	Evening	4	0	0	0	1	0.00	0.00	0.00	0.14	7.86
		Day	12	4	3	2	1	1.71	1.29	0.86	0.43	
С	28	Night Evening	12 4	3 0	3 0	0	0	1.29 0.00	1.29 0.00	0.86	0.00	
		Day	12	6	0	3	1	2.48	0.00	1.24	0.14	7.86
Α	29	Night	12	5	0	3	0	2.07	0.00	1.24	0.00	
		Evening	4	0	0	0	1	0.00	0.00	0.00	0.14	7.59
В	29	Day Night	12 12	3	2	3	0	1.66	0.83	1.24	0.41	
		Evening	4	0	0	0	1	0.00	0.00	0.00	0.14	7.59
		Day	12	4	3	2	1	1.66	1.24	0.83	0.41	
С	29	Night Evening	12 4	3 0	3 0	0	1	1.24 0.00	1.24 0.00	0.83	0.00	7.50
		Day	12	6	0	3	1	2.40	0.00	1.20	0.40	7.59
Α	30	Night	12	5	0	3	0	2.00	0.00	1.20	0.00	
		Evening	4	0	0	0	1	0.00	0.00	0.00	0.13	7.33
В	30	Day Night	12	3	2	3	0	1.60	0.80	1.20	0.40	
		Evening	4	0	0	0	1	0.00	0.00	0.00	0.00	7.33
		Day	12	4	3	2	1	1.60	1.20	0.80	0.40	
С	30	Night Evening	12 4	3 0	3 0	0	0	1.20 0.00	1.20 0.00	0.80	0.00	7.00
		Day	12	7	0	3	1	2.71	0.00	1.16	0.13	7.33
Α	31	Night	12	6	0	3	0	2.32	0.00	1.16	0.00	
		Evening	4	0	0	0	1	0.00	0.00	0.00	0.13	7.87
В	31	Day Night	12 12	5 4	2	3	0	1.94	0.77	1.16 1.16	0.39	
		Evening	4	0	0	0	1	0.00	0.00	0.00	0.13	7.87
		Day	12	5	3	2	1	1.94	1.16	0.77	0.39	
С	31	Night Evening	12 4	0	3 0	0	0	1.55 0.00	1.16 0.00	0.77	0.00	7.87
		Day	12	4	4	2	1	1.55	1.55	0.77	0.39	7.67
D	31	Night	12	4	3	2	0	1.55	1.16	0.77	0.00	
		Evening	4 12	7	0	0	1	0.00 2.63	0.00	0.00 1.50	0.13	7.87
Α	32	Day Night	12	6	0	4	0	2.03	0.00	1.50	0.38	
		Evening	4	0	0	0	1	0.00	0.00	0.00	0.13	8.38
	32	Day	12	5 4	2	4	1	1.88	0.75	1.50	0.38	
В	32	Night Evening	12 4	0	0	0	0	0.00	0.75	0.00	0.00	8.38
		Day	12	5	3	3	1	1.88	1.13	1.13	0.38	
С	32	Night	12 4	4	3	3	0	1.50	1.13	1.13	0.00	
		Evening Day	12	4	4	3	1	0.00 1.50	0.00 1.50	0.00 1.13	0.13	8.38
D	32	Night	12	4	3	3	0	1.50	1.13	1.13	0.00	
		Evening	4	0	0	0	1	0.00	0.00	0.00	0.13	8.38
Α	33	Day Night	12	7	0	4	0	2.55 2.18	0.00	1.45	0.36	
	33	Evening	4	0	0	0	1	0.00	0.00	0.00	0.12	8.12
		Day	12	5	2	4	1	1.82	0.73	1.45	0.36	
В	33	Night Evening	12	0	0	0	1	0.00	0.73	1.45 0.00	0.00	0.43
		Day	12	5	3	3	1	1.82	1.09	1.09	0.36	8.12
С	33	Night	12	4	3	3	0	1.45	1.09	1.09	0.00	
		Evening	4	0	0	0	1	0.00	0.00	0.00	0.12	8.12
D	33	Day Night	12	4	3	3	0	1.45	1.45	1.09	0.36	
		Evening	4	0	0	0	1	0.00	0.00	0.00	0.12	8.12
		Day	12	7	0	4	1	2.47	0.00	1.41	0.35	
А	34	Night Evening	12 4	6	0	4 0	0	2.12 0.00	0.00	1.41 0.00	0.00	7.88
		Day	12	5	2	4	1	1.76	0.71	1.41	0.35	
В	34	Night Evening	12 4	4 0	2	4 0	0	1.41	0.71	1.41	0.00 0.12	
		Day	12	5	3	3	1	1.76	1.06	1.06	0.12	7.88
С	34	Night	12	4	3	3	0	1.41	1.06	1.06	0.00	
		Evening	4	0	0	0	1	0.00	0.00	0.00	0.12	7.88
D	34	Day Night	12	4	3	3	0	1.41	1.41	1.06	0.35	
-		Evening	4	0	0	0	1	0.00	0.00	0.00	0.00	7.88
		Day	12	7	0	4	1	2.40	0.00	1.37	0.34	
Α	35	Night Evening	12 4	6	0	4 0	0	2.06	0.00	1.37	0.00	7.00
		Day	12	5	2	4	1	1.71	0.69	1.37	0.11	7.66
В	35	Night	12	4	2	4	0	1.37	0.69	1.37	0.00	
		Evening	4	0	0	0	1	0.00	0.00	0.00	0.11	7.66
С	35	Day Night	12 12	5	3	3	0	1.71	1.03	1.03	0.34	
		Evening	4	0	0	0	1	0.00	0.00	0.00	0.11	7.66
		Day	12	4	4	3	1	1.37	1.37	1.03	0.34	
D	35	Night Evening	12 4	0	3 0	3 0	0	1.37 0.00	1.03 0.00	1.03 0.00	0.00	7.00
		Day	12	8	0	4	1	2.67	0.00	1.33	0.11	7.66
Α	36	Night	12	6	0	4	0	2.00	0.00	1.33	0.00	
		Evening	4	0	0	0	1	0.00	0.00	0.00	0.11	7.78
		Day	12	6	2	4	0	2.00 1.33	0.67	1.33	0.33	
В	36	Night	12	4								
В	36	Night Evening	12 4	0	0	0	1	0.00	0.00	0.00	0.11	7.78
		Evening Day	4 12	0 4	0	0	1	0.00 1.33	1.33	1.33	0.11 0.33	7.78
В	36 36	Evening	4	0	0	0	1	0.00			0.11	7.78

		Day	12	5	4	3	1	1.67	1.33	1.00	0.33	
D	36	— <u> </u>	12	4	3	3	0	1.33	1.00	1.00	0.00	
U	36	Night Evening	4	0	0	0	1	0.00	0.00	0.00	0.00	
				_	_	_						7.78
		Day	12	8	0	4	1	2.59	0.00	1.30	0.32	
Α	37	Night	12 4	7	0	0	0	0.00	0.00	1.30 0.00	0.00	
		Evening		_	_	_						7.89
		Day	12	5	3	4	1	1.62	0.97	1.30	0.32	
В	37	Night	12	4	3	4	0	1.30	0.97	1.30	0.00	
		Evening	4	0	0	0	1	0.00	0.00	0.00	0.11	7.89
		Day	12	5	4	3	1	1.62	1.30	0.97	0.32	
С	37	Night	12	4	4	3	0	1.30	1.30	0.97	0.00	
		Evening	4	0	0	0	1	0.00	0.00	0.00	0.11	7.89
		Day	12	5	3	4	1	1.62	0.97	1.30	0.32	
D	37	Night	12	5	2	4	0	1.62	0.65	1.30	0.00	
		Evening	4	0	0	0	1	0.00	0.00	0.00	0.11	7.89
		Day	12	8	0	4	1	2.53	0.00	1.26	0.32	
Α	38	Night	12	7	0	4	0	2.21	0.00	1.26	0.00	
		Evening	4	0	0	0	1	0.00	0.00	0.00	0.11	7.68
		Day	12	5	3	4	1	1.58	0.95	1.26	0.32	
В	38	Night	12	4	3	4	0	1.26	0.95	1.26	0.00	
		Evening	4	0	0	0	1	0.00	0.00	0.00	0.11	7.68
		Day	12	5	4	3	1	1.58	1.26	0.95	0.32	
С	38	Night	12	4	4	3	0	1.26	1.26	0.95	0.00	
		Evening	4	0	0	0	1	0.00	0.00	0.00	0.11	7.68
		Day	12	5	3	4	1	1.58	0.95	1.26	0.32	
D	38	Night	12	5	2	4	0	1.58	0.63	1.26	0.00	
		Evening	4	0	0	0	1	0.00	0.00	0.00	0.11	7.68
		Day	12	8	0	4	1	2.46	0.00	1.23	0.31	
Α	39	Night	12	7	0	4	0	2.15	0.00	1.23	0.00	
		Evening	4	0	0	0	1	0.00	0.00	0.00	0.10	7.49
		Day	12	5	3	4	1	1.54	0.92	1.23	0.31	
В	39	Night	12	4	3	4	0	1.23	0.92	1.23	0.00	
		Evening	4	0	0	0	1	0.00	0.00	0.00	0.10	7.49
		Day	12	5	4	3	1	1.54	1.23	0.92	0.31	
С	39	Night	12	4	4	3	0	1.23	1.23	0.92	0.00	
		Evening	4	0	0	0	1	0.00	0.00	0.00	0.10	7.49
		Day	12	5	3	4	1	1.54	0.92	1.23	0.31	
D	39	Night	12	5	2	4	0	1.54	0.62	1.23	0.00	
		Evening	4	0	0	0	1	0.00	0.00	0.00	0.10	7.49
		Day	12	8	0	4	1	2.40	0.00	1.20	0.30	
Α	40	Night	12	7	0	4	0	2.10	0.00	1.20	0.00	
		Evening	4	0	0	0	1	0.00	0.00	0.00	0.10	7.30
		Day	12	5	3	4	1	1.50	0.90	1.20	0.30	
В	40	Night	12	4	3	4	0	1.20	0.90	1.20	0.00	
		Evening	4	0	0	0	1	0.00	0.00	0.00	0.10	7.30
		Day	12	5	4	3	1	1.50	1.20	0.90	0.30	
С	40	Night	12	4	4	3	0	1.20	1.20	0.90	0.00	
		Evening	4	0	0	0	1	0.00	0.00	0.00	0.10	7.30
		Day	12	5	3	4	1	1.50	0.90	1.20	0.30	
D	40	Night	12	5	2	4	0	1.50	0.60	1.20	0.00	
		Evening	4	0	0	0	1	0.00	0.00	0.00	0.10	7.30

Unit Information

Additional Care Team Members										
	Shift Coverage									
Occupation	Day	Evening	Night	Weekend						
Charge RN/Nurse Leader	24/7	24/7	24/7	24/7						
	Varied, included in staffing plan as		Varied, included in staffing plan as							
HUC (UAP)	UAP	Varied, included in staffing plan as UAP	UAP	Varied, included in staffing plan as UAP						

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

Activity such as patient admissions, discharges, and transfers
Description:
This unit experiences a high daily CHURN rate of admissions, discharges, and transfers.

Description:

This unit specializes in post-surgical care, orthopedic care, medical telemetry, and medical management of complex and high acuity medical patients. This unit has the capability for 12 remote telemetry monitoring.

Telementry is an essential aspect of a patients care need when monitoring a patient's cardiac rhythms remotely is essential to the care that they may require. The Tele unit can provide cardiac intervention or other medical care should patient's vital signs change, worsen, or otherwise become unstable. RN:PT Ratios, 1:4-6 with every (4-8) hour interventions and requiring greater than 4 hours of direct nursing care in a 24-hour period.

Description:

Varied additional certifications held by staff including ACLS, Chemo, CMSRN, ONC, CWON

✓ Level of experience of nursing and patient care staff
Description:
Varied experience levels balanced on both day and night shift.
varied experience evers business on both day sho high simile.
Need for specialized or intensive equipment Description:
Description:
Architecture and geography of the unit such as placement of patient rooms, treatment areas, nursing stations, medication preparation areas, and equipment
Description:
This unit supports 40 adult care beds located on the third floor.
☑ Other
Description:
1:1 behavioral and medical sitter needs



DOH 346-154

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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 aculty, 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:	Central Telemetry Monitoring (10003-1106)										
Unit/ Clinic Type:		Inpatient Services									
Unit/ Clinic Address:	3	3900 Capital Mall Drive SW, Olympia, WA 98502									
Effective as of:	1-Jul-25										
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					
24/7	Day	12	0	0	0	1					
24/7	Night	12	0	0	0	1					

			Unit Information		
		Addition	al Care Team Members		
Occupatio Monitor Tech (ın (UAP)	Day 1- 24/7 Coverage	Evening 1- 24/7 Coverage	Shift Coverage Night 1-24/7 Coverage	Weekend 1-24/7 Coverage
	Factors Con	sidered in the Developm	ent of the Unit Staffing Plan(Check all that apply):	
☐ Activity such a:	s patient admissions, discharges, and tran	sfers			
Description:					
Patient acuity lescription:	level, intensity of care needs, and the type	of care to be delivered on each sh	ift		
escription: 4/7 remote telemetry monitoring capal	oility				
Skill mix					
escription:					
Level of experi	ence of nursing and patient care staff				
Need for speci	alized or intensive equipment				
escription:	sized of intensive edubition				
Architecture a escription:	and geography of the unit such as placement	ent of patient rooms, treatment a	reas, nursing stations, medication pre	paration areas, and equipment	

Description:	Other			
Description:				

Patient Volume-based Staffing Matrix Formula Template

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

Unit/ Clinic	: Name:	Intensive Care / Progressive Care Unit (10003-1422)									
Unit/ Clinic	с Туре:	Inpatient Services									
Unit/ Clinic	c Address:			3900 Capital Mall Drive SW, Olympia, WA 98502							
Average Da	aily		1	9		Maximum	# of Beds:			26	
Census:											
Effective a	s of:					1-Ju	il-25				
Census		<u> </u>			<u> </u>			<u> </u>	1	1	
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 Night	12 12	2	0	0	0	24.00 24.00	0.00	0.00	0.00	48.00
2	Day Night	12 12	2	0	0	0	12.00 12.00	0.00	0.00	0.00	
3	Day	12	2	0	0	0	8.00	0.00	0.00	0.00	24.00
	Night	12	2	0	0		8.00	0.00	0.00	0.00	16.00
4	Day Night	12 12	2	0	0	0	6.00	0.00	0.00	0.00	
	_	12	2	0	1	0			2.40	0.00	12.00
5	Day Night	12	2	0	1	0	4.80 4.80	0.00	2.40	0.00	14.40
	Day	12	2	0	1	0	4.00	0.00	2.40	0.00	14.40
6	Night	12	2	0	1	0	4.00	0.00	2.00	0.00	12.00
7	Day	12	3	0	1	0	5.14	0.00	1.71	0.00	
	Night	12	3	0	1	0	5.14	0.00	1.71	0.00	13.71
8	Day Night	12 12	3	0	1	0	4.50 4.50	0.00	1.50 1.50	0.00	12.00
	Day	12	4	0	1	0	5.33	0.00	1.33	0.00	
9	Night	12	4	0	1	0	5.33	0.00	1.33	0.00	13.33
10	Day Night	12 12	4	0	1	1 0	4.80 4.80	0.00	1.20 1.20	1.20 0.00	13.20
	Day	12	4	0	1	1	4.36	0.00	1.09	1.09	15.20
11	Night	12	4	0	1	0	4.36	0.00	1.09	0.00	12.00
12	Day	12	4	0	2	1	4.00	0.00	2.00	1.00	
	Night	12	4	0	2	0	4.00	0.00	2.00	0.00	13.00
13	Day Night	12 12	5	0	2	0	4.62 4.62	0.00	1.85 1.85	0.92	13.85
14	Day Night	12 12	5 5	0	2	1 0	4.29 4.29	0.00	1.71 1.71	0.86	12.86
	Day	12	5	0	2	1	4.00	0.00	1.60	0.80	12.00
15	Night	12	5	0	2	0	4.00	0.00	1.60	0.00	12.00
16	Day	12	5	0	2	1	3.75	0.00	1.50	0.75	
	Night	12	5	0	2	0	3.75	0.00	1.50	0.00	11.25
17	Day Night	12 12	6	0	2	0	4.24 4.24	0.00	1.41 1.41	0.71	12.00
	Day	12	6	0	2	1	4.00	0.00	1.33	0.67	12.00
18	Night	12	6	0	2	0	4.00	0.00	1.33	0.00	11.33
19	Day Night	12 12	6	0	2	0	3.79 3.79	0.00	1.26 1.26	0.63 0.00	10.74
	Day	12	6	0	2	1	3.60	0.00	1.20	0.60	10.74
20	Night	12	6	0	2	0	3.60	0.00	1.20	0.00	10.20
21	Day Night	12 12	7	0	3	0	4.00 4.00	0.00	1.71 1.71	0.57 0.00	12.00
22	Day Night	12 12	7	0	3	1	3.82 3.82	0.00	1.64 1.64	0.55 0.00	
22	Day	12	7	0	3	1	3.65	0.00	1.57	0.52	11.45
23	Night	12	7	0	3	0	3.65	0.00	1.57	0.00	10.96
24	Day Night	12 12	7	0	3	0	3.50 3.50	0.00	1.50 1.50	0.50 0.00	10.50
25	Day Night	12 12	8	0	3	1 0	3.84 3.84	0.00	1.44 1.44	0.48 0.00	11.04
26	Day	12	8	0	3	1	3.69	0.00	1.38	0.46	
	Night	12	8	0	3	0	3.69	0.00	1.38	0.00	10.62

 m i+	Infar	mation

	Additional Care Team Members									
			Shift Coverage							
Occupation	Day	Evening	Night	Weekend						
Charge RN/Nurse Leader	24/7	24/7	24/7	24/7						
HUC (UAP)	Varied, included in staffing plan as UAP	aried, included in staffing plan as U	Varied, included in staffing plan as UAP	Varied, included in staffing plan as UAP						

Charge RN/Nurse Leader	24/7	24/7	24/7	24/7				
HUC (UAP)	Varied, included in staffing plan as UAP	aried, included in staffing plan as U	Varied, included in staffing plan as UAP	Varied, included in staffing plan as UAP				
Factors Considered in the Development of the Unit Staffing Plan (Check all that apply):								
 Activity such as patien 	t admissions, discharges, and trans	fers						
Description:								
This unit experiences a high daily	CHURN rate of admissions, dischar	rges, and transfers.						
_								
Patient acuity level, into Description:	ensity of care needs, and the type of	care to be delivered on each shift						
	0-bed Intensive Care unit, 16-bed Pro	ogressive Care unit located on the se	cond floor. ICU/PCU providing care 2	24/7/365, specializing in medical management of complex				
and high acuity medical patients, p	patients at increased risk of their con	dition becoming unstable or experie	ncing a life-threatening event.					
Skill mix Description:								
complications may arise so sudde		g depends upon the specialized ass	essment skills of the ICU nurse and	ian, is such that marked changes may occur so quickly or //or technical/monitoring equipment located at the				
				ll have patients at a higher level of care and lower nurse				
to patient ratio r/t to the patient's than 6 hours of direct nursing care		mediately life/limb saving intervent	ons. They could range from 1:3, 1:4	with every (2-4) hour interventions and requiring greater				
Level of experience of	nursing and patient care staff							
Description:								
Need for specialized or	intensive equipment							
Description:	птензіче ецирпіент							

Description:		
Other Description:		



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Fixed Staffing Matrix

imber 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 c activities. If a unit does not utilize certain staff for that shift please put "0", do not leave it blank.

Unit/ Clinic Name:		Birth Center, ADC 6 (10003-1435)							
Unit/ Clinic Type:		Women's Services							
Unit/ Clinic Address:		3900 Capital Mall Drive SW, Olympia, WA 98502							
Effective as of:		1-Jul-25							
Day of the week									
Day of the week	Shift Type	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's			
Monday- Sunday	Day (0700-1930)	12	3	0	0	1			
Widilday- Sullday	Night (1900-0730)	12	3	0	0	1			

Unit Information

	Additional Care Team Members									
		Shif	t Coverage							
Occupation	Day	Evening	Night	Weekend						
	1 required at all times, will vary with census and	1 required at all times, will vary with census	1 required at all times, will vary with census and							
	surgery schedule, included in staffing plan as	and surgery schedule, included in staffing	surgery schedule, included in staffing plan as	1 required at all times, will vary with census and						
ORTECH (UAP)	UAP	plan as UAP	UAP	surgery schedule, included in staffing plan as UAP						
Charge RN/Nurse Leader	24/7 (included in plan)	24/7 (included in plan)	24/7 (included in plan)	24/7 (included in plan)						

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

Activity such as patient admissions, discharges, and transfers

Fixed Staffing is 3-4 RNs and 1 OR Tech 24/7. Staffing will have variances with census, scheduled surgeries, active labor with pitocin, magnesium sulfate administration, inductions, boarder babies, readmitted postpartum patients, and post-operative clean synecological patients and will adjust accordingly.

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

Description: Women's Services aka Birth Center is an 11-bed unit providing care 247/855 days a year. The unit is comprised of OB triage, labor and delivery. Mother Baby postpartum, and GYN patients. The unit provides care for the following groups: Pregnant women, Postpartum Mothers and their Newborns, Post-operative Gynecological patients, and those meeting criteria for a mother-baby unit.

This unit cares for obsecting patients at 35 weeks gestation and above. Distativity patients under 53 weeks gestation will be statibilitied and transferred to a higher level of care if unstable. If immediate delivery is in the best interest of mother and inflant, then delivery and stabilization will loccur prior to transport to a higher level of care. Newborns at 35 weeks and greater than meet Washington DOH test interest. Staffing according to AMHONN guidelines. Adult gynecological post op surgical patients with infection or rule cont of infection symptoms. Patient nume radio varies according to condition and labor requirements, (includes 11, 12, up to 15-which is transported by the patients).

Skill mix

Skill mix

Descriptors: Interestions performed on this unit can include doppler or electronic fetal monitoring of the pregnant patient, sterile vaginal exams, glucose monitoring via POCT, non-stress tests, serial blood pressure monitoring in the antepartum, external version, cervical ripening, induction of labor, spontaneous and operative vaginal deliveries as well as cesarean deliveries, care of the immediate post-partum patient, and stabilization of the newborn. Care of the post-operative female for low risk surgeries without signs of interection. (Cardiac monitoring is not available).

Treatments include but not limited to medication administration, intravenous therapy, tood and blood product administration, labor and induction care with positioning and techniques, and pre and post- surgical care.

Lactation evaluation, assessment and support. Limited re spiratory support of the neonate, intravenous therapy, medication management, and bilirubin treatment. Post op surgical genecological patients are monitored for pain, infection, and bleeding in addition to return of gastric motility and bladder function.

Level of experience of nursing and patient care staff

Description: Registered Nurse Washington License, or equivalent. Must have completed nurse residency program or Fellowship program without prior Labor and Delivery experience. Labor and Delivery experience over one year otherwise. Certified in NRP, BLS and EFM a plus.

Description: Spinning Baby or equivalent class is preferred for peanut use in labor. Breastfeeding class required without experience for using breast pumps. Hospital orientation on all specialized or intensive equipment during orientation.

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

Description: Rooms 402-412 are LIDAP rooms used for all laboring or triage patients. Rooms 406 and 408 are used for triage rooms with a garney instead of a labor bed that can easily be changed out. Rooms 415, 416, 418, and 419 are used for readmits, antepartum, genecological patients, boarder bables and their families. There are two ORs. OR1 and OR2. The runsing station is in the middle of the entire flow in the stabilizing runsing statched, along with supply room and most room. Equipment is stored in the patient rooms in locked doctors in the babley for the stabilizing runsing statched, along with supply room and most room. Equipment is stored in the patient rooms in locked doctors in the babley for the stabilizing runsing statched, along with the restabilizing runsing statched, along with restablizing runsing statched, along with restabilizing runsing statched, along with restablizing runsing statched, along with restablizing runsing statched, along with restablizing statched, along with the restabilizing runsing statched, along with restablizing runsing statched, along with restablizing runsing statched, along with restablizing statched, along with restablizing runsing statched, along with restablizing runsing statched, along with restablizing statched, along with restablizing runsing statched, along with restablizing statched, along with restablizing runsing run with supplies needed.

Description: The directors office is in room 421. The educator (NPD) and Clinical Assistant Nurse Manager share norm 420 as their office. The Lactation Consultant's room is beside Broom 407 and is used for both in-patient and out-patients. There are sleep rooms for CNMs it is off of the mutition room, anesthesia has a sleep room in room 417, and the providers sleep room is beside the NMP sleep room by the locked doors that go to the physicians payllon (between 417 and 418). There are female and make locker rooms with abovers and tollets in both rooms. They are located by the back elevators and the two ORs. The nutrition room for families is by the staff lounge by the nurses station. We have a waiting room beside the main entrance of the unit. To get into the unit one must call on the prince outside the door by the main elevators.



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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 patien

Unit/ Clinic Name:	Emergency Department, ADC 78 (10003-1192)								
Unit/ Clinic Type:		Emerge	ncy Services						
Unit/ Clinic Address:	3900 Capital Mall Drive SW, Olympia, WA 98502 1-Jul-25								
Effective as of:									
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			
	Day (0700-1930)	12	4	0	0	1			
	Mid (0900-2130)	12	1	0	0	0			
Monday- Sunday	Mid (1000-2230)	12	1	0	0	0			
ivioliday- Suliday	Mid (1100-2330)	12	2	0	0	1			
	Mid (1500-0330)	12	0	0	0	1			
	NI-h+ (4000 0730)	12	-			-			

		Unit Information		
	Additional C	Care Team Members		
		Sh	ift Coverage	
Occupation	Day	Evening	Night	Weekend
EDTECH (UAP)	Varied, included in staffing plan as UAP	Varied, included in staffing plan as UAP	Varied, included in staffing plan as UAP	Varied, included in staffing plan as UAP
Fa	actors Considered in the Development	of the Unit Staffing Plan (Check all	that apply):	
Activity such as patient admissions, discharges, and transfers				
Description:				
This unit provides a full range of emergency services, including resuscitation, stabilization, t	treatment, and disposition, to patients of all ages, r	egardless of financial status. A medical screeni	ng exam is completed on each patient by a cred	entialed Physician or Allied Health Provider.
Average daily census and admission/transfer rates monitored and staffed accordingly.				
Patient acuity level, intensity of care needs, and the type of care to be	oe delivered on each shift			
Description:				
12-bed unit serving Thurston County and surrounding communities. Located in Olympia, WA t Seattle.	the unit serves as the gateway for several medically	underserved areas to the east, south, and west,	who are seeking services along the more popula	ted interstate 5 corridor between Olympia and
Skill mix				
Description:				
EDTECH (UAP) are utilized to assist with procedures, phlebotomy, apply casts and splints, and	other duties within their scope of practice, as well a	as non-direct patient care activities such as care	coordination and communication.	
Each patient presenting to the Emergency Department seeking medical care will be provided	d an appropriate medical screening examination to	determine the nature and urgency of the health	care problem, and the location where treatmen	t can best be rendered. The department offers
complete medical treatment and stabilization, evaluation, and disposition to anyone reques	iting it.			
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 pat	tient rooms, treatment areas, nursing stations. me	edication preparation areas, and equipment		
Description:	.,	p p		
		<u> </u>		
Other Description:				



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Fixed Staffing Matr

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

Unit/ Clinic Name:	Off Campus Emergency Department: ADC 85, 244.8 H/UOS (20103-1192)								
Unit/ Clinic Type:		Emergency Services 4312 Pacific Ave SE, Lacey, WA 98503							
Unit/ Clinic Address:									
Effective as of:			1-Jul-	25					
Day of the week									
Day of the week	Shift Type	Shift Length in Hours	Min#of RN's	Min # of LPN's	Min#of CNA's	Min # of UAP's			
	Day (0700-1930)	12	2	0	0	1			
	Mid (0900-2130)	12	2	0	0	0			
	Mid (1000-2230)	12	1	0	0	0			
Monday-Sunday	Mid (1100-2330)	12	1	0	0	0			
	Mid (1200-0030)	12	2	0	0	0			
	Mid (1500-0330)	12	1	0	0	0			
	Night (1900-0720)	12	-	0	_				

1		Unit Information		
	Additional Ca	are Team Members		
			Shift Coverage	
Occupation	Day	Evening	Night	Weekend
EDTECH (UAP)	1- 0700-1930 - 7 days a week (included in staffing plan as UAP)		1- 1900-0730 - 7 days a week (included in staffing plan as UAP)	
PAT/REG (UAP)	2-0700-1930 - 7 days a week (included in staffing plan as UAP)		2- 1900-0730 - 7 days a week (included in staffing plan as UAP)	
	Factors Considered in the Development of	of the Unit Staffing Plan (Ch	neck all that apply):	
Activity such as patient admissions, discharges,	, and transfers			
escription: Currently Lacey has 6.5% admisson/transfer rate for Q2.				
Patient acuity level, intensity of care needs, and	the type of care to be delivered on each shift			
scription:				
-bed unit serving Thurston County and surrounding communities. Locat	ted in Olympia, WA the unit serves as the gateway for several medically underserved areas to the e	east, south, and west, who are seekir	ng services along the more populated interstate 5 corridor between Olympia and Seattle	a.
cey Off Campus ED (OCED) provides a full range of emergency services	i, including resuscitation, stabilization, treatment, and disposition, to patients of all ages, regardle	ess of financial status. A medical scr	ening exam is completed on each patient by a credentialed Physician or Allied Health I	Provider.
Skill mix scription:				
ch patient presenting to the Emergency Department seeking medical ca d disposition to anyone requesting it.	are will be provided an appropriate medical screening examination to determine the nature and un	rgency of the health care problem, ar	id the location where treatment can best be rendered. The department offers complete	medical treatment and stabilization, evaluation
_				
Level of experience of nursing and patient care escription: Varied levels of experience in both nursing and ED experience	staff ranging from 2 years to 25 years.			
. ,				
Need for specialized or intensive equipment escription:				
Architecture and geography of the unit such a	is placement of patient rooms, treatment areas, nursing stations, medication preparation area	as, and equipment		
scription:			·	
-beds/rooms, 4-hallway beds.				
Other				
escription:				

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

Unit/ Clinic Name:	Operating Room, ADC: 25, 7 Beds (10003-1498)								
Unit/ Clinic Type:	Surgical Services								
Unit/ Clinic Address:	3900 Capital Mall Drive SW, Olympia, WA 98502								
Effective as of:	1-Jul-25								
Day of the week									
Day of the week	Shift Type	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's			
	0645-1515	8	5	0	0	5			
Monday-Friday	0645-1715	10	5	0	0	5			
	0645-1915	12	2	0	0	2			

Unit Information

Additional Care Team Members									
Occupation		Shift Coverage							
	Week Day 0645-1715	Week Night 2300-0700	Weekend						
Charge RN	1	0	0						
Night Surgical Tech		1	0						
Turnover RN	2	0	0						
Turnover UAP	2	0	0						
Turnover Tech	2	0	0						
Anesthesia Tech	1	0	0						
Resource Coordinator	1	0	0						

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:	
Specialties include ENT, general	surgery, gynecology, oral, orthopedics, plastics, podiatry, urology, vascular, and robotics.
	Skill mix
Description:	
	Level of experience of nursing and patient care staff
Description:	
	Need for specialized or intensive equipment
Description:	

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

Description: This unit includes 8 OR rooms, 1 Cysto room. This staffing plan is minimum staffing to cover the 8 OR rooms, 1 Cysto room. Staffing would be decreased based on operational OR rooms for the day along with total surgeries scheduled.

✓ Other

Description: Surgical services are available 24 hours a day by a surgical team who is on-site or on-call. Each operating room is staffed with a minimum of two staff members; one to perform scrub duties and the other as a circulator. The circulator is an RN. The care provided at CMC Surgery Department is based on hospital policy and procedures, and professional standards of care established by the Department of Nursing, AORN, and the American Society of Anesthesiologists (ASA). Patient care is based on age, sex, physical and mental limitations, past medical history, and the procedure to be performed.

Days of week, staffing level based on shift time variable based on patient census and acuity. start and end time of shifts may also vary based on census and acuity needs.

Minimum means the minimum number of RNs, LPNs, CNAs, and UAPs per shift based on the average needs of the unit such as patient aculty, 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:	Ambulatory Department, ADC 35, 14 Beds (20104-1498)							
Unit/ Clinic Type:		Surgical Services						
Unit/ Clinic Address:	3900 Capital Mall Drive SW, Olympia, WA 98502							
Effective as of:		1-Jul-25						
Day of the week								
Day of the week	Shift Type	Shift Length in Hours	Min#of RN's	Min#of LPN's	Min#of CNA's	Min#of UAP's		
	0500-1330	8		0	2			
	0500-1530	10	8			0		
	0500-1730	12						
Monday-Friday	0700-1930	12	2	0	0	0		
Monuay-Friday	0830-1700	10	0	0	0	1		
	0900-2130	12	1	0	0	0		
	1100-2130	10	1	0	0	0		
	1130-2000	8	0	0	1	0		

		Unit Information							
	Additional	Care Team Members	hift Coverage						
Occupation Charge RN HUC (UAP)	Day 1 1 1	Evening 1	Night	Weekend					
Factors Con	Factors Considered in the Development of the Unit Staffing Plan (Check all that apply):								
Activity such as patient admissions, discharges, and train	nsfers			1					
Description: Inpatients and outpatient surgery admission and preparation for surgery or procedure. Avera	ge daily census monitored and staffe	d accordingly							
inpatients and outpatient surgery admission and preparation for surgery or procedure. Avera	ge daily census monitored and staire	u accordingly.							
Patient acuity level, intensity of care needs, and the type	of care to be delivered on each shift								
Description: Unit responsible for admission, pre-operative preparation, and phase II recovery of surgical ou	tnationts Patients consist of OR Cath	Lab IR Endo CT Radiology Blood transpisions an	nd infusions and Cardioversions Inte	arventions consist of outnatient care is provided for					
patients who will be discharged after their procedure is completed, cardiac catheterization at draw blood from a saline-lock or central lines, IV infusions & blood transfusions, Phase II reco	nd other cardiac procedures requiring	close monitoring, radiological procedures, endo	oscopy procedures, anesthesia cons	sultation, laboratory procedures requiring a nurse to					
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 placem	ent of nationt rooms treatment are	as nursing stations, medication preparation as	eas and equipment						
Description:	ent of patient rooms, treatment are	as, naising sactors, medication preparation an	cas, and equipment						
This unit includes 14 bays/rooms.									
Description:									
Days of week, staffing level based on shift time variable pased on patient census and acuity. start ar	nd end time of shifts may also vary base	d on census and acuity needs.							

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:	Post Anesthesia Care Unit (PACU), ADC 35, 12 Beds (10003-1575)							
Unit/ Clinic Type:	Surgical Services 3900 Capital Mall Drive SW, Olympia, WA 98502							
Unit/ Clinic Address:								
Effective as of:	1-Jul-25							
Day of the week								
Day of the week	Shift Type	Shift Length in Hours	Min#of RN's	Min#of LPN's	Min#of CNA's	Min # of UAP's		
	0630-1500	8	1	0	0	0		
	0700-1930	12	1	0	0	0		
	0730-1600	10	1	0	0	0		
Monday-Friday	0800-1830	12	2	0	0	0		
	0900-1930	10	1	0	0	0		
	0900-2130	12	2	0	0	0		
	1100-2330	12	1	0	0	0		

		Unit Information		
	Additional	Care Team Members		
	Additionat		hit Course go	
			Shift Coverage	
Occupation None	Day	Evening	Night	Weekend
Factors Consi	idered 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 Description:	be delivered on each shift			
Procedures include placement of arterial lines and central line monitoring, and regional anesth Follow ASPAN's Practice Recommendation 1 on "Patient Classification/Staffing Recommendation	etic block and pain block managem	ent. Patients consist of OR, Cath Lab, IR, Endo, O	CT, Radiology, Blood tranfusions and	infusions, and Cardioversions.
Follow ASPAN's Practice Recommendation 1 on "Patient Classification/Staffing Recommendation	s" to make acuity based assignment:	s in all Phases of Care (Preop, PACU Phase I and F	hase II).	
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 pa	tient rooms treatment areas num	sing stations, medication preparation areas, an	d equipment	
Architecture and geography of the unit such as placement of pa Description:	tient rooms, treatment areas, nurs	ong stations, medication preparation areas, an	и едиривен	
This unit includes 11 bays/rooms on the 1st floor within the Surgical Suite, including 1 isolation	space.			
Other				
Description:				
Days of week, staffing level based on shift time variable pased on patient census and acuity. start and	end time of shifts may also vary based	l on census and aculty needs.		

Minimum means the minimum number of RNs, LPNs, CNAs, and UAPs per shift based on the average needs of the unit such as patient aculty, 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:	GI/Special Procedures (10003-1256)							
Unit/ Clinic Type:	Outpatient Services							
Unit/ Clinic Address:	3900 Capital Mall Drive SW, Olympia, WA 98502							
Effective as of:	1-Jul-25							
Day of the week	ek							
Day of the week	Shift Type	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's		
Monday-Friday	0500-1330	8	1	0	0	0		
Wonday-Friday	0600-1430	8	0	0	0	1		

		Unit Information							
	Additiona	l Care Team Members							
		S	hift Coverage						
Occupation Endo Tech (UAP)	Day 1	Evening	Night	Weekend					
Endo rech (UAP)	1								
Factors Considered in the Development of the Unit Staffing Plan (Check all that apply):									
Activity such as patient admissions, discharges, and transfers									
Description: Transfer patients to Ambulatory Care Unit or inpatient bed, as appropriate, for recovery an	al face all code acres								
Transfer patients to Ambutatory Care Unit of inpatient bed, as appropriate, for recovery an	o/or discharge								
→ Patient acuity level, intensity of care needs, and the type of ca	ra to ha dalivarad on each shift								
Description:	e to be detivered on each shift								
Endoscopic procedures of the gastrointestinal tract. Interventions performed on this unit c (comprehensive care is based on age, sex, physical and mental limitations, past medical h	story, the procedure performed, AS	A score, and the patient's response to anesthes	ia), airway management, pain mana	gement and support until the effects or possible					
complications of anesthesia or surgery have been controlled, emergency care airway obstr	uction, and prevention of aspiration	, treatment of hypovolemia, shock, cardiac dysr	hythmia, respiratory arrest, and can	diac arrest.					
Skill mix									
Description:									
_									
Level of experience of nursing and patient care staff Description:									
Need for specialized or intensive equipment Description:									
Description.									
Architecture and geography of the unit such as placement of Description:	patient rooms, treatment areas, n	ursing stations, medication preparation areas,	and equipment						
ess grow.									
_									
Other Description:									
24/7 call team									



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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 aculty, 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:	Pre-Admission Clinic (10003-1502)							
Unit/ Clinic Type:	Outpatient Services							
Unit/ Clinic Address:	3900 Capital Mall Drive SW, Olympia, WA 98502							
Effective as of:	1-Jul-25							
Day of the week								
Day of the week	Shift Type	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's		
Manufact Californ	0800-1830	10	2	0	0	0		
Monday-Friday	0900-1730	8	0	0	1	0		

Additional Care Team Members Shift Coverage Occupation None Day Evening Weekend Factors Considered in the Development of the Unit Staffing Plan (Check all that apply): Activity such as patient admissions, discharges, and transfers $\label{patient} \textbf{Patient acuity level, intensity of care needs, and the type of care to be delivered on each shift}$ The PAC nurse(s) provide oversight of patient care in the pre-anesthesia clinic. The goal is every pre-scheduled surgery patient, and GI/SPU outpatients requiring an Anesthesiologisy for their procedure are scheduled for a Pre-Anesthesia appointment as either a clinic visit or telephone interview. Level of experience of nursing and patient care staff Description: 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 Description: Description:

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:	Post Cardiac Catheter Recovery Unit, ADC 3 (10003-1627)							
Unit/ Clinic Type:	Outpatient Services							
Unit/ Clinic Address:	3900 Capital Mall Drive SW, Olympia, WA 98502							
Effective as of:	1-Jul-25							
Day of the week								
Day of the week	Shift Type	Shift Length in Hours	Min#of RN's	Min#of LPN's	Min#of CNA's	Min#of UAP's		
Monday-Friday	Day (0600-1830)	12	1	0	0	0		
	Day (1100-2130)	10	1	0	0	0		

		Unit Information		
	Additional Ca	are Team Members	hift Coverage	
Occupation	Day	Evening	Night	Weekend
None				
Factors Consid	ered in the Development o	of the Unit Staffing Plan (Check all th	hat apply):	
Activity such as patient admissions, discharges, and transfers				
Description: CVAR is responsible for admission and recovery of a variety of outpatient CCL and IR patients.				
or a supposition of admission and records you defined to expect the expectation repaired to				
Patient acuity level, intensity of care needs, and the type of care t				
Patient acuity level, intensity of care needs, and the type of care to Description:	o be delivered on each shift			
Recovery patients range in acuity between Phase II and Recovery Phase.				
Skill miv				
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 p Description:	atient rooms, treatment areas, nui	rsing stations, medication preparation areas, ar	na equipment	
Three double occupancy rooms. Unit is imbedded in PCU with shared med room, supply rooms etc.				
Other				
Description:				
Staffing would be decreased based on operational CVAR rooms for the day along with total procedures sch	eduled.			

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:	Cardiac Cath	Lab / Interve	ntional Rad	iology (100	03-1616)		
Unit/ Clinic Type:	Outpatient Services						
Unit/ Clinic Address:	3900 Ca	pital Mall Driv	e SW, Olyr	npia, WA 9	3502		
Effective as of:	1-Jul-25						
Day of the week							
Day of the week	Shift Type	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's	
Monday-Friday	Day (0630-1700)	10	3	0	0	0	

		Unit Information		
	Additional	Care Team Members		
		S	Shift Coverage	
Occupation CVTTECH	Day 4-6 Techs per Day (M-F)	Evening	Night	Weekend
CVITECH	4-6 Techs per Day (M-F)			
Factors Con	sidered in the Developmen	t of the Unit Staffing Plan (Check all	that apply):	
Activity such as patient admissions, discharges, and transfers				
Description:				
CCL/IR is a procedural unit functioning in 3-4 procedural rooms at any given time. Procedure inpatient units as directed by ordering physician.	lengths vary from 30 minutes to mu	ltiple hours depending on complexity with an av	erage length of 60 minutes. Patients	are recieved from and returned to CVAR, Peri-op and
Patient acuity level, intensity of care needs, and the type of care	to be delivered on each shift			
Description:				
Patient requiring procedural sedation are cared for at a 1:1 ratio by nursing staff in accordance	e with policy.			
☐ Skill mix				
Description:				
Level of experience of nursing and patient care staff Description:				
RN's are trained in Procedural Sedation. All staff are ACLS trained.				
Need for specialized or intensive equipment				
Description:				
Architecture and geography of the unit such as placement of p	atient rooms, treatment areas, nurs	sing stations, medication preparation areas, ar	nd equipment	
Description:				
Other				
Description:				
Staffing would be decreased based on operational cath lab/IR rooms for the day along with total pro- Call team available 24/7	ocedures scheduled.			
Call team available 24/7				

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

Unit/ Clinic Name:	Advanced Wound Care (10003-1795)						
		Advanced Wound Care (10003-1795)					
Unit/ Clinic Type:		Outpatient Services					
Unit/ Clinic Address:	601 Mc	601 McPhee Rd SW Building 2, Olympia, WA 98502					
Effective as of:	1-Jul-25						
		Shift					
		Length in	Min#of	Min#of	Min#of	Min#of	
Day of the week	Shift Type	Hours	RN's	LPN's	CNA's	UAP's	
Monday-Friday	0800-1630	8	1	0	0	1	

Init Information				
	Additi	ional Care Team Members		
			Shift Coverage	
Occupation UAP- Hyperbaric technician when HBO patients are present	Day 1	Evening 0	Night 0	Weekend 0
Factors	Considered in the Develop	oment of the Unit Staffing Plan (Chec	k all that apply):	
Activity such as patient admissions, discharges, and tra				
escription:				
Patient acuity level, intensity of care needs, and the type	e of care to be delivered on each sh	ift		
scription:				
treatment rooms, outpatient services only utpatients with active acute or chronic wounds				
dvanced wound care, may include multilayer compression, total contact casting, deb	ridement, hyperbaric oxygen therap	y and advanced wound care dressings		
Skill mix				
escription:				
rovider run with physician and ARNP coverage. Currently staffed with all RNs, but 50/5	50 RN/LPN model supported. Addition	onal staff include front desk receptionist and Hype	baric Tech.	
Level of experience of nursing and patient care staff				
escription:				
Need for specialized or intensive equipment escription:				
Architecture and geography of the unit such as placen	nent of patient rooms, treatment	areas, nursing stations, medication preparation	areas, and equipment	
escription:				

Dependent on scheduled volumes, maximum of 10 patients per nurse per 8-hour shift.

Description:

Minimum means the minimum number of RNs, LPNs, CNAs, and UAPs per shift based on the average needs of the unit such as patient aculty, 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:		Capital Radiation Therapy (10003-1659)						
Unit/ Clinic Type:		Outpatient Services						
Unit/ Clinic Address:	3920	3920 Capital Mall Drive SW Ste 100B Olympia, WA 98502						
Effective as of:		1-Jul-25						
Day of the week	Shift Type	Shift Length in Hours	Min#of RN's	Min#of LPN's	Min#of CNA's	Min#of UAP's		
Monday-Friday	Dav	0800-1630	0	0	_			

Init Information				
	Additio	onal Care Team Members	Shift Coverage	
Occupation Support Staff/Tech	Day 1	Evening	Night	Weekend
	atom Considered in the Develop		(Charle all that analy).	
	ctors Considered in the Develop	ment of the Unit Starring Plan	спеск ан that apply):	
Activity such as patient admissions, discha	rges, and transfers			
scription: RN does not need to be present for daily radiation treatments. RN	's will see OTV's, triage patients and provide clini	ical support for the MD.		
offing variable based on patient schedule and treatment needs.				
Patient acuity level, intensity of care needs escription:	, and the type of care to be delivered on eac	ch shift		
adiation Therapy Department assists referring physicians by provi	ding clinical assessment and recommend	ations for radiation therapy treatments a	s part of the ongoing management o	f the cancer patient. The clinic offers services primaril
patients with oncologic diagnoses, although occasionally, benig	n conditions may also receive radiotherapy	y, as well as acute, life- threatening man	festations or malformations.	
ommon procedures include simulation and treatment planning, e idiation therapy (SGRT), high dose radiation (HDR) brachytherapy,	xternal beam radiation including various n	nodalities such as intensity modulated r	adiation therapy (IMRT), image guide	d radiation therapy (IGRT), surface guided
diosurgery (SBRT), and robotic stereotactic radiosurgery (SRS). G	eneral support activities include pain and	side effect management and follow up o	are. Nutrition and social work service	es are available.
Skill mix				
escription:				
Level of experience of nursing and patient	care staff			
escription:	cure starr			
Need for specialized as intensiting and	nt			
Need for specialized or intensive equipme escription:	III.			
Architecture and geography of the unit su description:	ich as placement of patient rooms, treatme	ent areas, nursing stations, medication p	eparation areas, and equipment	