Cover Page

The following is the nurse staffing plan for St. Michael Medical Center, submitted to the Washington State Department of Health in accordance with Revised Code of Washington 70.41.420.

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Nurse Staffing Plan Purpose

This plan was developed for the management of scheduling and provision of daily staffing needs for the hospital, and to define a process that ensures the availability of qualified nursing staff to provide safe, reliable and effective care to our patients. This plan applies to all parts of the hospital licensed under RCW 70.41.

Nurse Staffing Plan Principles

- Access to high-quality nursing staff is critical to providing patients safe, reliable and effective care.
- The optimal staffing plan represents a partnership between nursing leadership and direct nursing care staff.
- Staffing is multifaceted and dynamic. The development of the plan must consider a wide range of variables.
- Data and measurable nurse sensitive indicators should help inform the staffing plan.

*These principles correspond to *The American Nursing Association Principles of Safe Staffing.*

Nurse Staffing Plan Policy

- The Nurse Staffing Committee is responsible for the development and oversight of the nurse staffing plan to ensure the availability of qualified nursing staff to provide safe, reliable and effective care to our patients.
- The committee's work is guided by its charter.
- The committee meets on a regular basis as determined by the committee's charter.
- The committee's work is informed by information and data from individual patient care units. Appropriate staffing levels for a patient care unit reflect an analysis of:
    - Individual and aggregate patient needs;
    - Staffing guidelines developed for specific specialty areas;
    - The skills and training of the nursing staff;
    - Resources and supports for nurses;
    - Anticipated absences and need for nursing staff to take meal and rest breaks;
    - Hospital data and outcomes from relevant quality indicators; and
    - Hospital finances.
  *The American Nurses Association does not recommend a specific staffing ratio, but rather to make care assignments based on acuity, patient needs and staff competencies.

- The analysis of the above information is aggregated into the hospital's nurse staffing plan. Each individual patient care unit may use the Nurse Staffing Committee Checklist to guide their work.
- Staff continuously monitor individual and aggregate patient care needs and make adjustments to staffing per agreed upon policy and collective bargaining agreement (if applicable).
- The committee will perform a semiannual review of the staffing plan. If changes are made to the staffing plan throughout the calendar year, an updated staffing plan will be submitted to DOH.
- The hospital is committed to ensuring staff are able to take meal and rest breaks as required by law, or collective bargaining agreement (if applicable). The committee considers breaks and strategies to ensure breaks when developing the plan. A global break policy may be used, or individual patient care units may have discretion in structuring breaks to meet specific needs

while meeting the requirements of the law. Data regarding missed or interrupted breaks will be reviewed by the committee to help develop strategies to ensure nurses are able to take breaks.

Nurse Staffing Plan Scope

*Acute care hospitals licensed under [RCW 70.41](#) are required by law to develop a nurse staffing plan. The plan must cover areas of the hospital that: 1) are under the hospital's license (RCW 70.41) and 2) where a nurse(s) provides patient care (i.e., "patient care unit").

The following areas of the hospital are covered by the nurse staffing plan:

- Exhibit A – Emergency Department/Transitional
- Exhibit B – 2 Orthopedic
- Exhibit C – 3 Medical
- Exhibit D – 4 Medical/Surgical Critical Care
- Exhibit E – 5 Cardiovascular Critical Care
- Exhibit F – 6 Respiratory PCU
- Exhibit G – 7 Oncology Med/Surg
- Exhibit H – 8 Surgical
- Exhibit I – Observation
- Exhibit J – Family Birth Center
- Exhibit K – Medical Imaging
- Exhibit L – Heart and Vascular Center
- Exhibit M– PACU
- Exhibit N – Perioperative
- Exhibit O – Orthopedic Perioperative
- Exhibit P – Orthopedic Pre-Admit, PACU, PREOP

Nurse Staffing Plan Critical Elements

The following represents critical elements about the nurse staffing plan: (List key decisions by the committee, factors listed on page one that resulted in or influenced changes in the final staffing plan, etc.)

Nurse Staffing Plan Matrices

*Matrices are developed as a guide for shift-by-shift unit-based staffing decisions and are adjusted up or down based on patient factors and skill-mix of hospital staff.

Exhibit A – Emergency Department / Transitional					
Projected Pt. Census	**Charge Nurse**	**RN**	**CNA / Techs (as applicable)**	**Health Unit Coordinator (as applicable)**	**Additional Support Staff/Other (as applicable)**
190	(1) 24/7	0700-1500 (1) 0700-1900 (9-10) 0900-2100 (1) 1100-2300 (3) 1300-0100 (2) 1500-0300 (3) 2300-0700 (8-10)	0700-1500 (2) 0700-1900 (4) 1100-2300 (1) 1500-2300 (1) 2300-0700 (1) 1900-0700 (4)	(1) 24/7	Physical Therapy Occupational Therapy Social Work RN Care Manager Respiratory Therapy ED Techs/CNAs for 1:1s

*Matrices are developed as a guide for shift-by-shift unit-based staffing decisions and are adjusted up or down based on patient factors and skill-mix of hospital staff. Matrices for ED patients, see Transition Unit matrix for ED boarders. Note variation by day of week to reflect volume changes by day of week.

Emergency Department
RN Staffing Matrix

	Sun	Mon	Tue	Wed	Thur	Fri	Sat
7a-7p	9	10	10	10	10	10	9
7a-3p	1	1	1	1	1	1	1
9a-9p	1	1	1	1	1	1	1
11a-11p	3	3	3	3	3	3	3
1p-1a	2	2	2	2	2	2	2
3p-3a	3	3	3	3	3	3	3
7p-7a	8	10	11	10	9	8	8

Hour	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23
EDT Shifts																								
0700-1900 HUC								1	1	1	1	1	1	1	1	1	1	1	1					
0700-1900 FT								1	1	1	1	1	1	1	1	1	1	1	1					
0700-1900 Side 1								1	1	1	1	1	1	1	1	1	1	1	1					
0700-1900 Side 2																								
0700-1900 Back Hall								2	2	2	2	2	2	2	2	2	2	2	2					
1100-2300 Triage												1	1	1	1	1	1	1	1	1	1	1	1	
1500-0300 Float/Break	1	1	1													1	1	1	1	1	1	1	1	1
1900-0700 HUC	1	1	1	1	1	1	1													1	1	1	1	1
1900-0700 Side 1	1	1	1	1	1	1	1													1	1	1	1	1
1900-0700 Side 2																								
1900-0700 FT	1	1	1	1	1	1	1													1	1	1	1	1
1900-0700 Back Hall	2	2	2	2	2	2														2	2	2	2	2
Sitters	2	2	2	2	2	2	2	2	2	2	2	3	3	3	3	3	3	3	3	3	3	3	3	2

Transitional Staffing Matrix

# of pts	Shift 1 RN	Shift 1 CNA	Shift 3 RN	Shift 3 CNA
1.000	1	1	1	1
2.000	1	1	1	1
3.000	1	1	1	1
4.000	1	1	1	1
5.000	2	1	2	1
6.000	2	1	2	1
7.000	2	1	2	1
8.000	2	1	2	1
9.000	3	2	3	2
10.000	3	2	3	2
11.000	3	2	3	2
12.000	3	2	3	2
13.000	4	2	4	2
14.000	4	2	4	2
15.000	4	2	4	2
16.000	4	2	4	2
17.000	5	2	5	2
18.000	5	2	5	2
19.000	5	3	5	3
20.000	5	3	5	3
21.000	6	3	6	3
22.000	6	3	6	3
23.000	6	3	6	3
24.000	6	3	6	3
25.000	7	3	7	3
26.000	7	3	7	3
27.000	7	3	7	3
28.000	7	3	7	3
29.000	8	3	8	3

Exhibit B - 2 Orthopedic					
Projected Pt. Census	**Charge Nurse**	**RN**	**CNA/Tech/LPN (as applicable)**	**Health Unit Coordinator (as applicable)**	**Additional Support Staff/Other (as applicable)**
33	1 per 12 hour shift 0700-1930/1900-0730	8 RN 0700-1930 1 ADT (0.5)0900-2130 8 RN 1900-0730	4 CNA 0700-1930 4 CNA 1900-0730	1 HUC 0700-1930	Physical Therapy Occupational Therapy Social Work Respiratory Therapy RN Care Manager SWAT RN RRT Security

*Matrices are developed as a guide for shift-by-shift unit-based staffing decisions and are adjusted up or down based on patient factors and skill-mix of hospital staff.

LABOR NEEDS AT EACH CENSUS, AVERAGE RATIO MIX

	Day Shift						Night Shift			
Census	Mgr/Dir	Charge RN	ADT	RN	CNA	HUC	NSM	Charge RN	RN	CNA
	MGT SUPV	MGT SUPV	OTHER	RN	AID ORDERLY	CLERICAL	MGT SUPV	RN	RN	AID ORDERLY
1	2.00			2.00					2.00	
2	2.00			2.00					2.00	
3	2.00			2.00					2.00	
4	2.00			2.00					2.00	
5	2.00			2.00	-				2.00	
6	2.00	1.00		2.00			1.00		2.00	
7	2.00	1.00		2.00	1.00		1.00		2.00	
8	2.00	1.00		2.00	1.00		1.00		2.00	1.00
9	2.00	1.00		2.00	1.00		1.00		2.00	1.00
10	2.00	1.00		2.00	2.00		1.00		2.00	1.00
11	2.00	1.00		3.00	2.00		1.00		3.00	1.00
12	2.00	1.00		3.00	2.00	-	1.00		3.00	2.00
13	2.00	1.00		3.00	2.00	-	1.00		3.00	2.00
14	2.00	1.00		3.00	2.00	-	1.00		3.00	2.00
15	2.00	1.00		3.00	2.00	-	1.00		3.00	2.00
16	2.00	1.00		4.00	2.00	-	1.00		4.00	2.00
17	2.00	1.00		4.00	2.00	1.00	1.00		4.00	2.00
18	2.00	1.00		4.00	2.00	1.00	1.00		4.00	2.00
19	2.00	1.00	-	4.00	2.00	1.00	1.00		4.00	2.00
20	2.00	1.00		4.00	3.00	1.00	1.00		4.00	2.00
21	2.00	1.00		5.00	3.00	1.00	1.00		5.00	3.00
22	2.00	1.00		5.00	3.00	1.00	1.00		5.00	3.00
23	2.00	1.00		5.00	3.00	1.00	1.00		5.00	3.00
24	2.00	1.00		5.00	3.00	1.00	1.00		5.00	3.00
25	2.00	1.00	0.50	5.00	3.00	1.00	1.00		5.00	3.00
26	2.00	1.00	0.50	6.00	3.00	1.00	1.00		6.00	3.00
27	2.00	1.00	0.50	6.00	3.00	1.00	1.00		6.00	3.00
28	2.00	1.00	0.50	7.00	3.00	1.00	1.00		7.00	3.00
29	2.00	1.00	0.50	7.00	3.00	1.00	1.00		7.00	3.00
30	2.00	1.00	0.50	7.00	4.00	1.00	1.00		7.00	3.00
31	2.00	1.00	0.50	7.00	4.00	1.00	1.00		7.00	4.00
32	2.00	1.00	0.50	7.00	4.00	1.00	1.00		7.00	4.00
33	2.00	1.00	0.50	8.00	4.00	1.00	1.00		8.00	4.00
34	2.00	1.00	0.50	8.00	4.00	1.00	1.00		8.00	4.00

Exhibit C – 3 Medical Unit					
Projected Pt. Census	**Charge Nurse**	**RN**	**CNA/Tech/LPN (as applicable)**	**Health Unit Coordinator (as applicable)**	**Additional Support Staff/Other (as applicable)**
25	1 per 12 hour shift 0700-1930/ 1900-0730	6 RN 0700-1930 6 RN 1900-0730	1 LPN 07-01930 5 CNA 07-1930 4 CNA 1900-0730	1 HUC 0700-1930	Physical Therapy Occupational Therapy Social Work RN Care Manager Respiratory Therapy SWAT RN Code Response RN's Security

*Matrices are developed as a guide for shift-by-shift unit-based staffing decisions and are adjusted up or down based on patient factors and skill-mix of hospital staff.

	0700-1500					1500-1900				
Census	**CN**	**RN**	**LPN**	**CNA**	**HUC**	**CN**	**RN**	**LPN**	**CNA**	**HUC**
26	1	6	1	5	1	1	6	1	5	1
25	1	6	1	5	1	1	6	1	5	1
24	1	6	1	5	1	1	6	1	5	1
23	1	6	1	5	1	1	6	1	5	1
22	1	5	1	5	1	1	5	1	5	1
21	1	5	1	4	1	1	5	1	4	1
20	1	5	1	4	1	1	5	1	4	1
19	1	4	1	4	1	1	4	1	4	1
18	1	4	1	4	1	1	4	1	4	1
17	1	4	1	4	1	1	4	1	4	1
16	1	4	1	4	1	1	4	1	4	1
15	1	4		4	1	1	4		4	1
14	1	4		3	1	1	4		3	1
13	1	3		3	1	1	3		3	1
12	1	3		3	1	1	3		3	1
11	1	3		3	1	1	3		3	1
10	1	3		3		1	3		3	
9	1	2		3		1	2		3	
8	1	2		2		1	2		2	
7	1	2		2		1	2		2	
6	1	2		1		1	2		1	
5	1	1		1		1	1		1	
4	1	1		1		1	1		1	
3	1	1				1	1			
2	1	1				1	1			
1	1	1				1	1			

Exhibit D - 4 Medical/Surgical Critical Care Unit					
Projected Pt. Census	**Charge Nurse**	**RN**	**CNA / HUC (as applicable)**	**Health Unit Coordinator (as applicable)**	**Additional Support Staff/Other (as applicable)**
16	1 for every 12 hours/ 07-1930, 1900-0730	9 RN 07-1930 (4 ICU/ 5 PCU)/ 8 RN 1900-0730 (4 ICU/ 4 PCU)	4 CNA 07-1930 3 CNA 1900-0730	NA (Using Care Assistants)	Physical Therapy Occupational Therapy Social Work RN Care Manager Respiratory Therapy

*Matrices are developed as a guide for shift-by-shift unit-based staffing decisions and are adjusted up or down based on patient factors and skill-mix of hospital staff.

The Fourth floor in Silverdale will be a Critical Care department which will consist of both ICU and PCU level of care patients. The following is a brief description of the types of patients but not limited to: critically ill patients who require life support for organ failure, intensive monitoring, and therapies only provided in the critical care environment such as: acute respiratory failure requiring mechanical ventilation or high level noninvasive positive pressure ventilation, continuous renal replacement therapies, invasive hemodynamic monitoring to direct aggressive hemodynamic interventions, patients in vasopressor dependent shock with hemodynamic instability, severe metabolic disturbances, in severe DKA, drug ingestion and drug overdose requiring frequent neurologic, pulmonary or cardiac monitoring, GI bleeding with hypotension unresponsive to fluid therapy, ETOH withdrawal needing close pulmonary and or cardiac monitoring, and other situations requiring critical care. As the patients become more stable, their level of care will transition to a PCU level of care while remaining on the 4th floor.

	A	B	C	D	E
	Variable Support Staff - Making It Productive				
HPUOS	16.3				
ICU Patients	9				
PCU Patients	14				
Total Census	23				
Dayshift			Nightshift		
Charge RN	1		Charge RN	1	
Resource RN			Resource RN		
1:1 RNs	1		1:1 RNs	1	
ICU RNs	4		ICU RNs	4	
PCU RNs	5		PCU RNs	4	
Totals RNs	11		Totals RNs	10	
HUC	1			0	
CNAs	4			3	
		(CNAs would include all sitters too)			
Target Hours	374.9				
Total Hours	364	16 Hours of Manager time added.			
Productivity	102.99%				
Hours Calc	280				
Hours Avail	94.9				
CNAs Avail	7				

USE THIS FOR PRODUCTIVITY NUMBERS - only change numbers in green boxes - DO NOT TOUCH THE OTHER NUMBERS

Exhibit E – 5 Cardiovascular Critical Care					
Projected Pt. Census	**Charge Nurse**	**RN**	**CNA / HUC (as applicable)**	**Health Unit Coordinator (as applicable)**	**Additional Support Staff/Other (as applicable)**
22	1 for every 12 hours/ 07-1930, 1900-0730	11 RN 07-1930 11 RN 1900-0730	3 CNA 07-1930 3 CNA 1900-0730	NA (Using Care Assistants)	Physical Therapy Occupational Therapy Social Work RN Care Manager Respiratory Therapy

Cardiovascular specialty adult intensive care unit (CVICU). Patient population include but are not limited to: out-of-hospital cardiopulmonary arrest, post cardiothoracic surgery, Percutaneous Coronary Intervention, and Transcatheter Aortic Valve Replacement. Routine interventions include advanced hemodynamic monitoring, induced hypothermia therapy, procedural sedation, invasive mechanical ventilation, continuous renal replacement therapy, titration of vasoactive medications, post cardiac surgery care, close monitoring of septic shock and coronary arrest, intra-aortic balloon pump therapy. The CVICU will provide both PCU and ICU level of care.

*Matrices are developed as a guide for shift-by-shift unit-based staffing decisions and are adjusted up or down based on patient factors and skill-mix of hospital staff.

	A	B	C	D	E
		Variable Support Staff - Making It Productive			
HPUOS	16.3				
ICU Patients	9				
PCU Patients	14				
Total Census	23				
	Dayshift			Nightshift	
Charge RN	1		Charge RN	1	
Resource RN			Resource RN		
1:1 RNs	1		1:1 RNs	1	
ICU RNs	4		ICU RNs	4	
PCU RNs	5		PCU RNs	4	
Totals RNs	11		Totals RNs	10	
HUC	1			0	
CNAs	4			3	
		(CNAs would include all sitters too)			
Target Hours	374.9				
Total Hours	364	16 Hours of Manager time added.			
Productivity	102.99%				
Hours Calc	280				
Hours Avail	94.9				
CNAs Avail	7				
	USE THIS FOR PRODUCTIVITY NUMBERS - only change numbers in green boxes - DO NOT TOUCH THE OTHER NUMBERS				

Exhibit F – 6 PCU					
Projected Pt. Census	**Charge Nurse**	**RN**	**CNA / Techs (as applicable)**	**Health Unit Coordinator (as applicable)**	**Additional Support Staff/Other (as applicable)**
31	**1 for every 12 hours/ 07-1930, 1900-0730**	**10** RN 07-1930 **8** RN 1900-0730 **1 RN resource 0700-1930/ 1900-0730**	**4 CNA 07-1930 3 CNA 19-0730**	**1 HUC 07-1930**	Physical Therapy Occupational Therapy Social Work RN Case Manager Respiratory Therapy

The 6ᵗʰ Floor is a Critical Care department which consists of both PCU and Medical level of care patients. Patient population includes, but not is limited to: Stroke, TIA, NSTEMI, STEMI, pre/post PCI, pacemaker insertion, Afib/flutter, CAPD, DKA, GI bleed, Telemetry, Respiratory, Renal, Vascular, post-op

*Matrices are developed as a guide for shift-by-shift unit-based staffing decisions and are adjusted up or down based on patient factors and skill-mix of hospital staff.

	PCU 6 Grid								
	Day Shift					**Night Shift**			
Census	**CN**	**Res/Break**	**RN**	**CNA**	**HUC**	**CN**	**Res/Break**	**RN**	**CNA**
8	1	-	2	-	-	1		2	-
9	1	-	3	-	-	1		2	1
10	1	-	3	1	-	1		2	1
11	1	-	3	1	-	1		3	1
12	1	-	4	1	-	1		3	1
13	1	-	4	2	1	1		3	1
14	1	-	4	2	1	1		3	2
15	1	-	5	2	1	1		3	2
16	1	-	5	2	1	1		4	2
17	1		5	2	1	1		4	2
18	1		6	2	1	1		4	2
19	1		6	2	1	1		4	2
20	1		6	2	1	1		4	2
21	1		7	2	1	1		5	2
22	1		7	2	1	1		5	2
23	1		7	2	1	1		5	2
24	1		8	3	1	1		6	2
25	1		8	3	1	1		6	3
26	1	1.0	8	3	1	1	1.0	6	3
27	1	1.0	9	3	1	1	1.0	7	3
28	1	1.0	9	3	1	1	1.0	7	3
29	1	1.0	9	4	1	1	1.0	7	3
30	1	1.0	10	4	1	1	1.0	8	3
31	1	1.0	10	4	1	1	1.0	8	3

Exhibit G –7 Oncology Medical/Surgical Unit					
Projected Pt. Census	**Charge Nurse**	**RN**	**CNA/Techs /LPN (as applicable)**	**Health Unit Coordinator (as applicable)**	**Additional Support Staff/Other (as applicable)**
30	1 for every 12 hours 0700-1930, 1900-0730	8 RN for 0700-1930 8 RN for 1900-0730	4 CNA 0700-1930 4 CNA for 1900-0730	1 HUC 0700-1930	Physical Therapy Occupational Therapy Social Work RN Care Manager Respiratory Therapy
*Matrices are developed as a guide for shift-by-shift unit-based staffing decisions and are adjusted up or down based on patient factors and skill-mix of hospital staff.					

LABOR NEEDS AT EACH CENSUS, AVERAGE RATIO MIX

		Day Shift									Night Shift						
Mgr/Dir MGT SUPV	Charge RN	Rest/Break RN	Other OTHER	RN RN	CNA AID ORDERLY	Safety Sitter CLERICAL	HUC CLERICAL	Other OTHER	Charge RN	Rest/Break RN	CH SPECIALI	RN RN	CNA AID ORDERLY	MT CLERICAL	Clerk CLERICAL	Other OTHER
2.00	1.00			2.00	1.00				1.00			2.00	1.00			
2.00	1.00			2.00	1.00				1.00			2.00	1.00			
2.00	1.00			2.00	1.00				1.00			2.00	1.00			
2.00	1.00			2.00	1.00				1.00			2.00	1.00			
2.00	1.00			2.00	1.00				1.00			2.00	1.00			
2.00	1.00			2.00	1.00				1.00			2.00	1.00			
2.00	1.00			2.00	1.00				1.00			2.00	1.00			
2.00	1.00			2.00	1.00				1.00			2.00	1.00			
2.00	1.00			3.00	1.00				1.00			3.00	1.00			
2.00	1.00			3.00	2.00				1.00			3.00	2.00			
2.00	1.00			3.00	2.00				1.00			3.00	2.00			
2.00	1.00			3.00	2.00				1.00			3.00	2.00			
2.00	1.00			4.00	2.00				1.00			4.00	2.00			
2.00	1.00			4.00	2.00		1.00		1.00			4.00	2.00			
2.00	1.00			4.00	2.00		1.00		1.00			4.00	2.00			
2.00	1.00			4.00	2.00		1.00		1.00			4.00	2.00			
2.00	1.00			4.00	2.00		1.00		1.00			4.00	2.00			
2.00	1.00			4.00	3.00		1.00		1.00			4.00	2.00			
2.00	1.00			5.00	3.00		1.00		1.00			5.00	3.00			
2.00	1.00			5.00	3.00		1.00		1.00			5.00	3.00			
2.00	1.00			5.00	3.00		1.00		1.00			5.00	3.00			
2.00	1.00			6.00	3.00		1.00		1.00			6.00	3.00			
2.00	1.00			6.00	3.00		1.00		1.00			6.00	3.00			
2.00	1.00			6.00	3.00		1.00		1.00			6.00	3.00			
2.00	1.00			7.00	3.00		1.00		1.00			7.00	3.00			
2.00	1.00			7.00	4.00		1.00		1.00			7.00	3.00			
2.00	1.00			8.00	4.00		1.00		1.00			8.00	4.00			
2.00	1.00			8.00	4.00		1.00		1.00			8.00	4.00			
2.00	1.00			8.00	4.00		1.00		1.00			8.00	4.00			
2.00	1.00			8.00	4.00		1.00		1.00			8.00	4.00			

Exhibit H –8 Surgical Unit					
Projected Pt. Census	**Charge Nurse**	**RN**	**CNA/Techs /LPN (as applicable)**	**Health Unit Coordinator (as applicable)**	**Additional Support Staff/Other (as applicable)**
31	1 for every 12 hours 0600-1830, 1800-0630	7 RN for 0700-1930 7 RN for 1900-0730 Cross shift RN 0900-2130 (Monday-Friday)	4 CNAs for every 12 hours/ 0700-1930, 1900-0730. LPN 1100-2330	1 Health Unit Coordinator/ 0700-1930	Physical Therapy Occupational Therapy Social Work RN Care Manager Respiratory Therapy

*Matrices are developed as a guide for shift-by-shift unit-based staffing decisions and are adjusted up or down based on patient factors and skill-mix of hospital staff.

LABOR NEEDS AT EACH CENSUS, AVERAGE RATIO MIX

	Census by Ratio					Day Shift						Night Shift			
Census	1:1	1:2	1:3	1:4	1:5	Mgr/ANM	CN	Cross Shift	HUC	RN	CNA	CN	RN	CNA	LPN
1	-	-	-	-	1.0	2.00				2.00			2.00		
2	-	-	-	-	2.0	2.00				2.00			2.00		
3	-	-	-	-	3.0	2.00				2.00			2.00		
4	-	-	-	-	4.0	2.00				2.00			2.00		
5	-	-	-	-	5.0	2.00				2.00			2.00		
6	-	-	-	-	6.0	2.00				2.00			2.00		
7	-	-	-	-	7.0	2.00				2.00			2.00		
8	-	-	-	-	8.0	2.00				2.00			2.00		
9	-	-	-	-	9.0	2.00				2.00			2.00		
10	-	-	-	-	10.0	2.00				2.00			2.00		
11	-	-	-	-	11.0	2.00				3.00			3.00		
12	-	-	-	-	12.0	2.00				3.00			3.00		
13	-	-	-	-	13.0	2.00				3.00	1.00		3.00	1.00	
14	-	-	-	-	14.0	2.00				3.00	1.00		3.00	1.00	
15	-	-	-	-	15.0	2.00				3.00	1.00		3.00	1.00	
16	-	-	-	-	16.0	2.00				4.00	2.00		4.00	2.00	
17	-	-	-	-	17.0	2.00				4.00	2.00		4.00	2.00	
18				-	18.0	2.00				4.00	2.00		4.00	2.00	
19	-	-	-	-	19.0	2.00	1.00			4.00	2.00	1.00	4.00	2.00	
20	-	-	-	-	20.0	2.00	1.00			4.00	3.00	1.00	4.00	2.00	
21	-	-	-	-	21.0	2.00	1.00			5.00	3.00	1.00	5.00	2.00	
22	-	-	-	-	22.0	2.00	1.00		0.67	5.00	3.00	1.00	5.00	2.00	
23	-	-	-	-	23.0	2.00	1.00		0.67	5.00	3.00	1.00	5.00	2.00	
24	-	-	-	-	24.0	2.00	1.00	0.70	1.00	5.00	3.00	1.00	5.00	3.00	
25	-	-	-	-	25.0	2.00	1.00	0.70	1.00	5.00	3.00	1.00	5.00	3.00	
26	-	-	-	-	26.0	2.00	1.00	0.70	1.00	6.00	3.00	1.00	6.00	3.00	
27	-	-	-	-	27.0	2.00	1.00	0.70	1.00	6.00	3.00	1.00	6.00	3.00	0.70
28	-	-	-	-	28.0	2.00	1.00	0.70	1.00	6.00	4.00	1.00	6.00	3.00	0.70
29	-	-	-	-	29.0	2.00	1.00	0.70	1.00	6.00	4.00	1.00	6.00	3.00	0.70
30	-	-	-	-	30.0	2.00	1.00	0.70	1.00	6.00	4.00	1.00	6.00	3.00	0.70
31	-	-	-	-	31.0	2.00	1.00	0.70	1.00	7.00	4.00	1.00	7.00	3.00	0.70
32	-	-	-	-	32.0	2.00	1.00	0.70	1.00	7.00	4.00	1.00	7.00	4.00	0.70

Exhibit I – Observation Unit					
Projected Pt. Census	**Charge Nurse**	**RN**	**CNA/Techs /LPN (as applicable)**	**Health Unit Coordinator (as applicable)**	**Additional Support Staff/Other (as applicable)**
11	1 for every 12 hours 0700-1930, 1900-0730	3 RN 0700-1930/ 3 RN 0700-1930	1 CNA 0700-1930/ 1 CNA 0700-1930	N/A	Physical Therapy Occupational Therapy Social Work RN Care Manager Respiratory Therapy

*Matrices are developed as a guide for shift-by-shift unit-based staffing decisions and are adjusted up or down based on patient factors and skill-mix of hospital staff.

OBSERVATION UNIT Grid - Updated 12/13/2021								
	Day Shift				**Night Shift**			
Census	CN	Res/Break	RN	HUC/CNA	CN	Res/Break	RN	CNA
1	1	-	1	-	1	-	1	-
2	1	-	1	-	1	-	1	-
3	1	-	1	-	1	-	1	-
4	1	-	1	-	1	-	1	-
5	1	-	1	1	1	-	1	1
6	1	-	2	1	1	-	2	1
7	1	-	2	1	1	-	2	1
8	1	-	2	1	1	-	2	1
9	1	-	3	1	1	-	3	1
10	1	-	3	1	1	-	3	1
11	1	-	3	1	1	-	3	1
12	1	-	3	1	1	-	3	1
13	1	-	3	1	1	-	3	1
	* charge doesnt take PT Load except at 5, 9, and 13 patients	*Charge is this role also		*HUC/CNA required at the point the Charge has a patient load and higher census.				

Exhibit J - Family Birth Center						
Projected Pt. Census	**Charge Nurse**	**RN**	**LPN**	**CNA / Techs (as applicable)**	**Health Unit Coordinator (as applicable)**	**Additional Support Staff/Other (as applicable)**
27	1 for every 12 hours/ 07-1930, 1900-0730 and 1 resource nurse for the Special Care Nursery	RNs = Budgeted FTE's to cover and flex per census/acuity; 14 on nights and 15 on dayshift (core staffing; charge, triage and 12 RN's)

Monday through Friday there is an additional 12 hour shift for procedural support from 0400-1630. | 1 LPN 11am-11pm, 3 days per week | 24 hours a day, 7 days a week there is one HUC/CNA for the Family Birthing Center | 24 hours a day, 7 days a week there is one HUC/CNA for the Family Birth Center -24 hours a day, 7 days a week there is one surgical tech scheduled. | Social Work RN Care Manager Respiratory Therapy Lactation Specialist |

*Matrices are developed as a guide for shift-by-shift unit-based staffing decisions and are adjusted up or down based on patient factors and skill-mix of hospital staff.

*Women and Infant Staffing tool (WIPS) is utilized as a guide for shift-by-shift unit-based staffing decisions and is adjusted up or down based on patient acuity and skill-mix of hospital staff.

Exhibit K - Medical Imaging					
Projected Pt. Census	**Charge Nurse**	**RN**	**CNA / Techs (as applicable)**	**Health Unit Coordinator (as applicable)**	**Additional Support Staff/Other (as applicable)**
Average Daily census 9 patients	1 Lead RN 0630-1500/Mon-Wed	3 RN Monday through Friday 0700-1630	NA	NA	Respiratory Therapy
*Matrices are developed as a guide for shift-by-shift unit-based staffing decisions and are adjusted up or down based on patient factors and skill-mix of hospital staff. N/A					

Exhibit L - Heart and Vascular Center					
Projected Pt. Census	**Charge Nurse**	**RN**	**CNA / Techs (as applicable)**	**Health Unit Coordinator (as applicable)**	**Additional Support Staff/Other (as applicable)**
20-30 procedures a day	1 Leads daily	6-8 RN staggered shifts to cover procedure schedule	1/CNA/HUC		Respiratory Therapy

Hourly staffing determined based on acuity of patients.
Radial Lounge and post procedural 1:3
Procedural 1:1

*Matrices are developed as a guide for shift-by-shift unit-based staffing decisions and are adjusted up or down based on patient factors and skill-mix of hospital staff.

- # of Unit Leadership team/support: Manager_1___ ANM__.5__ Educator__.5__ Admin Asst.__0_ WIN helper_0__ Other __0___
- # of Nurses: 16 in HVCU (+7 cross trained floats/per diems),10 in HVC Cath Lab (+5 cross trained floats/perdiems) Daily need: 16 HVCU & 7-8 HVC
- # of Techs: 14 (+3 PD) in HVC Cath Lab (CVTs) Daily need: 12-14
- # of HUCs: 2 in HVCU (HUC) Daily need: 1
- # of Traveler/Agency staff: 1 CVT tech now, many open positions
- Staff turnover/orientation costs: Loss of 7 RN(3RN,1PRD,3 TVR) and 1 CVT in HVC Cath Lab, 3 RN (2RN,1TVR) in HVCU since 1/2022. Gained 5 RN and 2CVT in HVC and 3 HVCU RN.
- Minimal losses over the move/last quarter, addition of new staff to open FTE.
- Overtime costs / end of shift overtime: FYTD Average per PP 97.44hrs OT not including CallBacks

	Minimum/5 labs	Normal/5 labs	Current	Goal/6 labs+radial lounge
CVT	10	12	11	14
HVC RN	5	6	7	8
HVCU RN	13	16	14	18

OPEN positions	
CVT	3
HVC RN	1
HVCU RN	5

Exhibit M - PACU					
Projected Pt. Census	**Charge Nurse**	**RN**	**CNA / Techs (as applicable)**	**Health Unit Coordinator (as applicable)**	**Additional Support Staff/Other (as applicable)**
Budget Metric: Hours/ UOS: Budget: 2.5485	2x 05-1730	See below chart	See below chart	See below chart	Respiratory Therapy
Average Ambulatory Surgery Prep/Recovery Visits: Budget: 860 Actual: 1000					

*Matrices are developed as a guide for shift-by-shift unit-based staffing decisions and are adjusted up or down based on patient factors and skill-mix of hospital staff.

Daily Staffing				
active ORs	Preop	PACU	Charge RN	HUC/NAC
7 OR's	6	9	2	1
8 OR's	7	10	2	1
9 OR's	8	11	2	1

Call Staffing			
Weekday	1700-0800	Preop	1 RN
Weekday	2100-0800	PACU	2 RN
Weekend	0600-1800	Preop	2 RN
Weekend	0600-1800	PACU	2 RN
Weekend	1800-0600	Preop	1 RN
Weekend	1800-0600	PACU	2 RN

Description	Monday	Tuesday	Wednesday	Thursday	Friday
Day Shift					
Main SADU 0500-1530	10	10	10	10	10
Main SADU Chg RN 0530-1600	10	10	10	10	10
Main SADU RN 0530-1400 or 160	18	18	18	18	18
Main SADU RN 0730-1800	10	10	10	10	10
Main SADU RN 1100-1930	8	8	8	8	8
Main SADU CA/HUC 0430-1700	12	12	12	12	12
Main PACU RN 0600-1630	10	10	10	10	10
Main PACU RN 0800-1830	10	10	10	10	10
Main PACU Chg RN 0900-1930	10	10	10	10	10
Main/Specials PACU RN 0900-18	10	10	10	10	10
Main PACU RN 1000-2030	10	10	10	10	10
Main PACU RN 1100-2130	20	20	20	20	20
Main PACU CA/HUC 0000-2130	12	12	12	12	12
Specials Pre-op RN 0500-1330	8	8	8	8	8
Specials Pre-op RN 0530-1600	10	10	10	10	10
Specials Pre-op RN 0800-1430	8	8	8	8	8
Specials Charge RN 0700-1530	8	8	8	8	8
Special PACU RN 0800-1830	20	20	20	20	20
Special/Main PACU RN 1000-203	10	10	10	10	10
Specials CA/HUC 0530-1600	10	10	10	10	10

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Exhibit N - Perioperative					
Projected Pt. Census	**Charge Nurse**	**RN**	**CNA / Techs (as applicable)**	**Health Unit Coordinator (as applicable)**	**Additional Support Staff/Other (as applicable)**
Average Case Hours/PPD Actual: 472	Charge RN = 4 hours depend on cases	Total of 22 FTEs schedule depends on case load.	Surgical techs = 16 FTE schedule depends on case load	N/A	
Budget Metric: Worked hours/OR Case Hours Budget: 7.1110		Core Staffing is matched to Surgeon Blocks and Add-on Averages. CV and Robotic ORs: 2 RNs, 1 ST/RN, 0.5 LPN All other ORs: 1 RN, 1 ST/RN and 0.25 LPN 0630-1500 Monday and Friday: 3 CV, 2 Robotic, 6 General ORs 18 RN, 1 CN, 13 ST, 4 LPN 0630-1500 Tues, Wed and Thurs: 4 CV, 2 Robotic, 7 General ORs 21 RN, 1 CN, 13 ST 4 LPN 1500-1900 Monday-Friday 1 CV, 1 Robotic and 2 General ORs 6 RN, 4 ST, 1 LPN Call Teams 1900-0630 and Sat/Sun/Holidays: CV, General- 2 teams 4 RN, 2 ST, 1 LPN			
		Every OR case needs a minimum of one RN and one ST/RN. No cases can be done unless this minimum staffing is available. AORN requires one RN per OR patient minimum.			

*Matrices are developed as a guide for shift-by-shift unit-based staffing decisions and are adjusted up or down based on patient factors and skill-mix of hospital staff.

N/A

Exhibit O - Orthopedic Perioperative					
Projected Pt. Census	**Charge Nurse**	**RN**	**CNA / Techs (as applicable)**	**Health Unit Coordinator (as applicable)**	**Additional Support Staff/Other (as applicable)**
16	1 Charge 8 hours	Minimum staffing per OR room: 1 RN or 2 RN and 2 Techs depending on case	1 Tech Or 2 techs depending on case	N/A	
		Each additional room then requires extra ancillary staff and support for the desk			

*Matrices are developed as a guide for shift-by-shift unit-based staffing decisions and are adjusted up or down based on patient factors and skill-mix of hospital staff.

	Shift 1																			
Job Profile	MGR	RN	RN	RN	RN	RN	RN	RN	RN	RN	RN	TECH	TECH	TECH	TECH	TECH	TECH	TECH	SPEC	COOR
Postion Note	MGR	Charge RN	Charge RN	RN	RN Cert	RN Cert	RN	RN	RN	RN Cert	RN	Periop Tech	Periop Tech	Periop Tech	Surg Tech Cert	Surg Tech Lead	Surg Tech Lead Cert	Surg Tech	Inst Invento ry	Care Asst Coor
Replace	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Days	5	3	2	1	3	4	4	3	4	4	4	5	5	5	4	4	4	3	5	4
Start Time	08:00	06:30	06:30	06:30	06:30	06:30	06:30	06:30	06:30	06:30	06:30	06:00	07:00	08:00	06:30	06:30	06:30	06:30	09:00	06:00
Shift Hours	8	8	10	10	10	10	10	10	10	10	10	8	8	8	10	8	8	10	8	10
13.200	0.5	0	1	1	1	1	1	1	0	1	1	1	1	1	4	1	0	1	1	0
15.360	0.5	0	1	1	1	1	1	1	0	1	1	1	1	1	4	1	0	1	1	0
17.520	0.5	0	1	1	1	1	1	1	0	1	1	1	1	1	4	1	0	1	1	0

Exhibit P - Orthopedic Pre-Admit, PACU, Preoperative					
Projected Pt. Census	**Charge Nurse**	**RN**	**CNA / Techs (as applicable)**	**Health Unit Coordinator (as applicable)**	**Additional Support Staff/Other (as applicable)**
23	1 charge daily for 8 hour shift	Please see chart below	See chart below	See chart below	
***Matrices are developed as a guide for shift-by-shift unit-based staffing decisions and are adjusted up or down based on patient factors and skill-mix of hospital staff.**					

Daily Staffing

Active OR rooms	Pre-op	PACU	CNA/HUC	LPN	Total staff	
1 OR	1	1			2	
2 OR	2	2	1	1	6	
3 OR	3	3	1	1	8	
4 OR	4	4	1	1	10	
5 OR	5	5	1	1	12	
					4	Pre Admit minimum staffing is 1 RN
Pre-Admit clinic	2 RN's		2 HUC/MA			1 HUC

Week day Call	2	
Week end	2	
Week end call using Silverdale RN as the Second.	1	