

**DAILY PATIENT CARE STAFFING REPORT
FOR
11/8/2023**

(Date)

NOTICE TO CONSUMER

Chapter 155 of Laws of 2021 requires every New York hospital to establish a clinical staffing committee charged with leading the hospital's development of an annual multidisciplinary staffing plan. The law also requires hospitals to post daily clinical staffing on each unit.

Name of Hospital	Jones Memorial Hospital
Name of Unit	Ambulatory Surgery Unit
Patient Census	13

Unit Type (check only one)

- | | | |
|--------------------------------------------------------|-----------------------------------------------------|---------------------------------------------|
| <input checked="" type="checkbox"/> Ambulatory Surgery | <input type="checkbox"/> Infusion Services | <input type="checkbox"/> Outpatient Clinics |
| <input type="checkbox"/> Burn | <input type="checkbox"/> Intensive Care | <input type="checkbox"/> Pediatric |
| <input type="checkbox"/> Cardiac Catheterization/EP | <input type="checkbox"/> Lithotripsy | <input type="checkbox"/> Psychiatry |
| <input type="checkbox"/> Cardiovascular | <input type="checkbox"/> Magnetic Resonance Imaging | <input type="checkbox"/> Pulmonary |
| <input type="checkbox"/> Chemical Dependency | <input type="checkbox"/> Medical/Surgical | <input type="checkbox"/> Rehabilitation |
| <input type="checkbox"/> Critical Care | <input type="checkbox"/> Mental Health Services O/P | <input type="checkbox"/> Renal |
| <input type="checkbox"/> Dental O/P | <input type="checkbox"/> Neonatal | <input type="checkbox"/> Short Stay |
| <input type="checkbox"/> Dialysis - Acute | <input type="checkbox"/> Neurology | <input type="checkbox"/> Stepdown |
| <input type="checkbox"/> Dialysis - O/P | <input type="checkbox"/> Nuclear Medicine/Radiology | <input type="checkbox"/> Telemetry |
| <input type="checkbox"/> Emergency Department | <input type="checkbox"/> Obstetrics/Gynecology | <input type="checkbox"/> Transplant |
| <input type="checkbox"/> Endoscopy | <input type="checkbox"/> Oncology | <input type="checkbox"/> Other |
| <input type="checkbox"/> Geriatric | <input type="checkbox"/> Orthopedics | |

	Staff	Number
	DAY	Registered professional nurses
Licensed practical nurses		0
Ancillary members of the frontline team		0
Unlicensed assistive personnel		0
Additional resources		0
	Staff	Number
	EVENING	Registered professional nurses
Licensed practical nurses		0
Ancillary members of the frontline team		0
Unlicensed assistive personnel		0
Additional resources		0
	Staff	Number
	NIGHTS	Registered professional nurses
Licensed practical nurses		0
Ancillary members of the frontline team		0
Unlicensed assistive personnel		0
Additional resources		0

Description of methods used to determine and adjust patient care staffing levels:

Staffing Plan for Day Shift

In this section should only reflect measurements for the day shift. (For example 7:00AM-3:00PM)

Name of Clinical Unit: ASU	
Description of Services being provided: Pre & Post Surgical	
Planned average number of RNs on unit providing direct patient care: 4	Planned total hours of LPNs care per patient per day-on-day shift: 0
Planned total hours of RN nursing care per patient: 3.5	Planned average number of LPNs on the unit providing patient care per day on the day shift? 0
Planned average number of patients on the floor which the RN on the unit will provide direct patient care per day-on-day shift? 12	Planned average number of ancillary members of the frontline team including adjustment for case mix and acuity on the day shift? 0
Planned average number of patients on the unit per day-on-day shift? 12	Planned average number of unlicensed personals (PCTs) on the unit providing direct patient care per day on the Day Shift? 0

**DAILY PATIENT CARE STAFFING REPORT
FOR
11/3/2023**

(Date)

NOTICE TO CONSUMER

Chapter 155 of Laws of 2021 requires every New York hospital to establish a clinical staffing committee charged with leading the hospital's development of an annual multidisciplinary staffing plan. The law also requires hospitals to post daily clinical staffing on each unit.

Name of Hospital	Jones Memorial Hospital
Name of Unit	Emergency Department
Patient Census	13,500/year

Unit Type (check only one)

- | | | |
|----------------------------------------------------------|-----------------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Ambulatory Surgery | <input type="checkbox"/> Infusion Services | <input type="checkbox"/> Outpatient Clinics |
| <input type="checkbox"/> Burn | <input type="checkbox"/> Intensive Care | <input type="checkbox"/> Pediatric |
| <input type="checkbox"/> Cardiac Catheterization/EP | <input type="checkbox"/> Lithotripsy | <input type="checkbox"/> Psychiatry |
| <input type="checkbox"/> Cardiovascular | <input type="checkbox"/> Magnetic Resonance Imaging | <input type="checkbox"/> Pulmonary |
| <input type="checkbox"/> Chemical Dependency | <input type="checkbox"/> Medical/Surgical | <input type="checkbox"/> Rehabilitation |
| <input type="checkbox"/> Critical Care | <input type="checkbox"/> Mental Health Services O/P | <input type="checkbox"/> Renal |
| <input type="checkbox"/> Dental O/P | <input type="checkbox"/> Neonatal | <input type="checkbox"/> Short Stay |
| <input type="checkbox"/> Dialysis - Acute | <input type="checkbox"/> Neurology | <input type="checkbox"/> Stepdown |
| <input type="checkbox"/> Dialysis - O/P | <input type="checkbox"/> Nuclear Medicine/Radiology | <input type="checkbox"/> Telemetry |
| <input checked="" type="checkbox"/> Emergency Department | <input type="checkbox"/> Obstetrics/Gynecology | <input type="checkbox"/> Transplant |
| <input type="checkbox"/> Endoscopy | <input type="checkbox"/> Oncology | <input type="checkbox"/> Other |
| <input type="checkbox"/> Geriatric | <input type="checkbox"/> Orthopedics | |

	DAY	
	Staff	Number
	Registered professional nurses	2.5
	Licensed practical nurses	0
	Ancillary members of the frontline team	1
	Unlicensed assistive personnel	0-5
	Additional resources	0
	EVENING	
	Staff	Number
	Registered professional nurses	3
	Licensed practical nurses	0
	Ancillary members of the frontline team	1
	Unlicensed assistive personnel	0-1
	Additional resources	0
	NIGHTS	
	Staff	Number
	Registered professional nurses	2
	Licensed practical nurses	0
	Ancillary members of the frontline team	1
	Unlicensed assistive personnel	0
	Additional resources	0

Description of methods used to determine and adjust patient care staffing levels:

We do not decrease staffing according to census, but will increase staffing if needed by utilizing Myself or the nursing supervisor.

Staffing Plan for Day Shift

In this section should only reflect measurements for the day shift. (For example 7:00AM-3:00PM)

Name of Clinical Unit: ER 7a-3p

Description of Services being provided: Emergency care to the community and surrounding areas

Planned average number of RNs on unit providing direct patient care: 2.5

Planned total hours of LPNs care per patient per day-on-day shift: 0

Planned total hours of RN nursing care per patient: 2.1

Planned average number of LPNs on the unit providing patient care per day on the day shift? 0

Planned average number of patients on the floor which the RN on the unit will provide direct patient care per day-on-day shift? 9

Planned average number of ancillary members of the frontline team including adjustment for case mix and acuity on the day shift? 1

Planned average number of patients on the unit per day-on-day shift? 18

Planned average number of unlicensed personals (PCTs) on the unit providing direct patient care per day on the Day Shift? 0-5

Staffing Plan for Evening Shift

In this section should only reflect measurements for the day shift. (For example 3:00PM-11:00PM)

Name of Clinical Unit: ER for 3p-11p	
Description of Services being provided: To provide emergency care to the community and surrounding areas	
Planned average number of RNs on unit providing direct patient care: 3	Planned total hours of LPNs care per patient per day-on-day shift: 0
Planned total hours of RN nursing care per patient: 2.1	Planned average number of LPNs on the unit providing patient care per day on the day shift? 0
Planned average number of patients on the floor which the RN on the unit will provide direct patient care per day-on-day shift? 5.6	Planned average number of ancillary members of the frontline team including adjustment for case mix and acuity on the day shift? 1
Planned average number of patients on the unit per day-on-day shift? 17	Planned average number of unlicensed personals (PCTs) on the unit providing direct patient care per day on the Day Shift? 0-1

Staffing Plan for Night Shift

In this section should only reflect measurements for the day shift. (For example 7:00AM-3:00PM)

Name of Clinical Unit: ER for 11p-7a

Description of Services being provided: To provide emergency care to the community and surrounding areas

Planned average number of RNs on unit providing direct patient care: 1-2

Planned total hours of LPNs care per patient per day-on-day shift: 0

Planned total hours of RN nursing care per patient: 2.1

Planned average number of LPNs on the unit providing patient care per day on the day shift? 0

Planned average number of patients on the floor which the RN on the unit will provide direct patient care per day-on-day shift? 2.5

Planned average number of ancillary members of the frontline team including adjustment for case mix and acuity on the day shift? 1

Planned average number of patients on the unit per day-on-day shift? 5

Planned average number of unlicensed personals (PCTs) on the unit providing direct patient care per day on the Day Shift? 0-1

**DAILY PATIENT CARE STAFFING REPORT
FOR
11/6/2023**

(Date)

NOTICE TO CONSUMER

Chapter 155 of Laws of 2021 requires every New York hospital to establish a clinical staffing committee charged with leading the hospital's development of an annual multidisciplinary staffing plan. The law also requires hospitals to post daily clinical staffing on each unit.

Name of Hospital	Jones Memorial Hospital
Name of Unit	Med/Surg
Patient Census	17

Unit Type (check only one)

- | | | |
|-----------------------------------------------------|------------------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Ambulatory Surgery | <input type="checkbox"/> Infusion Services | <input type="checkbox"/> Outpatient Clinics |
| <input type="checkbox"/> Burn | <input type="checkbox"/> Intensive Care | <input type="checkbox"/> Pediatric |
| <input type="checkbox"/> Cardiac Catheterization/EP | <input type="checkbox"/> Lithotripsy | <input type="checkbox"/> Psychiatry |
| <input type="checkbox"/> Cardiovascular | <input type="checkbox"/> Magnetic Resonance Imaging | <input type="checkbox"/> Pulmonary |
| <input type="checkbox"/> Chemical Dependency | <input checked="" type="checkbox"/> Medical/Surgical | <input type="checkbox"/> Rehabilitation |
| <input type="checkbox"/> Critical Care | <input type="checkbox"/> Mental Health Services O/P | <input type="checkbox"/> Renal |
| <input type="checkbox"/> Dental O/P | <input type="checkbox"/> Neonatal | <input type="checkbox"/> Short Stay |
| <input type="checkbox"/> Dialysis - Acute | <input type="checkbox"/> Neurology | <input type="checkbox"/> Stepdown |
| <input type="checkbox"/> Dialysis - O/P | <input type="checkbox"/> Nuclear Medicine/Radiology | <input type="checkbox"/> Telemetry |
| <input type="checkbox"/> Emergency Department | <input type="checkbox"/> Obstetrics/Gynecology | <input type="checkbox"/> Transplant |
| <input type="checkbox"/> Endoscopy | <input type="checkbox"/> Oncology | <input type="checkbox"/> Other |
| <input type="checkbox"/> Geriatric | <input type="checkbox"/> Orthopedics | |

	Staff	Number	
	DAY	Registered professional nurses	4
Licensed practical nurses		1	
Ancillary members of the frontline team		1	
Unlicensed assistive personnel		0	
Additional resources		1	
	Staff	Number	
	Registered professional nurses	4/3	
EVENING	Licensed practical nurses	1/0	
	Ancillary members of the frontline team	1/0	
	Unlicensed assistive personnel	0/1	
	Additional resources	1/1	
	Staff	Number	
	Registered professional nurses	3	
NIGHTS	Licensed practical nurses	0	
	Ancillary members of the frontline team	0	
	Unlicensed assistive personnel	1	
	Additional resources	1	

Description of methods used to determine and adjust patient care staffing levels:

We do not decrease staffing according to census, but will increase staffing if needed by utilizing Myself or the nursing supervisor.

Staffing Plan for Day Shift

In this section should only reflect measurements for the day shift. (For example 7:00AM-3:00PM)

Name of Clinical Unit: 2C
Description of Services being provided: Med/Surg/Tele

Planned average number of RNs on unit providing direct patient care: 4.5

Planned total hours of LPNs care per patient per day-on-day shift: 0

Planned total hours of RN nursing care per patient: 4

Planned average number of LPNs on the unit providing patient care per day on the day shift? 0

Planned average number of patients on the floor which the RN on the unit will provide direct patient care per day-on-day shift? 5

Planned average number of ancillary members of the frontline team including adjustment for case mix and acuity on the day shift? 0

Planned average number of patients on the unit per day-on-day shift? 13

Planned average number of unlicensed personals (PCIs) on the unit providing direct patient care per day on the Day Shift? 2

Staffing Plan for Evening Shift

In this section should only reflect measurements for the evening shift. (For example 3:00PM-11:00PM)

Name of Clinical Unit: 2C	
Description of Services being provided: Med/Surg/Tele	
Planned average number of RNs on unit providing direct patient care: 4.5	Planned total hours of LPNs care per patient per day-on-evening shift: 0
Planned total hours of RN nursing care per patient: 3	Planned average number of LPNs on the unit providing patient care per day on the evening shift? 0
Planned average number of patients on the floor which the RN on the unit will provide direct patient care per day-on-evening shift? 5	Planned average number of ancillary members of the frontline team including adjustment for case mix and acuity on the evening shift? 0
Planned average number of patients on the unit per day-on-evening shift? 13	Planned average number of unlicensed personals (PCTs) on the unit providing direct patient care per day on the Evening Shift? 1.5

Staffing Plan for Night Shift

In this section should only reflect measurements for the night shift. (For example 11:00PM-7:00AM)

Name of Clinical Unit: 2C	
Description of Services being provided: Med/Surg/Tele	
Planned average number of RNs on unit providing direct patient care: 3	Planned total hours of LPNs care per patient per day-on-night shift: 0
Planned total hours of RN nursing care per patient: 2	Planned average number of LPNs on the unit providing patient care per day on the night shift? 0
Planned average number of patients on the floor which the RN on the unit will provide direct patient care per day-on-night shift? 5.5	Planned average number of ancillary members of the frontline team including adjustment for case mix and acuity on the night shift? 0
Planned average number of patients on the unit per day-on-night shift? 13	Planned average number of unlicensed personals (PCTs) on the unit providing direct patient care per day on the Night Shift? 1

**DAILY PATIENT CARE STAFFING REPORT
FOR
11/6/2023**

(Date)

NOTICE TO CONSUMER

Chapter 155 of Laws of 2021 requires every New York hospital to establish a clinical staffing committee charged with leading the hospital's development of an annual multidisciplinary staffing plan. The law also requires hospitals to post daily clinical staffing on each unit.

Name of Hospital	Jones Memorial Hospital
Name of Unit	ICU
Patient Census	2

Unit Type (check only one)

- | | | |
|-----------------------------------------------------|-----------------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Ambulatory Surgery | <input type="checkbox"/> Infusion Services | <input type="checkbox"/> Outpatient Clinics |
| <input type="checkbox"/> Burn | <input checked="" type="checkbox"/> Intensive Care | <input type="checkbox"/> Pediatric |
| <input type="checkbox"/> Cardiac Catheterization/EP | <input type="checkbox"/> Lithotripsy | <input type="checkbox"/> Psychiatry |
| <input type="checkbox"/> Cardiovascular | <input type="checkbox"/> Magnetic Resonance Imaging | <input type="checkbox"/> Pulmonary |
| <input type="checkbox"/> Chemical Dependency | <input type="checkbox"/> Medical/Surgical | <input type="checkbox"/> Rehabilitation |
| <input type="checkbox"/> Critical Care | <input type="checkbox"/> Mental Health Services O/P | <input type="checkbox"/> Renal |
| <input type="checkbox"/> Dental O/P | <input type="checkbox"/> Neonatal | <input type="checkbox"/> Short Stay |
| <input type="checkbox"/> Dialysis - Acute | <input type="checkbox"/> Neurology | <input type="checkbox"/> Stepdown |
| <input type="checkbox"/> Dialysis - O/P | <input type="checkbox"/> Nuclear Medicine/Radiology | <input type="checkbox"/> Telemetry |
| <input type="checkbox"/> Emergency Department | <input type="checkbox"/> Obstetrics/Gynecology | <input type="checkbox"/> Transplant |
| <input type="checkbox"/> Endoscopy | <input type="checkbox"/> Oncology | <input type="checkbox"/> Other |
| <input type="checkbox"/> Geriatric | <input type="checkbox"/> Orthopedics | |

	Staff	Number
	DAY	Registered professional nurses
Licensed practical nurses		0
Ancillary members of the frontline team		0
Unlicensed assistive personnel		0
Additional resources		1
	Staff	Number
	EVENING	Registered professional nurses
Licensed practical nurses		0/0
Ancillary members of the frontline team		0/0
Unlicensed assistive personnel		0/1
Additional resources		1/1
	Staff	Number
	NIGHTS	Registered professional nurses
Licensed practical nurses		0
Ancillary members of the frontline team		0
Unlicensed assistive personnel		1
Additional resources		1

Description of methods used to determine and adjust patient care staffing levels:

We do not decrease staffing according to census, but will increase staffing if needed by utilizing Myself or the nursing supervisor.

Staffing Plan for Day Shift

In this section should only reflect measurements for the day shift. (For example 7:00AM-3:00PM)

Name of Clinical Unit: ICU	
Description of Services being provided: Critical Care	
Planned average number of RNs on unit providing direct patient care: 2	Planned total hours of LPNs care per patient per day-on-day shift: 0
Planned total hours of RN nursing care per patient: 4.5	Planned average number of LPNs on the unit providing patient care per day on the day shift? 0
Planned average number of patients on the floor which the RN on the unit will provide direct patient care per day-on-day shift? 1.5	Planned average number of ancillary members of the frontline team including adjustment for case mix and acuity on the day shift? 0
Planned average number of patients on the unit per day-on-day shift? 3	Planned average number of unlicensed personals (PCTs) on the unit providing direct patient care per day on the Day Shift? 1

Staffing Plan for Evening Shift

In this section should only reflect measurements for the evening shift. (For example 3:00PM-11:00PM)

Name of Clinical Unit: ICU	
Description of Services being provided: Critical Care	
Planned average number of RNs on unit providing direct patient care: 2	Planned total hours of LPNs care per patient per day-on-evening shift: 0
Planned total hours of RN nursing care per patient: 4	Planned average number of LPNs on the unit providing patient care per day on the evening shift? 0
Planned average number of patients on the floor which the RN on the unit will provide direct patient care per day-on-day shift? 1.5	Planned average number of ancillary members of the frontline team including adjustment for case mix and acuity on the day shift? 0
Planned average number of patients on the unit per day-on-evening shift? 3	Planned average number of unlicensed personals (PCTs) on the unit providing direct patient care per day on the Evening Shift? .5

Staffing Plan for Night Shift

In this section should only reflect measurements for the night shift. (For example 11:00PM-7:00AM)

Name of Clinical Unit: ICU	
Description of Services being provided: Critical Care	
Planned average number of RNs on unit providing direct patient care: 2	Planned total hours of LPNs care per patient per day-on-night shift: 0
Planned total hours of RN nursing care per patient: 4	Planned average number of LPNs on the unit providing patient care per day on the night shift? 0
Planned average number of patients on the floor which the RN on the unit will provide direct patient care per day-on-night shift? 1.5	Planned average number of ancillary members of the frontline team including adjustment for case mix and acuity on the night shift? 0
Planned average number of patients on the unit per day-on-night shift? 3	Planned average number of unlicensed personals (PCTs) on the unit providing direct patient care per day on the Night Shift? 0

**DAILY PATIENT CARE STAFFING REPORT
FOR
11/6/2023**

(Date)

NOTICE TO CONSUMER

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Name of Hospital	Jones Memorial Hospital
Name of Unit	OB
Patient Census	4

Unit Type (check only one)

- | | | |
|-----------------------------------------------------|-----------------------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Ambulatory Surgery | <input type="checkbox"/> Infusion Services | <input type="checkbox"/> Outpatient Clinics |
| <input type="checkbox"/> Burn | <input type="checkbox"/> Intensive Care | <input type="checkbox"/> Pediatric |
| <input type="checkbox"/> Cardiac Catheterization/EP | <input type="checkbox"/> Lithotripsy | <input type="checkbox"/> Psychiatry |
| <input type="checkbox"/> Cardiovascular | <input type="checkbox"/> Magnetic Resonance Imaging | <input type="checkbox"/> Pulmonary |
| <input type="checkbox"/> Chemical Dependency | <input type="checkbox"/> Medical/Surgical | <input type="checkbox"/> Rehabilitation |
| <input type="checkbox"/> Critical Care | <input type="checkbox"/> Mental Health Services O/P | <input type="checkbox"/> Renal |
| <input type="checkbox"/> Dental O/P | <input type="checkbox"/> Neonatal | <input type="checkbox"/> Short Stay |
| <input type="checkbox"/> Dialysis - Acute | <input type="checkbox"/> Neurology | <input type="checkbox"/> Stepdown |
| <input type="checkbox"/> Dialysis - O/P | <input type="checkbox"/> Nuclear Medicine/Radiology | <input type="checkbox"/> Telemetry |
| <input type="checkbox"/> Emergency Department | <input checked="" type="checkbox"/> Obstetrics/Gynecology | <input type="checkbox"/> Transplant |
| <input type="checkbox"/> Endoscopy | <input type="checkbox"/> Oncology | <input type="checkbox"/> Other |
| <input type="checkbox"/> Geriatric | <input type="checkbox"/> Orthopedics | |

	Staff	Number
DAY	Registered professional nurses	2
	Licensed practical nurses	0
	Ancillary members of the frontline team	0
	Unlicensed assistive personnel	0
	Additional resources	0
EVENING	Staff	Number
	Registered professional nurses	2.5
	Licensed practical nurses	0
	Ancillary members of the frontline team	0
	Unlicensed assistive personnel	0
NIGHTS	Staff	Number
	Registered professional nurses	3
	Licensed practical nurses	0
	Ancillary members of the frontline team	0
	Unlicensed assistive personnel	0
	Additional resources	0

Description of methods used to determine and adjust patient care staffing levels:

Staffing Plan for Day Shift

In this section should only reflect measurements for the day shift. (For example 7:00AM-3:00PM)

Name of Clinical Unit: Obstetrics

Description of Services being provided: Birthing Center

Planned average number of RNs on unit providing direct patient care: 3

Planned total hours of RN nursing care per patient: 1:2

Planned average number of patients on the floor which the RN on the unit will provide direct patient care per day-on-day shift? 2

Planned average number of patients on the unit per day-on-day shift? 4

Planned total hours of LPNs care per patient per day-on-day shift: 0

Planned average number of LPNs on the unit providing patient care per day on the day shift? 0

Planned average number of ancillary members of the frontline team including adjustment for case mix and acuity on the day shift? 0

Planned average number of unlicensed personals (PCTs) on the unit providing direct patient care per day on the Day Shift? 1

Staffing Plan for Evening Shift

In this section should only reflect measurements for the day shift. (For example 3:00PM-11:00 PM)

Name of Clinical Unit: Obstetrics

Description of Services being provided: Birthing Center

Planned average number of RNs on unit providing direct patient care: 3

Planned total hours of RN nursing care per patient: 1:2

Planned average number of patients on the floor which the RN on the unit will provide direct patient care per day-on-evening shift? 2

Planned average number of patients on the unit per day-on-evening shift? 4

Planned total hours of LPNs care per patient per day-on-evening shift: 0

Planned average number of LPNs on the unit providing patient care per day on the evening shift? 0

Planned average number of ancillary members of the frontline team including adjustment for case mix and acuity on the evening shift? 0

Planned average number of unlicensed personals (PCTs) on the unit providing direct patient care per day on the evening shift? 0

Staffing Plan for Night Shift

In this section should only reflect measurements for the day shift. (For example 11:00 PM-7:00 AM)

Name of Clinical Unit: Obstetrics

Description of Services being provided: Birthing Center

Planned average number of RNs on unit providing direct patient care: 3

Planned total hours of RN nursing care per patient: 1:2

Planned average number of patients on the floor which the RN on the unit will provide direct patient care per day-on-night shift? 2

Planned average number of patients on the unit per day-on-night shift? 4

Planned total hours of LPNs care per patient per day-on-night shift: 0

Planned average number of LPNs on the unit providing patient care per day on the night shift? 0

Planned average number of ancillary members of the frontline team including adjustment for case mix and acuity on the night shift? 0

Planned average number of unlicensed personals (PCTs) on the unit providing direct patient care per day on the night shift? 0

DAILY PATIENT CARE STAFFING REPORT
FOR
11/7/2023

(Date)

NOTICE TO CONSUMER

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Name of Hospital	Jones Memorial Hospital
Name of Unit	JMH Urgent Care
Patient Census	

Unit Type (check only one)

- | | | |
|-----------------------------------------------------|-----------------------------------------------------|-------------------------------------------------|
| <input type="checkbox"/> Ambulatory Surgery | <input type="checkbox"/> Infusion Services | <input type="checkbox"/> Outpatient Clinics |
| <input type="checkbox"/> Burn | <input type="checkbox"/> Intensive Care | <input type="checkbox"/> Pediatric |
| <input type="checkbox"/> Cardiac Catheterization/EP | <input type="checkbox"/> Lithotripsy | <input type="checkbox"/> Psychiatry |
| <input type="checkbox"/> Cardiovascular | <input type="checkbox"/> Magnetic Resonance Imaging | <input type="checkbox"/> Pulmonary |
| <input type="checkbox"/> Chemical Dependency | <input type="checkbox"/> Medical/Surgical | <input type="checkbox"/> Rehabilitation |
| <input type="checkbox"/> Critical Care | <input type="checkbox"/> Mental Health Services O/P | <input type="checkbox"/> Renal |
| <input type="checkbox"/> Dental O/P | <input type="checkbox"/> Neonatal | <input type="checkbox"/> Short Stay |
| <input type="checkbox"/> Dialysis - Acute | <input type="checkbox"/> Neurology | <input type="checkbox"/> Stepdown |
| <input type="checkbox"/> Dialysis - O/P | <input type="checkbox"/> Nuclear Medicine/Radiology | <input type="checkbox"/> Telemetry |
| <input type="checkbox"/> Emergency Department | <input type="checkbox"/> Obstetrics/Gynecology | <input type="checkbox"/> Transplant |
| <input type="checkbox"/> Endoscopy | <input type="checkbox"/> Oncology | <input checked="" type="checkbox"/> Urgent Care |
| <input type="checkbox"/> Geriatric | <input type="checkbox"/> Orthopedics | <input type="checkbox"/> Other |

	Staff	Number
	DAY	Registered professional nurses
Licensed practical nurses		
Ancillary members of the frontline team		
Unlicensed assistive personnel		
Additional resources		
	Staff	Number
	Registered professional nurses	
EVENING	Licensed practical nurses	1
	Ancillary members of the frontline team	
	Unlicensed assistive personnel	
	Additional resources	1 clerical
	Additional resources	
	Staff	Number
	Registered professional nurses	
NIGHTS	Licensed practical nurses	
	Ancillary members of the frontline team	
	Unlicensed assistive personnel	
	Additional resources	
	Additional resources	

Description of methods used to determine and adjust patient care staffing levels: 1 LPN/APP team to 4 exam rooms; Nursing Supervisor on duty to be contacted if additional support is needed

Staffing Plan for Evening Shift

In this section should only reflect measurements for the evening shift. (For example 2:00PM-7:00PM)

Name of Clinical Unit: JMH Urgent Care

Description of Services being provided: Non-emergent walk-in care

Planned average number of RNs on unit providing direct patient care: 0

Planned total hours of RN nursing care per patient: 0

Planned average number of patients on the floor which the RN on the unit will provide direct patient care per day-on-evening shift?
0

Planned average number of patients on the unit per day-on-evening shift? 15

Planned total hours of LPNs care per patient per day-on-evening shift: 0.25

Planned average number of LPNs on the unit providing patient care per day on the evening shift? 1

Planned average number of ancillary members of the frontline team including adjustment for case mix and acuity on the evening shift? 0

Planned average number of unlicensed personals (PCTs) on the unit providing direct patient care per day on the evening Shift? 0

**DAILY PATIENT CARE STAFFING REPORT
FOR
11/6/2023**

(Date)

NOTICE TO CONSUMER

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Name of Hospital	Jones Memorial Hospital
Name of Unit	General Surgery/ Pain Manangement
Patient Census	

Unit Type (check only one)

- | | | |
|-----------------------------------------------------|-----------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Ambulatory Surgery | <input type="checkbox"/> Infusion Services | <input checked="" type="checkbox"/> Outpatient Clinics |
| <input type="checkbox"/> Burn | <input type="checkbox"/> Intensive Care | <input type="checkbox"/> Pediatric |
| <input type="checkbox"/> Cardiac Catheterization/EP | <input type="checkbox"/> Lithotripsy | <input type="checkbox"/> Psychiatry |
| <input type="checkbox"/> Cardiovascular | <input type="checkbox"/> Magnetic Resonance Imaging | <input type="checkbox"/> Pulmonary |
| <input type="checkbox"/> Chemical Dependency | <input type="checkbox"/> Medical/Surgical | <input type="checkbox"/> Rehabilitation |
| <input type="checkbox"/> Critical Care | <input type="checkbox"/> Mental Health Services O/P | <input type="checkbox"/> Renal |
| <input type="checkbox"/> Dental O/P | <input type="checkbox"/> Neonatal | <input type="checkbox"/> Short Stay |
| <input type="checkbox"/> Dialysis - Acute | <input type="checkbox"/> Neurology | <input type="checkbox"/> Stepdown |
| <input type="checkbox"/> Dialysis - O/P | <input type="checkbox"/> Nuclear Medicine/Radiology | <input type="checkbox"/> Telemetry |
| <input type="checkbox"/> Emergency Department | <input type="checkbox"/> Obstetrics/Gynecology | <input type="checkbox"/> Transplant |
| <input type="checkbox"/> Endoscopy | <input type="checkbox"/> Oncology | <input type="checkbox"/> Other |
| <input type="checkbox"/> Geriatric | <input type="checkbox"/> Orthopedics | |

	Staff	Number
	DAY	Registered professional nurses
Licensed practical nurses		1
Ancillary members of the frontline team		
Unlicensed assistive personnel		
Additional resources		1
	Staff	Number
	EVENING	
EVENING	Registered professional nurses	
	Licensed practical nurses	
	Ancillary members of the frontline team	
	Unlicensed assistive personnel	
	Additional resources	
	Staff	Number
	NIGHTS	
NIGHTS	Registered professional nurses	
	Licensed practical nurses	
	Ancillary members of the frontline team	
	Unlicensed assistive personnel	
	Additional resources	

Description of methods used to determine and adjust patient care staffing levels:

Staffing Plan for Day Shift

In this section should only reflect measurements for the day shift:

Monday 1200- 1630

Tuesday 0800- 1630

Wednesday 0800- 1630

Thursday 0800- 1630

Name of Clinical Unit: General Surgery/ Pain Management

Description of Services being provided: Ambulatory office visits related to the General Surgery Specialty

Planned total hours of RN nursing care per patient: 0

Planned total hours of LPNs care per patient per day-on-day shift: 1

Planned average number of RNs on unit providing direct patient care: 0

Planned average number of LPNs on the unit providing patient care per day on the day shift? 1

Planned average number of patients on the floor which the RN on the unit will provide direct patient care per day-on-day shift? 0

Planned average number of ancillary members of the frontline team including adjustment for case mix and acuity on the day shift? 1

Planned average number of patients on the unit per day-on-day shift? 7.5

Planned average number of unlicensed personals (PCTs) on the unit providing direct patient care per day on the Day Shift? 0

**DAILY PATIENT CARE STAFFING REPORT
FOR
11/6/2023**

(Date)

NOTICE TO CONSUMER

Chapter 155 of Laws of 2021 requires every New York hospital to establish a clinical staffing committee charged with leading the hospital's development of an annual multidisciplinary staffing plan. The law also requires hospitals to post daily clinical staffing on each unit.

Name of Hospital	Jones Memorial Hospital
Name of Unit	Orthopedics
Patient Census	

Unit Type (check only one)

- | | | |
|-----------------------------------------------------|-----------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Ambulatory Surgery | <input type="checkbox"/> Infusion Services | <input checked="" type="checkbox"/> Outpatient Clinics |
| <input type="checkbox"/> Burn | <input type="checkbox"/> Intensive Care | <input type="checkbox"/> Pediatric |
| <input type="checkbox"/> Cardiac Catheterization/EP | <input type="checkbox"/> Lithotripsy | <input type="checkbox"/> Psychiatry |
| <input type="checkbox"/> Cardiovascular | <input type="checkbox"/> Magnetic Resonance Imaging | <input type="checkbox"/> Pulmonary |
| <input type="checkbox"/> Chemical Dependency | <input type="checkbox"/> Medical/Surgical | <input type="checkbox"/> Rehabilitation |
| <input type="checkbox"/> Critical Care | <input type="checkbox"/> Mental Health Services O/P | <input type="checkbox"/> Renal |
| <input type="checkbox"/> Dental O/P | <input type="checkbox"/> Neonatal | <input type="checkbox"/> Short Stay |
| <input type="checkbox"/> Dialysis - Acute | <input type="checkbox"/> Neurology | <input type="checkbox"/> Stepdown |
| <input type="checkbox"/> Dialysis - O/P | <input type="checkbox"/> Nuclear Medicine/Radiology | <input type="checkbox"/> Telemetry |
| <input type="checkbox"/> Emergency Department | <input type="checkbox"/> Obstetrics/Gynecology | <input type="checkbox"/> Transplant |
| <input type="checkbox"/> Endoscopy | <input type="checkbox"/> Oncology | <input type="checkbox"/> Other |
| <input type="checkbox"/> Geriatric | <input type="checkbox"/> Orthopedics | |

	Staff	Number	
	DAY	Registered professional nurses	
Licensed practical nurses		1	
Ancillary members of the frontline team		1	
Unlicensed assistive personnel			
Additional resources		1	
	Staff	Number	
	Registered professional nurses		
EVENING	Licensed practical nurses		
	Ancillary members of the frontline team		
	Unlicensed assistive personnel		
	Additional resources		
	Staff	Number	
	Registered professional nurses		
NIGHTS	Licensed practical nurses		
	Ancillary members of the frontline team		
	Unlicensed assistive personnel		
	Additional resources		

Description of methods used to determine and adjust patient care staffing levels:

Staffing Plan for Day Shift

In this section should only reflect measurements for the day shift:

Monday 0800- 1630

Wednesday 0800- 1630

Thursday 0800- 1630

Friday 0800- 1630

Name of Clinical Unit: Orthopedics
Description of Services being provided: Ambulatory office visits related to the Orthopedic Specialty

Planned total hours of RN nursing care per patient: 0

Planned total hours of LPNs care per patient per day-on-day shift: 1

Planned average number of RNs on unit providing direct patient care: 0

Planned average number of LPNs on the unit providing patient care per day on the day shift? 1

Planned average number of patients on the floor which the RN on the unit will provide direct patient care per day-on-day shift? 0

Planned average number of ancillary members of the frontline team including adjustment for case mix and acuity on the day shift? 2

Planned average number of patients on the unit per day-on-day shift? 20

Planned average number of unlicensed personals (PCTs) on the unit providing direct patient care per day on the Day Shift? 0

**DAILY PATIENT CARE STAFFING REPORT
FOR
11/7/2023**

(Date)

NOTICE TO CONSUMER

Chapter 155 of Laws of 2021 requires every New York hospital to establish a clinical staffing committee charged with leading the hospital's development of an annual multidisciplinary staffing plan. The law also requires hospitals to post daily clinical staffing on each unit.

Name of Hospital	Jones Memorial Hospital
Name of Unit	JMH Infusion Center
Patient Census	

Unit Type (check only one)

- | | | |
|-----------------------------------------------------|-------------------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Ambulatory Surgery | <input checked="" type="checkbox"/> Infusion Services | <input type="checkbox"/> Outpatient Clinics |
| <input type="checkbox"/> Burn | <input type="checkbox"/> Intensive Care | <input type="checkbox"/> Pediatric |
| <input type="checkbox"/> Cardiac Catheterization/EP | <input type="checkbox"/> Lithotripsy | <input type="checkbox"/> Psychiatry |
| <input type="checkbox"/> Cardiovascular | <input type="checkbox"/> Magnetic Resonance Imaging | <input type="checkbox"/> Pulmonary |
| <input type="checkbox"/> Chemical Dependency | <input type="checkbox"/> Medical/Surgical | <input type="checkbox"/> Rehabilitation |
| <input type="checkbox"/> Critical Care | <input type="checkbox"/> Mental Health Services O/P | <input type="checkbox"/> Renal |
| <input type="checkbox"/> Dental O/P | <input type="checkbox"/> Neonatal | <input type="checkbox"/> Short Stay |
| <input type="checkbox"/> Dialysis - Acute | <input type="checkbox"/> Neurology | <input type="checkbox"/> Stepdown |
| <input type="checkbox"/> Dialysis - O/P | <input type="checkbox"/> Nuclear Medicine/Radiology | <input type="checkbox"/> Telemetry |
| <input type="checkbox"/> Emergency Department | <input type="checkbox"/> Obstetrics/Gynecology | <input type="checkbox"/> Transplant |
| <input type="checkbox"/> Endoscopy | <input type="checkbox"/> Oncology | <input type="checkbox"/> Other |
| <input type="checkbox"/> Geriatric | <input type="checkbox"/> Orthopedics | |

	Staff	Number
	DAY	Registered professional nurses
Licensed practical nurses		
Ancillary members of the frontline team		
Unlicensed assistive personnel		
Additional resources		1 clerical
EVENING		Staff
	Registered professional nurses	
	Licensed practical nurses	
	Ancillary members of the frontline team	
	Unlicensed assistive personnel	
	Additional resources	
NIGHTS	Staff	Number
	Registered professional nurses	
	Licensed practical nurses	
	Ancillary members of the frontline team	
	Unlicensed assistive personnel	
	Additional resources	

Description of methods used to determine and adjust patient care staffing levels: 1 RN to 6-8 patients per day/2-3 Infusion Chairs; 1-2 clerical per day shared with Oncology Clinic; adjusted per # of patients/patient acuity/chair utilization

Staffing Plan for Day Shift

In this section should only reflect measurements for the day shift. (For example 7:00AM-3:00PM)

Name of Clinical Unit: JMH Infusion Center	
Description of Services being provided: Various IV infusions, injections, blood transfusions, mediport flushes/lab draws, therapeutic phlebotomies, IV hydration, etc.	
Planned average number of RNs on unit providing direct patient care: 2	Planned total hours of LPNs care per patient per day-on-day shift: 0
Planned total hours of RN nursing care per patient: 1	Planned average number of LPNs on the unit providing patient care per day on the day shift? 0
Planned average number of patients on the floor which the RN on the unit will provide direct patient care per day-on-day shift? 7	Planned average number of ancillary members of the frontline team including adjustment for case mix and acuity on the day shift? 0
Planned average number of patients on the unit per day-on-day shift? 14	Planned average number of unlicensed personals (PCTs) on the unit providing direct patient care per day on the Day Shift? 0

**DAILY PATIENT CARE STAFFING REPORT
FOR
11/6/2023**

(Date)

NOTICE TO CONSUMER

Chapter 155 of Laws of 2021 requires every New York hospital to establish a clinical staffing committee charged with leading the hospital's development of an annual multidisciplinary staffing plan. The law also requires hospitals to post daily clinical staffing on each unit.

Name of Hospital	Jones Memorial Hospital
Name of Unit	Stress Test M-Th
Patient Census	2-5

Unit Type (check only one)

- | | | |
|-----------------------------------------------------|-----------------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Ambulatory Surgery | <input type="checkbox"/> Infusion Services | <input type="checkbox"/> Outpatient Clinics |
| <input type="checkbox"/> Burn | <input type="checkbox"/> Intensive Care | <input type="checkbox"/> Pediatric |
| <input type="checkbox"/> Cardiac Catheterization/EP | <input type="checkbox"/> Lithotripsy | <input type="checkbox"/> Psychiatry |
| <input type="checkbox"/> Cardiovascular | <input type="checkbox"/> Magnetic Resonance Imaging | <input type="checkbox"/> Pulmonary |
| <input type="checkbox"/> Chemical Dependency | <input type="checkbox"/> Medical/Surgical | <input type="checkbox"/> Rehabilitation |
| <input type="checkbox"/> Critical Care | <input type="checkbox"/> Mental Health Services O/P | <input type="checkbox"/> Renal |
| <input type="checkbox"/> Dental O/P | <input type="checkbox"/> Neonatal | <input type="checkbox"/> Short Stay |
| <input type="checkbox"/> Dialysis - Acute | <input type="checkbox"/> Neurology | <input type="checkbox"/> Stepdown |
| <input type="checkbox"/> Dialysis - O/P | <input type="checkbox"/> Nuclear Medicine/Radiology | <input type="checkbox"/> Telemetry |
| <input type="checkbox"/> Emergency Department | <input type="checkbox"/> Obstetrics/Gynecology | <input type="checkbox"/> Transplant |
| <input type="checkbox"/> Endoscopy | <input type="checkbox"/> Oncology | <input checked="" type="checkbox"/> Other |
| <input type="checkbox"/> Geriatric | <input type="checkbox"/> Orthopedics | |

	Staff	Number
	DAY	Registered professional nurses
Licensed practical nurses		0
Ancillary members of the frontline team		0
Unlicensed assistive personnel		1
Additional resources		0-1
	Staff	Number
	EVENING	Registered professional nurses
Licensed practical nurses		0
Ancillary members of the frontline team		0
Unlicensed assistive personnel		0
Additional resources		0
	Staff	Number
	NIGHTS	Registered professional nurses
Licensed practical nurses		0
Ancillary members of the frontline team		0
Unlicensed assistive personnel		0
Additional resources		0

Description of methods used to determine and adjust patient care staffing levels:

Staffing Plan for Day Shift

In this section should only reflect measurements for the day shift. (For example 7:00AM-3:00PM)

Name of Clinical Unit: Stress Test	
Description of Services being provided: Stress echoes, Dobutamine, and treadmill tests as inpatient and outpatient procedures.	
Planned average number of RNs on unit providing direct patient care: 1	Planned total hours of LPNs care per patient per day-on-day shift: 0
Planned total hours of RN nursing care per patient: 2hours	Planned average number of LPNs on the unit providing patient care per day on the day shift? 0
Planned average number of patients on the floor which the RN on the unit will provide direct patient care per day-on-day shift? 2-5 patients	Planned average number of ancillary members of the frontline team including adjustment for case mix and acuity on the day shift? 0
Planned average number of patients on the unit per day-on-day shift? 2-5 patients	Planned average number of unlicensed personals (PCTs) on the unit providing direct patient care per day on the Day Shift? 1