#### **HOSPITAL INFORMATION**

| Region                      | Western Regional Office            |  |
|-----------------------------|------------------------------------|--|
|                             |                                    |  |
| County                      | Yates                              |  |
|                             |                                    |  |
| Council                     | Finger Lakes                       |  |
|                             |                                    |  |
| Network                     | FINGER LAKES HEALTH                |  |
|                             | Soldiers and Sailors Memorial      |  |
| Reporting Organization      | Hospital of Yates County           |  |
|                             |                                    |  |
| Reporting Organization Id   | 1158                               |  |
|                             |                                    |  |
| Reporting Organization Type | g Organization Type Hospital (pfi) |  |
|                             | Soldiers and Sailors Memorial      |  |
| Data Entity                 | Hospital of Yates County           |  |

| Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital. | Planned average number of Registered Nurses (RN) on the unit providing direct patient care per day on the Day Shift? (Please provide a number with up to 5 digits. Ex: 101.50) | Planned total hours of<br>RN nursing care per<br>patient including<br>adjustment for case mix<br>and acuity on the Day<br>Shift (Please provide a<br>number with up to 5<br>digits. Ex: 101.50) | Planned average number of patients on the unit per day on the Day Shift? (Please provide a number with up to 5 digits. Ex: 101.50) | What is the planned average number of patients for which one RN on the unit will provide direct patient care per day on the Day Shift (Please provide a number with up to 5 digits. Ex: 101.50) ? |
|---|--|---|--|---|
| Soldiers & Sailors Health   |  |   |  |   |
| Center located on upper   |  |   |  |   |
| floor of hospital building  | 0  | 0   | 54   | 0   |
| Dundee Family Health  |  |   |  |   |
| Center located offsite in   |  |   |  |   |
| Dundee, NY  | 0  | 0   | 17   | 0   |
| Seneca Family Health  |  |   |  |   |
| outpatient provider practice  |  |   |  |   |
| offisite located in Waterloo,   |  |   |  |   |
| NY  | 0  | 0   | 80   | 0   |
| Seneca Falls Urgent Care  |  |   |  |   |
| located offsite in Seneca   |  |   |  |   |
| Falls, NY   | 0  | 0   | 25   | 0   |
| Lifecare Office Practice -  |  |   |  |   |
| located off campus in   |  |   |  |   |
| Waterloo, NY  | 1  | 0.16  | 113  | 15  |
| Emergency Department  | 2  | 4   | 4  | 2   |
| Medical/ Surgical/  |  |   | _  |   |
| Telemetry   | 2  | 1.74  | 9.2  | 4.6   |
| Medical/ Surgical/  | 2  | 1.74  | 0.2  | 4.6   |
| Telemetry   | 2  | 1.74  | 9.2  | 4.6   |

| Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital. | Planned average number of Licensed Practical Nurses (LPN) on the unit providing direct patient care per day on the Day Shift? (Please provide a number with up to 5 digits. Ex: 101.50) | Planned total hours of<br>LPN care per patient<br>including adjustment for<br>case mix and acuity on<br>the Day Shift (Please<br>provide a number with<br>up to 5 digits. Ex: 101.50) |
|---|---|---|
| Soldiers & Sailors Health   |   |   |
| Center located on upper   |   |   |
| floor of hospital building  | 3   | 0.16  |
| Dundee Family Health  |   |   |
| Center located offsite in   |   |   |
| Dundee, NY  | 1   | 0.08  |
| Seneca Family Health  |   |   |
| outpatient provider practice  |   |   |
| offisite located in Waterloo,   |   |   |
| NY  | 4   | 0.08  |
| Seneca Falls Urgent Care  |   |   |
| located offsite in Seneca   |   | _   |
| Falls, NY   | 1   | 0.16  |
| Lifecare Office Practice -  |   |   |
| located off campus in   |   |   |
| Waterloo, NY  | 4   | 0.08  |
| Emergency Department  | 0   | 0   |
| Medical/ Surgical/  |   |   |
| Telemetry   | 0   | 0   |
| Medical/ Surgical/  | _   | _   |
| Telemetry   | 0   | 0   |

| Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital. | Planned average number of ancillary members of the frontline team on the unit per day on the Day Shift? (Please provide a number with up to 5 digits. Ex: 101.50) | Planned total hours of ancillary members of the frontline team including adjustment for case mix and acuity on the Day Shift (Please provide a number with up to 5 digits. Ex: 101.50) |
|---|---|--|
| Soldiers & Sailors Health   |   |  |
| Center located on upper   |   |  |
| floor of hospital building  | 4.55  | 36.4   |
| Dundee Family Health  |   |  |
| Center located offsite in   |   |  |
| Dundee, NY  | 1   | 8  |
| Seneca Family Health  |   |  |
| outpatient provider practice  |   |  |
| offisite located in Waterloo,   |   |  |
| NY  | 4   | 32   |
| Seneca Falls Urgent Care  |   |  |
| located offsite in Seneca   |   |  |
| Falls, NY   | 1   | 8  |
| Lifecare Office Practice -  |   |  |
| located off campus in   |   |  |
| Waterloo, NY  | 5.5   | 44   |
| Emergency Department  | 1   | 8  |
| Medical/ Surgical/  |   |  |
| Telemetry   | 1   | 8  |
| Medical/ Surgical/  |   |  |
| Telemetry   | 1   | 8  |

DAY SHIFT UNLICENSED STAFFING

| Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital. | Planned average number of unlicensed personnel (e.g., patient care technicians) on the unit providing direct patient care per day on the Day Shift? (Please provide a number with up to 5 digits. Ex: 101.50) | Planned total hours of unlicensed personnel care per patient including adjustment for case mix and acuity on the Day Shift (Please provide a number with up to 5 digits. Ex: 101.50) |
|---|---|--|
| Soldiers & Sailors Health   |   |  |
| Center located on upper floor of hospital building  | 2   | 0.08   |
| Dundee Family Health  |   |  |
| Center located offsite in   |   |  |
| Dundee, NY  | 0.9   | 0.08   |
| Seneca Family Health  |   |  |
| outpatient provider practice  |   |  |
| offisite located in Waterloo,   |   |  |
| NY  | 2   | 0.08   |
| Seneca Falls Urgent Care  |   |  |
| located offsite in Seneca   |   |  |
| Falls, NY   | 0   | 0  |
| Lifecare Office Practice -  |   |  |
| located off campus in   |   |  |
| Waterloo, NY  | 2.75  | 0.08   |
| Emergency Department  | 0   | 0  |
| Medical/ Surgical/  |   |  |
| Telemetry   | 0   | 0  |
| Medical/ Surgical/  |   | 0.5-   |
| Telemetry   | 1   | 0.87   |

DAY SHIFT ADDITIONAL RESOURCES

|  | Description of additional     |
|--|-------------------------------|
|  | resources available to        |
|  | support unit level            |
|  | patient care on the Day       |
|  | Shift. These resources        |
|  | include but are not           |
|  | limited to unit clerical      |
| Dravida a description of                       |                               |
| Provide a description of                       | staff,                        |
| Clinical Unit, including a                     | admission/discharge           |
| description of typical                         | nurse, and other              |
| patient services provided                      | coverage provided to          |
| on the unit and the                            | registered nurses,            |
| unit's location in                             | licensed practical nurses,    |
| the hospital.                                  | and ancillary staff.          |
| Soldiers & Sailors Health                      |                               |
| Center located on upper                        | Manager Book the Charles      |
| floor of hospital building                     | Manager, Providers, Clerical  |
| Dundee Family Health Center located offsite in |                               |
|  | Manager Providers Clerical    |
| Dundee, NY Seneca Family Health                | Manager, Providers, Clerical  |
| outpatient provider practice                   |                               |
| offisite located in Waterloo,                  |                               |
| NY   | Manager, Providers, Clerical  |
| Seneca Falls Urgent Care                       | manager, r roviders, cicrical |
| located offsite in Seneca                      |                               |
| Falls, NY                                      | Manager, Providers, Clerical  |
| Lifecare Office Practice -                     | g ,                           |
| located off campus in                          |                               |
| Waterloo, NY                                   | Manager, Clerical, Providers  |
| Emergency Department                           | Clinical Leader, Provider     |
|  | Clinical Leader, PT, OT,      |
| Medical/ Surgical/                             | Director, Pharmacy, Care      |
| Telemetry                                      | Management                    |
|  | Clinical Leader, PT, OT,      |
| Medical/ Surgical/                             | Director, Pharmacy, Care      |
| Telemetry                                      | Management                    |

#### DAY SHIFT CONSENSUS INFORMATION

| Provide a description of Clinical Unit, including a description of typical patient services provided |                              | If no,<br>Chief Executive Officer | Statement by members of clinical staffing committee selected by | Statement by members of clinical staffing committee that were registered nurses, licensed practical nurses, |
|--|------------------------------|-----------------------------------|---|---|
| on the unit and the  | Committee reached            | Statement in support of           | the general hospital  | and ancillary members of  |
| · · ·  | consensus on the clinical    | clinical staffing plan for        | administration  | the frontline team  |
| the hospital.  | staffing plan for this unit: | this unit:                        | (management members):   | (employee members):   |
| Soldiers & Sailors Health  |                              |                                   |   |   |
| Center located on upper  | .,                           |                                   |   |   |
| floor of hospital building   | Yes                          |                                   |   |   |
| Dundee Family Health   |                              |                                   |   |   |
| Center located offsite in  |                              |                                   |   |   |
| Dundee, NY   | Yes                          |                                   |   |   |
| Seneca Family Health   |                              |                                   |   |   |
| outpatient provider practice   |                              |                                   |   |   |
| offisite located in Waterloo,  |                              |                                   |   |   |
| NY   | Yes                          |                                   |   |   |
| Seneca Falls Urgent Care   |                              |                                   |   |   |
| located offsite in Seneca  |                              |                                   |   |   |
| Falls, NY  | Yes                          |                                   |   |   |
| Lifecare Office Practice -   |                              |                                   |   |   |
| located off campus in  |                              |                                   |   |   |
| Waterloo, NY   | Yes                          |                                   |   |   |
| Emergency Department   | Yes                          |                                   |   |   |
| Medical/ Surgical/   |                              |                                   |   |   |
| Telemetry  | Yes                          |                                   |   |   |
| Medical/ Surgical/   |                              |                                   |   |   |
| Telemetry  | Yes                          |                                   |   |   |

#### RN EVENING SHIFT STAFFING

| Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital. | Planned average number of Registered Nurses (RN) on the unit providing direct patient care per day on the Evening Shift? (Please provide a number with up to 5 digits. Ex: 101.50) | Planned total hours of RN nursing care per patient including adjustment for case mix and acuity on the Evening Shift (Please provide a number with up to 5 digits. Ex: 101.50) | Planned average number of patients on the unit per day on the Evening Shift? (Please provide a number with up to 5 digits. Ex: 101.50) | What is the planned average number of patients for which one RN on the unit will provide direct patient care per day on the Evening Shift (Please provide a number with up to 5 digits. Ex: 101.50)? |
|---|--|--|--|--|
| Seneca Falls Urgent Care  |  |  |  |  |
| located offsite in Seneca   |  |  |  |  |
| Falls, NY   | 8  | 0  | 0  | 0  |
| Emergency Department  | 2  | 1.45   | 11   | 5.5  |
| Medical/ Surgical/  |  |  |  |  |
| Telemetry   | 2  | 1.74   | 9.2  | 4.6  |
| Medical/ Surgical/  |  |  |  |  |
| Telemetry   | 2  | 1.74   | 9.2  | 4.6  |

## LPN EVENING SHIFT STAFFING

| Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital. | Planned average number of Licensed Practical Nurses (LPN) on the unit providing direct patient care per day on the Evening Shift? (Please provide a number with up to 5 digits. Ex: 101.50) | Planned total hours of<br>LPN care per patient<br>including adjustment for<br>case mix and acuity on<br>the Evening Shift (Please<br>provide a number with<br>up to 5 digits. Ex: 101.50) |
|---|---|---|
| Seneca Falls Urgent Care  |   |   |
| located offsite in Seneca   |   |   |
| Falls, NY   | 0.5   | 0.16  |
| Emergency Department  | 0   | 0   |

| Medical/ Surgical/ |   |   |
|--------------------|---|---|
| Telemetry          | 0 | 0 |
| Medical/ Surgical/ |   |   |
| Telemetry          | 0 | 0 |

# **EVENING SHIFT ANCILLARY STAFF**

| Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital. | Planned average number of ancillary members of the frontline team on the unit per day on the Evening Shift? (Please provide a number with up to 5 digits. Ex: 101.50) | Planned total hours of ancillary members of the frontline team including adjustment for case mix and acuity on the Evening Shift (Please provide a number with up to 5 digits. Ex: 101.50) |
|---|---|--|
| Seneca Falls Urgent Care  |   |  |
| located offsite in Seneca   |   |  |
| Falls, NY   | 0.5   | 4  |
| Emergency Department  | 1   | 8  |
| Medical/ Surgical/  |   |  |
| Telemetry   | 0   | 0  |
| Medical/ Surgical/  |   |  |
| Telemetry   | 0   | 0  |

# EVENING SHIFT UNLICENSED STAFFING

|                            | Planned average number    | Planned total hours of      |
|----------------------------|---------------------------|-----------------------------|
| Provide a description of   | of unlicensed personnel   | unlicensed personnel        |
| Clinical Unit, including a | on the unit providing     | care per patient            |
| description of typical     | direct patient care per   | including adjustment for    |
| patient services provided  | day on the Evening Shift? | case mix and acuity on      |
| on the unit and the        | (Please provide a         | the Evening Shift (Please   |
| unit's location in         | number with up to 5       | provide a number with       |
| the hospital.              | digits. Ex: 101.50)       | up to 5 digits. Ex: 101.50) |
| Seneca Falls Urgent Care   |                           |                             |
| located offsite in Seneca  |                           |                             |
| Falls, NY                  | 0                         | 0                           |

| Emergency Department | 0 | 0    |
|----------------------|---|------|
| Medical/ Surgical/   |   |      |
| Telemetry            | 0 | 0    |
| Medical/ Surgical/   |   |      |
| Telemetry            | 1 | 0.87 |

#### **EVENING SHIFT ADDITIONAL RESOURCES**

| EVENING SHIFT ADDITIONAL                            | Description of additional resources available to support unit level patient care on the Evening Shift. These resources include but are not limited to unit |  |
|---|--|--|
| Provide a description of Clinical Unit, including a | clerical staff,<br>admission/discharge   |  |
| description of typical                              | nurse, and other   |  |
| patient services provided                           | · ·  |  |
| on the unit and the                                 | registered nurses,   |  |
| unit's location in                                  | licensed practical nurses,   |  |
| the hospital.                                       | and ancillary staff.   |  |
| Seneca Falls Urgent Care                            |  |  |
| located offsite in Seneca                           |  |  |
| Falls, NY   | Provider, Clerical   |  |
| Emergency Department                                | Clinical Leader, Provider  |  |
|   | Clinical Leader, PT, OT,   |  |
| Medical/ Surgical/                                  | Director, Pharmacy, Care   |  |
| Telemetry   | Management   |  |
|   | Clinical Leader, PT, OT,   |  |
| Medical/ Surgical/                                  | Director, Pharmacy, Care   |  |
| Telemetry   | Management   |  |

**EVENING SHIFT CONSENSUS INFORMATION** 

| Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital. | Our Clinical Staffing<br>Committee reached<br>consensus on the clinical<br>staffing plan for this unit: | If no, Chief Executive Officer Statement in support of clinical staffing plan for this unit: | Statement by members of clinical staffing committee selected by the general hospital administration (management members): | Statement by members of clinical staffing committee that were registered nurses, licensed practical nurses, and ancillary members of the frontline team (employee members): |
|---|---|--|---|---|
| Seneca Falls Urgent Care  |   |  |   |   |
| located offsite in Seneca   |   |  |   |   |
| Falls, NY   | Yes   |  |   |   |
| Emergency Department  | Yes   |  |   |   |
| Medical/ Surgical/  |   |  |   |   |
| Telemetry   | Yes   |  |   |   |
| Medical/ Surgical/  |   |  |   |   |
| Telemetry   | Yes   |  |   |   |

#### RN NIGHT SHIFT STAFFING

|                        | Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in | (RN) on the unit providing direct patient care per day on the Night Shift? (Please provide a | Planned total hours of RN nursing care per patient including adjustment for case mix and acuity on the Night Shift (Please provide a number with up to 5 | Planned average number of patients on the unit per day on the Night Shift? (Please provide a number with up to 5 |
|------------------------|---|--|--|--|
| Name of Clinical Unit: | the hospital.   | digits. Ex: 101.50)  | digits. Ex: 101.50)  | digits. Ex: 101.50)  |
| Emergency Department   | Emergency Department  | 2  | 5  | 10   |
|                        | Medical/ Surgical/  |  |  |  |
| Medical/Surgical       | Telemetry   | 2  | 1.74   | 9.2  |

## LPN NIGHT SHIFT STAFFING

| Name of Clinical Unit: | What is the planned average number of patients for which one RN on the unit will provide direct patient care per day on the Night Shift (Please provide a number with up to 5 digits. Ex: 101.50)? | Planned average number of Licensed Practical Nurses (LPN) on the unit providing direct patient care per day on the Night Shift? (Please provide a number with up to 5 digits. Ex: 101.50) |
|------------------------|--|---|
| Emergency Department   | 5  | 0   |
| Medical/Surgical       | 4.6  | 0   |

NIGHT SHIFT ANCILLARY STAFF

| Name of Clinical Unit: | Planned total hours of<br>LPN care per patient<br>including adjustment for<br>case mix and acuity on<br>the Night Shift (Please<br>provide a number with<br>up to 5 digits. Ex: 101.50) | Planned average number of ancillary members of the frontline team on the unit per day on the Night Shift? (Please provide a number with up to 5 digits. Ex: 101.50) |
|------------------------|---|---|
| Emergency Department   | 0   | 1   |
| Medical/Surgical       | 0   | 0   |

## NIGHT SHIFT UNLICENSED STAFFING

| Name of Clinical Unit: | Planned total hours of ancillary members of the frontline team including adjustment for case mix and acuity on the Night Shift (Please provide a number with up to 5 digits. Ex: 101.50) | Planned average number of unlicensed personnel on the unit providing direct patient care per day on the Night Shift?  (Please provide a number with up to 5 digits. Ex: 101.50) |
|------------------------|--|---|
| Emergency Department   | 8  | 0   |
| Medical/Surgical       | 0  | 1   |

# NIGHT SHIFT ADDITIONAL RESOURCES

| Name of Clinical Unit: | Planned total hours of unlicensed personnel care per patient including adjustment for case mix and acuity on the Night Shift (Please provide a number with up to 5 digits. Ex: 101.50) |
|------------------------|--|
| Emergency Department   | 0  |
| Medical/Surgical       | 0.87   |

#### NIGHT SHIFT CONSENSUS INFORMATION

|                        | Description of additional  |                              |                            |                       |
|------------------------|----------------------------|------------------------------|----------------------------|-----------------------|
|                        | Description of additional  |                              |                            |                       |
|                        | resources available to     |                              |                            |                       |
|                        | support unit level         |                              |                            |                       |
|                        | patient care on the Night  |                              |                            |                       |
|                        | Shift. These resources     |                              |                            |                       |
|                        | include but are not        |                              |                            |                       |
|                        | limited to unit clerical   |                              |                            |                       |
|                        | staff,                     |                              |                            |                       |
|                        | admission/discharge        |                              |                            | Statement by members  |
|                        | nurse, and other           |                              | If no,                     | of clinical staffing  |
|                        | coverage provided to       | Our Clinical Staffing        | Chief Executive Officer    | committee selected by |
|                        | registered nurses,         | Committee reached            | Statement in support of    | the general hospital  |
|                        | licensed practical nurses, | consensus on the clinical    | clinical staffing plan for | administration        |
| Name of Clinical Unit: | and ancillary staff.       | staffing plan for this unit: | this unit:                 | (management members): |
| Emergency Department   | Clinical Leader, Provider  | Yes                          |                            |                       |
| Medical/Surgical       | Clinical Leader            | Yes                          |                            |                       |

