HOSPITAL INFORMATION

Region	Metropolitan Area Regional Office
County	Queens
Council	New York City
Network	NORTHWELL HEALTH
Reporting Organization	Long Island Jewish Medical Center
Reporting Organization Id	1630
Reporting Organization Type	Hospital (pfi)
Data Entity	Long Island Jewish Medical Center

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 4 digits. Ex: 10.50)	Planned total hours of RN nursing care per patient including adjustment for case mix and acuity on the Day Shift (Please provide a number with up to 4 digits. Ex: 10.50)	Planned average number of patients on the unit per day on the Day Shift? (Please provide a number with up to 4 digits. Ex: 10.50)	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 4 digits. Ex: 10.50)?
Neuroscience-				
Medical/Surgery	3	2.5	9	3.6
3 Tower - L&D	22	6	27	1.2
4 Tower - Antepartum	4	2.1	14	3.5
6 Tower - Post-Partum	7	1.7	30	4.3
5 Tower - Post-Partum	7	1.7	30	4.3
3 North - Surgery	4	1.2	24	6
4 Tower - Surgery	3	1.6	14	4.7
6 North - Telemetry	4	1.4	21	5.3
7 South - Telemetry	4	1.2	24	6
ESSU - Medicine/Telemetry/Surger y Inpatient Holds Unit	3	1.2	18	6
CSSU - Medicine/Telemetry Inpatient Holds Unit 6 North - Critical Care	2	1.2	12	6
Inpatient Unit	3	3.7	6	2
RCU - Critical Care Inpatient		3./	U	Δ
Unit	3	1.8	12	4
CCU - Critical Care Inpatient		1.0	14	7
Unit	4	3.7	8	2
CTICU - Critical Care	T T	J.1		2
Inpatient Unit	6	3.4	13	2.2

SICU - Critical Care Inpatient				
Unit	7	3.9	13	1.9
MICU - Critical Care				
Inpatient Unit	8	4.2	14	1.75
NICU - Neonatal ICU	24	3.4	52	2.2
2 Central - Pediatric ICU	3	2.2	10	3.3
PICU - Pediatric ICU	15	5	22	1.5
Med 4 - Hematology				
Oncology Inpatient Unit	6	2.6	17	2.8
Med 3 - Medical Surgical				
Inpatient Unit	4	2.1	13	3.5
3 Central - Medical Surgical				
Inpatient Unit	4	2	15	3.8
Pavilion 3 - Medical Surgical				
Inpatient Unit	6	2	22	3.7
ML6 - Acute Inpatient BH				
Unit	3	1.3	18.19	6.1
ML5 - Acute Inpatient BH				
Unit	3	1.6	18.12	6
ML4 - Acute Inpatient BH				
Unit	4	1.3	25.5	6.4
ML3 - Acute Inpatient BH				
Unit	4	1.3	25.66	6.4
2 South - Acute Inpatient BH				
Unit	3	1.3	18.58	6.2
9 Tower - Surgery	6	1.5	30	5
8 Tower - Surgery	6	1.5	30	5
9 North - Medicine	6	1.2	36	6
9 South - Medicine	5	1.1	32	6.4
8 North - Medicine	5	1.2	30	6
8 South - Surgery	6	1.5	30	5
7 North - Telemetry	5	1.3	28	5.6
5 South - Medicine	6	1.2	37	6.2
5 North - Telemetry	5	1.1	34	6.8
4 North - Telemetry	4	1	30	7.5
4 South - Telemetry	5	1.1	33	6.6
2 West - Acute Inpatient BH				
Unit	3	1.2	19.81	6.6

2 North - Acute Inpatient				
BH Unit	3	1.2	20.03	6.7
1 West - Acute Inpatient BH				
Unit	3	1.2	19.83	6.6
1 South - Acute Inpatient BH				
Unit	3	1.2	20.03	6.7
1 North - Acute Inpatient				
BH Unit	3	1.4	17.6	5.9

LPN DAY 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 Day Shift? (Please provide a number with up to 4 digits. Ex: 10.50)	Planned total hours of LPN care per patient including adjustment for case mix and acuity on the Day Shift (Please provide a number with up to 4 digits. Ex: 10.50)
Neuroscience- Medical/Surgery	0	0
3 Tower - L&D	0	0
4 Tower - Antepartum	0	0
6 Tower - Post-Partum	0	0
5 Tower - Post-Partum	0	0
3 North - Surgery	0	0
4 Tower - Surgery	0	0
6 North - Telemetry	0	0
7 South - Telemetry	0	0
ESSU - Medicine/Telemetry/Surger	0	0
y Inpatient Holds Unit	U	U

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CCCLL Madiaina/Talamatm		
CSSU - Medicine/Telemetry	0	
Inpatient Holds Unit 6 North - Critical Care	0	0
	0	
Inpatient Unit	0	0
RCU - Critical Care Inpatient	•	
Unit	0	0
CCU - Critical Care Inpatient		
Unit	0	0
CTICU - Critical Care		
Inpatient Unit	0	0
SICU - Critical Care Inpatient		
Unit	0	0
MICU - Critical Care		
Inpatient Unit	0	0
NICU - Neonatal ICU	0	0
2 Central - Pediatric ICU	0	0
PICU - Pediatric ICU	0	0
Med 4 - Hematology		
Oncology Inpatient Unit	0	0
Med 3 - Medical Surgical		
Inpatient Unit	0	0
3 Central - Medical Surgical		
Inpatient Unit	0	0
Pavilion 3 - Medical Surgical		
Inpatient Unit	0	0
ML6 - Acute Inpatient BH		
Unit	0	0
ML5 - Acute Inpatient BH		
Unit	0	0
ML4 - Acute Inpatient BH		
Unit	0	0
ML3 - Acute Inpatient BH		
Unit	0	0
2 South - Acute Inpatient BH		
Unit	0	0
9 Tower - Surgery	0	0
8 Tower - Surgery	0	0
9 North - Medicine	0	0

9 South - Medicine	0	0
8 North - Medicine	0	0
8 South - Surgery	0	0
7 North - Telemetry	0	0
5 South - Medicine	0	0
5 North - Telemetry	0	0
4 North - Telemetry	4	1
4 South - Telemetry	0	0
2 West - Acute Inpatient BH		
Unit	0	0
2 North - Acute Inpatient		
BH Unit	0	0
1 West - Acute Inpatient BH		
Unit	0	0
1 South - Acute Inpatient BH		
Unit	0	0
1 North - Acute Inpatient		
BH Unit	0	0

DAY 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 Day Shift? (Please provide a number with up to 4 digits. Ex: 10.50)	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 4 digits. Ex: 10.50)
Neuroscience-		
Neuroscience-		
Medical/Surgery	4.03	3.36
	4.03 3.3	3.36 0.91
Medical/Surgery		
Medical/Surgery 3 Tower - L&D	3.3	0.91
Medical/Surgery 3 Tower - L&D 4 Tower - Antepartum	3.3 2.36	0.91 0.6

4 Tower - Surgery	2.36	0.6
6 North - Telemetry	5.17	1.84
7 South - Telemetry	4.18	1.36
ESSU -		
Medicine/Telemetry/Surger		
y Inpatient Holds Unit	2.16	0.54
CSSU - Medicine/Telemetry		
Inpatient Holds Unit	2.16	0.54
6 North - Critical Care		
Inpatient Unit	4.17	5.21
RCU - Critical Care Inpatient		
Unit	3.67	2.29
CCU - Critical Care Inpatient		
Unit	4.37	4.09
CTICU - Critical Care		
Inpatient Unit	4.87	2.8
SICU - Critical Care Inpatient		
Unit	4.87	2.8
MICU - Critical Care		
Inpatient Unit	6.37	3.41
NICU - Neonatal ICU	13.95	3.36
2 Central - Pediatric ICU	4.03	3.36
PICU - Pediatric ICU	9.63	3.28
Med 4 - Hematology		
Oncology Inpatient Unit	7.67	3.38
Med 3 - Medical Surgical		
Inpatient Unit	6.53	3.48
3 Central - Medical Surgical		
Inpatient Unit	7.04	3.43
Pavilion 3 - Medical Surgical		
Inpatient Unit	10.63	3.62
ML6 - Acute Inpatient BH		
Unit	2.1	0.86
ML5 - Acute Inpatient BH		
Unit	2.1	0.86
ML4 - Acute Inpatient BH	_	
Unit	3.7	0.91

ML3 - Acute Inpatient BH		
Unit	3.1	0.9
2 South - Acute Inpatient BH		
Unit	2.1	0.84
9 Tower - Surgery	4.63	1.15
8 Tower - Surgery	4.63	1.15
9 North - Medicine	6.63	1.38
9 South - Medicine	5.63	1.31
8 North - Medicine	5.63	1.4
8 South - Surgery	5.63	1.4
7 North - Telemetry	5.68	1.52
5 South - Medicine	6.68	1.35
5 North - Telemetry	6.68	1.47
4 North - Telemetry	5.64	1.36
4 South - Telemetry	5.64	1.28
2 West - Acute Inpatient BH		
Unit	2.1	0.79
2 North - Acute Inpatient		
BH Unit	2.1	0.78
1 West - Acute Inpatient BH		
Unit	2.1	0.79
1 South - Acute Inpatient BH		
Unit	2.1	0.78
1 North - Acute Inpatient		
BH Unit	2.1	0.89

DAY SHIFT UNLICENSED STAFFING

Planned average number	Planned total hours of
of unlicensed personnel	unlicensed personnel
(e.g., patient care	care per patient
technicians) on the unit	including adjustment for
providing direct patient	case mix and acuity on
care per day on the Day	the Day Shift (Please
Shift? (Please provide a	provide a number with
number with up to 4	up to 4 digits. Ex: 10.50)
digits. Ex: 10.50)	
	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 4

Neuroscience-		
Medical/Surgery	1	0.85
3 Tower - L&D	2	0.55
4 Tower - Antepartum	1	0.53
6 Tower - Post-Partum	3	0.75
5 Tower - Post-Partum	3	0.75
	3	0.73
3 North - Surgery	1	0.53
4 Tower - Surgery		
6 North - Telemetry	2	0.71
7 South - Telemetry	4	1.2
ESSU -		
Medicine/Telemetry/Surger		0.00
y Inpatient Holds Unit	2	0.83
00011 14 17 17		
CSSU - Medicine/Telemetry	_	
Inpatient Holds Unit	1	0.62
6 North - Critical Care		
Inpatient Unit	0.5	0.62
RCU - Critical Care Inpatient		
Unit	2	1.25
CCU - Critical Care Inpatient		
Unit	1	0.93
CTICU - Critical Care		
Inpatient Unit	1	0.57
SICU - Critical Care Inpatient		
Unit	1	0.57
MICU - Critical Care		
Inpatient Unit	1	0.53
NICU - Neonatal ICU	1	0.14
2 Central - Pediatric ICU	1	0.75
PICU - Pediatric ICU	1	0.34
Med 4 - Hematology		
Oncology Inpatient Unit	1	0.45
Med 3 - Medical Surgical		
Inpatient Unit	1	0.58
3 Central - Medical Surgical		
Inpatient Unit	1	0.5
Pavilion 3 - Medical Surgical		
Inpatient Unit	1	0.34

4	1.65
4	1.65
4	1.17
4	1.17
4	1.61
3	0.75
3	0.75
4	0.83
3	0.7
3	0.75
3	0.75
3	0.8
4	0.81
4	0.88
0	0
3	0.68
4	1.51
3	1.12
4	1.51
3	1.12
3	1.27
	4 4 4 4 3 3 3 3 4 4 4 0 3 3 4 3 4 3 3 4 3 4

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
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.
	Staff educators, peer
Neuroscience-	advocates, unit clerical
Medical/Surgery	support
	Staff Educator, Patient
3 Tower - L&D	Transport, Unit Receptionist
	Staff Educator, Patient
4 Tower - Antepartum	Transport, Unit Receptionist
	Staff Educator, Patient
6 Tower - Post-Partum	Transport, Unit Receptionist
	Chaff Educator Dations
5 Tower - Post-Partum	Staff Educator, Patient Transport, Unit Receptionist
J TOWET - FUST-FAITUIL	Transport, offit Receptionist
	Staff Educator, Patient
3 North - Surgery	Transport, Unit Receptionist
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	Staff Educator, Patient
4 Tower - Surgery	

	Staff Educator, Patient
6 North - Telemetry	Transport, Unit Receptionist
	Staff Educator, Patient
7 South - Telemetry	Transport, Unit Receptionist
ESSU -	
Medicine/Telemetry/Surger	Staff Educator, Patient
y Inpatient Holds Unit	Transport, Unit Receptionist
CSSU - Medicine/Telemetry	Staff Educator, Patient
Inpatient Holds Unit	Transport, Unit Receptionist
6 North - Critical Care	Staff Educator, Patient
Inpatient Unit	Transport, Unit Receptionist
RCU - Critical Care Inpatient	Staff Educator, Patient
Unit	Transport, Unit Receptionist
CCU - Critical Care Inpatient	Staff Educator, Patient
Unit	Transport, Unit Receptionist
CTICU - Critical Care	Staff Educator, Patient
Inpatient Unit	Transport, Unit Receptionist
SICU - Critical Care Inpatient	Staff Educator, Patient
Unit	Transport, Unit Receptionist
MICU - Critical Care	Staff Educator, Patient
Inpatient Unit	Transport, Unit Receptionist
	Staff Educators, Peer
	Advocates, Unit Clerical
NICU - Neonatal ICU	Support
	Staff Educators, Peer
	Advocates, Unit Clerical
2 Central - Pediatric ICU	Support
	Staff Educators, Peer
	Advocates, Unit Clerical
PICU - Pediatric ICU	Support

	Staff Educators, Peer
Med 4 - Hematology	Advocates, Unit Clerical
Oncology Inpatient Unit	Support
	Staff Educators, Peer
Med 3 - Medical Surgical	Advocates, Unit Clerical
Inpatient Unit	Support
	Staff Educators, Peer
3 Central - Medical Surgical	Advocates, Unit Clerical
Inpatient Unit	Support
	Staff Educators, Peer
Pavilion 3 - Medical Surgical	Advocates, Unit Clerical
Inpatient Unit	Support
	Staff Educators, Peer
ML6 - Acute Inpatient BH	Advocates, Unit Clerical
Unit	Support, Admissions Nurse
	Staff Educators, Peer
ML5 - Acute Inpatient BH	Advocates, Unit Clerical
Unit	Support, Admissions Nurse
	Staff Educators, Peer
ML4 - Acute Inpatient BH	Advocates, Unit Clerical
Unit	Support, Admissions Nurse
	Staff Educators, Peer
ML3 - Acute Inpatient BH	Advocates, Unit Clerical
Unit	Support, Admissions Nurse
	Staff Educators, Peer
2 South - Acute Inpatient BH	
Unit	Support, Admissions Nurse
	11.71.6
	Unit Secretary, Staff
0 T 0	
9 Tower - Surgery	Educator, Patient Transport
9 Tower - Surgery	
9 Tower - Surgery 8 Tower - Surgery	Unit Secretary, Staff Educator, Patient Transport

	Unit Secretary, Staff
9 North - Medicine	Educator, Patient Transport
	Unit Secretary, Staff
9 South - Medicine	Educator, Patient Transport
	Unit Secretary, Staff
8 North - Medicine	Educator, Patient Transport
	Unit Secretary, Staff
8 South - Surgery	Educator, Patient Transport
	Unit Socratary Staff
7 North - Telemetry	Unit Secretary, Staff Educator, Patient Transport
7 North - Telemetry	Educator, Patient Transport
	Unit Secretary, Staff
5 South - Medicine	Educator, Patient Transport
3 30dtii Wedicine	Laucator, rations transport
	Unit Secretary, Staff
5 North - Telemetry	Educator, Patient Transport
,	
	Unit Secretary, Staff
4 North - Telemetry	Educator, Patient Transport
	Staff Educator, Patient
	Transport, , Unit
4 South - Telemetry	Receptionist
	Staff Educators, Peer
2 West - Acute Inpatient BH	Advocates, Unit Clerical
Unit	Support, Admissions Nurse
	0. 55 -
	Staff Educators, Peer
2 North - Acute Inpatient	Advocates, Unit Clerical
BH Unit	Support, Admissions Nurse
	Staff Educator Door
1 West Acute Innationt DI	Staff Educator, Peer
1 West - Acute Inpatient BH Unit	Advocate, Unit Clerical Support, Admissions Nurse
Unit	Support, Admissions nurse

1 South - Acute Inpatient BH Unit	Staff Educator, Peer Advocate, Unit Clerical Support, Admissions Nurse
0	
1 North - Acute Inpatient	Staff Educator, Peer Advocates, Unit Clerical
BH Unit	Support, Admissions Nurse

DAY SHIFT CONSENSUS INFORMATION

DAT SHIFT CONSENSUS INFO	MINATION			
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 Committee reached consensus on the clinical 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):
Neuroscience-	-			
Medical/Surgery	Yes			
3 Tower - L&D	Yes			
4 Tower - Antepartum	Yes			
6 Tower - Post-Partum	Yes			
5 Tower - Post-Partum	Yes			
3 North - Surgery	Yes			
4 Tower - Surgery	Yes			
6 North - Telemetry	Yes			
7 South - Telemetry	Yes			
ESSU -				
Medicine/Telemetry/Surger				
y Inpatient Holds Unit	Yes			
CSSU - Medicine/Telemetry Inpatient Holds Unit	Yes			
6 North - Critical Care				
Inpatient Unit	Yes			

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RCU - Critical Care Inpatient	V			
Unit	Yes			
CCU - Critical Care Inpatient				
Unit	Yes			
CTICU - Critical Care	.,			
Inpatient Unit	Yes			
SICU - Critical Care Inpatient				
Unit	Yes			
MICU - Critical Care				
Inpatient Unit	Yes			
NICU - Neonatal ICU	Yes			
2 Central - Pediatric ICU	Yes			
PICU - Pediatric ICU	Yes			
Med 4 - Hematology				
Oncology Inpatient Unit	Yes			
Med 3 - Medical Surgical				
Inpatient Unit	Yes			
3 Central - Medical Surgical				
Inpatient Unit	Yes			
Pavilion 3 - Medical Surgical				
Inpatient Unit	Yes			
ML6 - Acute Inpatient BH				
Unit	Yes			
ML5 - Acute Inpatient BH				
Unit	Yes			
ML4 - Acute Inpatient BH				
Unit	Yes			
ML3 - Acute Inpatient BH				
Unit	Yes			
2 South - Acute Inpatient BH				
Unit	Yes			
9 Tower - Surgery	Yes			
8 Tower - Surgery	Yes			
9 North - Medicine	Yes			
9 South - Medicine	Yes			
8 North - Medicine	Yes			
8 South - Surgery	Yes			
7 North - Telemetry	Yes			
5 South - Medicine	Yes			
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5 North - Telemetry	Yes			
4 North - Telemetry	Yes			
4 South - Telemetry	Yes			
			propose that the current staffing	propose the addition of an additional
			plan is appropriate for 2	RN on the night shift and an
			West. In response to the	additional night shift MHW
			request for	to
			increased staff on the 2	the current staffing plan.
			West night shift, the	The following justification
			administrative coleads	was
			presented the following	presented to support the
			information. A review of the	addition of these team
			aggression index for 2 West	members to the
			over the last 6 years	staffing plan. The clinical co-
			showed that	leads stated that an
			the unit had half as many	additional
			episodes of aggression in	RN was needed on the night
			2022 as in	shift due to the unit being
		For 2 West, the executive	2016. The measures put in	an
		director considered both	place to support the unit	acute specialty unit.
		rationales	greatly	Concerns that there had
		and determined the	contributed to this	been a recent
		outcomes as listed.	decrease.	increase in aggression on 2
		Decisions were based	A specialty unit does not	West were also raised by
		on our enhanced model of	determine the need for an	the
		patient care delivery, the	additional	clinical co-leads.
		collaboration between	RN in base staffing. Not all	The clinical co-leads stated
		disciplines, quality metrics	specialty units have an	that there was a need for an
2 West - Acute Inpatient BH		data, and	additional	additional MHW on nights
Unit	No	budgetary constraints.	RN on the night shift. The	so that there would be

			additional MHW by the	propose the addition of an
			clinical	additional
			co- leads was not supported	MHW for the night shift to
			by the administrative co-	the current staffing plan.
			leads.	The
			They stated that the current	
			unit staffing plan reflects	presented to support the
			the	addition
			appropriate number of	of an additional MHW to
			team members to care for	the staffing plan.
			the patients	The clinical co-leads stated
			·	that there was a need for a
			day. Changes in unit MHW	additional MHW on nights
			, staffing	so that there would be
			is based on a number of	"more
			factors including census,	hands-on deck", as well as
		For 2 North, the executive	bed blocks,	increased interactions with
		director considered both	number of C:Os on the unit,	patients
		rationales	appointments/ER visits, and	resulting in an increased
		and determined the	particular care needs of the	level of awareness of what
		outcomes as listed.	current patient population	was
		Decisions were based	on the	happening on the unit. In
		on our enhanced model of	unit. Additional MHW	addition, they stated that
		patient care delivery, the	support is provided to the	having only
		collaboration between	unit if	2 MHWs on the night shift
		disciplines, quality metrics	indicated based on	leaves only 1 MHW to deal
2 North - Acute Inpatient		data, and	assessment and	with
BH Unit	No	budgetary constraints.	communication among unit	any situation that might

			additional MHW by the clinical	propose the addition of an additional
			co- leads was not supported	MHW for the night shift to
			by the administrative co-	the current staffing plan.
			leads.	The
			They stated that the current	•
			unit staffing plan reflects	presented to support the
			the	addition
			appropriate number of	of an additional MHW to
			team members to care for	the staffing plan.
			the patients	The clinical co-leads stated
			on the unit throughout the	that there was a need for ar
			day. Changes in unit MHW	additional MHW on nights
			staffing	so that there would be
			is based on a number of	"more
			factors including census,	hands-on deck", as well as
		For 1 West, the executive	bed blocks,	increased interactions with
		director considered both	number of C:Os on the unit,	patients
		rationales	appointments/ER visits, and	resulting in an increased
		and determined the	particular care needs of the	level of awareness of what
		outcomes as listed.	current patient population	was
		Decisions were based	on the	happening on the unit. In
		on our enhanced model of	unit. Additional MHW	addition, they stated that
		patient care delivery, the	support is provided to the	having only
		collaboration between	unit if	2 MHWs on the night shift
		disciplines, quality metrics	indicated based on	leaves only 1 MHW to deal
1 West - Acute Inpatient BH		data, and	assessment and	with
Unit	No	budgetary constraints.	communication among unit	any situation that might

			additional MHW by the	propose the addition of an
			clinical	additional
			co- leads was not supported	MHW for the night shift to
			by the administrative co-	the current staffing plan.
			leads.	The
			They stated that the current	following justification was
			unit staffing plan reflects	presented to support the
			the	addition
			appropriate number of	of an additional MHW to
			team members to care for	the staffing plan.
			the patients	The clinical co-leads stated
			on the unit throughout the	that there was a need for an
			day. Changes in unit MHW	additional MHW on nights
			staffing	so that there would be
			is based on a number of	"more
			factors including census,	hands-on deck", as well as
		For 1 South, the executive	bed blocks,	increased interactions with
		director considered both	number of C:Os on the unit,	patients
		rationales	appointments/ER visits, and	resulting in an increased
		and determined the	particular care needs of the	level of awareness of what
		outcomes as listed.	current patient population	was
		Decisions were based	on the	happening on the unit. In
		on our enhanced model of	unit. Additional MHW	addition, they stated that
		patient care delivery, the	support is provided to the	having only
		collaboration between	unit if	2 MHWs on the night shift
		disciplines, quality metrics	indicated based on	leaves only 1 MHW to deal
1 South - Acute Inpatient BH		data, and	assessment and	with
Unit	No	budgetary constraints.	communication among unit	any situation that might

Г	I		and distance I NALDALL LI	manage the subdivision of
			additional MHW by the	propose the addition of an
			clinical	additional
			co- leads was not supported	MHW for the night shift to
			by the administrative co-	the current staffing plan.
			leads.	The
			They stated that the current	following justification was
			unit staffing plan reflects	presented to support the
			the	addition
			appropriate number of	of an additional MHW to
			team members to care for	the staffing plan.
			the patients	The clinical co-leads stated
			on the unit throughout the	that there was a need for an
			day. Changes in unit MHW	additional MHW on nights
			staffing	so that there would be
			is based on a number of	"more hands-on deck", as
			factors including census,	well as increased
		For 1 North, the executive	bed blocks,	interactions with patients
		director considered both	number of C:Os on the unit,	resulting in an increased
		rationales	appointments/ER visits, and	level of awareness of what
		and determined the	particular care needs of the	was
		outcomes as listed.	current patient population	happening on the unit. In
		Decisions were based	on the	addition, they stated that
		on our enhanced model of	unit. Additional MHW	having only
		patient care delivery, the	support is provided to the	2 MHWs on the night shift
		collaboration between	unit if	leaves only 1 MHW to deal
		disciplines, quality metrics	indicated based on	with
1 North - Acute Inpatient		data, and	assessment and	any situation that might
BH Unit	No	budgetary constraints.	communication among unit	arise while the other MHW

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 4 digits. Ex: 10.50)	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 4 digits. Ex: 10.50)	Planned average number of patients on the unit per day on the Evening Shift? (Please provide a number with up to 4 digits. Ex: 10.50)	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 4 digits. Ex: 10.50)?
Neuroscience-				
Medical/Surgery	3	2.5	9	3.6
3 Tower - L&D	22	6	27	1.2
4 Tower - Antepartum	4	2.1	14	3.5
6 Tower - Post-Partum	7	1.7	30	4.3
5 Tower - Post-Partum	7	1.7	30	4.3
3 North - Surgery	4	1.2	24	6
4 Tower - Surgery	3	1.6	14	4.7
6 North - Telemetry	4	1.4	21	5.3
7 South - Telemetry	4	1.2	24	6
ESSU - Medicine/Telemetry/Surger y Inpatient Holds Unit	3	1.2	18	6
CSSU - Medicine/Telemetry Inpatient Holds Unit 6 North - Critical Care	2	1.2	12	6
Inpatient Unit	3	3.7	6	2
RCU - Critical Care Inpatient	J	3.7	U	۷
Unit	3	1.8	12	4
CCU - Critical Care Inpatient				
Unit	4	3.7	8	2
CTICU - Critical Care Inpatient Unit	6	3.4	13	2.2

SICU - Critical Care Inpatient				
Unit	7	3.9	13	1.9
MICU - Critical Care				
Inpatient Unit	8	4.2	14	1.75
NICU - Neonatal ICU	24	3.4	52	2.2
2 Central - Pediatric ICU	3	2.2	10	3.3
PICU - Pediatric ICU	15	5	22	1.5
Med 4 - Hematology				
Oncology Inpatient Unit	6	2.6	17	2.8
Med 3 - Medical Surgical				
Inpatient Unit	4	2.1	13	3.5
3 Central - Medical Surgical				
Inpatient Unit	4	2	15	3.8
Pavilion 3 - Medical Surgical				
Inpatient Unit	6	2	22	3.7
ML6 - Acute Inpatient BH				
Unit	3	1.3	18.19	6.1
ML5 - Acute Inpatient BH				
Unit	3	1.3	18.12	6
ML4 - Acute Inpatient BH				
Unit	3.5	1.1	25.5	7.9
ML3 - Acute Inpatient BH				
Unit	3.5	1.1	25.66	7.3
2 South - Acute Inpatient BH				
Unit	3	1.3	18.58	6.2
9 Tower - Surgery	6	1.5	30	5
8 Tower - Surgery	6	1.5	30	5
9 North - Medicine	6	1.2	36	6
9 South - Medicine	5	1.1	32	6.4
8 North - Medicine	5	1.2	30	6
8 South - Surgery	6	1.5	30	5
7 North - Telemetry	5	1.3	28	5.6
5 South - Medicine	6	1.2	37	6.2
5 North - Telemetry	5	1.1	34	6.8
4 North - Telemetry	4	1	30	7.5
4 South - Telemetry	5	1.1	33	6.6
2 West - Acute Inpatient BH				
Unit	2.5	1	19.81	7.9

2 North - Acute Inpatient				
BH Unit	2.5	1	20.03	8
1 West - Acute Inpatient BH				
Unit	3	1.2	19.83	6.6
1 South - Acute Inpatient BH				
Unit	2.5	1	20.03	8
1 North - Acute Inpatient				
BH Unit	2.5	1.1	17.6	7

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 4 digits. Ex: 10.50)	Planned total hours of LPN care per patient including adjustment for case mix and acuity on the Evening Shift (Please provide a number with up to 4 digits. Ex: 10.50)
Neuroscience-		
Medical/Surgery	0	0
3 Tower - L&D	0	0
4 Tower - Antepartum	0	0
6 Tower - Post-Partum	0	0
5 Tower - Post-Partum	0	0
3 North - Surgery	0	0
4 Tower - Surgery	0	0
6 North - Telemetry	0	0
7 South - Telemetry	0	0
ESSU - Medicine/Telemetry/Surger y Inpatient Holds Unit	0	0
CSSU - Medicine/Telemetry Inpatient Holds Unit	0	0
6 North - Critical Care Inpatient Unit	0	0

DCII Critical Cara Innationt		
RCU - Critical Care Inpatient	0	0
Unit	0	0
CCU - Critical Care Inpatient	0	0
Unit Critical Care	0	0
CTICU - Critical Care	0	0
Inpatient Unit	0	0
SICU - Critical Care Inpatient	0	
Unit	0	0
MICU - Critical Care		
Inpatient Unit	0	0
NICU - Neonatal ICU	0	0
2 Central - Pediatric ICU	0	0
PICU - Pediatric ICU	0	0
Med 4 - Hematology		
Oncology Inpatient Unit	0	0
Med 3 - Medical Surgical		
Inpatient Unit	0	0
3 Central - Medical Surgical		
Inpatient Unit	0	0
Pavilion 3 - Medical Surgical		
Inpatient Unit	0	0
ML6 - Acute Inpatient BH		
Unit	0	0
ML5 - Acute Inpatient BH		
Unit	0	0
ML4 - Acute Inpatient BH		
Unit	0	0
ML3 - Acute Inpatient BH		
Unit	0	0
2 South - Acute Inpatient BH		
Unit	0	0
9 Tower - Surgery	0	0
8 Tower - Surgery	0	0
9 North - Medicine	0	0
9 South - Medicine	0	0
8 North - Medicine	0	0
8 South - Surgery	0	0
7 North - Telemetry	0	0
5 South - Medicine	0	0

5 North - Telemetry	0	0
4 North - Telemetry	4	1
4 South - Telemetry	0	0
2 West - Acute Inpatient BH		
Unit	0	0
2 North - Acute Inpatient		
BH Unit	0	0
1 West - Acute Inpatient BH		
Unit	0	0
1 South - Acute Inpatient BH		
Unit	0	0
1 North - Acute Inpatient		
BH Unit	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 4 digits. Ex: 10.50)	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 4 digits. Ex: 10.50)
Neuroscience-		
Medical/Surgery	4.73	3.94
3 Tower - L&D	0.52	0.12
4 Tower - Antepartum	0.34	0.08
6 Tower - Post-Partum	0.68	0.15
5 Tower - Post-Partum	0.68	0.15
3 North - Surgery	0.69	0.19
4 Tower - Surgery	0.34	0.08
6 North - Telemetry	0.92	0.22
7 South - Telemetry	0.73	0.19
ESSU - Medicine/Telemetry/Surger		
y Inpatient Holds Unit	0.46	0.07

CSSIL Modicine/Tolomoter		
CSSU - Medicine/Telemetry Inpatient Holds Unit	0.46	0.07
6 North - Critical Care	0.40	0.07
Inpatient Unit	0.92	0.77
RCU - Critical Care Inpatient	0.32	0.77
Unit	0.92	0.38
CCU - Critical Care Inpatient	0.32	0.50
Unit	0.92	0.58
CTICU - Critical Care	0.32	0.38
Inpatient Unit	0.92	0.35
SICU - Critical Care Inpatient	0.32	0.55
Unit	0.92	0.35
MICU - Critical Care	0.52	0.55
Inpatient Unit	0.92	0.33
NICU - Neonatal ICU	2.73	0.38
2 Central - Pediatric ICU	4.73	3.94
PICU - Pediatric ICU	3.73	1.27
Med 4 - Hematology		
Oncology Inpatient Unit	8.73	3.85
Med 3 - Medical Surgical		
Inpatient Unit	6.73	3.58
3 Central - Medical Surgical		
Inpatient Unit	5.73	2.79
Pavilion 3 - Medical Surgical		
Inpatient Unit	7.73	2.64
ML6 - Acute Inpatient BH		
Unit	0	0
ML5 - Acute Inpatient BH		
Unit	0	0
ML4 - Acute Inpatient BH		
Unit	0	0
ML3 - Acute Inpatient BH		
Unit	0	0
2 South - Acute Inpatient BH		
Unit	0	0
9 Tower - Surgery	0.68	0.15
8 Tower - Surgery	0.68	0.15
9 North - Medicine	0.68	0.12

0.68	0.14
0.68	0.15
0.68	0.15
0.73	0.16
0.73	0.12
0.73	0.13
5.64	1.36
0.68	0.14
0	0
0	0
0	0
0	0
0	0
	0.68 0.73 0.73 0.73 5.64 0.68 0

EVENING 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 on the unit providing direct patient care per day on the Evening Shift? (Please provide a number with up to 4 digits. Ex: 10.50)	Planned total hours of unlicensed personnel care per patient including adjustment for case mix and acuity on the Evening Shift (Please provide a number with up to 4 digits. Ex: 10.50)
Neuroscience- Medical/Surgery	1	0.34
3 Tower - L&D	2	0.55
4 Tower - Antepartum	1	0.53
6 Tower - Post-Partum	3	0.75
5 Tower - Post-Partum	3	0.75
3 North - Surgery	1	0.31
4 Tower - Surgery	1	0.53
6 North - Telemetry	2	0.71

7 South - Telemetry	4	1.2
ESSU -		
Medicine/Telemetry/Surger		
y Inpatient Holds Unit	2	0.83
CSSU - Medicine/Telemetry		
Inpatient Holds Unit	1	0.62
6 North - Critical Care		
Inpatient Unit	0.5	0.62
RCU - Critical Care Inpatient		
Unit	2	1.25
CCU - Critical Care Inpatient		
Unit	1	0.93
CTICU - Critical Care		
Inpatient Unit	1	0.57
SICU - Critical Care Inpatient		
Unit	1	0.57
MICU - Critical Care		
Inpatient Unit	1	0.53
NICU - Neonatal ICU	1	0.14
2 Central - Pediatric ICU	1	0.75
PICU - Pediatric ICU	1	0.34
Med 4 - Hematology		
Oncology Inpatient Unit	1	0.44
Med 3 - Medical Surgical		
Inpatient Unit	1	0.57
3 Central - Medical Surgical		
Inpatient Unit	1	0.5
Pavilion 3 - Medical Surgical		
Inpatient Unit	1	0.34
ML6 - Acute Inpatient BH		
Unit	4	1.65
ML5 - Acute Inpatient BH		
Unit	4	1.65
ML4 - Acute Inpatient BH		
Unit	4	1.17
ML3 - Acute Inpatient BH		
Unit	4	1.17

4	1.61
1	0.25
3	0.75
1	0.2
3	0.7
3	0.75
1	0.25
3	0.8
3	0.6
3	0.66
0	0
3	0.68
4	1.51
3	1.12
4	1.51
3	1.12
3	1.27
	1 3 1 3 1 3 3 1 3 3 3 0 3 4 3 4 3

EVENING SHIFT ADDITIONAL RESOURCES

	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	clerical 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.
Neuroscience-	
Medical/Surgery	Unit clerical support
	Patient Transport, Unit
3 Tower - L&D	Receptionist
4 Tower - Antepartum	Patient Transport
	Patient Transport, Unit
6 Tower - Post-Partum	Receptionist
	Patient Transport, Unit
5 Tower - Post-Partum	Receptionist
	Patient Transport, Unit
3 North - Surgery	Receptionist
	Patient Transport, Unit
4 Tower - Surgery	Receptionist
	Patient Transport, Unit
6 North - Telemetry	Receptionist
	Patient Transport, Unit
7 South - Telemetry	Receptionist
ESSU -	
Medicine/Telemetry/Surger	Patient Transport, Unit
y Inpatient Holds Unit	Receptionist
CSSU - Medicine/Telemetry	Patient Transport, Unit
Inpatient Holds Unit	Receptionist

6 North - Critical Care	Patient Transport, Unit
Inpatient Unit	Receptionist
RCU - Critical Care Inpatient	Patient Transport, Unit
Unit	Receptionist
CCU - Critical Care Inpatient	Patient Transport, Unit
Unit	Receptionist
CTICU - Critical Care	Patient Transport, Unit
Inpatient Unit	Receptionist
SICU - Critical Care Inpatient	Patient Transport, Unit
Unit	Receptionist
MICU - Critical Care	Patient Transport, Unit
Inpatient Unit	Receptionist
	Staff Educators, Unit
NICU - Neonatal ICU	Clerical Support
	Staff Educators, Unit
2 Central - Pediatric ICU	Clerical Support
	Staff Educators, Unit
PICU - Pediatric ICU	Clerical Support
Med 4 - Hematology	Staff Educators, Unit
Oncology Inpatient Unit	Clerical Support
Med 3 - Medical Surgical	Staff Educators, Unit
Inpatient Unit	Clerical Support
3 Central - Medical Surgical	Staff Educators, Unit
Inpatient Unit	Clerical Support
Pavilion 3 - Medical Surgical	Staff Educators, Unit
Inpatient Unit	Clerical Support
	Staff Educators, Unit
ML6 - Acute Inpatient BH	Clerical Support, Admissions
Unit	Nurse
	Staff Educators, Unit
ML5 - Acute Inpatient BH	Clerical Support, Admissions
Unit	Nurse
	Staff Educators, Unit
ML4 - Acute Inpatient BH	Clerical Support, Admissions
Unit	Nurse
	Staff Educators, Unit
ML3 - Acute Inpatient BH	Clerical Support, Admissions
Unit	Nurse
<u> </u>	

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	Staff Educators, Unit
2 South - Acute Inpatient BH	Clerical Support, Admissions
Unit	Nurse
	Unit Secretary, Patient
9 Tower - Surgery	Transport
	Unit Secretary, Patient
8 Tower - Surgery	Transport
	Unit Secretary, Patient
9 North - Medicine	Transport
	Unit Secretary, Patient
9 South - Medicine	Transport
	Unit Secretary, Patient
8 North - Medicine	Transport
	Unit Secretary, Patient
8 South - Surgery	Transport
	Unit Secretary, Patient
7 North - Telemetry	Transport
	Unit Secretary, Patient
5 South - Medicine	Transport
	Unit Secretary, Patient
5 North - Telemetry	Transport
	Unit Secretary, Patient
4 North - Telemetry	Transport
	Patient Transport, Unit
4 South - Telemetry	Receptionist
	Staff Educators, Unit
2 West - Acute Inpatient BH	Clerical Support, Admissions
Unit	Nurse
2 North - Acute Inpatient	Staff Educator, Unit Clerical
BH Unit	Support, Admissions Nurse
1 West - Acute Inpatient BH	Staff Educator, Unit Clerical
Unit	Support, Admissions Nurse
1 South - Acute Inpatient BH	Staff Educator, Unit Clerical
Unit	Support
1 North - Acute Inpatient	Staff Educator, Unit Clerical
BH Unit	Support, Admissions Nurse

EVENING SHIFT CONSENSUS INFORMATION

	INFORMATION			
Provide a description of				
Clinical Unit, including a			Statement by members	
description of typical		If no,	of clinical staffing	
patient services provided	Our Clinical Staffing	Chief Executive Officer	committee selected by	
on the unit and the	Committee reached	Statement in support of	the general hospital	
unit's location in	consensus on the clinical	clinical staffing plan for	administration	
the hospital.	staffing plan for this unit:	this unit:	(management members):	
Neuroscience-				
Medical/Surgery	Yes			
3 Tower - L&D	Yes			
4 Tower - Antepartum	Yes			
6 Tower - Post-Partum	Yes			
5 Tower - Post-Partum	Yes			
3 North - Surgery	Yes			
4 Tower - Surgery	Yes			
6 North - Telemetry	Yes			
7 South - Telemetry	Yes			
ESSU -				
Medicine/Telemetry/Surger				
y Inpatient Holds Unit	Yes			
CSSU - Medicine/Telemetry				
Inpatient Holds Unit	Yes			
6 North - Critical Care	1.03			
Inpatient Unit	Yes			
RCU - Critical Care Inpatient				
Unit	Yes			
CCU - Critical Care Inpatient				
Unit	Yes			
CTICU - Critical Care				
Inpatient Unit	Yes			
SICU - Critical Care Inpatient				
Unit	Yes			
MICU - Critical Care				
Inpatient Unit	Yes			
NICU - Neonatal ICU	Yes			

PICU - Pediatric ICU	Yes		
Med 4 - Hematology			
Oncology Inpatient Unit	Yes		
Med 3 - Medical Surgical			
Inpatient Unit	Yes		
3 Central - Medical Surgical			
Inpatient Unit	Yes		
Pavilion 3 - Medical Surgical			
Inpatient Unit	Yes		
ML6 - Acute Inpatient BH			
Unit	Yes		
ML5 - Acute Inpatient BH			
Unit	Yes		
ML4 - Acute Inpatient BH			
Unit	Yes		
ML3 - Acute Inpatient BH			
Unit	Yes		
2 South - Acute Inpatient BH			
Unit	Yes		
9 Tower - Surgery	Yes		
8 Tower - Surgery	Yes		
9 North - Medicine	Yes		
9 South - Medicine	Yes		
8 North - Medicine	Yes		
8 South - Surgery	Yes		
7 North - Telemetry	Yes		
5 South - Medicine	Yes		
5 North - Telemetry	Yes		
4 North - Telemetry	Yes		
4 South - Telemetry	Yes		

	T			
			propose that the current	
			staffing	
			plan is appropriate for 2	
			West. In response to the	
			request for	
			increased staff on the 2	
			West night shift, the	
			administrative coleads	
			presented the following	
			information. A review of the	
			aggression index for 2 West	
			over the last 6 years	
			showed that	
			the unit had half as many	
			episodes of aggression in	
			2022 as in	
		For 2 West, the executive	2016. The measures put in	
		director considered both	place to support the unit	
		rationales	greatly	
		and determined the	contributed to this	
		outcomes as listed.	decrease.	
		Decisions were based	A specialty unit does not	
		on our enhanced model of	determine the need for an	
		patient care delivery, the	additional	
		collaboration between	RN in base staffing. Not all	
		disciplines, quality metrics	specialty units have an	
2 West - Acute Inpatient BH		data, and	additional	
Unit	No	budgetary constraints.	RN on the night shift. The	

T			, , ,	
			additional MHW by the	
			clinical	
			co- leads was not supported	
			by the administrative co-	
			leads.	
			They stated that the current	
			unit staffing plan reflects	
			the	
			appropriate number of	
			team members to care for	
			the patients	
			on the unit throughout the	
			day. Changes in unit MHW	
			staffing	
			is based on a number of	
			factors including census,	
		For 2 North, the executive	bed blocks,	
		director considered both	number of C:Os on the unit,	
		rationales	appointments/ER visits, and	
		and determined the	particular care needs of the	
		outcomes as listed.	current patient population	
		Decisions were based on	on the	
		our enhanced model of	unit. Additional MHW	
		patient care delivery, the	support is provided to the	
		collaboration between	unit if	
		disciplines, quality metrics	indicated based on	
2 North - Acute Inpatient		data, and	assessment and	
BH Unit	No	budgetary constraints.	communication among unit	

T	1		· · · I	
			additional MHW by the	
			clinical	
			co- leads was not supported	
			by the administrative co-	
			leads.	
			They stated that the current	
			unit staffing plan reflects	
			the	
			appropriate number of	
	,		team members to care for	
			the patients	
			on the unit throughout the	
			day. Changes in unit MHW	
			staffing	
			is based on a number of	
			factors including census,	
		For 1 West, the executive	bed blocks,	
		director considered both	number of C:Os on the unit,	
		rationales	appointments/ER visits, and	
		and determined the	particular care needs of the	
		outcomes as listed.	current patient population	
		Decisions were based	on the	
	,	on our enhanced model of	unit. Additional MHW	
	,	patient care delivery, the	support is provided to the	
	,	collaboration between	unit if	
	,	disciplines, quality metrics	indicated based on	
1 West - Acute Inpatient BH	,	data, and	assessment and	
Unit	No	budgetary constraints	communication among unit	
Onit	INU	budgetary constraints	communication among unit	

Г	I			
			additional MHW by the	
			clinical	
			co- leads was not supported	
			by the administrative co-	
			leads.	
			They stated that the current	
			unit staffing plan reflects	
			the	
			appropriate number of	
			team members to care for	
			the patients	
			on the unit throughout the	
			day. Changes in unit MHW	
			staffing	
			is based on a number of	
			factors including census,	
		For 1 South, the executive	bed blocks,	
		director considered both	number of C:Os on the unit,	
		rationales	appointments/ER visits, and	
		and determined the	particular care needs of the	
		outcomes as listed.	current patient population	
		Decisions were based	on the	
		on our enhanced model of	unit. Additional MHW	
		patient care delivery, the	support is provided to the	
		collaboration between	unit if	
		disciplines, quality metrics	indicated based on	
1 South - Acute Inpatient BH		data, and	assessment and	
Unit	No	budgetary constraints.	communication among unit	

т			,	
			additional MHW by the	
			clinical	
			co- leads was not supported	
			by the administrative co-	
			leads.	
			They stated that the current	
			unit staffing plan reflects	
			the	
			appropriate number of	
			team members to care for	
			the patients	
			on the unit throughout the	
			day. Changes in unit MHW	
			staffing	
			is based on a number of	
			factors including census,	
		For 1 North, the executive	bed blocks,	
		director considered both	number of C:Os on the unit,	
		rationales	appointments/ER visits, and	
		and determined the	particular care needs of the	
		outcomes as listed.	current patient population	
		Decisions were based	on the	
		on our enhanced model of	unit. Additional MHW	
		patient care delivery, the	support is provided to the	
		collaboration between	unit if	
		disciplines, quality metrics	indicated based on	
1 North - Acute Inpatient		data, and	assessment and	
BH Unit	No	budgetary constraints.	communication among unit	

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 Night Shift? (Please provide a number with up to 4 digits. Ex: 10.50)	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 4 digits. Ex: 10.50)	Planned average number of patients on the unit per day on the Night Shift? (Please provide a number with up to 4 digits. Ex: 10.50)	What is the planned average number of patients for which one RN on the unit will provide direct patient care per day on the Night Shift (Please provide a number with up to 4 digits. Ex: 10.50)?
Neuroscience-				
Medical/Surgical	3	2.5	9	3.6
3 Tower - L&D	19	6	27	1.2
4 Tower - Antepartum	4	2.1	14	3.5
6 Tower - Post-Partum	7	1.7	30	4.3
5 Tower - Post-Partum	7	1.7	30	4.3
3 North - Surgery	4	1.2	24	6
4 Tower - Surgery	3	1.6	14	4.7
6 North - Telemetry	4	1.4	21	5.3
7 South - Telemetry	4	1.2	24	6
ESSU - Medicine/Telemetry/Surger y Inpatient Holds Unit	3	1.2	18	6
CSSU - Medicine/Telemetry Inpatient Holds Unit	2	1.2	12	6
6 North - Critical Care Inpatient Unit	3	3.7	6	2
RCU - Critical Care Inpatient Unit	3	1.8	12	4
CCU - Critical Care Inpatient Unit	4	3.7	8	2
CTICU - Critical Care Inpatient Unit	6	3.4	13	2.2
SICU - Critical Care Inpatient Unit	7	3.9	13	1.9

MICU - Critical Care				
Inpatient Unit	8	4.2	14	1.75
NICU - Neonatal ICU	24	3.4	52	2.2
2 Central - Pediatric ICU	3	2.2	10	3.3
PICU - Pediatric ICU	15	5	22	1.5
Med 4 - Hematology				
Oncology Inpatient Unit	6	2.6	17	2.8
Med 3 - Medical Surgical				
Inpatient Unit	4	2.1	13	3.5
3 Central - Medical Surgical				
Inpatient Unit	4	2	15	3.8
Pavilion 3 - Medical Surgical				
Inpatient Unit	6	2	22	3.7
ML6 - Acute Inpatient BH				
Unit	2	0.9	18.19	9.1
ML5 - Acute Inpatient BH				
Unit	3	1.3	18.12	6
ML4 - Acute Inpatient BH				
Unit	3	0.9	25.5	8.5
ML3 - Acute Inpatient BH				
Unit	3	0.9	25.66	8.6
2 South - Acute Inpatient BH				
Unit	3	1.3	18.58	6.2
9 Tower - Surgery	6	1.5	30	5
8 Tower - Surgery	6	1.5	30	5
9 North - Medicine	6	1.2	36	6
9 South - Medicine	5	1.1	32	6.4
8 North - Medicine	5	1.2	30	6
8 South - Surgery	6	1.5	30	5
7 North - Telemetry	5	1.3	28	5.6
5 South - Medicine	6	1.2	37	6.2
5 North - Telemetry	5	1.1	34	6.8
4 North - Telemetry	4	1	30	7.5
4 South - Telemetry	5	1.1	33	6.6
2 West - Acute Inpatient BH				
Unit	2	0.8	19.81	9.9
2 North - Acute Inpatient				
BH Unit	2	0.8	20.03	10

1 West - Acute Inpatient BH				
Unit	3	1.2	19.83	6.6
1 South - Acute Inpatient BH				
Unit	2	0.8	20.03	10
1 North - Acute Inpatient				
BH Unit	2	0.9	17.6	8.8

LPN NIGHT SHIFT STAFFING

LPN 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 the hospital.	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 4 digits. Ex: 10.50)	Planned total hours of LPN care per patient including adjustment for case mix and acuity on the Night Shift (Please provide a number with up to 4 digits. Ex: 10.50)		
Neuroscience-	ung. ser zer zere ey	up or i organi zm zone o		
Medical/Surgical	0	0		
3 Tower - L&D	0	0		
4 Tower - Antepartum	0	0		
6 Tower - Post-Partum	0	0		
5 Tower - Post-Partum	0	0		
3 North - Surgery	0	0		
4 Tower - Surgery	0	0		
6 North - Telemetry	0	0		
7 South - Telemetry	0	0		
ESSU - Medicine/Telemetry/Surger y Inpatient Holds Unit	0	0		
CSSU - Medicine/Telemetry Inpatient Holds Unit	0	0		
6 North - Critical Care Inpatient Unit	0	0		
RCU - Critical Care Inpatient Unit	0	0		

CCU - Critical Care Inpatient		
Unit	0	0
CTICU - Critical Care	0	
Inpatient Unit	0	0
SICU - Critical Care Inpatient	<u> </u>	·
Unit	0	
MICU - Critical Care	0	0
	0	
Inpatient Unit	0	0
NICU - Neonatal ICU	0	0
2 Central - Pediatric ICU	0	0
PICU - Pediatric ICU	0	0
Med 4 - Hematology	•	
Oncology Inpatient Unit	0	0
Med 3 - Medical Surgical	_	_
Inpatient Unit	0	0
3 Central - Medical Surgical		
Inpatient Unit	0	0
Pavilion 3 - Medical Surgical		
Inpatient Unit	0	0
ML6 - Acute Inpatient BH		
Unit	0	0
ML5 - Acute Inpatient BH		
Unit	0	0
ML4 - Acute Inpatient BH		
Unit	0	0
ML3 - Acute Inpatient BH		
Unit	0	0
2 South - Acute Inpatient BH		
Unit	0	0
9 Tower - Surgery	0	0
8 Tower - Surgery	0	0
9 North - Medicine	0	0
9 South - Medicine	0	0
8 North - Medicine	0	0
8 South - Surgery	0	0
7 North - Telemetry	0	0
5 South - Medicine	0	0
5 North - Telemetry	0	0
4 North - Telemetry	4	1

4 South - Telemetry	0	0
2 West - Acute Inpatient BH		
Unit	0	0
2 North - Acute Inpatient		
BH Unit	0	0
1 West - Acute Inpatient BH		
Unit	0	0
1 South - Acute Inpatient BH		
Unit	0	0
1 North - Acute Inpatient		
BH Unit	0	0

NIGHT 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 Night Shift? (Please provide a number with up to 4 digits. Ex: 10.50)	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 4 digits. Ex: 10.50)
Neuroscience-	digits. Lx. 10.30)	digits. Lx. 10.30)
Medical/Surgical	0.24	0.2
3 Tower - L&D	0.51	0.08
4 Tower - Antepartum	0.31	0.04
6 Tower - Post-Partum	0.53	0.08
5 Tower - Post-Partum	0.53	0.08
3 North - Surgery	0.68	0.1
4 Tower - Surgery	0.31	0.04
6 North - Telemetry	0.93	0.11
7 South - Telemetry	0.72	0.1
ESSU - Medicine/Telemetry/Surger	0.43	0.04
y Inpatient Holds Unit	0.42	0.04

		T
CSSU - Medicine/Telemetry		
Inpatient Holds Unit	0.42	0.04
6 North - Critical Care	0.72	0.04
Inpatient Unit	0.77	0.11
RCU - Critical Care Inpatient	0.77	0.11
Unit	1.17	0.2
CCU - Critical Care Inpatient	1.17	0.2
Unit	1.44	0.3
CTICU - Critical Care	1.44	0.5
	1.56	0.18
Inpatient Unit	1.30	0.18
SICU - Critical Care Inpatient	0.00	0.10
Unit	0.98	0.18
MICU - Critical Care	4.22	0.47
Inpatient Unit	1.22	0.17
NICU - Neonatal ICU	1.4	0.2
2 Central - Pediatric ICU	0.24	0.2
PICU - Pediatric ICU	0.58	0.2
Med 4 - Hematology		
Oncology Inpatient Unit	0.44	0.2
Med 3 - Medical Surgical		
Inpatient Unit	0.37	0.2
3 Central - Medical Surgical		
Inpatient Unit	0.4	0.2
Pavilion 3 - Medical Surgical		
Inpatient Unit	0.58	0.2
ML6 - Acute Inpatient BH		
Unit	0	0
ML5 - Acute Inpatient BH		
Unit	0	0
ML4 - Acute Inpatient BH		
Unit	0	0
ML3 - Acute Inpatient BH		
Unit	0	0
2 South - Acute Inpatient BH		
Unit	0	0
9 Tower - Surgery	0.66	0.08
8 Tower - Surgery	0.66	0.08
9 North - Medicine	0.61	0.06

-		
9 South - Medicine	0.64	0.07
8 North - Medicine	0.66	0.08
8 South - Surgery	0.66	0.08
7 North - Telemetry	0.67	0.08
5 South - Medicine	0.65	0.06
5 North - Telemetry	0.67	0.07
4 North - Telemetry	0.61	0.07
4 South - Telemetry	0.64	0.07
2 West - Acute Inpatient BH		
Unit	0	0
2 North - Acute Inpatient		
BH Unit	0	0
1 West - Acute Inpatient BH		
Unit	0	0
1 South - Acute Inpatient BH		
Unit	0	0
1 North - Acute Inpatient		
BH Unit	0	0

NIGHT 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 on the unit providing direct patient care per day on the Night Shift? (Please provide a number with up to 4 digits. Ex: 10.50)	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 4 digits. Ex: 10.50)
Neuroscience- Medical/Surgical	1	0.83
3 Tower - L&D	2	0.55
4 Tower - Antepartum	1	0.53
6 Tower - Post-Partum	3	0.75
5 Tower - Post-Partum	3	0.75
		0.62
3 North - Surgery	2	0.62
3 North - Surgery 4 Tower - Surgery	1	0.53

7 South - Telemetry	4	1.2
ESSU -		
Medicine/Telemetry/Surger		
y Inpatient Holds Unit	3	1.25
CSSU - Medicine/Telemetry		
Inpatient Holds Unit	1	0.62
6 North - Critical Care		
Inpatient Unit	0.5	0.62
RCU - Critical Care Inpatient		
Unit	2	1.25
CCU - Critical Care Inpatient		
Unit	1	0.93
CTICU - Critical Care		
Inpatient Unit	1	0.57
SICU - Critical Care Inpatient		
Unit	1	0.57
MICU - Critical Care		
Inpatient Unit	1	0.53
NICU - Neonatal ICU	1	0.14
2 Central - Pediatric ICU	1	0.75
PICU - Pediatric ICU	1	0.34
Med 4 - Hematology		
Oncology Inpatient Unit	1	0.44
Med 3 - Medical Surgical		
Inpatient Unit	1	0.57
3 Central - Medical Surgical		
Inpatient Unit	1	0.5
Pavilion 3 - Medical Surgical		
Inpatient Unit	1	0.34
ML6 - Acute Inpatient BH		
Unit	3	1.23
ML5 - Acute Inpatient BH		
Unit	3	1.24
ML4 - Acute Inpatient BH		
Unit	3	0.88
ML3 - Acute Inpatient BH		
Unit	3	0.87

2 South - Acute Inpatient BH		
Unit	3	1.21
9 Tower - Surgery	2	0.5
8 Tower - Surgery	2	0.5
9 North - Medicine	2	0.41
9 South - Medicine	2	0.46
8 North - Medicine	2	0.5
8 South - Surgery	2	0.5
7 North - Telemetry	2	0.53
5 South - Medicine	7	1.41
5 North - Telemetry	2	0.44
4 North - Telemetry	1	0.24
4 South - Telemetry	2	0.45
2 West - Acute Inpatient BH		
Unit	3	1.13
2 North - Acute Inpatient		
BH Unit	2	0.75
1 West - Acute Inpatient BH		
Unit	3	1.13
1 South - Acute Inpatient BH		
Unit	2	0.74
1 North - Acute Inpatient		
BH Unit	2	0.85

NIGHT SHIFT ADDITIONAL RESOURCES

	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
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.
Neuroscience-	
Medical/Surgical	Unit clerical support
3 Tower - L&D	Staff Educator, Patient Transport, Unit Receptionist
	Staff Educator, Patient
4 Tower - Antepartum	Transport, Unit Receptionist
	Ctoff Educator Dations
6 Tower - Post-Partum	Staff Educator, Patient Transport, Unit Receptionist
o Tower - Post-Partum	Transport, Offit Receptionist
	Staff Educator, Patient
5 Tower - Post-Partum	Transport, Unit Receptionist
	Staff Educator, Patient
3 North - Surgery	Transport, Unit Receptionist
	Staff Educator, Patient
4 Tower - Surgery	Transport, Unit Receptionist
CN 11 - 1	Staff Educator, Patient
6 North - Telemetry	Transport, Unit Receptionist

Staff Educator, Patient Transport, Unit Receptioni ESSU - Medicine/Telemetry/Surger y Inpatient Holds Unit CSSU - Medicine/Telemetry Inpatient Holds Unit 6 North - Critical Care Inpatient Unit CCU - Critical Care Inpatient Unit CCU - Critical Care Inpatient Unit CTICU - Critical Care Inpatient Unit Staff Educator, Patient Transport, Unit Receptioni CTICU - Critical Care Inpatient Unit Staff Educator, Patient Transport, Unit Receptioni
ESSU - Medicine/Telemetry/Surger y Inpatient Holds Unit CSSU - Medicine/Telemetry Inpatient Holds Unit 6 North - Critical Care Inpatient Unit CCU - Critical Care Inpatient Unit Staff Educator, Patient Transport, Unit Receptioni CCU - Critical Care Inpatient Unit Staff Educator, Patient Transport, Unit Receptioni Staff Educator, Patient Transport, Unit Receptioni
Medicine/Telemetry/Surger y Inpatient Holds Unit CSSU - Medicine/Telemetry Inpatient Holds Unit 6 North - Critical Care Inpatient Unit RCU - Critical Care Inpatient Unit CCU - Critical Care Inpatient Unit CCU - Critical Care Inpatient Unit Staff Educator, Patient Transport, Unit Receptioni
y Inpatient Holds Unit CSSU - Medicine/Telemetry Inpatient Holds Unit 6 North - Critical Care Inpatient Unit CCU - Critical Care Inpatient CCU - Critical Care Staff Educator, Patient CCU - Critical Care
CSSU - Medicine/Telemetry Inpatient Holds Unit Transport, Unit Receptioni 6 North - Critical Care Inpatient Unit Transport, Unit Receptioni RCU - Critical Care Inpatient Unit Transport, Unit Receptioni CCU - Critical Care Inpatient Unit Transport, Unit Receptioni CCU - Critical Care Inpatient Unit Staff Educator, Patient Transport, Unit Receptioni CTICU - Critical Care Staff Educator, Patient Transport, Unit Receptioni
Inpatient Holds Unit 6 North - Critical Care Inpatient Unit RCU - Critical Care Inpatient Unit CCU - Critical Care Inpatient Unit Transport, Unit Receptioni Staff Educator, Patient Transport, Unit Receptioni CTICU - Critical Care Staff Educator, Patient
Inpatient Holds Unit 6 North - Critical Care Inpatient Unit RCU - Critical Care Inpatient Unit CCU - Critical Care Inpatient Unit Transport, Unit Receptioni Staff Educator, Patient Transport, Unit Receptioni CTICU - Critical Care Staff Educator, Patient
6 North - Critical Care Inpatient Unit RCU - Critical Care Inpatient Unit CCU - Critical Care Inpatient Unit Staff Educator, Patient Transport, Unit Receptioni Staff Educator, Patient Transport, Unit Receptioni Staff Educator, Patient Transport, Unit Receptioni CTICU - Critical Care Staff Educator, Patient Transport, Unit Receptioni
RCU - Critical Care Inpatient Unit Staff Educator, Patient Transport, Unit Receptioni CCU - Critical Care Inpatient Unit Staff Educator, Patient Transport, Unit Receptioni Staff Educator, Patient Transport, Unit Receptioni CTICU - Critical Care Staff Educator, Patient
RCU - Critical Care Inpatient Unit Staff Educator, Patient Transport, Unit Receptioni CCU - Critical Care Inpatient Unit Staff Educator, Patient Transport, Unit Receptioni CTICU - Critical Care Staff Educator, Patient Transport, Unit Receptioni
RCU - Critical Care Inpatient Unit Staff Educator, Patient Transport, Unit Receptioni CCU - Critical Care Inpatient Unit Staff Educator, Patient Transport, Unit Receptioni CTICU - Critical Care Staff Educator, Patient
Unit Transport, Unit Receptioni CCU - Critical Care Inpatient Unit Staff Educator, Patient Transport, Unit Receptioni CTICU - Critical Care Staff Educator, Patient
Unit Transport, Unit Receptioni CCU - Critical Care Inpatient Unit Staff Educator, Patient Transport, Unit Receptioni CTICU - Critical Care Staff Educator, Patient
CCU - Critical Care Inpatient Unit Staff Educator, Patient Transport, Unit Receptioni CTICU - Critical Care Staff Educator, Patient
Unit Transport, Unit Receptioni CTICU - Critical Care Staff Educator, Patient
Unit Transport, Unit Receptioni CTICU - Critical Care Staff Educator, Patient
CTICU - Critical Care Staff Educator, Patient
Inpatient Unit Transport, Unit Receptioni
SICU - Critical Care Inpatient Staff Educator, Patient
Unit Transport, Unit Receptioni
MICU - Critical Care Staff Educator, Patient
Inpatient Unit Transport
NICU - Neonatal ICU Unit Clerical Support
2 Central - Pediatric ICU Unit Clerical Support
PICU - Pediatric ICU Unit Clerical Support
Med 4 - Hematology
Oncology Inpatient Unit Unit Clerical Support
Med 3 - Medical Surgical
Inpatient Unit Unit Clerical Support
3 Central - Medical Surgical
Inpatient Unit Unit Clerical Support
Pavilion 3 - Medical Surgical
Inpatient Unit Unit Clerical Support
ML6 - Acute Inpatient BH
Unit Staff Educators

ML5 - Acute Inpatient BH	
Unit	Staff Educators
ML4 - Acute Inpatient BH	
Unit	Staff Educators
ML3 - Acute Inpatient BH	
Unit	Staff Educators
2 South - Acute Inpatient BH	
Unit	Staff Educator
	Unit Secretary, Staff
9 Tower - Surgery	Educator, Patient Transport
5 ,	
	Unit Secretary, Staff
8 Tower - Surgery	Educator, Patient Transport
	and the second second
	Unit Secretary, Staff
9 North - Medicine	Educator, Patient Transport
	Unit Secretary, Staff
9 South - Medicine	Educator, Patient Transport
3 30dell Wiedleine	Educator, Fatient Transport
	Unit Secretary, Staff
8 North - Medicine	Educator, Patient Transport
3 NOTELL MICHIELLE	Educator, Fatient Transport
	Unit Secretary, Staff
8 South - Surgery	Educator, Patient Transport
8 South Surgery	Laucator, rations fransport
	Unit Secretary, Staff
7 North - Telemetry	Educator, Patient Transport
7 North - Telementy	Ludcator, ratient Transport
	Unit Secretary Staff
5 South - Medicine	Unit Secretary, Staff
3 30utii - Medicine	Educator, Patient Transport
	Unit Cocretany Ctaff
E North Tolomotru	Unit Secretary, Staff
5 North - Telemetry	Educator, Patient Transport
	Unit Coorotom, Ctoff
4 North Tolomotini	Unit Secretary, Staff
4 North - Telemetry	Educator, Patient Transport

	Staff Educator, Patient
4 South - Telemetry	Transport
2 West - Acute Inpatient BH	
Unit	Staff Educators
2 North - Acute Inpatient	
BH Unit	Staff Educator
1 West - Acute Inpatient BH	
Unit	Staff Educator
1 South - Acute Inpatient BH	
Unit	Staff Educator
1 North - Acute Inpatient	
BH Unit	Staff Educator

NIGHT 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. Neuroscience-	Our Clinical Staffing Committee reached consensus on the clinical 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):
Medical/Surgical	Yes			
3 Tower - L&D	Yes			
4 Tower - Antepartum	Yes			
6 Tower - Post-Partum	Yes			
5 Tower - Post-Partum	Yes			
3 North - Surgery	Yes			
4 Tower - Surgery	Yes			
6 North - Telemetry	Yes			
7 South - Telemetry	Yes			
ESSU -				
Medicine/Telemetry/Surger				
y Inpatient Holds Unit	Yes			

		 ·	1
CSSII Modicino/Tolomotar			
CSSU - Medicine/Telemetry Inpatient Holds Unit	Yes		
6 North - Critical Care	163		
Inpatient Unit	Yes		
RCU - Critical Care Inpatient	165		
Unit	Yes		
CCU - Critical Care Inpatient	163		
Unit	Yes		
CTICU - Critical Care	165		
Inpatient Unit	Yes		
SICU - Critical Care Inpatient	165		
Unit	Yes		
MICU - Critical Care	163		
	Yes		
Inpatient Unit NICU - Neonatal ICU	Yes		
2 Central - Pediatric ICU	Yes		
PICU - Pediatric ICU			
	Yes	 	
Med 4 - Hematology	V		
Oncology Inpatient Unit	Yes		
Med 3 - Medical Surgical	.,		
Inpatient Unit	Yes		
3 Central - Medical Surgical	.,		
Inpatient Unit	Yes		
Pavilion 3 - Medical Surgical			
Inpatient Unit	Yes		
ML6 - Acute Inpatient BH			
Unit	Yes		
ML5 - Acute Inpatient BH			
Unit	Yes		
ML4 - Acute Inpatient BH			
Unit	Yes		
ML3 - Acute Inpatient BH			
Unit	Yes		
2 South - Acute Inpatient BH			
Unit	Yes		
9 Tower - Surgery	Yes		
8 Tower - Surgery	Yes		
9 North - Medicine	Yes		

O Co., the NA - disir-	Ve -		I	
9 South - Medicine	Yes			
8 North - Medicine	Yes			
8 South - Surgery	Yes			
7 North - Telemetry	Yes			
5 South - Medicine	Yes			
5 North - Telemetry	Yes			
4 North - Telemetry	Yes			
4 South - Telemetry	Yes			
			propose that the current	propose the addition of an
			staffing plan is appropriate	additional RN on the night
			for 2 West. In response to	shift and an additional night
			the request for increased	shift MHW to the current
			staff on the 2 West night	staffing plan. The following
			shift, the administrative co-	justification was presented
			leads presented the	to support the addition of
			following information. A	these team members to the
			review of the aggression	staffing plan. The clinical co-
			index for 2 West over the	leads stated that an
			last 6 years showed that the	additional RN was needed
			unit had half as many	on the night shift due to the
			episodes of aggression in	unit being an acute
			2022 as in 2016. The	specialty unit. Concerns
			measures put in place to	that there had been a
			support the unit greatly	recent increase in
			contributed to this	aggression on 2 West were
		For 2 West, the executive	decrease.	also raised by the clinical co-
		director considered both	A specialty unit does not	leads.
		rationales and determined	determine the need for an	The clinical co-leads stated
		the outcomes as listed.	additional RN in base	that there was a need for an
		Decisions were based on	staffing. Not all specialty	additional MHW on nights
		our enhanced model of	units have an additional RN	so that there would be
		patient care delivery, the	on the night shift. The RN	"more hands-on deck", as
		collaboration between	staffing is based on a	well as increased
		disciplines, quality metrics	number of factors including	interactions with patients,
2 West - Acute Inpatient BH		data, and budgetary	census, unit population, and	resulting in an increased
Unit	No	constraints.	particular care needs of the	level of awareness of what
			11	

				propose the addition of a additional MHW for the
			The proposed addition of an	night shift to the current
			additional MHW by the	staffing plan. The following
			clinical co- leads was not	justification was presente
			supported by the	to support the addition of
			administrative co-leads.	an additional MHW to th
			They stated that the current	staffing plan.
			unit staffing plan reflects	The clinical co-leads state
			the appropriate number of	that there was a need for
			team members to care for	additional MHW on nigh
			the patients on the unit	so that there would be
			throughout the day.	"more hands-on deck",
			Changes in unit MHW	well as increased
			staffing is based on a	interactions with patien
			number of factors including	resulting in an increase
			census, bed blocks, number	level of awareness of wh
		For 2 North, the executive	of C:Os on the unit,	was happening on the ur
		director considered both	appointments/ER visits, and	In addition, they stated t
		rationales and determined	particular care needs of the	having only 2 MHWs on t
		the outcomes as listed.	current patient population	night shift leaves only
		Decisions were based on	on the unit. Additional	MHW to deal with any
		our enhanced model of	MHW support is provided	situation that might aris
		patient care delivery, the	to the unit if indicated	while the other MHW i
		collaboration between	based on assessment and	involved in unit checks of
		disciplines, quality metrics	communication among unit	other assignments. The
2 North - Acute Inpatient		data, and budgetary	team members and nursing	also voiced concern tha
BH Unit	No	constraints.	leadership.	having 2 MHWS on the u

				propose the addition of a additional MHW for the
			The proposed addition of an	night shift to the current
			additional MHW by the	staffing plan. The following
			clinical co- leads was not	justification was presente
			supported by the	to support the addition o
			administrative co-leads.	an additional MHW to th
			They stated that the current	staffing plan.
			unit staffing plan reflects	The clinical co-leads state
			•	that there was a need for
			team members to care for	additional MHW on nigh
			the patients on the unit	so that there would be
			throughout the day.	"more hands-on deck", a
			Changes in unit MHW	well as increased
			staffing is based on a	interactions with patien
			number of factors including	resulting in an increase
			census, bed blocks, number	level of awareness of wh
		For 1 West, the executive	of C:Os on the unit,	was happening on the ur
		director considered both	appointments/ER visits, and	In addition, they stated t
		rationales and determined	particular care needs of the	having only 2 MHWs on
		the outcomes as listed.	current patient population	night shift leaves only
		Decisions were based on	on the unit. Additional	MHW to deal with any
		our enhanced model of	MHW support is provided	situation that might aris
		patient care delivery, the	to the unit if indicated	while the other MHW i
		collaboration between	based on assessment and	involved in unit checks o
		disciplines, quality metrics	communication among unit	other assignments. The
West - Acute Inpatient BH		data, and budgetary	team members and nursing	also voiced concern tha
Unit	No	constraints.	leadership.	having 2 MHWS on the ur

				propose the addition of an additional MHW for the
			The proposed addition of an	night shift to the current
			additional MHW by the	-
			clinical co- leads was not	staffing plan. The following
				justification was presente
			supported by the	to support the addition o
			administrative co-leads.	an additional MHW to th
			They stated that the current	staffing plan.
			unit staffing plan reflects	The clinical co-leads state
			'' '	that there was a need for
			team members to care for	additional MHW on night
			the patients on the unit	so that there would be
			throughout the day.	"more hands-on deck", a
			Changes in unit MHW	well as increased
			staffing is based on a	interactions with patient
			number of factors including	resulting in an increased
			census, bed blocks, number	level of awareness of wh
		For 1 South, the executive	of C:Os on the unit,	was happening on the un
		director considered both	appointments/ER visits, and	In addition, they stated th
		rationales and determined	particular care needs of the	having only 2 MHWs on t
		the outcomes as listed.	current patient population	night shift leaves only 1
		Decisions were based on	on the unit. Additional	MHW to deal with any
		our enhanced model of	MHW support is provided	situation that might aris
		patient care delivery, the	to the unit if indicated	while the other MHW is
		collaboration between	based on assessment and	involved in unit checks o
		disciplines, quality metrics	communication among unit	other assignments. They
South - Acute Inpatient BH		data, and budgetary	team members and nursing	also voiced concern tha
Unit	No	constraints.	leadership.	having 2 MHWS on the ur

				propose the addition of ar additional MHW for the
			The proposed addition of an	night shift to the current
			additional MHW by the	staffing plan. The following
			clinical co- leads was not	justification was presented
			supported by the	to support the addition of
			administrative co-leads.	an additional MHW to the
			They stated that the current	staffing plan.
			unit staffing plan reflects	The clinical co-leads state
			the appropriate number of	that there was a need for a
			team members to care for	additional MHW on night
			the patients on the unit	so that there would be
			throughout the day.	"more hands-on deck", as
			Changes in unit MHW	well as increased
			staffing is based on a	interactions with patients
			number of factors including	resulting in an increased
			census, bed blocks, number	level of awareness of wha
		For 1 North, the executive	of C:Os on the unit,	was happening on the uni
		director considered both	appointments/ER visits, and	In addition, they stated th
		rationales and determined	particular care needs of the	having only 2 MHWs on tl
		the outcomes as listed.	current patient population	night shift leaves only 1
		Decisions were based on	on the unit. Additional	MHW to deal with any
		our enhanced model of	MHW support is provided	situation that might arise
		patient care delivery, the	to the unit if indicated	while the other MHW is
		collaboration between	based on assessment and	involved in unit checks of
		disciplines, quality metrics	communication among unit	other assignments. They
1 North - Acute Inpatient		data, and budgetary	team members and nursing	also voiced concern that
BH Unit	No	constraints.	leadership.	having 2 MHWS on the un

CBA INFORMATION We have one or more collective bargaining agreements: Yes If yes, then: Our general hospital has a collective bargaining agreement with the following organizations that represent clinical staff (Select all that apply): **Please select association and identify staff (e.g. nurses, ancillary staff, etc.) represented. SEIU 1199

Our general hospital's collective	09/30/20
bargaining agreement with SEIU 1199	26 12:00
expires on the following date:	AM
The number of hospital employees	
represented by SEIU 1199 is:	4013