Region	Metropolitan Area Regional Office
County	Kings
Council	New York City
Network	NYU LANGONE HEALTH
Reporting Organization	NYU Langone Health-Cobble Hill
Reporting Organization Id	9753
Reporting Organization Type	Hospital (pfi)
Data Entity	NYU Langone Health-Cobble Hill

HOSPITAL INFORMATION

RN 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 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) ?
Emergency Department- TH				
CHED	11	2.1	37	3.4
Cobble Hill PACU	1.5	1.29	9.31	6.21
Cobble Hill PR	2.4	1.49	8	3.89
Cobble Hill OR	2.4	3.01	8	2.56
Emergency Department- TH CHED	11	2.1	37	3.4

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)
Emergency Department- TH CHED	0	0

Cobble Hill PACU	0	0
Cobble Hill PR	0	0
Cobble Hill OR	0	0
Emergency Department- TH		
CHED	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)
Emergency Department- TH	0	0
CHED	0	0
Cobble Hill PACU	0	0
Cobble Hill PR	1.9	15.2
Cobble Hill OR	1.9	15.2
Emergency Department- TH CHED	0	0

DAY SHIFT UNLICENSED STAFFING

	Planned average number	Planned total hours of
	of unlicensed personnel	unlicensed personnel
Provide a description of	(e.g., patient care	care per patient
Clinical Unit, including a	technicians) on the unit	including adjustment for
description of typical	providing direct patient	case mix and acuity on
patient services provided	care per day on the Day	the Day Shift (Please
on the unit and the	Shift? (Please provide a	provide a number with
unit's location in	number with up to 4	up to 4 digits. Ex: 10.50)
the hospital.	digits. Ex: 10.50)	

Т

Emergency Department- TH		
CHED	5	0.9
Cobble Hill PACU	1.31	1.13
Cobble Hill PR	0	0
Cobble Hill OR	0	0
Emergency Department- TH		
CHED	5	0.9

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.	

1 Charge Nurse, 1 Unit Clerk. Other house-wide
resources are centrally
staffed and available to this
unit as needed based on
patient acuity and/or
provider orders. These
resources may include:
Wound Care Team, IV
Access Team, Alert Team,
Physical Therapy,
Occupational Therapy,
Speech Therapy,
Respiratory Therapy,
Pharmacists, Case
Management, Social Work,
Patient Support Associates,
and Clinical Nutrition.
Other house-wide resources
are centrally staffed and
available to this unit as
needed based on patient
acuity and/or provider
orders. These resources
may include: Pharmacists,
Respiratory Therapy (on
call).

	OR Staffing Plan based on
	anticipated daily OR
	volume. Each operating
	room is staffed with a
	minimum of one RN and
	one scrub role filled by
	either an RN or CST. Other
	house-wide resources are
	centrally staffed and
	available to this unit as
	needed based on patient
	acuity and/or provider
	orders. These resources
	may include: CRNAs,
	Pharmacists, Certified
	Scrub Techs, and Patient
Cobble Hill PR	Support Associates
	OR Staffing Plan based on
	anticipated daily OR
	volume. Each operating
	room is staffed with a
	minimum of one RN and
	one scrub role filled by
	either an RN or CST. Other
	house-wide resources are
	centrally staffed and
	available to this unit as
	needed based on patient
	acuity and/or provider
	orders. These resources
	may include: CRNAs,
	Pharmacists, Certified
	Scrub Techs, and Patient
Cobble Hill OR	Support Associates

	Other house-wide resources
	are centrally staffed and
	available to this unit as
	needed based on patient
	acuity and/or provider
	orders. These resources
	may include: Pharmacists
Emergency Department- TH	Respiratory Therapy (on
CHED	call).

DAY SHIFT CONSENSUS INFORMATION

				Statement by members
Provide a description of				of clinical staffing
Clinical Unit, including a			Statement by members	committee that were
description of typical		lf no,	of clinical staffing	registered nurses,
patient services provided	Our Clinical Staffing	Chief Executive Officer	committee selected by	licensed practical nurses,
on the unit and the	Committee reached	Statement in support of	the general hospital	and ancillary members of
unit's location in	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):

			· · ·	[]
			plans to hire into our PCT	
			float	
			team an additional 23 full-	
			time equivalents (FTEs) to	
			meet the	
			patient care and break	
			coverage needs expressed	
			by the	
			Employee Committee	
			Members.	
			2) NYULH has also	
		I acknowledge the	prioritized hiring of all	
		statements of both the	vacant frontline	
		management and	nursing and support staff	An increase in the number
		employee members of the	positions to ensure the	of patient care technicians
		clinical staffing committee,	proposed	(PCTs)
		and,	clinical staffing model	per shift, depending on the
		pursuant to the law, I am	meets the needs of the	patient care unit, is needed
		using my discretion as Chief	patient care unit	to
		Executive Officer of NYULH	based on care hours per	address patient care needs,
		to adopt those portions of	patient day. At our Main	such as toileting patients,
		the	campus, we	ambulating patients, or
		clinical staffing plan for	plan to increase the	monitoring fall risk patients
		which the Clinical Staffing	Registered Nurse Float	on
		Committee did not achieve	Team to 170 FTEs	constant observation, as
		consensus, as well as those	(an additional 69 positions)	well as to provide coverage
Emergency Department- TH		that	and will designate RNs for	for
CHED	No	were affirmed unanimously.	daily	breaks.

I acknowledge the statements of both the management and employee members of the clinical staffing committee, and, pursuant to the law, I am using my discretion as Chief Executive Officer of NYULH to adopt those portions of the clinical staffing plan for which the Clinical Staffing Committee did not achieve consensus, as well as those Cobble Hill PACU RN Staff reached consensus on the proposed care models, however union representation and ancillary representation and ancillary representat	r				
Cobble Hill PACUNoRN Staff reached consensus on the proposed care models, however union representation and ancillary representation and ancillaryEmergency Department-THthat were affirmed that were affirmedRN Staff reached consensus on the proposed care models, however union representation and ancillary representation and ancillary representation and ancillary representation and ancillary representation and			statements of both the management and employee members of the clinical staffing committee, and, pursuant to the law, I am using my discretion as Chief Executive Officer of NYULH		
which the Clinical Staffing Committee did not achieve consensus, as well as those that were affirmedon the proposed care models, however union representation and ancillary members of the committee declined to voteon the proposed care models, however union representation and ancillary members of the committee declined to voteon the proposed care models, however union representation and ancillary members of the committee declined to voteCobble Hill PRYesICobble Hill ORYesICobble Hill ORYesII acknowledge the statements of both the management and employee members of the clinical staffing committee, and, pursuant to the law, I am using my discretion as Chief Executive Officer of NYULH to adopt those portions of the clinical Staffing Committee did not achieve consensus, as well as those ithe clinical Staffing committee did not achieve consensus, as well as those on the proposed care models, however unionEmergency Department-THthat were affirmedRN Staff reached consensus members of the committee models, however union representation and ancillary members of the committee				RN Staff reached consensus	RN Staff reached consensus
Cobble Hill PACUNomodels, however union representation and ancillary members of the committee declined to votemodels, however union representation and ancillary members of the committee declined to voteCobble Hill PRYesCobble Hill ORYesCobble Hill ORYesI acknowledge the statements of both the management and employee members of the clinical staffing committee, and, pursuant to the law, I am using my discretion as Chief Executive Officer of NYULH to adopt those portions of the clinical staffing Committee did not achieve consensus, as well as those the clinical staffing continee on the proposed care models, however unionRN Staff reached consensus models, however unionEmergency Department- THHat were affirmedRN staff reached consensus members of the committee members of the committeeRN staff reached consensus members of the committee					
Cobble Hill PACUNorepresentation and ancillary members of the committee declined to voterepresentation and ancillary members of the committee declined to voteCobble Hill PRYesCobble Hill ORYesCobble Hill ORYesI acknowledge the statements of both the management and employee members of the clinical staffing committee, and, pursuant to the law, I am using my discretion as Chief Executive Officer of NYULH to adopt those portions of the clinical staffing plan for which the Clinical Staffing Committee did not achieve consensus, as well as those that were affirmedRN Staff reached consensus on the proposed care models, however unionEmergency Department- THthat were affirmedmembers of the committee that were affirmedRN staff reached consensus on the proposed care models, however union			_		· · ·
Cobble Hill PACUNounanimously.declined to votedeclined to voteCobble Hill PRYes </td <td></td> <td></td> <td>consensus, as well as those</td> <td></td> <td>-</td>			consensus, as well as those		-
Cobble Hill PR Yes I acknowledge the statements of both the management and employee members of the clinical staffing committee, and, pursuant to the law, I am using my discretion as Chief Executive Officer of NYULH to adopt those portions of the clinical staffing plan for which the Clinical Staffing Committee did not achieve consensus, as well as those that were affirmed RN Staff reached consensus on the proposed care models, however union representation and ancillary members of the committee Emergency Department- TH Yes I acknowledge the statements of both the management and employee members of the committee RN Staff reached consensus on the proposed care models, however union representation and ancillary members of the committee			that were affirmed	members of the committee	members of the committee
Cobble Hill OR Yes I acknowledge the statements of both the management and employee members of the clinical staffing committee, and, pursuant to the law, I am using my discretion as Chief Executive Officer of NYULH to adopt those portions of the clinical staffing plan for which the Clinical Staffing Committee did not achieve consensus, as well as those that were affirmed RN Staff reached consensus on the proposed care models, however union representation and ancillary members of the committee	Cobble Hill PACU	No	unanimously.	declined to vote	declined to vote
I acknowledge the statements of both the management and employee members of the clinical staffing committee, and, pursuant to the law, I am using my discretion as Chief Executive Officer of NYULH to adopt those portions of the clinical staffing plan for which the Clinical Staffing Committee did not achieve consensus, as well as those that were affirmed RN Staff reached consensus on the proposed care models, however union representation and ancillary members of the committee	Cobble Hill PR	Yes			
statements of both the management and employee members of the clinical staffing committee, and, pursuant to the law, I am using my discretion as Chief Executive Officer of NYULH to adopt those portions of the clinical staffing plan for which the Clinical Staffing on the proposed care models, however union representation and ancillary members of the committee that were affirmedRN Staff reached consensus models, however union representation and ancillary members of the committee	Cobble Hill OR	Yes			
Emergency Department- TH that were affirmed members of the committee			statements of both the management and employee members of the clinical staffing committee, and, pursuant to the law, I am using my discretion as Chief Executive Officer of NYULH to adopt those portions of the clinical staffing plan for which the Clinical Staffing Committee did not achieve	on the proposed care models, however union	models, however union
	Emergency Department TU				
	÷	No			

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	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	per day on the Evening Shift? (Please provide a number with up to 4	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
the hospital.		up to 4 digits. Ex: 10.50)	digits. Ex: 10.50)	up to 4 digits. Ex: 10.50)?
Emergency Department- TH				
CHED	16	2.1	53	3.3
Cobble Hill PACU	1.25	1.29	7.76	6.21
Cobble Hill PR	1.7	0.2	1	0.37
Cobble Hill OR	0.9	0.2	1	0.29
Emergency Department- TH				
CHED	16	2.1	53	3.3

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)
Emergency Department- TH		
0	0	0
CHED	0	0
CHED Cobble Hill PACU	0	0
Cobble Hill PACU	0	0
Cobble Hill PACU Cobble Hill PR	0 0 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	Evening Shift? (Please provide a number with	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
the nospital.	up to 4 algits. EX: 10.50)	up to 4 digits. EX: 10.50)
the hospital. Emergency Department- TH	up to 4 digits. Ex: 10.50)	up to 4 digits. Ex: 10.50)
		up to 4 digits. Ex: 10.50) 0
Emergency Department- TH		
Emergency Department- TH CHED	0	0
Emergency Department- TH CHED Cobble Hill PACU	0 0	0 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)
		UD 10 4 UISI15. EX. 10.301 I
Emergency Department- TH CHED	5	0.9
Emergency Department- TH		
Emergency Department- TH CHED	5	0.9
Emergency Department- TH CHED Cobble Hill PACU	5 0.69	0.9 0.71

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.
	1 Charge Nurse, 1 Unit
	Clerk. Other house-wide
	resources are centrally
	staffed and available to this
	unit as needed based on
	patient acuity and/or
	provider orders. These
	resources may include:
	Wound Care Team, IV
	Access Team, Alert Team,
	Physical Therapy,
	Occupational Therapy,
	Speech Therapy,
	Respiratory Therapy,
	Pharmacists, Case
	Management, Social Work,
Emergency Department- TH	Management, Social Work, Patient Support Associates, and Clinical Nutrition.

	Other house-wide resources
	are centrally staffed and
	available to this unit as
	needed based on patient
	acuity and/or provider
	orders. These resources
	may include: Pharmacists,
	Respiratory Therapy (on
Cobble Hill PACU	call).
	OR Staffing Plan based on
	anticipated daily OR
	volume. Each operating
	room is staffed with a
	minimum of one RN and
	one scrub role filled by
	, either an RN or CST. Other
	house-wide resources are
	centrally staffed and
	available to this unit as
	needed based on patient
	acuity and/or provider
	orders. These resources
	may include: CRNAs,
	Pharmacists, Certified
	Scrub Techs, and Patient
Cobble Hill PR	Support Associates
	Support Associates

	OR Staffing Plan based on
	anticipated daily OR
	volume. Each operating
	room is staffed with a
	minimum of one RN and
	one scrub role filled by
	either an RN or CST. Other
	house-wide resources are
	centrally staffed and
	available to this unit as
	needed based on patient
	acuity and/or provider
	orders. These resources
	may include: CRNAs,
	Pharmacists, Certified
	Scrub Techs, and Patient
Cobble Hill OR	Support Associates
	Other house-wide resources
	are centrally staffed and
	available to this unit as
	needed based on patient
	acuity and/or provider
	orders. These resources
	may include: Pharmacists,
Emergency Department- TH	Respiratory Therapy (on
CHED	call).
	· ·

EVENING SHIFT CONSENSUS INFORMATION

Provide a description of			
Clinical Unit, including a			Statement by members
description of typical		lf 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):

			· · · · ·	
			plans to hire into our PCT	
			float	
			team an additional 23 full-	
			time equivalents (FTEs) to	
			meet the	
			patient care and break	
			coverage needs expressed	
			by the	
			Employee Committee	
			Members.	
			2) NYULH has also	
		I acknowledge the	prioritized hiring of all	
		statements of both the	vacant frontline	
		management and	nursing and support staff	
		employee members of the	positions to ensure the	
		clinical staffing committee,	proposed	
		and,	clinical staffing model	
		pursuant to the law, I am	meets the needs of the	
		using my discretion as Chief	patient care unit	
		Executive Officer of NYULH	based on care hours per	
		to adopt those portions of	patient day. At our Main	
		the	campus, we	
		clinical staffing plan for	plan to increase the	
		which the Clinical Staffing	Registered Nurse Float	
		Committee did not achieve	Team to 170 FTEs	
		consensus, as well as those	(an additional 69 positions)	
Emergency Department- TH		that	and will designate RNs for	
CHED	No	were affirmed unanimously.	daily	

		I acknowledge the statements of both the management and employee members of the clinical staffing committee, and,		
		pursuant to the law, I am using my discretion as Chief Executive Officer of NYULH to adopt those portions of the clinical staffing plan for		
		which the Clinical Staffing Committee did not achieve	on the proposed care	
Cobble Hill PACU	No	unanimously.	declined to vote	
Cobble Hill PR	Yes			
Cobble Hill OR	Yes			

			1) NYULH Main Campus	
			plans to hire into our PCT	
			float team an additional 23	
			full-time equivalents (FTEs)	
			to meet the patient care	
			and break coverage needs	
			expressed by the Employee	
			Committee Members. 2)	
			NYULH has also prioritized	
			hiring of all vacant frontline	
			nursing and support staff	
		I acknowledge the	positions to ensure the	
		statements of both the	proposed clinical staffing	
		management and employee	model meets the needs of	
		members of the clinical	the patient care unit based	
		staffing committee, and,	on care hours per patient	
		pursuant to the law, I am	day. At our Main campus,	
		using my discretion as Chief	we plan to increase the	
		Executive Officer of NYULH	Registered Nurse Float	
		to adopt those portions of	Team to 170 FTEs (an	
		the clinical staffing plan for	additional 69 positions) and	
		which the Clinical Staffing	will designate RNs for daily	
		Committee did not achieve	floating to account for	
		consensus, as well as those	acuity and patients on	
Emergency Department- TH		that were affirmed	medical equipment	
CHED	No	unanimously.	requiring 1 to 1 assignment.	

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in	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	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	Planned average number of patients on the unit per day on the Night Shift? (Please provide a number with up to 4	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
the hospital.	digits. Ex: 10.50)	digits. Ex: 10.50)	digits. Ex: 10.50)	digits. Ex: 10.50)?
Emergency Department- TH				
CHED	9	2.1	30	3.3
Emergency Department- TH				
CHED	9	2.1	30	3.3

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)
Emergency Department- TH CHED	0	0
Emergency Department- TH CHED	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)
Emergency Department- TH		
CHED	0	0
Emergency Department- TH		
CHED	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)
Emergency Department- TH CHED	5	0.9
Emergency Department- TH CHED	5	0.9

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.
	1 Charge Nurse, 1 Unit
	Clerk. Other house-wide
	resources are centrally
	staffed and available to this
	unit as needed based on
	patient acuity and/or
	provider orders. These
	resources may include:
	Wound Care Team, IV
	Access Team, Alert Team,
	Physical Therapy,
	Occupational Therapy,
	Speech Therapy,
	Respiratory Therapy,
	Pharmacists, Case
	Management, Social Work,
Emergency Department- TH	Patient Support Associates,
CHED	and Clinical Nutrition.

	Other house-wide resources
	are centrally staffed and
	available to this unit as
	needed based on patient
	acuity and/or provider
	orders. These resources
	may include: Pharmacists,
Emergency Department- TH	
CHED	call).

NIGHT SHIFT CONSENSUS INFORMATION

				Statement by members
Provide a description of				of clinical staffing
Clinical Unit, including a			Statement by members	committee that were
description of typical		lf no,	of clinical staffing	registered nurses,
patient services provided	Our Clinical Staffing	Chief Executive Officer	committee selected by	licensed practical nurses,
on the unit and the	Committee reached	Statement in support of	the general hospital	and ancillary members of
unit's location in	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):

		plans to hire into our PCT	plans to hire into our PCT	
		float	float	
		team an additional 23 full-	team an additional 23 full-	
		time equivalents (FTEs) to	time equivalents (FTEs) to	
		meet the	meet the	
		patient care and break	patient care and break	
		coverage needs expressed	coverage needs expressed	
		by the	by the	
		Employee Committee	Employee Committee	
		Members.	Members.	
		2) NYULH has also	2) NYULH has also	
		prioritized hiring of all	prioritized hiring of all	
		vacant frontline	vacant frontline	
		nursing and support staff	nursing and support staff	An increase in the number
		positions to ensure the	positions to ensure the	of patient care technicians
		proposed	proposed	(PCTs)
		clinical staffing model	clinical staffing model	per shift, depending on the
		meets the needs of the	meets the needs of the	patient care unit, is needed
		patient care unit	patient care unit	to
		based on care hours per	based on care hours per	address patient care needs,
		patient day. At our Main	patient day. At our Main	such as toileting patients,
		campus, we	campus, we	ambulating patients, or
		plan to increase the	plan to increase the	monitoring fall risk patients
		Registered Nurse Float	Registered Nurse Float	on
		Team to 170 FTEs	Team to 170 FTEs	constant observation, as
		(an additional 69 positions)	(an additional 69 positions)	well as to provide coverage
Emergency Department- TH		and will designate RNs for	and will designate RNs for	for
CHED	No	daily	daily	breaks.

			1) NYULH Main Campus	
			plans to hire into our PCT	
			•	
			float team an additional 23	
			full-time equivalents (FTEs)	
			to meet the patient care	
			and break coverage needs	
			expressed by the Employee	
			Committee Members. 2)	
			NYULH has also prioritized	
			hiring of all vacant frontline	
			nursing and support staff	
		I acknowledge the	positions to ensure the	
		statements of both the	proposed clinical staffing	
		management and employee	model meets the needs of	
		members of the clinical	the patient care unit based	An increase in the number
		staffing committee, and,	on care hours per patient	of patient care technicians
		pursuant to the law, I am	day. At our Main campus,	(PCTs) per shift, depending
		using my discretion as Chief	we plan to increase the	on the patient care unit, is
		Executive Officer of NYULH	Registered Nurse Float	needed to address patient
		to adopt those portions of	Team to 170 FTEs (an	care needs, such as toileting
		the clinical staffing plan for	additional 69 positions) and	patients, ambulating
		which the Clinical Staffing	will designate RNs for daily	patients, or monitoring fall
		Committee did not achieve	floating to account for	risk patients on constant
		consensus, as well as those	acuity and patients on	observation, as well as to
Emergency Department- TH		that were affirmed	medical equipment	provide coverage for
CHED	No	unanimously.	requiring 1 to 1 assignment.	breaks.

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 bargaining agreement with SEIU 1199 expires on the following date:	09/30/20 26 12:00 AM
The number of hospital employees	
represented by SEIU 1199 is:	123