

HOSPITAL INFORMATION

Region	Western Regional Office
County	Livingston
Council	Finger Lakes
Network	UNIVERSITY OF ROCHESTER MEDICAL CENTER
Reporting Organization	Nicholas H Noyes Memorial Hospital
Reporting Organization Id	0393
Reporting Organization Type	Hospital (pfi)
Data Entity	Nicholas H Noyes Memorial Hospital

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 5 digits. Ex: 101.50)	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 5 digits. Ex: 101.50)	Planned average number of patients on the unit per day on the Day Shift? (Please provide a number with up to 5 digits. Ex: 101.50)	What is the planned average number of patients for which one RN on the unit will provide direct patient care per day on the Day Shift (Please provide a number with up to 5 digits. Ex: 101.50) ?
Peri op - ASU, OR, PACU, Phase II	16.43	7.3	18	1.1
Emergency Department	3.5	2.2	10	3.33
Interventional Radiology	3	1	16	8
Infusion Service without the administration of chemotherapy	0.4	1	4	4
Medical Surgical Unit	6	1.6	30	5.5
Intensive Care Unit	2.5	3.5	4.5	2.5
Birthing Center	2	4	4	2

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 5 digits. Ex: 101.50)	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 5 digits. Ex: 101.50)
Peri op - ASU, OR, PACU, Phase II	3.13	1.33
Emergency Department	0	0
Interventional Radiology	0	0
Infusion Service without the administration of chemotherapy	0	0
Medical Surgical Unit	2	2
Intensive Care Unit	0	0
Birthing Center	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 5 digits. Ex: 101.50)	Planned total hours of ancillary members of the frontline team including adjustment for case mix and acuity on the Day Shift (Please provide a number with up to 5 digits. Ex: 101.50)
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Peri op - ASU, OR, PACU, Phase II	0	0
Emergency Department	0	0
Interventional Radiology	0	0
Infusion Service without the administration of chemotherapy	0	0
Medical Surgical Unit	0	0
Intensive Care Unit	0	0
Birth Center	0	0

DAY SHIFT UNLICENSED STAFFING

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Planned average number of unlicensed personnel (e.g., patient care technicians) on the unit providing direct patient care per day on the Day Shift? (Please provide a number with up to 5 digits. Ex: 101.50)	Planned total hours of unlicensed personnel care per patient including adjustment for case mix and acuity on the Day Shift (Please provide a number with up to 5 digits. Ex: 101.50)
Peri op - ASU, OR, PACU, Phase II	0	0
Emergency Department	2	1.6
Interventional Radiology	0	0
Infusion Service without the administration of chemotherapy	0	0
Medical Surgical Unit	4	2
Intensive Care Unit	1	1.6
Birth Center	0	0

DAY SHIFT ADDITIONAL RESOURCES

<p>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.</p>	<p>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 staff, admission/discharge nurse, and other coverage provided to registered nurses, licensed practical nurses, and ancillary staff.</p>
<p>Peri op - ASU, OR, PACU, Phase II</p>	<p>Endo tech and PCT help with turn over between cases</p>
<p>Emergency Department</p>	<p>None</p>
<p>Interventional Radiology</p>	<p>Interventional radiology techs and administrative scheduling staff</p>
<p>Infusion Service without the administration of chemotherapy</p>	<p>none</p>
<p>Medical Surgical Unit</p>	<p>There is also a unit clerk/secretary available from 7:00 am to 3:30 pm daily. Monday through Friday day shift there is an admission/discharge RN.</p>
<p>Intensive Care Unit</p>	<p>NA</p>
<p>Birthing Center</p>	<p>NA</p>

DAY SHIFT CONSENSUS INFORMATION

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Our Clinical Staffing 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):
Peri op - ASU, OR, PACU, Phase II	Yes			
Emergency Department	Yes			
Interventional Radiology	Yes			
Infusion Service without the administration of chemotherapy	Yes			
Medical Surgical Unit	Yes			
Intensive Care Unit	Yes			
Birthing Center	Yes			

RN EVENING SHIFT STAFFING

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Planned average number of Registered Nurses (RN) on the unit providing direct patient care per day on the Evening Shift? (Please provide a number with up to 5 digits. Ex: 101.50)	Planned total hours of RN nursing care per patient including adjustment for case mix and acuity on the Evening Shift (Please provide a number with up to 5 digits. Ex: 101.50)	Planned average number of patients on the unit per day on the Evening Shift? (Please provide a number with up to 5 digits. Ex: 101.50)	What is the planned average number of patients for which one RN on the unit will provide direct patient care per day on the Evening Shift (Please provide a number with up to 5 digits. Ex: 101.50)?
Emergency Department	4	1.28	25	6.25
Medical Surgical Unit	6	1.6	30	5
Intensive Care Unit	2.5	3.5	4.5	2.5
Birthing Center	2	4	4	2

LPN EVENING SHIFT STAFFING

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Planned average number of Licensed Practical Nurses (LPN) on the unit providing direct patient care per day on the Evening Shift? (Please provide a number with up to 5 digits. Ex: 101.50)	Planned total hours of LPN care per patient including adjustment for case mix and acuity on the Evening Shift (Please provide a number with up to 5 digits. Ex: 101.50)
Emergency Department	0	0
Medical Surgical Unit	1	1
Intensive Care Unit	0	0
Birthing Center	0	0

EVENING SHIFT ANCILLARY STAFF

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Planned average number of ancillary members of the frontline team on the unit per day on the Evening Shift? (Please provide a number with up to 5 digits. Ex: 101.50)	Planned total hours of ancillary members of the frontline team including adjustment for case mix and acuity on the Evening Shift (Please provide a number with up to 5 digits. Ex: 101.50)
Emergency Department	0	0
Medical Surgical Unit	0	0
Intensive Care Unit	0	0
Birth Center	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 5 digits. Ex: 101.50)	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 5 digits. Ex: 101.50)
Emergency Department	2	0.64
Medical Surgical Unit	3	0.8
Intensive Care Unit	1	1.6
Birth Center	0	0

EVENING SHIFT ADDITIONAL RESOURCES

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.	Description of additional resources available to support unit level patient care on the Evening Shift. These resources include but are not limited to unit clerical staff, admission/discharge nurse, and other coverage provided to registered nurses, licensed practical nurses, and ancillary staff.
Emergency Department	None
Medical Surgical Unit	There is a unit clerk/secretary available from 3:00 pm to 11:30 pm daily.
Intensive Care Unit	NA
Birthing Center	NA

EVENING SHIFT CONSENSUS INFORMATION

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Our Clinical Staffing 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):
Emergency Department	Yes			
Medical Surgical Unit	Yes			
Intensive Care Unit	Yes			
Birthing Center	Yes			

RN NIGHT SHIFT STAFFING

Name of Clinical 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 5 digits. Ex: 101.50)	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 5 digits. Ex: 101.50)	Planned average number of patients on the unit per day on the Night Shift? (Please provide a number with up to 5 digits. Ex: 101.50)
Emergency Department	Emergency Department	3	1.6	10
Medical/Surgical	Medical Surgical Unit	6	1.6	30
Intensive Care	Intensive Care Unit	2.5	3.5	5
Obstetrics/Gynecology	Birthing Center	2	4	4

LPN NIGHT SHIFT STAFFING

Name of Clinical Unit:	What is the planned average number of patients for which one RN on the unit will provide direct patient care per day on the Night Shift (Please provide a number with up to 5 digits. Ex: 101.50)?	Planned average number of Licensed Practical Nurses (LPN) on the unit providing direct patient care per day on the Night Shift? (Please provide a number with up to 5 digits. Ex: 101.50)
Emergency Department	5	0
Medical/Surgical	5	1
Intensive Care	2.5	0
Obstetrics/Gynecology	2	0

NIGHT SHIFT ANCILLARY STAFF

Name of Clinical Unit:	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 5 digits. Ex: 101.50)	Planned average number of ancillary members of the frontline team on the unit per day on the Night Shift? (Please provide a number with up to 5 digits. Ex: 101.50)
Emergency Department	0	0
Medical/Surgical	1	0
Intensive Care	0	0
Obstetrics/Gynecology	0	0

NIGHT SHIFT UNLICENSED STAFFING

Name of Clinical Unit:	Planned total hours of ancillary members of the frontline team including adjustment for case mix and acuity on the Night Shift (Please provide a number with up to 5 digits. Ex: 101.50)	Planned average number of unlicensed personnel on the unit providing direct patient care per day on the Night Shift? (Please provide a number with up to 5 digits. Ex: 101.50)
Emergency Department	0	1
Medical/Surgical	0	3
Intensive Care	0	0
Obstetrics/Gynecology	0	0

NIGHT SHIFT ADDITIONAL RESOURCES

Name of Clinical Unit:	Planned total hours of unlicensed personnel care per patient including adjustment for case mix and acuity on the Night Shift (Please provide a number with up to 5 digits. Ex: 101.50)
Emergency Department	0.8
Medical/Surgical	1
Intensive Care	0
Obstetrics/Gynecology	0

NIGHT SHIFT CONSENSUS INFORMATION

Name of Clinical Unit:	Description of additional resources available to support unit level patient care on the Night Shift. These resources include but are not limited to unit clerical staff, admission/discharge nurse, and other coverage provided to registered nurses, licensed practical nurses, and ancillary staff.	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):
Emergency Department	None	Yes		
Medical/Surgical	NA	Yes		
Intensive Care	NA	Yes		
Obstetrics/Gynecology	NA	Yes		

CBA INFORMATION

<p>We have one or more collective bargaining agreements:</p>	<p>No</p>
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