

## HOSPITAL INFORMATION

<b>Region</b>	Metropolitan Area Regional Office
<b>County</b>	Queens
<b>Council</b>	New York City
<b>Network</b>	NYC H+H
<b>Reporting Organization</b>	Elmhurst Hospital Center
<b>Reporting Organization Id</b>	1626
<b>Reporting Organization Type</b>	Hospital (pfi)
<b>Data Entity</b>	Elmhurst Hospital Center

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) ?
Outpatient Infusion Services (Hope Pavilion)	2	0.7	25	12
Immunology / TB (J1)	3	0.3	75	25
World Trade Center Environmental Health Program (D1)	1	0.5	13	13
Pre-admission Testing (D1)	1	0.7	7	7
Diagnostic Clinic (A1)	1	0.1	75	75
Occupational Health Service (A1)	1	0.1	40	40
Senior Care (H1)	2	0.25	60	30
Med/Surg Specialties (H2 and Hope Pavilion)	9	0.1	700	78
Medical Primary Care (D1-55)	8	0.2	350	44
Pediatric Primary Care	6	0.2	250	42
Women's Health Services (H2 and Women's Pavilion)	8	0.3	250	32
Nuclear Medicine (D4); Radiology, Interventional Radiology, Radiation Oncology, MRI (E1)	9	0.3	250	28

Post Anesthesia Care Unit (PACU) - E2	5	3	12	2
Operating Room (E2)	12	4.2	21	1
Observation Unit - Medicine (B1)	2	1.5	10	5
Pediatric Emergency Department (B1)	4	0.7	46	6
Partial Hospitalization Program - Pediatric (E10)	1	1.5	4	4
Partial Hospitalization Program - Adult	1	0.9	8	8
Chemical Dependency - Outpatient (alcohol and other substances) - (H3)	1	0.21	25	25
Methadone Treatment Program (O2)	2	0.13	136	68
Outpatient Behavioral Health clinics (H3)	3	0.1	190	30
Endoscopy Suite (E2)	3	2.5	9	3
Cardiac Cath Lab (E2)	4	5	5	1
Hemodialysis - In-patient Acute (C7)	3	4	6	2
ACT (Assertive Community Treatment) Program (78-07 41 Av)	1	0.4	12	12
Perioperative services - (B2 and E2)	1	0.5	18	18
D5 (Labor & Delivery)	8	4	16	2
B8 (Neonatal Stepdown)	1	8	1	4
E8 (Neonatal ICU)	6	4.1	11	2
B7 (Pediatric Intermediate Care Unit)	1	3	2	3
A2 (Rehab)	2	2	8	6
B5 (Med/Surg)	7	2	32	5
B4 (Med/Surg)	7	2	32	5
B3 (Med/Surg)	5	2	22	5
A3 (Med Surg)	7	2	32	5
A2 (Med/Surg)	6	2	30	5

Adult Emergency Department	28	3	94	6
Comprehensive Psychiatric Emergency Program (CPEP) - Adult and Pediatric (B1)	4	0.7	20	5
A5 (Psychiatry)	2	2.5	6	7
D11 (Forensics)	2	2.5	6	7
E4	3	1.2	16	7
D9 (Adult Psychiatry)	2	1.5	13	7
B7 (Pediatrics)	2	2.5	6	6
A/B-8 (Mother-Baby)	7	2.5	21	3
E7 (Medical ICU)	4	4	8	2
A7 (Cardiac Stepdown)	2	4	4	4
B3 (Surgical Stepdown)	2	2	7	4
A/B-11 (Adult Psychiatry)	3	1.5	15	7
A/B-10 (Adult Psychiatry)	4	1.3	23	7
B9 (Adolescent Psychiatry)	2	2	6	5
A9 (Adolescent Psychiatry)	2	2	8	5
A6 (Adult Psychiatry)	2	1.4	11	7
B2 (Surgical/Trauma ICU)	6	4.5	11	2
A7 (CCU)	4	4.73	7.2	2
A4 (Medicine, Neurology, and Neurosurgery Stepdown)	11	3	32	3
B6 (Med/Surg)	7	2	33	5

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)
Outpatient Infusion Services (Hope Pavilion)	0	0
Immunology / TB (J1)	0	0
World Trade Center Environmental Health Program (D1)	0	0
Pre-admission Testing (D1)	0	0
Diagnostic Clinic (A1)	0	0
Occupational Health Service (A1)	1	0.2
Senior Care (H1)	0	0
Med/Surg Specialties (H2 and Hope Pavilion)	0	0
Medical Primary Care (D1-55)	0	0
Pediatric Primary Care	0	0
Women's Health Services (H2 and Women's Pavilion)	0	0
Nuclear Medicine (D4); Radiology, Interventional Radiology, Radiation Oncology, MRI (E1)	3	0.66

Post Anesthesia Care Unit (PACU) - E2	0	0
Operating Room (E2)	0	0
Observation Unit - Medicine (B1)	0	0
Pediatric Emergency Department (B1)	0	0
Partial Hospitalization Program - Pediatric (E10)	0	0
Partial Hospitalization Program - Adult	0	0
Chemical Dependency - Outpatient (alcohol and other substances) - (H3)	0	0
Methadone Treatment Program (O2)	1	0.13
Outpatient Behavioral Health clinics (H3)	0	0
Endoscopy Suite (E2)	1	1
Cardiac Cath Lab (E2)	0	0
Hemodialysis - In-patient Acute (C7)	0	0
ACT (Assertive Community Treatment) Program (78-07 41 Av)	0	0
Perioperative services - (B2 and E2)	0	0
D5 (Labor & Delivery)	1	1
B8 (Neonatal Stepdown)	0	0
E8 (Neonatal ICU)	0	0
B7 (Pediatric Intermediate Care Unit)	0	0
A2 (Rehab)	0	0
B5 (Med/Surg)	0	0
B4 (Med/Surg)	0	0
B3 (Med/Surg)	0	0
A3 (Med Surg)	0	0
A2 (Med/Surg)	0	0

Adult Emergency Department	0	0
Comprehensive Psychiatric Emergency Program (CPEP) - Adult and Pediatric (B1)	0	0
A5 (Psychiatry)	0	0
D11 (Forensics)	0	0
E4	0	0
D9 (Adult Psychiatry)	0	0
B7 (Pediatrics)	0	0
A/B-8 (Mother-Baby)	0	0
E7 (Medical ICU)	0	0
A7 (Cardiac Stepdown)	0	0
B3 (Surgical Stepdown)	0	0
A/B-11 (Adult Psychiatry)	0	0
A/B-10 (Adult Psychiatry)	0	0
B9 (Adolescent Psychiatry)	0	0
A9 (Adolescent Psychiatry)	0	0
A6 (Adult Psychiatry)	0	0
B2 (Surgical/Trauma ICU)	0	0
A7 (CCU)	0	0
A4 (Medicine, Neurology, and Neurosurgery Stepdown)	0	0
B6 (Med/Surg)	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)
Outpatient Infusion Services (Hope Pavilion)	0	0
Immunology / TB (J1)	0	0
World Trade Center Environmental Health Program (D1)	0	0
Pre-admission Testing (D1)	0	0
Diagnostic Clinic (A1)	0	0
Occupational Health Service (A1)	0	0
Senior Care (H1)	0	0
Med/Surg Specialties (H2 and Hope Pavilion)	0	0
Medical Primary Care (D1-55)	0	0
Pediatric Primary Care	0	0
Women's Health Services (H2 and Women's Pavilion)	0	0
Nuclear Medicine (D4); Radiology, Interventional Radiology, Radiation Oncology, MRI (E1)	0	0
Post Anesthesia Care Unit (PACU) - E2	0	0
Operating Room (E2)	12	90



Observation Unit - Medicine (B1)	0	0
Pediatric Emergency Department (B1)	0	0
Partial Hospitalization Program - Pediatric (E10)	0	0
Partial Hospitalization Program - Adult	0	0
Chemical Dependency - Outpatient (alcohol and other substances) - (H3)	0	0
Methadone Treatment Program (O2)	0	0
Outpatient Behavioral Health clinics (H3)	0	0
Endoscopy Suite (E2)	0	0
Cardiac Cath Lab (E2)	0	0
Hemodialysis - In-patient Acute (C7)	0	0
ACT (Assertive Community Treatment) Program (78-07 41 Av)	0	0
Perioperative services - (B2 and E2)	1	7
D5 (Labor & Delivery)	0	0
B8 (Neonatal Stepdown)	0	0
E8 (Neonatal ICU)	0	0
B7 (Pediatric Intermediate Care Unit)	0	0
A2 (Rehab)	0	0
B5 (Med/Surg)	0	0
B4 (Med/Surg)	0	0
B3 (Med/Surg)	0	0
A3 (Med Surg)	0	0
A2 (Med/Surg)	0	0
Adult Emergency Department	0	0

Comprehensive Psychiatric Emergency Program (CPEP) - Adult and Pediatric (B1)	0	0
A5 (Psychiatry)	0	0
D11 (Forensics)	0	0
E4	0	0
D9 (Adult Psychiatry)	0	0
B7 (Pediatrics)	0	0
A/B-8 (Mother-Baby)	0	0
E7 (Medical ICU)	0	0
A7 (Cardiac Stepdown)	0	0
B3 (Surgical Stepdown)	0	0
A/B-11 (Adult Psychiatry)	0	0
A/B-10 (Adult Psychiatry)	0	0
B9 (Adolescent Psychiatry)	0	0
A9 (Adolescent Psychiatry)	0	0
A6 (Adult Psychiatry)	0	0
B2 (Surgical/Trauma ICU)	0	0
A7 (CCU)	0	0
A4 (Medicine, Neurology, and Neurosurgery Stepdown)	0	0
B6 (Med/Surg)	0	0

**DAY SHIFT UNLICENSED STAFFING**

<p><b>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.</b></p>	<p><b>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)</b></p>	<p><b>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)</b></p>
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Outpatient Infusion Services (Hope Pavilion)	0	0
Immunology / TB (J1)	1	0.1
World Trade Center Environmental Health Program (D1)	0	0
Pre-admission Testing (D1)	1	0.1
Diagnostic Clinic (A1)	1	0.1
Occupational Health Service (A1)	1	0.2
Senior Care (H1)	1	0.1
Med/Surg Specialties (H2 and Hope Pavilion)	7	0.5
Medical Primary Care (D1- 55)	7	0.2
Pediatric Primary Care	7	0.2
Women's Health Services (H2 and Women's Pavilion)	4	0.1
Nuclear Medicine (D4); Radiology, Interventional Radiology, Radiation Oncology, MRI (E1)	1	0.05
Post Anesthesia Care Unit (PACU) - E2	1	0.6
Operating Room (E2)	1	0.5
Observation Unit - Medicine (B1)	1	0.8
Pediatric Emergency Department (B1)	1	0.2
Partial Hospitalization Program - Pediatric (E10)	0	0
Partial Hospitalization Program - Adult	0	0
Chemical Dependency - Outpatient (alcohol and other substances) - (H3)	0	0

Methadone Treatment Program (O2)	0	0
Outpatient Behavioral Health clinics (H3)	1	0.04
Endoscopy Suite (E2)	0	0
Cardiac Cath Lab (E2)	1	0.8
Hemodialysis - In-patient Acute (C7)	0	0
ACT (Assertive Community Treatment) Program (78-07 41 Av)	0	0
Perioperative services - (B2 and E2)	1	0.7
D5 (Labor & Delivery)	1	0.47
B8 (Neonatal Stepdown)	0	0
E8 (Neonatal ICU)	1	0.75
B7 (Pediatric Intermediate Care Unit)	0	0
A2 (Rehab)	1	0.7
B5 (Med/Surg)	3	0.6
B4 (Med/Surg)	3	0.6
B3 (Med/Surg)	2	0.6
A3 (Med Surg)	3	0.6
A2 (Med/Surg)	2.5	1
Adult Emergency Department	11	0.4
Comprehensive Psychiatric Emergency Program (CPEP) - Adult and Pediatric (B1)	3	0.9
A5 (Psychiatry)	2	2.5
D11 (Forensics)	2	2.5
E4	2	0.8
D9 (Adult Psychiatry)	2	0.8
B7 (Pediatrics)	1	1.25
A/B-8 (Mother-Baby)	2	0.7
E7 (Medical ICU)	1	0.7
A7 (Cardiac Stepdown)	0	0
B3 (Surgical Stepdown)	0	0

A/B-11 (Adult Psychiatry)	3	0.9
A/B-10 (Adult Psychiatry)	3	0.8
B9 (Adolescent Psychiatry)	2	0.75
A9 (Adolescent Psychiatry)	2	0.93
A6 (Adult Psychiatry)	2	0.75
B2 (Surgical/Trauma ICU)	1	0.5
A7 (CCU)	1	0.8
A4 (Medicine, Neurology, and Neurosurgery Stepdown)	3	0.6
B6 (Med/Surg)	3	0.6

DAY SHIFT ADDITIONAL RESOURCES

<p><b>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.</b></p>	<p><b>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.</b></p>
<p>Outpatient Infusion Services (Hope Pavilion)</p>	<p>Physicians, pharmacy, lab, social work, dietician, transportation, and clerical support.</p>
<p>Immunology / TB (J1)</p>	<p>Head nurse, nurse practitioners, physicians, social work, dietician, and clerical support.</p>

World Trade Center Environmental Health Program (D1)	Nurse practitioners, physicians, social work, and clerical support.
Pre-admission Testing (D1)	Nurse practitioners, physicians, and clerical support.
Diagnostic Clinic (A1)	Physicians, social work, and clerical support.
Occupational Health Service (A1)	Nurse practitioners, physicians, and clerical support.
Senior Care (H1)	Nurse practitioners, physicians, social work, dietitian, and clerical support.
Med/Surg Specialties (H2 and Hope Pavilion)	Head nurse, nurse practitioners, physicians, social work, dietitian, and clerical support.
Medical Primary Care (D1-55)	Head nurse, nurse practitioners, physicians, social work, dietitian, and clerical support.
Pediatric Primary Care	Head nurse, nurse practitioners, physicians, social work, child life specialist, dietitian, and clerical support.
Women's Health Services (H2 and Women's Pavilion)	Head nurse, nurse practitioners, physicians, midwives, social work, ultrasound technologist, dietitian, lactation consultant, and clerical support.

Nuclear Medicine (D4); Radiology, Interventional Radiology, Radiation Oncology, MRI (E1)	Head nurse, radiology technologists, radiation physicist, biomedical engineering, patient transporters, respiratory therapist, pharmacist, and clerical staff.
Post Anesthesia Care Unit (PACU) - E2	Head nurse, physicians, anesthesiologists, CRNA's, respiratory therapy, pharmacy, biomedical engineering, materials management, and clerical support.
Operating Room (E2)	Physicians, anesthesiologists, CRNA's, infection control practitioners, respiratory therapy, pathology, pharmacy, radiology, central sterile processing, central scheduling, biomedical engineering, materials management, and clerical support.
Observation Unit - Medicine (B1)	Physicians, nurse practitioners, social workers, case managers, respiratory therapy, and pharmacy.
Pediatric Emergency Department (B1)	Head nurse, physicians, nurse practitioner, social workers, respiratory therapy, pharmacy, hospital police, and clerical support.
Partial Hospitalization Program - Pediatric (E10)	Physician, social workers, and counselors.

Partial Hospitalization Program - Adult	Nurse practitioner, social workers, counselors, and peer support.
Chemical Dependency - Outpatient (alcohol and other substances) - (H3)	Physician, nurse practitioners, social workers, counselors, peer support.
Methadone Treatment Program (O2)	Head nurse, physician, social workers, counselors, peer support, pharmacy, and Hospital Police.
Outpatient Behavioral Health clinics (H3)	Psychiatrists, psychologists, community liaison workers, social workers, nurse practitioners, clerical staff,
Endoscopy Suite (E2)	Physician, nurse practitioner, equipment (scope) contract management services, infection control practitioner, and clerical support.
Cardiac Cath Lab (E2)	Physician, biomedical technician, infection control practitioner, materials management aide, and clerical support. (7 p.m. to 7 a.m. covered by two standby RN's.)



Hemodialysis - In-patient Acute (C7)	Physician, dialysis machine technician (1), biomedical technician, infection control practitioner, materials management aide, social worker and clerical support. (Tour I and Sundays covered by standby RN.)
ACT (Assertive Community Treatment) Program (78-07 41 Av)	Physician, social work, clinical liaison workers, and clerical staff; peer support personnel
Perioperative services - (B2 and E2)	Clerical coverage.
D5 (Labor & Delivery)	Dedicated clerical and HN resources for this unit are in place. Additional resources such as anesthesiologists, CRNA's, pharmacists, respiratory therapists, social workers, and registrars and clerical support are available to support the planned number of patients on this unit.
B8 (Neonatal Stepdown)	Additional resources such as pharmacists, respiratory therapists, social workers, and clerical support are available to support the planned number of patients on this unit.

E8 (Neonatal ICU)	Dedicated clerical and HN resources for this unit are in place. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.
B7 (Pediatric Intermediate Care Unit)	Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.
A2 (Rehab)	Additional resources such as pharmacists, respiratory therapists, occupational/physical therapists and social workers are available to support the planned number of patients on this unit.
B5 (Med/Surg)	Dedicated clerical and HN resources for this unit are in place. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.

B4 (Med/Surg)	Dedicated clerical and HN resources for this unit are in place. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.
B3 (Med/Surg)	Dedicated clerical and HN resources for this unit are in place. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.
A3 (Med Surg)	Dedicated clerical and HN resources for this unit are in place. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.

A2 (Med/Surg)	Dedicated clerical and HN resources for this unit are in place. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.
Adult Emergency Department	Head nurse, physicians, physician assistants, nurse practitioners, social workers, case managers, respiratory therapy, pharmacy, hospital police, registrars and clerical support.
Comprehensive Psychiatric Emergency Program (CPEP) - Adult and Pediatric (B1)	Head nurse, physician, social workers, nurse practitioners, pharmacy, and clerical staff.
A5 (Psychiatry)	Dedicated clerical and HN resources for this unit. Additional resources such as pharmacists, activity therapists, and social workers are available to support the planned number of patients on this unit.

D11 (Forensics)	Dedicated clerical and HN resources for this unit. Additional resources such as pharmacists, activity therapists, and social workers are available to support the planned number of patients on this unit.
E4	Dedicated clerical and HN resources for this unit are in place. Additional resources such as pharmacists, activity therapists, and social workers are available to support the planned number of patients on this unit.
D9 (Adult Psychiatry)	Dedicated clerical and HN resources for this unit are in place. Additional resources such as pharmacists, activity therapists, and social workers are available to support the planned number of patients on this unit.

B7 (Pediatrics)	Dedicated clerical and Nursing manager resources for this unit are in place. Additional resources such as pharmacists, respiratory therapists, social workers, and child life specialists are available to support the planned number of patients on this unit.
A/B-8 (Mother-Baby)	Dedicated clerical and HN resources for this unit are in place. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.
E7 (Medical ICU)	Dedicated clerical and Nursing supervisor resources for this unit are in place. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.
A7 (Cardiac Stepdown)	Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.

B3 (Surgical Stepdown)	Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.
A/B-11 (Adult Psychiatry)	Dedicated clerical and HN resources for this unit are in place. Additional resources such as pharmacists, activity therapists, and social workers are available to support the planned number of patients on this unit.
A/B-10 (Adult Psychiatry)	Dedicated clerical and HN resources for this unit are in place. Additional resources such as pharmacists, activity therapists, and social workers are available to support the planned number of patients on this unit.
B9 (Adolescent Psychiatry)	Head nurse and clerical support are available. Additional resources such as pharmacists, activity therapists, social workers, are available to support the planned number of patients on this unit. During the school year, teachers are available.

A9 (Adolescent Psychiatry)	Dedicated clerical and HN resources for this unit are in place. Additional resources such as pharmacists, activity therapists, and social workers are available to support the planned number of patients on this unit. During the school year, teachers are available.
A6 (Adult Psychiatry)	Dedicated clerical and HN resources for this unit are in place. Additional resources such as pharmacists, activity therapists, and social workers are available to support the planned number of patients on this unit.
B2 (Surgical/Trauma ICU)	Dedicated clerical and Nursing supervisor resources for this unit are in place. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.



A7 (CCU)	Dedicated clerical and Nursing supervisor resources for this unit are in place. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.
A4 (Medicine, Neurology, and Neurosurgery Stepdown)	Dedicated clerical and HN resources for this unit are in place. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.
B6 (Med/Surg)	Dedicated clerical and HN resources for this unit are in place. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.

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):
Outpatient Infusion Services (Hope Pavilion)	Yes			
Immunology / TB (J1)	Yes			
World Trade Center Environmental Health Program (D1)	Yes			
Pre-admission Testing (D1)	Yes			
Diagnostic Clinic (A1)	Yes			
Occupational Health Service (A1)	Yes			
Senior Care (H1)	Yes			
Med/Surg Specialties (H2 and Hope Pavilion)	Yes			
Medical Primary Care (D1-55)	Yes			
Pediatric Primary Care	Yes			
Women's Health Services (H2 and Women's Pavilion)	Yes			
Nuclear Medicine (D4); Radiology, Interventional Radiology, Radiation Oncology, MRI (E1)	Yes			
Post Anesthesia Care Unit (PACU) - E2	Yes			
Operating Room (E2)	Yes			
Observation Unit - Medicine (B1)	Yes			

Pediatric Emergency Department (B1)	Yes			
Partial Hospitalization Program - Pediatric (E10)	Yes			
Partial Hospitalization Program - Adult	Yes			
Chemical Dependency - Outpatient (alcohol and other substances) - (H3)	Yes			
Methadone Treatment Program (O2)	Yes			
Outpatient Behavioral Health clinics (H3)	Yes			
Endoscopy Suite (E2)	Yes			
Cardiac Cath Lab (E2)	Yes			
Hemodialysis - In-patient Acute (C7)	Yes			
ACT (Assertive Community Treatment) Program (78-07 41 Av)	Yes			
Perioperative services - (B2 and E2)	Yes			
D5 (Labor & Delivery)	Yes			
B8 (Neonatal Stepdown)	Yes			
E8 (Neonatal ICU)	Yes			
B7 (Pediatric Intermediate Care Unit)	Yes			
A2 (Rehab)	Yes			

<p>B5 (Med/Surg)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members  Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>B4 (Med/Surg)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members  Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>B3 (Med/Surg)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members  Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>A3 (Med Surg)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members  Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>A2 (Med/Surg)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members  Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>Adult Emergency Department</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>Comprehensive Psychiatric Emergency Program (CPEP) - Adult and Pediatric (B1)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements: DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals: In Patient Units: Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA 56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>A5 (Psychiatry)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members  Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>D11 (Forensics)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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E4	No	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:</p> <p>DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:</p> <p>In Patient Units: Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA</p> <p>56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,</p> <p>Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.</p> <p>DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:</p> <p>Facility - Elmhurst Union Committee members Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>D9 (Adult Psychiatry)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members  Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>B7 (Pediatrics)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>A/B-8 (Mother-Baby)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members  Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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E7 (Medical ICU)	No	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:</p> <p>DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:</p> <p>In Patient Units: Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA</p> <p>56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,</p> <p>Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.</p> <p>DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:</p> <p>Facility - Elmhurst Union Committee members Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council</p>
A7 (Cardiac Stepdown)	Yes			
B3 (Surgical Stepdown)	Yes			

<p>A/B-11 (Adult Psychiatry)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members  Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>A/B-10 (Adult Psychiatry)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members  Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>B9 (Adolescent Psychiatry)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members  Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>A9 (Adolescent Psychiatry)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members  Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>A6 (Adult Psychiatry)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>B2 (Surgical/Trauma ICU)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members  Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>A7 (CCU)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members  Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>A4 (Medicine, Neurology, and Neurosurgery Stepdown)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members  Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>B6 (Med/Surg)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members  Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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RN EVENING SHIFT STAFFING

<p><b>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.</b></p>	<p><b>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)</b></p>	<p><b>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)</b></p>	<p><b>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)</b></p>	<p><b>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)?</b></p>
<p>Nuclear Medicine (D4); Radiology, Interventional Radiology, Radiation Oncology, MRI (E1)</p>	<p>3</p>	<p>0.2</p>	<p>200</p>	<p>66</p>
<p>Post Anesthesia Care Unit (PACU) - E2</p>	<p>6</p>	<p>3</p>	<p>12</p>	<p>2</p>
<p>Operating Room</p>	<p>4</p>	<p>4</p>	<p>4</p>	<p>1</p>
<p>Observation Unit - Medicine (B1)</p>	<p>2</p>	<p>1.5</p>	<p>10</p>	<p>5</p>
<p>Pediatric Emergency Department</p>	<p>5</p>	<p>0.8</p>	<p>48</p>	<p>6</p>
<p>Cardiac Cath Lab (E2)</p>	<p>4</p>	<p>4</p>	<p>2</p>	<p>1</p>
<p>Hemodialysis - In-patient Acute (C7)</p>	<p>3</p>	<p>4</p>	<p>6</p>	<p>2</p>
<p>Perioperative services (B2 and E2)</p>	<p>1</p>	<p>0.8</p>	<p>10</p>	<p>10</p>
<p>D5 (Labor &amp; Delivery)</p>	<p>8</p>	<p>4</p>	<p>16</p>	<p>2</p>
<p>B8 (Neonatal Stepdown)</p>	<p>1</p>	<p>8</p>	<p>1</p>	<p>4</p>
<p>E8 (Neonatal ICU)</p>	<p>6</p>	<p>4.1</p>	<p>11</p>	<p>2</p>
<p>B7 (Pediatric Intermediate Care Unit)</p>	<p>1</p>	<p>3</p>	<p>2</p>	<p>3</p>
<p>A2 (Rehab)</p>	<p>2</p>	<p>2</p>	<p>8</p>	<p>6</p>
<p>B5 (Med/Surg)</p>	<p>7</p>	<p>2</p>	<p>32</p>	<p>5</p>
<p>B4 (Med/Surg)</p>	<p>7</p>	<p>2</p>	<p>32</p>	<p>5</p>

B3 (Med/Surg)	5	2	22	5
A3 (Med/Surg)	7	2	32	5
A2 (Med/Surg)	6	2	30	5
Adult Emergency Department	38	2.3	110	6
Comprehensive Psychiatric Emergency Program (CPEP) - Adult and Pediatric (B1)	4	0.7	20	5
A5 (Psychiatry)	2	2.5	6	7
D11 (Forensics)	2	2.5	6	7
E4	3	1.2	16	7
D9 (Adult Psychiatry)	2	1.5	13	7
B7 (Pediatrics)	2	2.5	6	6
A/B-8 (Mother/Baby)	7	2.5	21	3
E7 (Medical ICU)	4	4	8	2
A7 (Cardiac Stepdown)	2	4	4	4
B3 (Surgical Stepdown)	2	2	7	4
A/B-11 (Adult Psychiatry)	3	1.5	15	7
A/B-10 (Adult Psychiatry)	4	1.3	23	7
B9 (Adolescent Psychiatry)	2	2	6	5
A9 (Adolescent Psychiatry)	2	2	8	5
A6 (Adult Psychiatry)	2	1.4	11	7
B2 (Surgical/Trauma ICU)	6	4.5	11	2
A7 (CCU)	4	4.73	7.2	2
A4 (Medicine / Neurology / Neurosurgery Stepdown)	11	3	32	3
B6 (Med/Surg)	7	2	33	5

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)
Nuclear Medicine (D4); Radiology, Interventional Radiology, Radiation Oncology, MRI (E1)	1	0.2
Post Anesthesia Care Unit (PACU) - E2	0	0
Operating Room	0	0
Observation Unit - Medicine (B1)	0	0
Pediatric Emergency Department	0	0
Cardiac Cath Lab (E2)	0	0
Hemodialysis - In-patient Acute (C7)	0	0
Perioperative services (B2 and E2)	0	0
D5 (Labor & Delivery)	0	0
B8 (Neonatal Stepdown)	0	0
E8 (Neonatal ICU)	0	0
B7 (Pediatric Intermediate Care Unit)	0	0
A2 (Rehab)	0	0
B5 (Med/Surg)	0	0
B4 (Med/Surg)	0	0
B3 (Med/Surg)	0	0
A3 (Med/Surg)	0	0
A2 (Med/Surg)	0	0
Adult Emergency Department	0	0

Comprehensive Psychiatric Emergency Program (CPEP) - Adult and Pediatric (B1)	0	0
A5 (Psychiatry)	0	0
D11 (Forensics)	0	0
E4	0	0
D9 (Adult Psychiatry)	0	0
B7 (Pediatrics)	0	0
A/B-8 (Mother/Baby)	0	0
E7 (Medical ICU)	0	0
A7 (Cardiac Stepdown)	0	0
B3 (Surgical Stepdown)	0	0
A/B-11 (Adult Psychiatry)	0	0
A/B-10 (Adult Psychiatry)	0	0
B9 (Adolescent Psychiatry)	0	0
A9 (Adolescent Psychiatry)	0	0
A6 (Adult Psychiatry)	0	0
B2 (Surgical/Trauma ICU)	0	0
A7 (CCU)	0	0
A4 (Medicine / Neurology / Neurosurgery Stepdown)	0	0
B6 (Med/Surg)	0	0

**EVENING SHIFT ANCILLARY STAFF**

<b>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.</b>	<b>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)</b>	<b>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)</b>
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Nuclear Medicine (D4); Radiology, Interventional Radiology, Radiation Oncology, MRI (E1)	0	0
Post Anesthesia Care Unit (PACU) - E2	0	0
Operating Room	4	30
Observation Unit - Medicine (B1)	0	0
Pediatric Emergency Department	0	0
Cardiac Cath Lab (E2)	0	0
Hemodialysis - In-patient Acute (C7)	0	0
Perioperative services (B2 and E2)	0	0
D5 (Labor & Delivery)	0	0
B8 (Neonatal Stepdown)	0	0
E8 (Neonatal ICU)	0	0
B7 (Pediatric Intermediate Care Unit)	0	0
A2 (Rehab)	0	0
B5 (Med/Surg)	0	0
B4 (Med/Surg)	0	0
B3 (Med/Surg)	0	0
A3 (Med/Surg)	0	0
A2 (Med/Surg)	0	0
Adult Emergency Department	0	0
Comprehensive Psychiatric Emergency Program (CPEP) - Adult and Pediatric (B1)	0	0
A5 (Psychiatry)	0	0
D11 (Forensics)	0	0
E4	0	0
D9 (Adult Psychiatry)	0	0
B7 (Pediatrics)	0	0
A/B-8 (Mother/Baby)	0	0

E7 (Medical ICU)	0	0
A7 (Cardiac Stepdown)	0	0
B3 (Surgical Stepdown)	0	0
A/B-11 (Adult Psychiatry)	0	0
A/B-10 (Adult Psychiatry)	0	0
B9 (Adolescent Psychiatry)	0	0
A9 (Adolescent Psychiatry)	0	0
A6 (Adult Psychiatry)	0	0
B2 (Surgical/Trauma ICU)	0	0
A7 (CCU)	0	0
A4 (Medicine / Neurology / Neurosurgery Stepdown)	0	0
B6 (Med/Surg)	0	0

**EVENING SHIFT UNLICENSED STAFFING**

<b>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.</b>	<b>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)</b>	<b>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)</b>
Nuclear Medicine (D4); Radiology, Interventional Radiology, Radiation Oncology, MRI (E1)	1	0.05
Post Anesthesia Care Unit (PACU) - E2	1	0.6
Operating Room	1	0.5
Observation Unit - Medicine (B1)	0	0
Pediatric Emergency Department	1	0.2
Cardiac Cath Lab (E2)	0	0
Hemodialysis - In-patient Acute (C7)	0	0



Perioperative services (B2 and E2)	0	0
D5 (Labor & Delivery)	2	1.33
B8 (Neonatal Stepdown)	0	0
E8 (Neonatal ICU)	1	0.75
B7 (Pediatric Intermediate Care Unit)	0	0
A2 (Rehab)	1	0.7
B5 (Med/Surg)	3	0.6
B4 (Med/Surg)	3	0.6
B3 (Med/Surg)	2	0.6
A3 (Med/Surg)	3	0.6
A2 (Med/Surg)	2.5	1
Adult Emergency Department	11	0.4
Comprehensive Psychiatric Emergency Program (CPEP) - Adult and Pediatric (B1)	3	0.9
A5 (Psychiatry)	2	2.5
D11 (Forensics)	2	2.5
E4	2	0.8
D9 (Adult Psychiatry)	2	0.8
B7 (Pediatrics)	1	1.25
A/B-8 (Mother/Baby)	2	0.7
E7 (Medical ICU)	1	0.7
A7 (Cardiac Stepdown)	0	0
B3 (Surgical Stepdown)	0	0
A/B-11 (Adult Psychiatry)	3	0.9
A/B-10 (Adult Psychiatry)	3	0.8
B9 (Adolescent Psychiatry)	2	0.75
A9 (Adolescent Psychiatry)	2	0.93
A6 (Adult Psychiatry)	2	0.75
B2 (Surgical/Trauma ICU)	1	0.5
A7 (CCU)	1	0.8
A4 (Medicine / Neurology / Neurosurgery Stepdown)	3	0.6
B6 (Med/Surg)	3	0.6

EVENING SHIFT ADDITIONAL RESOURCES

<p><b>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.</b></p>	<p><b>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.</b></p>
<p>Nuclear Medicine (D4); Radiology, Interventional Radiology, Radiation Oncology, MRI (E1)</p>	<p>Radiology technologists, biomedical engineering, patient transporters, respiratory therapist, pharmacist, and clerical staff.</p>
<p>Post Anesthesia Care Unit (PACU) - E2</p>	<p>Physicians, anesthesiologists, CRNA's, respiratory therapy, pharmacy, biomedical engineering, materials management, and clerical support.</p>
<p>Operating Room</p>	<p>Physicians, anesthesiologists, CRNA's, respiratory therapy, pathology, pharmacy, radiology, central sterile processing, biomedical engineering, materials management, and clerical support.</p>

Observation Unit - Medicine (B1)	Physicians, nurse practitioners, respiratory therapy, and pharmacy.
Pediatric Emergency Department	Physicians, respiratory therapy, pharmacy, hospital police, registrars and clerical support.
Cardiac Cath Lab (E2)	Physician, biomedical technician, materials management aide. (7 p.m. to 7 a.m. covered by two standby RN's.)
Hemodialysis - In-patient Acute (C7)	Dialysis machine technician (1), biomedical technician, materials management aide, and social worker. (Tour I and Sundays covered by standby RN.)
Perioperative services (B2 and E2)	Clerical coverage
D5 (Labor & Delivery)	Dedicated clerical and HN resources for this unit are in place. Additional resources such as anesthesiologists, CRNA's, pharmacists, respiratory therapists, social workers, and registrars and clerical support are available to support the planned number of patients on this unit.
B8 (Neonatal Stepdown)	Additional resources such as pharmacists, and respiratory therapists are available to support the planned number of patients on this unit.

E8 (Neonatal ICU)	Dedicated clerical resources for this unit are in place. Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.
B7 (Pediatric Intermediate Care Unit)	Additional resources such as pharmacists, respiratory therapists and social workers are available to support the planned number of patients on this unit.
A2 (Rehab)	Additional resources such as pharmacists and respiratory therapists are available to support the planned number of patients on this unit.
B5 (Med/Surg)	Dedicated clerical resources for this unit are in place. Additional resources such as pharmacists and respiratory therapists are available to support the planned number of patients on this unit.

B4 (Med/Surg)	Dedicated clerical resources for this unit are in place. Additional resources such as pharmacists and respiratory therapists are available to support the planned number of patients on this unit.
B3 (Med/Surg)	Dedicated clerical resources for this unit are in place. Additional resources such as pharmacists and respiratory therapists are available to support the planned number of patients on this unit.
A3 (Med/Surg)	Dedicated clerical resources for this unit are in place. Additional resources such as pharmacists and respiratory therapists are available to support the planned number of patients on this unit.
A2 (Med/Surg)	Dedicated clerical support for this unit are in place. Additional resources such as pharmacists and respiratory therapists are available to support the planned number of patients on this unit.

Adult Emergency Department	Head nurse, physicians, physician assistants, nurse practitioners, social workers, respiratory therapy, pharmacy, hospital police, registration and clerical support.
Comprehensive Psychiatric Emergency Program (CPEP) - Adult and Pediatric (B1)	Physician, social workers, nurse practitioners, pharmacy, and clerical staff.
A5 (Psychiatry)	Additional resources such as pharmacists are planned for the planned number of patients.
D11 (Forensics)	Additional resources such as pharmacists are available to support the planned number of patients.
E4	Additional resources such as pharmacists are available to support the planned number of patients on this unit.
D9 (Adult Psychiatry)	Additional resources such as pharmacists are available to support the planned number of patients on this unit.
B7 (Pediatrics)	Additional resources such as pharmacists and respiratory therapists are available to support the planned number of patients on this unit.

A/B-8 (Mother/Baby)	Dedicated clerical resources for this unit are in place. Additional resources such as pharmacists, and respiratory therapists are available to support the planned number of patients on this unit.
E7 (Medical ICU)	Dedicated clerical resources for this unit are in place. Additional resources such as pharmacists and respiratory therapists are available to support the planned number of patients on this unit.
A7 (Cardiac Stepdown)	Additional resources such as pharmacists and respiratory therapists are available to support the planned number of patients on this unit.
B3 (Surgical Stepdown)	Additional resources such as pharmacists and respiratory therapists are available to support the planned number of patients on this unit.
A/B-11 (Adult Psychiatry)	Dedicated clerical resources for this unit are in place. Additional resources such as pharmacists and activity therapists are available to support the planned number of patients on this unit.

A/B-10 (Adult Psychiatry)	Dedicated clerical resources for this unit are in place. Additional resources such as pharmacists and activity therapists are available to support the planned number of patients on this unit.
B9 (Adolescent Psychiatry)	Additional resources such as pharmacists and activity therapists are available to support the planned number of patients on this unit.
A9 (Adolescent Psychiatry)	Additional resources such as pharmacists and activity therapists are available to support the planned number of patients on this unit.
A6 (Adult Psychiatry)	Additional resources such as pharmacists and activity therapists are available to support the planned number of patients on this unit.
B2 (Surgical/Trauma ICU)	Dedicated clerical resources for this unit are in place. Additional resources such as pharmacists and respiratory therapists are available to support the planned number of patients on this unit.



A7 (CCU)	Dedicated clerical resources for this unit are in place. Additional resources such as pharmacists and respiratory therapists are available to support the planned number of patients on this unit.
A4 (Medicine / Neurology / Neurosurgery Stepdown)	Dedicated clerical resources for this unit are in place. Additional resources such as pharmacists and respiratory therapists are available to support the planned number of patients on this unit.
B6 (Med/Surg)	Dedicated clerical resources are in place. Additional resources such as pharmacists and respiratory therapists are available to support the planned number of patients on this unit.

**EVENING SHIFT CONSENSUS INFORMATION**

<b>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.</b>	<b>Our Clinical Staffing Committee reached consensus on the clinical staffing plan for this unit:</b>	<b>If no, Chief Executive Officer Statement in support of clinical staffing plan for this unit:</b>	<b>Statement by members of clinical staffing committee selected by the general hospital administration (management members):</b>	<b>Statement by members of clinical staffing committee that were registered nurses, licensed practical nurses, and ancillary members of the frontline team (employee members):</b>
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Nuclear Medicine (D4); Radiology, Interventional Radiology, Radiation Oncology, MRI (E1)	Yes			
Post Anesthesia Care Unit (PACU) - E2	Yes			
Operating Room	Yes			
Observation Unit - Medicine (B1)	Yes			
Pediatric Emergency Department	Yes			
Cardiac Cath Lab (E2)	Yes			
Hemodialysis - In-patient Acute (C7)	Yes			
Perioperative services (B2 and E2)	Yes			
D5 (Labor & Delivery)	Yes			
B8 (Neonatal Stepdown)	Yes			
E8 (Neonatal ICU)	Yes			
B7 (Pediatric Intermediate Care Unit)	Yes			
A2 (Rehab)	Yes			

<p>B5 (Med/Surg)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members  Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>B4 (Med/Surg)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members  Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>B3 (Med/Surg)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members  Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>A3 (Med/Surg)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>A2 (Med/Surg)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>Adult Emergency Department</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>Comprehensive Psychiatric Emergency Program (CPEP) - Adult and Pediatric (B1)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements: DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals: In Patient Units: Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA 56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>A5 (Psychiatry)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members  Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>D11 (Forensics)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members  Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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E4	No	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:</p> <p>DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:</p> <p>In Patient Units: Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA</p> <p>56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,</p> <p>Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.</p> <p>DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:</p> <p>Facility - Elmhurst Union Committee members Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>D9 (Adult Psychiatry)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members  Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>B7 (Pediatrics)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>A/B-8 (Mother/Baby)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members  Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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E7 (Medical ICU)	No	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:</p> <p>DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:</p> <p>In Patient Units: Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA</p> <p>56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,</p> <p>Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.</p> <p>DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:</p> <p>Facility - Elmhurst Union Committee members Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
A7 (Cardiac Stepdown)	Yes			
B3 (Surgical Stepdown)	Yes			



<p>A/B-11 (Adult Psychiatry)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>A/B-10 (Adult Psychiatry)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members  Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>B9 (Adolescent Psychiatry)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members  Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>A9 (Adolescent Psychiatry)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members  Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>A6 (Adult Psychiatry)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members  Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>B2 (Surgical/Trauma ICU)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members  Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>A7 (CCU)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members  Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>A4 (Medicine / Neurology / Neurosurgery Stepdown)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members  Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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<p>B6 (Med/Surg)</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA  56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>	<p>Dear Dr. Helen Arteaga,  Please find DC 37's proposals for safe staffing submission to the NYS Department of Health. We are not in agreement with the facility's proposal. This may vary from what was discussed at the meeting but represents further discussions with leadership.  DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  Facility - Elmhurst Union Committee members  Maribel Brown NATE, Celeste Alston BHA, Jainarine Jasopersaud, NATE, Michele Trester, Assistant Director, DC 37, Jennifer White, Council Representative, DC 37</p>
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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)
Nuclear Medicine/Radiology	Nuclear Medicine (D4); Radiology, Interventional Radiology, Radiation Oncology, MRI (E1)	2	0.1	204
Other	Post Anesthesia Care Unit (PACU) - E2	2	3	4
Other	Operating Room (E2)	2	4	2
Short Stay	Observation Unit - Medicine (B1)	2	1.5	10
Emergency Department	Pediatric Emergency Department	4	2	15
Obstetrics/Gynecology	D5 (Labor & Delivery)	8	4	16
Stepdown	B8 (Neonatal Stepdown)	1	8	1
Intensive Care	E8 (Neonatal ICU)	6	4.1	11
Pediatric	B7 (Pediatric Intermediate Care Unit)	1	3	2
Rehabilitaion	A2 (Rehab)	2	2	8
Medical/Surgical	B5 (Med/Surg)	7	2	32
Medical/Surgical	B4 (Med/Surg)	7	2	32
Medical/Surgical	B3 (Med/Surg)	5	2	22
Medical/Surgical	A3 (Med/Surg)	7	2	32
Medical/Surgical	A2 (Med/Surg)	6	2	30
Emergency Department	Adult Emergency Department	27	1.6	62
Emergency Department	Comprehensive Psychiatric Emergency Program (CPEP) - Adult and Pediatric (B1)	4	0.7	20

Psychiatry	A5 (Adult Psychiatry)	2	2.5	6
Psychiatry	D11 (Forensics)	2	2.5	6
Psychiatry	E4 (Adult Psychiatry)	3	1.2	16
Psychiatry	D9 (Adult Psychiatry)	2	1.5	13
Pediatric	B7 (Pediatrics)	2	2.5	6
Obstetrics/Gynecology	A/B-8 (Mother/Baby)	7	2.5	21
Intensive Care	E7 (Medical ICU)	4	4	8
Stepdown	A7 (Cardiac Stepdown)	2	4	4
Stepdown	B3 (Surgical Stepdown)	2	2	7
Psychiatry	A/B-11 (Adult Psychiatry)	3	1.5	15
Psychiatry	A/B-10 (Adult Psychiatry)	4	1.3	23
Psychiatry	B9 (Adolescent Psychiatry)	2	2	6
Psychiatry	A9 (Adolescent Psychiatry)	2	2	8
Psychiatry	A6 (Adult Psychiatry)	2	1.4	11
Intensive Care	B2 (Surgical/Trauma ICU)	6	4.5	11
Intensive Care	A7 (CCU)	4	4.73	7.2
Stepdown	A4 (Medicine / Neurology / Neurosurgery Stepdown)	11	3	32
Medical/Surgical	B6 (Med/Surg)	7	2	33

LPN NIGHT SHIFT STAFFING

<b>Name of Clinical Unit:</b>	<b>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)?</b>	<b>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)</b>
Nuclear Medicine/Radiology	102	1
Other	2	0
Other	1	0
Short Stay	5	0
Emergency Department	6	0
Obstetrics/Gynecology	2	0

Stepdown	4	0
Intensive Care	2	0
Pediatric	3	0
Rehabilitaion	6	0
Medical/Surgical	5	0
Medical/Surgical	5	0
Medical/Surgical	5	0
Medical/Surgical	5	0
Medical/Surgical	5	0
Emergency Department	6	0
Emergency Department	5	0
Psychiatry	7	0
Psychiatry	7	0
Psychiatry	7	0
Psychiatry	7	0
Pediatric	6	0
Obstetrics/Gynecology	3	0
Intensive Care	2	0
Stepdown	4	0
Stepdown	4	0
Psychiatry	7	0
Psychiatry	7	0
Psychiatry	5	0
Psychiatry	5	0
Psychiatry	7	0
Intensive Care	2	0
Intensive Care	2	0
Stepdown	3	0
Medical/Surgical	5	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)
Nuclear Medicine/Radiology	0.2	0
Other	0	0
Other	0	2
Short Stay	0	0
Emergency Department	0	0
Obstetrics/Gynecology	0	0
Stepdown	0	0
Intensive Care	0	0
Pediatric	0	0
Rehabilitaion	0	0
Medical/Surgical	0	0
Medical/Surgical	0	0
Medical/Surgical	0	0
Medical/Surgical	0	0
Medical/Surgical	0	0
Emergency Department	0	0
Emergency Department	0	0
Psychiatry	0	0
Psychiatry	0	0
Psychiatry	0	0
Psychiatry	0	0
Pediatric	0	0
Obstetrics/Gynecology	0	0
Intensive Care	0	0
Stepdown	0	0
Stepdown	0	0
Psychiatry	0	0
Psychiatry	0	0

Psychiatry	0	0
Psychiatry	0	0
Psychiatry	0	0
Intensive Care	0	0
Intensive Care	0	0
Stepdown	0	0
Medical/Surgical	0	0

**NIGHT SHIFT UNLICENSED STAFFING**

<b>Name of Clinical Unit:</b>	<b>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)</b>	<b>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)</b>
Nuclear Medicine/Radiology	0	1
Other	0	0
Other	15	0
Short Stay	0	0
Emergency Department	0	0
Obstetrics/Gynecology	0	2
Stepdown	0	0
Intensive Care	0	1
Pediatric	0	0
Rehabilitaion	0	1
Medical/Surgical	0	3
Medical/Surgical	0	3
Medical/Surgical	0	2
Medical/Surgical	0	3
Medical/Surgical	0	2.5
Emergency Department	0	11
Emergency Department	0	3
Psychiatry	0	2
Psychiatry	0	2

Psychiatry	0	2
Psychiatry	0	2
Pediatric	0	1
Obstetrics/Gynecology	0	2
Intensive Care	0	1
Stepdown	0	0
Stepdown	0	0
Psychiatry	0	3
Psychiatry	0	3
Psychiatry	0	2
Psychiatry	0	2
Psychiatry	0	2
Intensive Care	0	1
Intensive Care	0	1
Stepdown	0	3
Medical/Surgical	0	3

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)
Nuclear Medicine/Radiology	0.05
Other	0
Other	0
Short Stay	0
Emergency Department	0
Obstetrics/Gynecology	1.33
Stepdown	0
Intensive Care	0.75
Pediatric	0
Rehabilitaion	0.7

Medical/Surgical	0.6
Medical/Surgical	0.6
Medical/Surgical	0.6
Medical/Surgical	0.6
Medical/Surgical	1
Emergency Department	0.4
Emergency Department	0.9
Psychiatry	2.5
Psychiatry	2.5
Psychiatry	0.8
Psychiatry	0.8
Pediatric	1.25
Obstetrics/Gynecology	0.7
Intensive Care	0.7
Stepdown	0
Stepdown	0
Psychiatry	0.9
Psychiatry	0.8
Psychiatry	0.75
Psychiatry	0.93
Psychiatry	0.75
Intensive Care	0.5
Intensive Care	0.8
Stepdown	0.6
Medical/Surgical	0.6

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):
Nuclear Medicine/Radiology	Radiology technologists, patient transporters, respiratory therapist, pharmacist, and clerical staff.	Yes		
Other	Physicians, anesthesiologists, respiratory therapy, and pharmacy.	Yes		

Other	Physicians, anesthesiologists, respiratory therapy, pharmacy, radiology, and central sterile processing.	Yes		
Short Stay	Physicians, nurse practitioners, respiratory therapy, and pharmacy.	Yes		
Emergency Department	Physicians, respiratory therapy, pharmacy, hospital police, and clerical support.	Yes		
Obstetrics/Gynecology	Dedicated clerical and HN resources for this unit are in place. Additional resources such as pharmacists, respiratory therapists, registrars and clerical support are available to support the planned number of patients on this unit.	Yes		
Stepdown	Additional resources such as pharmacists and respiratory therapists are available to support the planned number of patients on this unit.	Yes		
Intensive Care	Additional resources such as pharmacists and respiratory therapists are available to support the planned number of patients on this unit.	Yes		

Pediatric	Additional resources such as pharmacists and respiratory therapists are available to support the planned number of patients on this unit.	Yes		
Rehabilitaion	Additional resources such as pharmacists and respiratory therapists are available to support the planned number of patients on this unit.	Yes		

<p>Medical/Surgical</p>	<p>Additional resources such as pharmacists and respiratory therapists are available to support the planned number of patients on this unit.</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements: DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals: In Patient Units: Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA 56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>
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<p>Medical/Surgical</p>	<p>Additional resources such as pharmacists and respiratory therapists are available to support the planned number of patients on this unit.</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements: DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals: In Patient Units: Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA 56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>
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<p>Medical/Surgical</p>	<p>Additional resources such as pharmacists and respiratory therapists are available to support the planned number of patients on this unit.</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements: DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals: In Patient Units: Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA 56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>
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Emergency Department	Head nurse, physicians, physician assistants, nurse practitioners, respiratory therapy, pharmacy, hospital police, and clerical support.	No	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:</p> <p>DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:</p> <p>In Patient Units: Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA</p> <p>56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>
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Emergency Department	Physician, social worker, pharmacy, and clerical staff.	No	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:</p> <p>DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:</p> <p>In Patient Units: Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA</p> <p>56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>
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<p>Psychiatry</p>	<p>Additional resources such as pharmacists are available to support the planned number of patients.</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements: DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals: In Patient Units: Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA 56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>
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<p>Pediatric</p>	<p>Additional resources such as pharmacists and respiratory therapists are available to support the planned number of patients on this unit.</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements: DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals: In Patient Units: Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA 56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>
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<p>Obstetrics/Gynecology</p>	<p>Additional resources such as pharmacists and respiratory therapists are available to support the planned number of patients on this unit.</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements: DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals: In Patient Units: Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA 56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>
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Intensive Care	Additional resources such as pharmacists and respiratory therapists are available to support the planned number of patients on this unit.	No	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:</p> <p>DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:</p> <p>In Patient Units: Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA</p> <p>56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>
Stepdown	Additional resources such as pharmacists and respiratory therapists are available to support the planned number of patients on this unit.	Yes		

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Intensive Care	Additional resources such as pharmacists and respiratory therapists are available to support the planned number of patients on this unit.	No	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements:</p> <p>DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals:  In Patient Units:  Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA</p> <p>56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>
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<p>Stepdown</p>	<p>Head nurse is assigned to unit. Additional resources such as pharmacists and respiratory therapists are available to support the planned number of patients on this unit.</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements: DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals: In Patient Units: Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA 56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>
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<p>Medical/Surgical</p>	<p>Additional resources such as pharmacists and respiratory therapists are available to support the planned number of patients on this unit.</p>	<p>No</p>	<p>Dear Dr. Stephanie Shulman, Director Division of Hospitals and Diagnostic &amp; Treatment Centers, I want to acknowledge and thank the Elmhurst Nursing Management and the Union Nursing leadership for coming together this past quarter to ensure Elmhurst Hospital has the best possible Nursing Staffing Plan for our units and patients. This is further evidence of the alignment and trust in our mission to serve all individuals that need care regardless of their ability to pay. The following is a high-level summary and final agreements: DC 37 2024 Response for the Safe Staffing Submission NYC Health and Hospitals: In Patient Units: Behavioral Health 4 BHA's per Unit and 2 PCA's per</p>	<p>This is the Management's proposal and rationale for the NYS Clinical Staffing Committee for areas with no consensus between Labor and Management. RN Labor Bargaining Unit/ NYSNA 56 out of 56 units reached consensus on staffing models and ratios. Local 420 and Local 1549 Elmhurst Hospital was not able to come to consensus with frontline staff on nursing support ratios for inpatient units for PCAs, BHAs and clerical support. Nursing support includes Patient Care Associates (PCA), Behavioral Health Associates (BHA), Psych Techs and Clerical Support in inpatient units. Our proposal for Nursing Support ratios is one nursing support person to every 12 patients. The</p>
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CBA INFORMATION

<p><b>We have one or more collective bargaining agreements:</b></p>	<p>Yes</p>
<p><b>If yes, then:</b></p> <p><b>Our general hospital has a collective bargaining agreement with the following organizations that represent clinical staff (Select all that apply):</b></p> <p><b>**Please select association and identify staff (e.g. nurses, ancillary staff, etc.) represented.</b></p>	<p>DC 37,New York State Nurses Associati on,SEIU 1199</p>

**Our general hospital's collective bargaining agreement with New York State Nurses Association expires on the following date:**

09/02/20  
28 12:00  
AM

**The number of hospital employees represented by New York State Nurses Association is:**

1093

**Our general hospital's collective bargaining agreement with SEIU 1199 expires on the following date:**

10/09/20  
27 12:00  
AM

<p><b>The number of hospital employees represented by SEIU 1199 is:</b></p>	<p>36</p>
<p><b>Our general hospital's collective bargaining agreement with DC 37 expires on the following date:</b></p>	<p>11/06/2026 12:00 AM</p>
<p><b>The number of hospital employees represented by DC37 is:</b></p>	<p>813</p>