

HOSPITAL INFORMATION

Region	Metropolitan Area Regional Office
County	Queens
Council	New York City
Network	MEDISYS HEALTH NETWORK
Reporting Organization	Jamaica Hospital Medical Center
Reporting Organization Id	1629
Reporting Organization Type	Hospital (pfi)
Data Entity	Jamaica Hospital Medical 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) ?
Neonatal Intensive Care Unit - NICU - 2nd Floor - A/B Building	5.22	3.08	12.67	3
Maternal Health OB - 2 North - A/B Building	3.11	1.58	14.78	7
Ambulatory Infusion Therapy	3.8	1.9	15	3.95
Ambulatory Surgery	9.4	2.35	30	3.19
Post Anesthesia Care Unit/Recovery Unit	9	6.76	10	1.11
Endoscopy	9	5.64	12	1.33
Operating Room	10	6.7	11.19	1.12
Cardiac Catheterization Lab	14	7.28	14.4	1.03
Emergency Department	26	2.04	95.68	3.68
Ambulatory Care Clinic	6	0.46	98	16.33
Medical Oncology - 3S - A/B Building -	6.01	1.5	30.04	6
Stroke, Telemetry, Medical Rehab. - 5N - A/B Building	4.62	1.6	21.71	6
Ortho Surgery - 3N - A/B Building	5.59	1.52	27.53	6
Medical Telemetry - 4S - A/B Building	6.29	1.78	26.47	5
Medical - 6S - A/B Building	5.93	1.5	29.57	6
Hospice - C Building	1.29	5.56	1.74	6

Medical Intensive Care Unit - A/B Building	7.78	4.31	13.56	2
Surgical Intensive Care Unit - 3 Central - A/B Building	7.01	4.39	12.01	2
Mental Health - Psychiatry 2 - C Building	4.63	1.6	21.77	6
Surgical/Medical Stepdown - 4N - A/B Building	9.89	2.77	26.68	3
Psychiatry 3 - C Building - Mental Health	4.63	1.6	21.77	6

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)
Neonatal Intensive Care Unit - NICU - 2nd Floor - A/B Building	0	0
Maternal Health OB - 2 North - A/B Building	0	0
Ambulatory Infusion Therapy	0	0
Ambulatory Surgery	0	0
Post Anesthesia Care Unit/Recovery Unit	0	0
Endoscopy	0	0

Operating Room	0	0
Cardiac Catheterization Lab	0	0
Emergency Department	0	0
Ambulatory Care Clinic	4	0.31
Medical Oncology - 3S - A/B Building -	0	0
Stroke, Telemetry, Medical Rehab. - 5N - A/B Building	0	0
Ortho Surgery - 3N - A/B Building	0	0
Medical Telemetry - 4S - A/B Building	0	0
Medical - 6S - A/B Building	0	0
Hospice - C Building	0	0
Medical Intensive Care Unit - A/B Building	0	0
Surgical Intensive Care Unit - 3 Central - A/B Building	0	0
Mental Health - Psychiatry 2 - C Building	0	0
Surgical/Medical Stepdown - 4N - A/B Building	0	0
Psychiatry 3 - C Building - Mental Health	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)
Neonatal Intensive Care Unit - NICU - 2nd Floor - A/B Building	0	0
Maternal Health OB - 2 North - A/B Building	1.85	0.94
Ambulatory Infusion Therapy	0	0
Ambulatory Surgery	2	0.5
Post Anesthesia Care Unit/Recovery Unit	1	0.75
Endoscopy	1	0.63
Operating Room	13	8.72
Cardiac Catheterization Lab	3	1.56
Emergency Department	11	0.86
Ambulatory Care Clinic	9	0.68
Medical Oncology - 3S - A/B Building -	3.75	0.94
Stroke, Telemetry, Medical Rehab. - 5N - A/B Building	2.71	0.94
Ortho Surgery - 3N - A/B Building	3.44	0.94
Medical Telemetry - 4S - A/B Building	3.78	1.07
Medical - 6S - A/B Building	3.7	0.94
Hospice - C Building	0.22	0.95
Medical Intensive Care Unit - A/B Building	1.94	1.07

Surgical Intensive Care Unit - 3 Central - A/B Building	1.72	1.07
Mental Health - Psychiatry 2 - C Building	2.72	0.94
Surgical/Medical Stepdown - 4N - A/B Building	3.81	1.07
Psychiatry 3 - C Building - Mental Health	2.72	0.94

DAY SHIFT UNLICENSED STAFFING

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Planned average number of unlicensed personnel (e.g., patient care technicians) on the unit providing direct patient care per day on the Day Shift? (Please provide a number with up to 5 digits. Ex: 101.50)	Planned total hours of unlicensed personnel care per patient including adjustment for case mix and acuity on the Day Shift (Please provide a number with up to 5 digits. Ex: 101.50)
Neonatal Intensive Care Unit - NICU - 2nd Floor - A/B Building	0	0
Maternal Health OB - 2 North - A/B Building	0	0
Ambulatory Infusion Therapy	0	0
Ambulatory Surgery	0	0
Post Anesthesia Care Unit/Recovery Unit	0	0
Endoscopy	0	0
Operating Room	0	0
Cardiac Catherization Lab	0	0
Emergency Department	0	0
Ambulatory Care Clinic	0	0

Medical Oncology - 3S - A/B Building -	0	0
Stroke, Telemetry, Medical Rehab. - 5N - A/B Building	0	0
Ortho Surgery - 3N - A/B Building	0	0
Medical Telemetry - 4S - A/B Building	0	0
Medical - 6S - A/B Building	0	0
Hospice - C Building	0	0
Medical Intensive Care Unit - A/B Building	0	0
Surgical Intensive Care Unit - 3 Central - A/B Building	0	0
Mental Health - Psychiatry 2 - C Building	0	0
Surgical/Medical Stepdown - 4N - A/B Building	0	0
Psychiatry 3 - C Building - Mental Health	0	0

DAY SHIFT ADDITIONAL RESOURCES

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Description of additional resources available to support unit level patient care on the 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.
Neonatal Intensive Care Unit - NICU - 2nd Floor - A/B Building	Clerk
Maternal Health OB - 2 North - A/B Building	Clerk
Ambulatory Infusion Therapy	Navigators
Ambulatory Surgery	Ward Clerk
Post Anesthesia Care Unit/Recovery Unit	N/A
Endoscopy	Surgical Tech.
Operating Room	Ward Clerk
Cardiac Catherization Lab	N/A
Emergency Department	Ward Clerk, Medical Assistant
Ambulatory Care Clinic	N/A
Medical Oncology - 3S - A/B Building -	Clerk
Stroke, Telemetry, Medical Rehab. - 5N - A/B Building	Clerk
Ortho Surgery - 3N - A/B Building	Clerk

Medical Telemetry - 4S - A/B Building	Clerk; Telemetry Tech
Medical - 6S - A/B Building	Clerk
Hospice - C Building	Clerk
Medical Intensive Care Unit - A/B Building	Clerk
Surgical Intensive Care Unit - 3 Central - A/B Building	Clerk
Mental Health - Psychiatry 2 - C Building	Clerk; Behavioral Health Associate
Surgical/Medical Stepdown - 4N - A/B Building	Clerk; Telemetry Tech.
Psychiatry 3 - C Building - Mental Health	Clerk; Behavioral Health Associate

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):
Neonatal Intensive Care Unit - NICU - 2nd Floor - A/B Building	Yes			
Maternal Health OB - 2 North - A/B Building	Yes			
Ambulatory Infusion Therapy	Yes			
Ambulatory Surgery	Yes			
Post Anesthesia Care Unit/Recovery Unit	Yes			
Endoscopy	Yes			

Operating Room	Yes			
Cardiac Catheterization Lab	Yes			
Emergency Department	Yes			
Ambulatory Care Clinic	Yes			
Medical Oncology - 3S - A/B Building -	Yes			
Stroke, Telemetry, Medical Rehab. - 5N - A/B Building	Yes			
Ortho Surgery - 3N - A/B Building	Yes			
Medical Telemetry - 4S - A/B Building	Yes			
Medical - 6S - A/B Building	Yes			
Hospice - C Building	Yes			
Medical Intensive Care Unit - A/B Building	Yes			
Surgical Intensive Care Unit - 3 Central - A/B Building	Yes			
Mental Health - Psychiatry 2 - C Building	Yes			
Surgical/Medical Stepdown - 4N - A/B Building	Yes			
Psychiatry 3 - C Building - Mental Health	Yes			

RN EVENING SHIFT STAFFING

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Planned average number of Registered Nurses (RN) on the unit providing direct patient care per day on the Evening Shift? (Please provide a number with up to 5 digits. Ex: 101.50)	Planned total hours of RN nursing care per patient including adjustment for case mix and acuity on the Evening Shift (Please provide a number with up to 5 digits. Ex: 101.50)	Planned average number of patients on the unit per day on the Evening Shift? (Please provide a number with up to 5 digits. Ex: 101.50)	What is the planned average number of patients for which one RN on the unit will provide direct patient care per day on the Evening Shift (Please provide a number with up to 5 digits. Ex: 101.50)?
Neonatal Intensive Care Unit - NICU - 2nd Floor - A/B Building	5.22	3.08	12.67	3
Maternal Health OB - 2 North - A/B Building	3.11	1.58	14.78	7
Ambulatory Care Clinic	5	0.45	84	16.8
Operating Room	5	6.7	5.59	1.12
Emergency Department	28	2.11	99.36	3.55
Medical Oncology - 3S - A/B Building	6.01	1.5	30.04	6
Stroke, Telemetry, Medical Rehab. - 5N - A/B Building	4.62	1.6	21.71	6
Ortho Surgery - 3N - A/B Building	5.59	1.52	27.53	6
Medical Telemetry - 4S - A/B Building	6.29	1.78	26.47	5
Medical - 6S - A/B Building	5.93	1.5	29.57	6
Hospice - C Building	1.29	5.56	1.74	6
Medical Intensive Care Unit - A/B Building	7.78	4.31	13.56	2
Surgical Intensive Care Unit - 3 Central - A/B Building	7.01	4.39	12.01	2

Mental Health - Psychiatry 2 - C Building	4.63	1.6	21.77	6
Surgical/Medical Stepdown - 4N - A/B Building	9.89	2.77	26.68	3
Mental Health - Psychiatry 3 - C Building	4.63	1.6	21.77	6

LPN EVENING SHIFT STAFFING

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Planned average number of Licensed Practical Nurses (LPN) on the unit providing direct patient care per day on the Evening Shift? (Please provide a number with up to 5 digits. Ex: 101.50)	Planned total hours of 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)
Neonatal Intensive Care Unit - NICU - 2nd Floor - A/B Building	0	0
Maternal Health OB - 2 North - A/B Building	0	0
Ambulatory Care Clinic	5	0.45
Operating Room	0	0
Emergency Department	0	0
Medical Oncology - 3S - A/B Building	0	0
Stroke, Telemetry, Medical Rehab. - 5N - A/B Building	0	0
Ortho Surgery - 3N - A/B Building	0	0
Medical Telemetry - 4S - A/B Building	0	0
Medical - 6S - A/B Building	0	0
Hospice - C Building	0	0
Medical Intensive Care Unit - A/B Building	0	0

Surgical Intensive Care Unit - 3 Central - A/B Building	0	0
Mental Health - Psychiatry 2 - C Building	0	0
Surgical/Medical Stepdown - 4N - A/B Building	0	0
Mental Health - Psychiatry 3 - C Building	0	0

EVENING SHIFT ANCILLARY STAFF

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Planned average number of ancillary members of the frontline team on the unit per day on the Evening Shift? (Please provide a number with up to 5 digits. Ex: 101.50)	Planned total hours of ancillary members of the frontline team including adjustment for case mix and acuity on the Evening Shift (Please provide a number with up to 5 digits. Ex: 101.50)
Neonatal Intensive Care Unit - NICU - 2nd Floor - A/B Building	0	0
Maternal Health OB - 2 North - A/B Building	1.85	0.94
Ambulatory Care Clinic	8	0.71
Operating Room	4	5.36
Emergency Department	11	0.83
Medical Oncology - 3S - A/B Building	3.75	0.94
Stroke, Telemetry, Medical Rehab. - 5N - A/B Building	2.71	0.94
Ortho Surgery - 3N - A/B Building	3.44	0.94
Medical Telemetry - 4S - A/B Building	3.78	1.07

Medical - 6S - A/B Building	3.7	0.94
Hospice - C Building	0.22	0.95
Medical Intensive Care Unit - A/B Building	1.94	1.07
Surgical Intensive Care Unit - 3 Central - A/B Building	1.72	1.07
Mental Health - Psychiatry 2 - C Building	2.72	0.94
Surgical/Medical Stepdown - 4N - A/B Building	3.81	1.07
Mental Health - Psychiatry 3 - C Building	2.72	0.94

EVENING SHIFT UNLICENSED STAFFING

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Planned average number of unlicensed personnel on the unit providing direct patient care per day on the Evening Shift? (Please provide a number with up to 5 digits. Ex: 101.50)	Planned total hours of unlicensed personnel care per patient including adjustment for case mix and acuity on the Evening Shift (Please provide a number with up to 5 digits. Ex: 101.50)
Neonatal Intensive Care Unit - NICU - 2nd Floor - A/B Building	0	0
Maternal Health OB - 2 North - A/B Building	0	0
Ambulatory Care Clinic	0	0
Operating Room	0	0
Emergency Department	0	0
Medical Oncology - 3S - A/B Building	0	0
Stroke, Telemetry, Medical Rehab. - 5N - A/B Building	0	0

Ortho Surgery - 3N - A/B Building	0	0
Medical Telemetry - 4S - A/B Building	0	0
Medical - 6S - A/B Building	0	0
Hospice - C Building	0	0
Medical Intensive Care Unit - A/B Building	0	0
Surgical Intensive Care Unit - 3 Central - A/B Building	0	0
Mental Health - Psychiatry 2 - C Building	0	0
Surgical/Medical Stepdown - 4N - A/B Building	0	0
Mental Health - Psychiatry 3 - C Building	0	0

EVENING SHIFT ADDITIONAL RESOURCES

<p>Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.</p>	<p>Description of additional resources available to support unit level patient care on the 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.</p>
Neonatal Intensive Care Unit - NICU - 2nd Floor - A/B Building	Clerk

Maternal Health OB - 2 North - A/B Building	Clerk
Ambulatory Care Clinic	N/A
Operating Room	N/A
Emergency Department	Ward Clerk; Medical Assistant
Medical Oncology - 3S - A/B Building	Clerk
Stroke, Telemetry, Medical Rehab. - 5N - A/B Building	Clerk
Ortho Surgery - 3N - A/B Building	Clerk
Medical Telemetry - 4S - A/B Building	Clerk; Telemetry Tech
Medical - 6S - A/B Building	Clerk
Hospice - C Building	None
Medical Intensive Care Unit - A/B Building	Clerk
Surgical Intensive Care Unit - 3 Central - A/B Building	Clerk
Mental Health - Psychiatry 2 - C Building	Clerk; Behavioral Health Associate
Surgical/Medical Stepdown - 4N - A/B Building	Clerk; Telemetry Tech.
Mental Health - Psychiatry 3 - C Building	Clerk; Behavioral Health Associate

EVENING SHIFT CONSENSUS INFORMATION

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Our Clinical Staffing Committee reached consensus on the clinical staffing plan for this unit:	If no, Chief Executive Officer Statement in support of clinical staffing plan for this unit:	Statement by members of clinical staffing committee selected by the general hospital administration (management members):	Statement by members of clinical staffing committee that were registered nurses, licensed practical nurses, and ancillary members of the frontline team (employee members):
Neonatal Intensive Care Unit - NICU - 2nd Floor - A/B Building	Yes			
Maternal Health OB - 2 North - A/B Building	Yes			
Ambulatory Care Clinic	Yes			
Operating Room	Yes			
Emergency Department	Yes			
Medical Oncology - 3S - A/B Building	Yes			
Stroke, Telemetry, Medical Rehab. - 5N - A/B Building	Yes			
Ortho Surgery - 3N - A/B Building	Yes			
Medical Telemetry - 4S - A/B Building	Yes			
Medical - 6S - A/B Building	Yes			
Hospice - C Building	Yes			
Medical Intensive Care Unit - A/B Building	Yes			
Surgical Intensive Care Unit - 3 Central - A/B Building	Yes			
Mental Health - Psychiatry 2 - C Building	Yes			
Surgical/Medical Stepdown - 4N - A/B Building	Yes			

Mental Health - Psychiatry 3 - C Building	Yes			
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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)
Neonatal	Neonatal Intensive Care Unit - NICU - 2nd Floor - A/B Building	5.22	3.08	12.67
Obstetrics/Gynecology	Maternal Health OB - 2 North - A/B Building	3.11	1.58	14.78
Other	Operating Room	3	6.7	3.35
Emergency Department	Emergency Department	26	2.41	80.96
Medical/Surgical	Medical Oncology - 3S - A/B Building	6.01	1.5	30.04
Medical/Surgical	Stroke, Telemetry, Medical Rehab. - 5N - A/B Building	4.62	1.6	21.71
Medical/Surgical	Ortho Surgery - 3N - A/B Building	5.59	1.52	27.53
Telemetry	Medical Telemetry - 4S - A/B Building	6.29	1.78	26.47
Medical/Surgical	Medical - 6S - A/B Building	5.93	1.5	29.57
Medical/Surgical	Hospice - C Building	1.29	5.56	1.74
Intensive Care	Medical Intensive Care Unit - A/B Building	7.78	4.31	13.56
Intensive Care	Surgical Intensive Care Unit - 3 Central - A/B Building	7.01	4.39	12.01
Psychiatry	Mental Health - Psychiatry 2 - C Building	4.63	1.6	21.77
Critical Care	Surgical/Medical Stepdown - 4N - A/B Building	9.89	2.77	26.68

Psychiatry	Mental Health - Psychiatry 3 - C Building	4.63	1.6	21.77
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LPN NIGHT SHIFT STAFFING

Name of Clinical Unit:	What is the planned average number of patients for which one RN on the unit will provide direct patient care per day on the Night Shift (Please provide a number with up to 5 digits. Ex: 101.50)?	Planned average number of Licensed Practical Nurses (LPN) on the unit providing direct patient care per day on the Night Shift? (Please provide a number with up to 5 digits. Ex: 101.50)
Neonatal	3	0
Obstetrics/Gynecology	7	0
Other	1.12	0
Emergency Department	3.11	0
Medical/Surgical	6	0
Medical/Surgical	6	0
Medical/Surgical	6	0
Telemetry	5	0
Medical/Surgical	6	0
Medical/Surgical	6	0
Intensive Care	2	0
Intensive Care	2	0
Psychiatry	6	0
Critical Care	3	0
Psychiatry	6	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)
Neonatal	0	0
Obstetrics/Gynecology	0	1.85
Other	0	2
Emergency Department	0	11
Medical/Surgical	0	3.75
Medical/Surgical	0	2.71
Medical/Surgical	0	3.44
Telemetry	0	3.78
Medical/Surgical	0	3.7
Medical/Surgical	0	0.22
Intensive Care	0	1.94
Intensive Care	0	1.72
Psychiatry	0	2.72
Critical Care	0	3.81
Psychiatry	0	2.72

NIGHT SHIFT UNLICENSED STAFFING

Name of Clinical Unit:	Planned total hours of ancillary members of the frontline team including adjustment for case mix and acuity on the Night Shift (Please provide a number with up to 5 digits. Ex: 101.50)	Planned average number of unlicensed personnel on the unit providing direct patient care per day on the Night Shift? (Please provide a number with up to 5 digits. Ex: 101.50)
Neonatal	0	0
Obstetrics/Gynecology	0.94	0
Other	4.46	0

Emergency Department	1.02	0
Medical/Surgical	0.94	0
Medical/Surgical	0.94	0
Medical/Surgical	0.94	0
Telemetry	1.07	0
Medical/Surgical	0.94	0
Medical/Surgical	0.94	0
Intensive Care	1.07	0
Intensive Care	1.07	0
Psychiatry	0.94	0
Critical Care	1.07	0
Psychiatry	0.94	0

NIGHT SHIFT ADDITIONAL RESOURCES

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

NIGHT SHIFT CONSENSUS INFORMATION

Name of Clinical Unit:	Description of additional resources available to support unit level patient care on the Night Shift. These resources include but are not limited to unit clerical staff, admission/discharge nurse, and other coverage provided to registered nurses, licensed practical nurses, and ancillary staff.	Our Clinical Staffing Committee reached consensus on the clinical staffing plan for this unit:	If no, Chief Executive Officer Statement in support of clinical staffing plan for this unit:	Statement by members of clinical staffing committee selected by the general hospital administration (management members):
Neonatal	N/A	Yes		
Obstetrics/Gynecology	N/A	Yes		
Other	N/A	Yes		
Emergency Department	Ward Clerk; Medical Assistant	Yes		
Medical/Surgical	None	Yes		
Medical/Surgical	Clerk	Yes		
Medical/Surgical	None	Yes		
Telemetry	Clerk, Telemetry Tech.	Yes		
Medical/Surgical	None	Yes		

Medical/Surgical	None	Yes		
Intensive Care	Clerk	Yes		
Intensive Care	Clerk	Yes		
Psychiatry	Behavioral Health Associate	Yes		
Critical Care	Clerk, Telemetry Tech	Yes		
Psychiatry	Behavioral Health Associate	Yes		

CBA INFORMATION

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

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

09/30/20
26 12:00
AM

The number of hospital employees represented by SEIU 1199 is:

2479