



New York State Law 2805-t

Hospital Clinical Staffing Committee

LONG ISLAND JEWISH FOREST HILLS

PFI Number: 1638

HOSPITAL CLINICAL STAFFING COMMITTEE CHARGE

The New York State Hospital Clinical Staffing Committee (NYSHCSC) law enacted in June 2021 requires hospitals to collaboratively develop and implement a clinical staffing plan for registered nurses (RNs) and other members of the frontline team. The hospital clinical staffing committee (HCSC) is charged with creating a forum to give frontline workers, RNs, licensed practical nurses (LPNs) and nursing assistive staff, including certified nursing assistants (CNAs), patient care attendants (PCTs), medical assistants (MAs) and unit clerks a role/voice in developing unit level staffing plans—while preserving management’s role in designing and implementing the staffing plan. The HCSC’s primary responsibilities are to develop and oversee implementation of the hospital’s annual clinical staffing plan.

**[PFI 1638] [Long Island Jewish Forest Hills]
Acute Care Inpatient Unit**

***4 North/ Medical Surgical**

Date of Services Budgeted: FY 2024

A well-staffed unit is not only defined by the number of caregivers included in the team, but by the carefully chosen members of each team depending upon the needs of each patient and the unit overall.

| | |
|-------------------------------------|----|
| Average Number of Patients Per Day: | 24 |
|-------------------------------------|----|

| Direct Caregivers | Scheduled Hours | Shift Length | Number of Staff | | | | | | |
|-----------------------------|-----------------|--------------|-----------------|------|------|------|------|------|------|
| | | | Mon | Tues | Wed | Thu | Fri | Sat | Sun |
| Day Shift | | | | | | | | | |
| RN | 7am-7pm | 12.00 | 4.00 | 4.00 | 4.00 | 4.00 | 4.00 | 4.00 | 4.00 |
| PCA | 7am-3pm | 8.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 |
| CSA | 7am-3pm | 8.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 |
| Evening Shift | | | | | | | | | |
| PCA | 3p-11pm | 8.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 |
| CSA | 3p-11pm | 8.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 |
| Night Shift | | | | | | | | | |
| RN | 7pm-7am | 12.00 | 4.00 | 4.00 | 4.00 | 4.00 | 4.00 | 4.00 | 4.00 |
| PCA | 11pm-7am | 8.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 |
| CHARGE RN/ASST. NUR. MNGER. | 8p-8a | 12.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 |

| Additional Care Team Members | | | |
|--|----------------|---------|-------|
| Skills | Shift Coverage | | |
| | Day | Evening | Night |
| Unit Nurse Management | X | | |
| Assistant Nurse Management | | | X |
| Staff Educator | X | | X |
| Unit Clerical Support | X | X | |
| 1:1 Patient Observer/sitter | X | X | X |
| Patient Transport Team | X | X | |
| Rapid Response Team | X | X | X |
| Respiratory Therapy Support | X | X | X |
| Nutritionist | X | | |
| Rehab Activities (OT, PT, Speech) | X | X | |
| Clinical Pharmacist | X | X | X |
| Licensed Social Services / Case Management | X | | |
| Phlebotomist | X | | |
| Spiritual Services | X | X | X |
| Hospitalist / NP / PA | X | X | X |
| Intensivist | X | X | X |
| Nursing Students | X | | |
| Other | | | |

| Additional Care Team Members | | | |
|---|----------------|---------|-------|
| Skills | Shift Coverage | | |
| | Day | Evening | Night |
| Unit Nurse Management | X | | |
| Assistant Nurse Management | | X | |
| Staff Educator | X | | X |
| Unit Clerical Support | X | X | |
| 1:1 Patient Observer/sitter | X | X | X |
| Patient Transport Team | X | X | |
| Rapid Response Team | X | X | X |
| Respiratory Therapy Support | X | X | X |
| Nutritionist | X | | |
| Rehab Activities (OT, PT, Speech) | X | X | |
| Clinical Pharmacist | X | X | X |
| Licensed Social Services / Case Management | X | | |
| Phlebotomist | X | | |
| Spiritual Services | X | X | X |
| Hospitalist / NP / PA | X | X | X |
| Palliative Care/Hospice Attending | X | X | X |
| Nursing Students | X | | |
| Other | | | |

■ The list of caregivers in these boxes were provided to all hospitals.

| Additional Care Team Members | | | |
|---|----------------|---------|-------|
| Skills | Shift Coverage | | |
| | Day | Evening | Night |
| Unit Nurse Management | X | | |
| Assistant Nurse Management | | | X |
| Staff Educator | X | | X |
| Unit Clerical Support | X | X | |
| 1:1 Patient Observer/sitter | X | X | X |
| Patient Transport Team | X | X | |
| Rapid Response Team | X | X | X |
| Respiratory Therapy Support | X | X | X |
| Nutritionist | X | | |
| Rehab Activities (OT, PT, Speech) | X | X | |
| Clinical Pharmacist | X | X | X |
| Licensed Social Services / Case Management | X | | |
| Phlebotomist | X | | |
| Telemetry Technician | X | X | X |
| Spiritual Services | X | X | X |
| Hospitalist / NP / PA | X | X | X |
| Nursing Students | | | |
| Other | | | |

■ The list of caregivers in these boxes were provided to all hospitals.

| Additional Care Team Members | | | |
|---|----------------|---------|-------|
| Skills | Shift Coverage | | |
| | Day | Evening | Night |
| Unit Nurse Management | X | | |
| Assistant Nurse Management | | X | |
| Staff Educator | X | | X |
| Unit Clerical Support | X | X | |
| 1:1 Patient Observer/sitter | X | X | X |
| Patient Transport Team | X | X | |
| Rapid Response Team | X | X | X |
| Respiratory Therapy Support | X | X | X |
| Nutritionist | X | | |
| Rehab Activities (OT, PT, Speech) | X | X | |
| Clinical Pharmacist | X | X | X |
| Licensed Social Services / Case Management | X | | |
| Phlebotomist | X | | |
| Telemetry Technician | X | X | X |
| Spiritual Services | X | X | X |
| Hospitalist / NP / PA | X | X | X |
| Nursing Students | X | | |
| Other | | | |

■ The list of caregivers in these boxes were provided to all hospitals.

| Additional Care Team Members | | | |
|---|----------------|---------|-------|
| Skills | Shift Coverage | | |
| | Day | Evening | Night |
| Unit Nurse Management | X | | |
| Assistant Nurse Management | | | X |
| Staff Educator | X | | X |
| Unit Clerical Support | X | X | |
| 1:1 Patient Observer/sitter | X | X | X |
| Patient Transport Team | X | X | |
| Rapid Response Team | X | X | X |
| Respiratory Therapy Support | X | X | X |
| Nutritionist | X | | |
| Rehab Activities (OT, PT, Speech) | X | X | |
| Clinical Pharmacist | X | X | X |
| Licensed Social Services / Case Management | X | | |
| Phlebotomist | X | X | X |
| Telemetry Technician | X | X | X |
| Spiritual Services | X | X | X |
| Hospitalist / NP / PA | X | X | X |
| Nursing Students | X | | |
| Other | | | |

■ The list of caregivers in these boxes were provided to all hospitals.

| Additional Care Team Members | | | |
|---|----------------|---------|-------|
| Skills | Shift Coverage | | |
| | Day | Evening | Night |
| Unit Nurse Management | X | | |
| Assistant Nurse Management | | | X |
| Staff Educator | X | | X |
| Unit Clerical Support | X | X | |
| 1:1 Patient Observer/sitter | X | X | X |
| Patient Transport Team | X | X | |
| Rapid Response Team | X | X | X |
| Respiratory Therapy Support | X | X | X |
| Nutritionist | X | | |
| Rehab Activities (OT, PT, Speech) | X | X | |
| Clinical Pharmacist | X | X | X |
| Licensed Social Services / Case Management | X | X | |
| Phlebotomist | X | | |
| Spiritual Services | X | X | X |
| Hospitalist / NP / PA | X | X | X |
| Nursing Student | X | | |
| Other | | | |

■ The list of caregivers in these boxes were provided to all hospitals.

[PFI 1638]
**[Long Island Jewish
Forest
Hills]**
Acute Care Inpatient Unit
***Acute Dialysis**

Date of Services Budgeted: FY 2024

A well-staffed unit is not only defined by the number of caregivers included in the team, but by the carefully chosen members of each team depending upon the needs of each patient and the unit overall.

| | |
|-------------------------------------|-----|
| Average Number of Patients Per Day: | 5.6 |
|-------------------------------------|-----|

| Direct Caregivers | Scheduled Hours | Shift Length | Number of Staff | | | | | | | |
|--|-----------------|--------------|-----------------|------|------|------|------|------|------|---------|
| | | | Mon | Tues | Wed | Thu | Fri | Sat | Sun | |
| | Day Shift | | | | | | | | | |
| RN | 8am-8pm | 12.00 | 2.00 | 2.00 | 2.00 | 2.00 | 2.00 | 2.00 | 2.00 | On-Call |
| Unlicensed Assistive Personnel (Dialysis Technician) | 7am-3pm | 8.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | N/A |

| <u>Skills</u> | Day |
|-----------------------------|-----------------------|
| | Unit Nurse Management |
| Staff Educator | X |
| 1:1 Patient Observer/sitter | X |
| Patient Transport Team | X |
| Monitor/Tele Technician | X |
| Rapid Response Team | X |
| Respiratory Therapy Support | X |
| Nephrologist | X |
| Resident/NPs/PAs | X |

■ The list of caregivers in these boxes were provided to all hospitals.

[PFI 1638]
**[Long Island Jewish
Forest Hills]**
Ambulatory/Procedural Areas
Ambulatory Surgery Unit

Date of Services Budgeted: FY 2024

A well-staffed unit is not only defined by the number of caregivers included in the team, but by the carefully chosen members of each team depending upon the needs of each patient and the unit overall.

| | |
|-------------------------------------|--------------|
| Average Number of Patients Per Day: | 15.84 |
|-------------------------------------|--------------|

| | | | Number of Staff | | | | | | |
|-------------------|-----------------|--------------|-----------------|------|------|------|------|-----|-----|
| Direct Caregivers | Scheduled Hours | Shift Length | Mon | Tues | Wed | Thu | Fri | Sat | Sun |
| | | | Day Shift | | | | | | |
| RN | 6am-2pm | 8.00 | 4.00 | 4.00 | 4.00 | 4.00 | 4.00 | N/A | N/A |
| RN | 7am-3pm | 8.00 | 1.00 | | 1.00 | | 1.00 | N/A | N/A |
| RN | 9am-5pm | 8.00 | | 1.00 | | 1.00 | | N/A | N/A |
| PCA | 6am-2pm | 8.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | N/A | N/A |
| CSA | 5:30am-1:30pm | 8.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | N/A | N/A |

| | | | Evening Shift | | | | | | |
|-----|----------|------|---------------|------|------|------|------|-----|-----|
| RN | 11am-7pm | 8.00 | 2.00 | 2.00 | 2.00 | 2.00 | 2.00 | N/A | N/A |
| PCA | 11am-7pm | 8.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | N/A | N/A |
| CSA | 11am-7pm | 8.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | N/A | N/A |

| <u>Skills</u> | | |
|-----------------------|-----|---------|
| | Day | Evening |
| Unit Nurse Management | X | |
| Staff Educator | X | |
| Unit Clerical Support | X | X |
| Rapid Response Team | X | X |
| Surgeons | X | X |
| Physician Assistants | X | X |
| Anesthesiologist | X | X |

The list of caregivers in these boxes were provided to all hospitals.

**[PFI 1638]
[Long Island Jewish
Forest Hills]
Ambulatory/Procedural Areas
Cardiology**

Date of Services Budgeted: FY 2024

A well-staffed unit is not only defined by the number of caregivers included in the team, but by the carefully chosen members of each team depending upon the needs of each patient and the unit overall.

| | |
|-------------------------------------|--------------|
| Average Number of Patients Per Day: | 22.86 |
|-------------------------------------|--------------|

| | | | Number of Staff | | | | | | |
|-------------------|-----------------|--------------|-----------------|------|------|------|------|------|------|
| Direct Caregivers | Scheduled Hours | Shift Length | Mon | Tues | Wed | Thu | Fri | Sat | Sun |
| | Day Shift | | | | | | | | |
| RN | 7am-3pm | 8.00 | 2.00 | 2.00 | 2.00 | 2.00 | 2.00 | N/A | N/A |
| US Tech | 7am-3pm | 8.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 |

| Skills | Day |
|-----------------------|-----|
| Unit Nurse Management | X |
| Unit Clerical Support | X |
| Rapid Response Team | X |
| Cardiologist | X |
| Anesthesiologist | X |

The list of caregivers in these boxes were provided to all hospitals.

| Skills | Shift Coverage | | |
|--|----------------|---------|-------|
| | Day | Evening | Night |
| Nursing Director | X | | |
| Staff Educator | X | | X |
| 1:1 Patient Observer/sitter | X | X | X |
| Patient Transport Team | X | X | X |
| Rapid Response Team | X | X | X |
| Respiratory Therapy Support | X | X | X |
| Unit Clerical Support | X | X | X |
| Rehab Activities (OT, PT, Speech) | X | X | |
| Clinical Pharmacist | X | X | X |
| Licensed Social Services / Case Management | X | | |
| Telemetry Technician | X | X | X |
| Spiritual Services | X | X | X |
| Hospitalist / NP / PA | X | X | X |

■ The list of caregivers in these boxes were provided to all hospitals.

| | | | | | | | | | |
|---|----------|-------|------|------|------|------|------|------|------|
| Unlicensed Assistive Personnel (NA/PCA) | 11pm-7am | 8.00 | 4.00 | 4.00 | 4.00 | 4.00 | 4.00 | 4.00 | 4.00 |
| CHARGE RN/ASST. NUR. MNGER. | 8pm-8am | 12.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 |

** Additional 4 RNs added midshift (varied shifts) totaling maximum 12 RNs in department.

| Skills | Shift Coverage | | |
|--|----------------|---------|-------|
| | Day | Evening | Night |
| Unit Nurse Management | X | | |
| Assistant Nurse Management | | X | X |
| Staff Educator | X | | X |
| 1:1 Patient Observer/sitter | X | X | X |
| Patient Transport Team | X | X | X |
| Monitor/Tele Technician | X | X | X |
| Rapid Response Team | X | X | X |
| Respiratory Therapy Support | X | X | X |
| Unit Clerical Support | X | X | X |
| Rehab Activities (OT, PT, Speech) | X | X | |
| Clinical Pharmacist | X | | |
| Licensed Social Services/Case Management | X | X | X |
| Spiritual Services | X | X | X |
| Emergency Medicine Physician /NP/PA | X | X | X |
| Medical Residents | | | |

The list of caregivers in these boxes were provided to all hospitals.

[PFI 1638]
[Long Island Jewish Forest Hills]
Ambulatory/Procedural Areas
Endoscopy

| | |
|--|-------------|
| Average Number of Patients Per Day: | 12.6 |
|--|-------------|

Date of Services Budgeted: FY 2024

A well-staffed unit is not only defined by the number of caregivers included in the team, but by the carefully chosen members of each team depending upon the needs of each patient and the unit overall.

| Direct Caregivers | Scheduled Hours | Shift Length | Number of Staff | | | | | | |
|-------------------|-----------------|--------------|-----------------|------|------|------|------|-----|-----|
| | | | Mon | Tues | Wed | Thu | Fri | Sat | Sun |
| Day Shift | | | | | | | | | |
| RN | 7am-3pm | 8.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | N/A | N/A |
| RN | 8am-4pm | 8.00 | 2.00 | 2.00 | 2.00 | 2.00 | 2.00 | N/A | N/A |
| RN | 9am-5pm | 8.00 | 1.00 | 2.00 | 1.00 | 2.00 | 2.00 | N/A | N/A |
| RN | 10am-6pm | 8.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | N/A | N/A |
| Endo Aides | 8am-4pm | 8.00 | 2.00 | 2.00 | 2.00 | 2.00 | 2.00 | N/A | N/A |
| Endo Aides | 9am-5pm | 8.00 | | 1.00 | 1.00 | 1.00 | | | |

| Evening Shift | | | | | | | | | |
|----------------------|----------|------|------|------|------|------|------|-----|-----|
| RN | 11am-7pm | 8.00 | 2.00 | 2.00 | 2.00 | 2.00 | 2.00 | N/A | N/A |
| Endo Aides | 11am-7pm | 8.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | N/A | N/A |

Additional Endo Aides/ RN are added when needed due to increased volume.

| <u>Skills</u> | | |
|-----------------------------|-----|---------|
| | Day | Evening |
| Unit Nurse Management | X | |
| Staff Educator | X | |
| Rapid Response Team | X | X |
| Respiratory Therapy Support | X | X |
| GI Specialist | X | X |
| Anesthesia Tech | | |
| Anesthesiologist | X | X |

The list of caregivers in these boxes were provided to all hospitals.

| Additional Care Team Members | | | |
|---|----------------|---------|-------|
| Skills | Shift Coverage | | |
| | Day | Evening | Night |
| Unit Nurse Management | X | | |
| Assistant Nurse Management | | | X |
| Staff Educator | X | | X |
| Unit Clerical Support | X | X | |
| 1:1 Patient Observer/sitter | X | X | X |
| Patient Transport Team | X | X | |
| Telemetry Technician | X | X | X |
| Rapid Response Team | X | X | X |
| Respiratory Therapy Support | X | X | X |
| Nutritionist | X | | |
| Rehab Activities (OT, PT, Speech) | X | X | |
| Clinical Pharmacist | X | X | X |
| Licensed Social Services / Case Management | X | X | |
| Spiritual Services | X | X | X |
| Hospitalist / NP / PA | X | X | X |
| Intensivist | X | X | X |
| Nursing Students | X | | |
| Other | | | |

■ The list of caregivers in these boxes were provided to all hospitals.

[PFI 1638]
[Long Island Jewish Forest Hills]
Ambulatory/Procedural Areas
Interventional Radiology

Date of Services Budgeted: FY 2024

A well-staffed unit is not only defined by the number of caregivers included in the team, but by the carefully chosen members of each team depending upon the needs of each patient and the unit overall.

| | |
|-------------------------------------|-------------|
| Average Number of Patients Per Day: | 2.43 |
|-------------------------------------|-------------|

| Direct Caregivers | Scheduled Hours | Shift Length | Mon | Tues | Wed | Thu | Fri |
|--|-----------------|--------------|------|------|------|------|------|
| RN | 8a-4p | 8.00 | 2.00 | 2.00 | 2.00 | 2.00 | 2.00 |
| Unlicensed Assistive Personnel (Interventional Rad Technician) | 8a-4p | 8.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 |

Additional RN and IR Tech are added based on the scheduled cases for a max of 2 RNs and 2 IR Techs

| <u>Skills</u> | Day |
|----------------------------|-----|
| Unit Director | X |
| Nurse Educator | X |
| Staff Educator | X |
| Unit Clerical Support | X |
| Rapid Response Team | X |
| Interventional Radiologist | X |
| Anesthesiologist | X |
| Physician Assistants | X |

 The list of caregivers in these boxes were provided to all hospitals

| Additional Care Team Members | | | |
|---|----------------|---------|-------|
| Skills | Shift Coverage | | |
| | Day | Evening | Night |
| Unit Nurse Management | X | | |
| Assistant Nurse Management | | | X |
| Staff Educator | X | | |
| Unit Clerical Support | X | X | X |
| 1:1 Patient Observer/sitter | X | X | X |
| Patient Transport Team | | | |
| Rapid Response Team | X | X | X |
| Respiratory Therapy Support | X | X | X |
| Lactation Specialist | X | | |
| Rehab Activities (OT, PT, Speech) | X | X | |
| Licensed Social Services / Case Management | X | X | |
| Spiritual Services | X | X | X |
| OB Physician Assistants | X | X | X |
| OB GYN Attending /Anesthesia | X | X | X |
| Other | | | |

■ The list of caregivers in these boxes were provided to all hospitals.

[PFI 1638]
**[Long Island Jewish
Forest Hills]**
Acute Care Inpatient Unit
***Newborn Nursery/Special Care Nursery**

Date of Services Budgeted: FY 2024

| | |
|-------------------------------------|----|
| Average Number of Patients Per Day: | 15 |
|-------------------------------------|----|

A well-staffed unit is not only defined by the number of caregivers included in the team, but by the carefully chosen members of each team depending upon the needs of each patient and the unit overall.

| Direct Caregivers | Scheduled Hours | Shift Length | Number of Staff | | | | | | |
|-------------------|-----------------|--------------|-----------------|------|------|------|------|------|------|
| | | | Mon | Tues | Wed | Thu | Fri | Sat | Sun |
| | Day Shift | | | | | | | | |
| RN | 7am-7pm | 12.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 |

| | Night Shift | | | | | | | | |
|----|-------------|-------|------|------|------|------|------|------|------|
| RN | 7pm-7am | 12.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 |

| Skills | Shift Coverage | | |
|-----------------------------|----------------|---------|-------|
| | Day | Evening | Night |
| Unit Nurse Management | X | | |
| Assistant Nurse Management | | | X |
| Staff Educator | X | | |
| Unit Clerical Support | | | |
| Rapid Response Team | X | X | X |
| Respiratory Therapy Support | X | X | X |
| Lactation Specialist | X | | |

| | | | |
|---|---|---|---|
| Licensed Social Services / Case Management | X | X | |
| Spiritual Services | X | X | X |
| Hospitalist / NP / PA | X | X | X |
| Neonatologist | | | |

[PFI 1638]
[Long Island Jewish Forest Hills]
Ambulatory/Procedural Areas
Operating Room

Date of Services Budgeted: FY 2024

A well-staffed unit is not only defined by the number of caregivers included in the team, but by the carefully chosen members of each team depending upon the needs of each patient and the unit overall.

| | |
|-------------------------------------|-------------|
| Average Number of Patients Per Day: | 23.5 |
|-------------------------------------|-------------|

| | | | Number of Staff | | | | | | |
|-------------------|-----------------|--------------|-----------------|-------|-------|-------|-------|-----|-----|
| Direct Caregivers | Scheduled Hours | Shift Length | Mon | Tues | Wed | Thu | Fri | Sat | Sun |
| | | | Day Shift | | | | | | |
| RN | 7am-3pm | 8.00 | 10.00 | 10.00 | 10.00 | 10.00 | 10.00 | N/A | N/A |
| Surgical Tech | 7am-3pm | 8.00 | 9.00 | 9.00 | 9.00 | 9.00 | 9.00 | N/A | N/A |

| | | | Evening Shift | | | | | | |
|---------------|-----------|-------|---------------|------|------|------|------|-----|-----|
| RN | 11am-7pm | 8.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | N/A | N/A |
| RN | 11am-11pm | 12.00 | | 1.00 | | 1.00 | 1.00 | N/A | N/A |
| RN | 3pm-11pm | 8.00 | 4.00 | 4.00 | 4.00 | 4.00 | 4.00 | N/A | N/A |
| Surgical Tech | 11am-7pm | 8.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | N/A | N/A |
| Surgical Tech | 3pm-11pm | 8.00 | 4.00 | 4.00 | 4.00 | 4.00 | 4.00 | N/A | N/A |

*Nights and weekends, OR staff on-call for emergent cases

| <u>Skills</u> | | |
|--|-----|---------|
| | Day | Evening |
| Unit Nurse Management | X | |
| Assistant Nurse Manager | | X |
| Unit Clerical Support | X | X |
| Staff Educator | X | |
| Rapid Response Team | X | X |
| PA/Surgeon | X | X |
| Turnover Technicians | X | X |
| Anesthesiologist/ Anesthesia Technicians | X | X |

The list of caregivers in these boxes were provided to all hospitals.

[PFI 1638]
[Long Island Jewish Forest Hills]
Ambulatory/Procedural Areas
POST ANESTHESIA RECOVERY ROOM (PACU)

Date of Services Budgeted: FY 2024

A well-staffed unit is not only defined by the number of caregivers included in the team, but by the carefully chosen members of each team depending upon the needs of each patient and the unit overall.

| | |
|-------------------------------------|--------------|
| Average Number of Patients Per Day: | 23.49 |
|-------------------------------------|--------------|

| | | | Number of Staff | | | | | | |
|-------------------|-----------------|--------------|-----------------|------|------|------|------|-----|-----|
| Direct Caregivers | Scheduled Hours | Shift Length | Mon | Tues | Wed | Thu | Fri | Sat | Sun |
| | | | Day Shift | | | | | | |
| RN | 7am-3pm | 8.00 | 2.00 | 2.00 | 2.00 | 2.00 | 2.00 | N/A | N/A |
| RN | 9am-5pm | 8.00 | 2.00 | 2.00 | 2.00 | 2.00 | 2.00 | N/A | N/A |
| PCA | 7am-3pm | 8.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | N/A | N/A |

| | | | Evening Shift | | | | | | |
|-----|----------|------|---------------|------|------|------|------|-----|-----|
| RN | 12pm-8pm | 8.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | N/A | N/A |
| RN | 1pm-9pm | 8.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | N/A | N/A |
| RN | 3pm-11pm | 8.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | N/A | N/A |
| PCA | 3pm-11pm | 8.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | N/A | N/A |
| CSA | 11am-7pm | 8.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | N/A | N/A |

*Nights and weekends, OR staff on-call for emergent cases

| Skills | | |
|--|-----|---------|
| | Day | Evening |
| Unit Nurse Management | X | |
| Staff Educator | X | |
| Unit Clerical Support | X | X |
| Rapid Response Team | X | X |
| 1:1 Patient Observer | X | X |
| Physician Assistants | X | X |
| Surgeons | X | X |
| Anesthesiologist/Anesthesia Technician | X | X |

The list of caregivers in these boxes were provided to all hospitals.

| Additional Care Team Members | | | |
|--|----------------|---------|-------|
| Skills | Shift Coverage | | |
| | Day | Evening | Night |
| Unit Nurse Management | X | | |
| Assistant Nurse Management | | | X |
| Staff Educator | X | | X |
| Unit Clerical Support | X | X | X |
| 1:1 Patient Observer/sitter | X | X | X |
| Patient Transport Team | | | |
| Rapid Response Team | X | X | X |
| Respiratory Therapy Support | X | X | X |
| Lactation Specialist | X | | |
| Rehab Activities (OT, PT, Speech) | X | X | |
| Licensed Social Services / Case Management | X | | |
| Spiritual Services | X | X | X |
| Hospitalist / NP / PA | X | X | X |
| OB GYN Attending/Anesthesia | X | X | X |
| Other | | | |

■ The list of caregivers in these boxes were provided to all hospitals.

[PFI 1638]
[Long Island Jewish Forest Hills]
Ambulatory/Procedural Areas
Pre-Surgical Testing (PST)

Date of Services Budgeted: FY 2024

A well-staffed unit is not only defined by the number of caregivers included in the team, but by the carefully chosen members of each team depending upon the needs of each patient and the unit overall.

| | |
|-------------------------------------|-----------|
| Average Number of Patients Per Day: | 27 |
|-------------------------------------|-----------|

| | | | Number of Staff | | | | | | |
|-------------------|-----------------|--------------|-----------------|------|------|------|------|-----|-----|
| Direct Caregivers | Scheduled Hours | Shift Length | Mon | Tues | Wed | Thu | Fri | Sat | Sun |
| | | | Day Shift | | | | | | |
| NP | 7am-7pm | 12.00 | 3.00 | 2.00 | 2.00 | 2.00 | 2.00 | N/A | N/A |
| NP | 8am-6pm | 13.00 | N/A | 1.00 | 1.00 | 1.00 | 1.00 | N/A | N/A |

*Varied (4) 10-hour shifts

| | | | Evening Shift | | | | | | |
|-----------------|----------|------|---------------|------|------|------|------|-----|-----|
| Admitting Clerk | 7am-3pm | 8.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | N/A | N/A |
| Admitting Clerk | 10am-6pm | 8.00 | 1.00 | 1.00 | 1.00 | 1.00 | 1.00 | N/A | N/A |
| CSA | 8am-4pm | 8.00 | N/A | 1.00 | 1.00 | 1.00 | 1.00 | N/A | N/A |

| Skills | Day | | Evening | |
|---------------------|-----------------------|---|---------|--|
| | Unit Nurse Management | X | | |
| Rapid Response Team | X | | X | |
| Surgeons | X | | X | |
| Anesthesiologist | X | | X | |

■ The list of caregivers in these boxes were provided to all hospitals.

Long Island Jewish Forest Hills
Executive Director Decision

Acute Care Inpatient Units Staffing Plan
Medical Unit / Advanced Illness
29 Licensed Beds

| | | |
|--|-------------------------------------|----|
| Unit Description: 4 North is a 29 bedded Medical Unit. We can operate up to 4 Advanced Illness beds on this unit. These Advanced Illness patients are admitted under the care of an intensivist and coverage is 24/7. There is a dedicated Nurse Practitioner that cares for this population as well. Staffing is adjusted according to the acuity and number of advanced illness beds on the unit at any given time. This is assessed every 12 hours by nursing leadership. This unit can accommodate ventilators and non-invasive ventilation. | Average Number of Patients Per Day: | 24 |
|--|-------------------------------------|----|

| Staffing Submitted by Committee Co-leads | | | | | | | | |
|---|--------------------------|--------------|------------------------------|------------------------|------------------------------|------------------------|------------------------------|------------------------|
| Direct Caregivers | Scheduled Hours | Shift Length | Day | | Evening | | Night | |
| | | | Direct Care Co-lead Proposal | Admin Co-lead Proposal | Direct Care Co-lead Proposal | Admin Co-lead Proposal | Direct Care Co-lead Proposal | Admin Co-lead Proposal |
| RN | 7am-7pm and 7pm-7am | 12.00 | No Proposal | 4 | No Proposal | N/A | No Proposal | 4 |
| Unlicensed Assistive Personnel (NA/PCA/PCT/BHA) | 7a-3p, 3p-11p and 11p-7a | 8.00 | No Proposal | 3 | No Proposal | 3 | No Proposal | 3 |
| CSA | 7a-3p and 3p-11p | 8.00 | No Proposal | 1 | No Proposal | 1 | No Proposal | 0 |
| Charge RN/Asst Nurse Mgr | 8p-8a | 12.00 | No Proposal | 0 | No Proposal | 0 | No Proposal | 1 |

Final Recommendations by Executive Director

| Unit Name – 4 North | | | | | | |
|---|--------------------------|--------------|-----|---------|-------|--|
| Direct Caregivers | Scheduled Hours | Shift Length | Day | Evening | Night | |
| RN | 7am-7pm and 7pm-7am | 12.00 | 4 | N/A | 4 | |
| Unlicensed Assistive Personnel (NA/PCA/PCT/BHA) | 7a-3p, 3p-11p and 11p-7a | 8.00 | 3 | 3 | 3 | |
| CSA | 7a-3p and 3p-11p | 8.00 | 1 | 1 | 0 | |
| Charge RN/Asst Nurse Mgr | 8p-8a | 12.00 | 0 | 0 | 1 | |

Findings and Conclusions

In my role as executive director LIJ Forest Hills hospital, I have the responsibility of reviewing the staffing plans recommended by the Clinical staffing committee. We aim to offer quality care to our community and providing a safe work environment for our team members. Factors that are part of my evaluation include, but are not limited to quality metrics, the average daily census and the level of acuity of our patients. Based upon that review I am not recommending any unit staffing changes at this time.

Rationale for Decision

In reviewing our average daily census, acuity of our patient and the overall quality metrics, there are no material changes to support specific revisions of unit staffing. Administration provided me with their proposed staffing plan for review. Other proposed staffing plans were not made available.

With the above stated review in mind, and the absence of any significant changes in clinical programs, I am currently not recommending any staffing changes.

For the safety of our patients, our nursing leadership team has processes in place to consistently re-evaluate our staffing needs and responding to the acuity and increases in patient volume. Our team members also have clear mechanisms to raise staffing concerns for nursing leadership to address. These processes provide effective communication opportunities regarding the safety of patient care for the entire team to work together should our patient care environment shift and need additional support. We will continue to monitor for any changes in short or long term needs for our patients and the team. I thank the entire Clinical Staffing Committee for their time and effort to create a safe environment in our hospital.

| Additional Care Team Members | | | |
|--|-----------------------|---------|-------|
| <u>Skills</u> | <u>Shift Coverage</u> | | |
| | Day | Evening | Night |
| Unit Nurse Management | X | | |
| Assistant Nurse Management | | X | |
| Staff Educator | X | | X |
| Unit Clerical Support | X | X | |
| 1:1 Patient Observer/sitter | X | X | X |
| Patient Transport Team | X | X | |
| Rapid Response Team | X | X | X |
| Respiratory Therapy Support | X | X | X |
| Nutritionist | X | | |
| Rehab Activities (OT, PT, Speech) | X | X | |
| Clinical Pharmacist | X | X | X |
| Licensed Social Services / Case Management | X | | |
| Phlebotomist | X | | |
| Spiritual Services | X | X | X |
| Hospitalist / NP / PA | X | X | X |
| Intensivist | X | X | X |
| Nursing Students | X | | |
| Other | | | |

The list of caregivers in these boxes were provided to all hospitals.

Submitted by Lorraine Chambers Lewis

LIJ Forest Hills

June 27, 2023



Long Island Jewish Forest Hills
Executive Director Decision

Acute Care Inpatient Units Staffing Plan
Medical Unit / Hospice Inpatient
30 Licensed Beds

| | | |
|---|-------------------------------------|----|
| Unit Description: 4 South is a 30 bedded Medical/Surgical Unit. We have designated 4 South to be our inpatient hospice unit. Patients are admitted to 4 south from Hospice Care Network. The hospice patients are admitted under the care of a medical attending that specializes in palliative/hospice care with coverage 24/7. There are nurse practitioners and medical residents that provide oversight for the patients on 4 south 24/7. Staffing is adjusted according to the acuity and number of admitted hospice patients on the unit, which can fluctuate between 0 and 6 at any given time. The acuity is assessed every 12 hours by nursing leadership and staffing adjustments made accordingly. All registered nurses on this unit are specially trained to manage symptoms at end of life. This is encompassed in the orientation program of registered nurses on this unit. | Average Number of Patients Per Day: | 24 |
|---|-------------------------------------|----|

| Staffing Submitted by Committee Co-leads | | | | | | | | |
|---|--------------------------|--------------|------------------------------|------------------------|------------------------------|------------------------|------------------------------|------------------------|
| Direct Caregivers | Scheduled Hours | Shift Length | Day | | Evening | | Night | |
| | | | Direct Care Co-lead Proposal | Admin Co-lead Proposal | Direct Care Co-lead Proposal | Admin Co-lead Proposal | Direct Care Co-lead Proposal | Admin Co-lead Proposal |
| RN | 7am-7pm and 7pm-7am | 12.00 | No Proposal | 3 | No Proposal | N/A | No Proposal | 3 |
| Unlicensed Assistive Personnel (NA/PCA/PCT/BHA) | 7a-3p, 3p-11p and 11p-7a | 8.00 | No Proposal | 3 | No Proposal | 3 | No Proposal | 3 |
| CSA | 7a-3p and 3p-11p | 8.00 | No Proposal | 1 | No Proposal | 1 | No Proposal | 0 |
| Charge RN/Asst Nurse Mgr | 2p-12a | 10.00 | No Proposal | 0 | No Proposal | 1 | No Proposal | 0 |

Final Recommendations by Executive Director

| Unit Name – 4 South | | | | | | |
|---|--------------------------|--------------|-----|---------|-------|--|
| Direct Caregivers | Scheduled Hours | Shift Length | Day | Evening | Night | |
| RN | 7am-7pm and 7pm-7am | 12.00 | 3 | N/A | 3 | |
| Unlicensed Assistive Personnel (NA/PCA/PCT/BHA) | 7a-3p, 3p-11p and 11p-7a | 8.00 | 3 | 3 | 3 | |



| | | | | | |
|--------------------------|------------------|-------|---|---|---|
| CSA | 7a-3p and 3p-11p | 8.00 | 1 | 1 | 0 |
| Charge RN/Asst Nurse Mgr | 2p-12a | 10.00 | 0 | 1 | 0 |

Findings and Conclusions

In my role as executive director LIJ Forest Hills hospital, I have the responsibility of reviewing the staffing plans recommended by the Clinical staffing committee. We aim to offer quality care to our community and providing a safe work environment for our team members. Factors that are part of my evaluation include, but are not limited to quality metrics, the average daily census and the level of acuity of our patients.

Rationale for Decision

In reviewing our average daily census, acuity of our patient and the overall quality metrics, there are no material changes to support specific revisions of unit staffing. Administration provided me with their proposed staffing plan for review. Other proposed staffing plans were not made available.

With the above stated review in mind, and the absence of any significant changes in clinical programs, I am currently not recommending any staffing changes.

For the safety of our patients, our nursing leadership team has processes in place to consistently re-evaluate our staffing needs and responding to the acuity and increases in patient volume. Our team members also have clear mechanisms to raise staffing concerns for nursing leadership to address. These processes provide effective communication opportunities regarding the safety of patient care for the entire team to work together should our patient care environment shift and need additional support. We will continue to monitor for any changes in short or long term needs for our patients and the team. I thank the entire Clinical Staffing Committee for their time and effort to create a safe environment in our hospital.



| Additional Care Team Members | | | |
|--|----------------|---------|-------|
| Skills | Shift Coverage | | |
| | Day | Evening | Night |
| Unit Nurse Management | X | | |
| Assistant Nurse Management | | X | |
| Staff Educator | X | | X |
| Unit Clerical Support | X | X | |
| 1:1 Patient Observer/sitter | X | X | X |
| Patient Transport Team | X | X | |
| Rapid Response Team | X | X | X |
| Respiratory Therapy Support | X | X | X |
| Nutritionist | X | | |
| Rehab Activities (OT, PT, Speech) | X | X | |
| Clinical Pharmacist | X | X | X |
| Licensed Social Services / Case Management | X | | |
| Phlebotomist | X | | |
| Spiritual Services | X | X | X |
| Hospitalist / NP / PA | X | X | X |
| Palliative Care/Hospice Attending | X | X | X |
| Nursing Students | X | | |
| Other | | | |

The list of caregivers in these boxes were provided to all hospitals.

Submitted by:

Lorraine Chambers Lewis
 Executive Director
 LIJ Forest Hills
 June 27, 2023

Long Island Jewish Forest Hills
Executive Director Decision

Acute Care Inpatient Units Staffing Plan
5 North Telemetry Unit
29 Licensed Beds

| | | |
|---|--|-----------|
| <p>Unit Description: 5 North is a 29 bedded Telemetry Unit. There are medical residents that provide oversight for all patients on 5 North 24/7. Staffing is adjusted according to the acuity and number of telemetry patients on the unit. The unit is monitored 24/7 by the central monitoring room, staffed with telemetry technicians. The central monitoring room is located on the physical unit to enhance collaboration and communication. Patient acuity is assessed every 12 hours by nursing leadership and staffing adjustments made accordingly. All registered nurses on this unit are specially trained to monitor, interpret, and respond appropriately to telemetry monitoring. Telemetry competency is validated yearly. Telemetry training is encompassed in the orientation program of registered nurses on this unit.</p> | <p>Average Number of Patients Per Day:</p> | <p>29</p> |
|---|--|-----------|

| Staffing Submitted by Committee Co-leads | | | | | | | | |
|---|--------------------------|--------------|------------------------------|------------------------|------------------------------|------------------------|------------------------------|------------------------|
| Direct Caregivers | Scheduled Hours | Shift Length | Day | | Evening | | Night | |
| | | | Direct Care Co-lead Proposal | Admin Co-lead Proposal | Direct Care Co-lead Proposal | Admin Co-lead Proposal | Direct Care Co-lead Proposal | Admin Co-lead Proposal |
| RN | 7am-7pm and 7p-7a | 12.00 | No Proposal | 4 | No proposal | N/A | No Proposal | 4 |
| Unlicensed Assistive Personnel (NA/PCA/PCT/BHA) | 7a-3p, 3p-11p and 11p-7a | 8.00 | No Proposal | 3 | No Proposal | 3 | No Proposal | 3 |
| CSA | 7a-3p and 3p-11p | 8.00 | No Proposal | 1 | No Proposal | 1 | No Proposal | 0 |
| Charge RN/Asst Nurse Mgr | 8p-8a | 12.00 | No Proposal | 0 | No Proposal | 0 | No Proposal | 1 |

Final Recommendations by Executive Director

| Unit Name – [Name of Unit] | | | | | | |
|---|--------------------------|--------------|-----|---------|-------|--|
| Direct Caregivers | Scheduled Hours | Shift Length | Day | Evening | Night | |
| RN | 7am-7pm and 7p-7a | 12.00 | 4 | N/A | 4 | |
| Unlicensed Assistive Personnel (NA/PCA/PCT/BHA) | 7a-3p, 3p-11p and 11p-7a | 8.00 | 3 | 3 | 3 | |
| CSA | 7a-3p and 3p-11p | 8.00 | 1 | 1 | 0 | |
| Charge RN/Asst Nurse Mgr | 8p-8a | 12.00 | 0 | 0 | 1 | |

Findings and Conclusions

In my role as executive director LIJ Forest Hills hospital, I have the responsibility of reviewing the staffing plans recommended by the Clinical staffing committee. We aim to offer quality care to our community and providing a safe work environment for our team members. Factors that are part of my evaluation include, but are not limited to quality metrics, the average daily census and the level of acuity of our patients.

Rationale for Decision

In reviewing our average daily census, acuity of our patient and the overall quality metrics, there are no material changes to support specific revisions of unit staffing. Administration provided me with their proposed staffing plan for review. Other proposed staffing plans were not made available.

With the above stated review in mind, and the absence of any significant changes in clinical programs, I am currently not recommending any staffing changes.

For the safety of our patients, our nursing leadership team has processes in place to consistently re-evaluate our staffing needs and responding to the acuity and increases in patient volume. Our team members also have clear mechanisms to raise staffing concerns for nursing leadership to address. These processes provide effective communication opportunities regarding the safety of patient care for the entire team to work together should our patient care environment shift and need additional support. We will continue to monitor for any changes in short or long term needs for our patients and the team. I thank the entire Clinical Staffing Committee for their time and effort to create a safe environment in our hospital.

| Additional Care Team Members | | | |
|--|-----------------------|---------|-------|
| <u>Skills</u> | <u>Shift Coverage</u> | | |
| | Day | Evening | Night |
| Unit Nurse Management | X | | |
| Assistant Nurse Management | | | X |
| Staff Educator | X | | X |
| Unit Clerical Support | X | X | |
| 1:1 Patient Observer/sitter | X | X | X |
| Patient Transport Team | X | X | |
| Rapid Response Team | X | X | X |
| Respiratory Therapy Support | X | X | X |
| Nutritionist | X | | |
| Rehab Activities (OT, PT, Speech) | X | X | |
| Clinical Pharmacist | X | X | X |
| Licensed Social Services / Case Management | X | | |
| Phlebotomist | X | | |
| Spiritual Services | X | X | X |
| Hospitalist / NP / PA | X | X | X |
| Nursing Students | X | | |
| Other | | | |

The list of caregivers in these boxes were provided to all hospitals.

Submitted by Lorraine Chambers Lewis

LIJ Forest Hills

June 27, 2023

Long Island Jewish Forest Hills
Executive Director Decision

Acute Care Inpatient Units Staffing Plan
5 South
Medical Surgical Telemetry Unit
30 Licensed Beds

| | | |
|--|--|--------------------------|
| <p>Unit Description: 5 South is a 30 bedded Med/Surg/Telemetry Unit. 5 south is a medical surgical unit that also can accommodate 10 telemetry patients. 5 south is also equipped with our roam alert technology utilized to prevent cognitively impaired patients from wandering. There are medical/surgical residents and nurse practitioners that provide oversight for all patients on 5 South 24/7. Staffing is adjusted according to the acuity and number of telemetry and roam alert patients on the unit. The unit is monitored 24/7 by the central monitoring room, staffed with telemetry technicians. Patient acuity is assessed every 12 hours by nursing leadership and staffing adjustments made accordingly. All registered nurses on this unit are specially trained to monitor, interpret, and respond appropriately to telemetry monitoring as well as operate roam alert technology. Telemetry competency is validated yearly. Telemetry and roam alert training is encompassed in the orientation program of registered nurses on this unit.</p> | <p>Average Number of Patients Per Day:</p> | <p align="center">24</p> |
|--|--|--------------------------|

| Staffing Submitted by Committee Co-leads | | | | | | | | |
|---|--------------------------|--------------|------------------------------|------------------------|------------------------------|------------------------|------------------------------|------------------------|
| Direct Caregivers | Scheduled Hours | Shift Length | Day | | Evening | | Night | |
| | | | Direct Care Co-lead Proposal | Admin Co-lead Proposal | Direct Care Co-lead Proposal | Admin Co-lead Proposal | Direct Care Co-lead Proposal | Admin Co-lead Proposal |
| RN | 7am-7pm and 7pm-7am | 12.00 | No Proposal | 3 | N/A | N/A | No Proposal | 3 |
| Unlicensed Assistive Personnel (NA/PCA/PCT/BHA) | 7a-3p, 3p-11p and 11p-7a | 8.00 | No Proposal | 3 | No Proposal | 3 | No Proposal | 3 |
| CSA | 7a-3p and 3p-11p | 8.00 | No Proposal | 1 | No Proposal | 1 | No Proposal | 0 |
| Charge RN/Asst Nurse Mgr | 8p-830a | 10.00 | No Proposal | 0 | No Proposal | 0 | No Proposal | 1 |

Final Recommendations by Executive Director

| Unit Name – [Name of Unit] | | | | | | |
|----------------------------|---------------------|--------------|-----|---------|-------|--|
| Direct Caregivers | Scheduled Hours | Shift Length | Day | Evening | Night | |
| RN | 7am-7pm and 7pm-7am | 12.00 | 3 | N/A | 3 | |

| | | | | | |
|---|--------------------------|-------|---|---|---|
| Unlicensed Assistive Personnel (NA/PCA/PCT/BHA) | 7a-3p, 3p-11p and 11p-7a | 8.00 | 3 | 3 | 3 |
| CSA | 7a-3p and 3p-11p | 8.00 | 1 | 1 | 0 |
| Charge RN/Asst Nurse Mgr | 8p-8:30a | 10.00 | 0 | 1 | 0 |

Findings and Conclusions

In my role as executive director LIJ Forest Hills hospital, I have the responsibility of reviewing the staffing plans recommended by the Clinical staffing committee. We aim to offer quality care to our community and providing a safe work environment for our team members. Factors that are part of my evaluation include, but are not limited to quality metrics, the average daily census and the level of acuity of our patients.

Rationale for Decision

In reviewing our average daily census, acuity of our patient and the overall quality metrics, there are no material changes to support specific revisions of unit staffing. Administration provided me with their proposed staffing plan for review. Other proposed staffing plans were not made available.

With the above stated review in mind, and the absence of any significant changes in clinical programs, I am currently not recommending any staffing changes.

For the safety of our patients, our nursing leadership team has processes in place to consistently re-evaluate our staffing needs and responding to the acuity and increases in patient volume. Our team members also have clear mechanisms to raise staffing concerns for nursing leadership to address. These processes provide effective communication opportunities regarding the safety of patient care for the entire team to work together should our patient care environment shift and need additional support. We will continue to monitor for any changes in short or long term needs for our patients and the team. I thank the entire Clinical Staffing Committee for their time and effort to create a safe environment in our hospital.

| Additional Care Team Members | | | |
|--|-----------------------|---------|-------|
| <u>Skills</u> | <u>Shift Coverage</u> | | |
| | Day | Evening | Night |
| Unit Nurse Management | X | | |
| Assistant Nurse Management | | X | |
| Staff Educator | X | | X |
| Unit Clerical Support | X | X | |
| 1:1 Patient Observer/sitter | X | X | X |
| Patient Transport Team | X | X | |
| Rapid Response Team | X | X | X |
| Respiratory Therapy Support | X | X | X |
| Nutritionist | X | | |
| Rehab Activities (OT, PT, Speech) | X | X | |
| Clinical Pharmacist | X | X | X |
| Licensed Social Services / Case Management | X | | |
| Phlebotomist | X | | |
| Spiritual Services | X | X | X |
| Hospitalist / NP / PA | X | X | X |
| Nursing Students | X | | |
| Other | | | |

The list of caregivers in these boxes were provided to all hospitals.

Submitted by Lorraine Chambers Lewis

LIJ Forest Hills

June 27, 2023

Long Island Jewish Forest Hills
Executive Director Decision

Acute Care Inpatient Units Staffing Plan
6 North
Surgical Unit
29 Licensed Beds

| | | |
|---|--|-----------|
| <p>Unit Description: 6 North is a 29 bedded Surgical Unit. 6 North is a surgical unit that also can accommodate up to 10 telemetry patients. There are surgical physician assistants that provide oversight for all patients on 6 North 24/7. Staffing is adjusted according to the post op acuity and number of telemetry patients on the unit. The unit is monitored 24/7 by the central monitoring room, staffed with telemetry technicians. Patient acuity is assessed every 12 hours by nursing leadership and staffing adjustments made accordingly. All registered nurses on this unit are specially trained to monitor, interpret, and respond appropriately to telemetry monitoring as well as administer chemotherapy. Telemetry and chemotherapy competency is validated yearly and encompassed in the orientation program of registered nurses on this unit.</p> | <p>Average Number of Patients Per Day:</p> | <p>18</p> |
|---|--|-----------|

| Staffing Submitted by Committee Co-leads | | | | | | | | |
|---|--------------------------|--------------|------------------------------|------------------------|------------------------------|------------------------|------------------------------|------------------------|
| Direct Caregivers | Scheduled Hours | Shift Length | Day | | Evening | | Night | |
| | | | Direct Care Co-lead Proposal | Admin Co-lead Proposal | Direct Care Co-lead Proposal | Admin Co-lead Proposal | Direct Care Co-lead Proposal | Admin Co-lead Proposal |
| RN | 7am-7pm | 12.00 | No Proposal | 3 | N/A | N/A | No Proposal | 3 |
| Unlicensed Assistive Personnel (NA/PCA/PCT/BHA) | 7a-3p, 3p-11p and 11p-7a | 8.00 | No Proposal | 3 | No Proposal | 3 | No Proposal | 3 |
| CSA | 7a-3p and 3p-11p | 8.00 | No Proposal | 1 | No Proposal | 1 | No Proposal | 0 |
| Charge RN/Asst Nurse Mgr | 8p-8a | 12.00 | No Proposal | 0 | No Proposal | 0 | No Proposal | 1 |

Final Recommendations by Executive Director

| Unit Name – 6 North | | | | | | |
|---|--------------------------|--------------|-----|---------|-------|--|
| Direct Caregivers | Scheduled Hours | Shift Length | Day | Evening | Night | |
| RN | 7am-7:30pm | 12.00 | 3 | N/A | 3 | |
| Unlicensed Assistive Personnel (NA/PCA/PCT/BHA) | 7a-3p, 3p-11p and 11p-7a | 8.00 | 3 | 3 | 3 | |
| CSA | 7a-3p and 3p-11p | 8.00 | 1 | 1 | 0 | |

| | | | | | |
|--------------------------|-------|-------|---|---|---|
| Charge RN/Asst Nurse Mgr | 8p-8a | 12.00 | 0 | 0 | 1 |
|--------------------------|-------|-------|---|---|---|

Findings and Conclusions

In my role as executive director LIJ Forest Hills hospital, I have the responsibility of reviewing the staffing plans recommended by the Clinical staffing committee. We aim to offer quality care to our community and providing a safe work environment for our team members. Factors that are part of my evaluation include, but are not limited to quality metrics, the average daily census and the level of acuity of our patients.

Rationale for Decision

In reviewing our average daily census, acuity of our patient and the overall quality metrics, there are no material changes to support specific revisions of unit staffing. Administration provided me with their proposed staffing plan for review. Other proposed staffing plans were not made available.

With the above stated review in mind, and the absence of any significant changes in clinical programs, I am currently not recommending any staffing changes.

For the safety of our patients, our nursing leadership team has processes in place to consistently re-evaluate our staffing needs and responding to the acuity and increases in patient volume. Our team members also have clear mechanisms to raise staffing concerns for nursing leadership to address. These processes provide effective communication opportunities regarding the safety of patient care for the entire team to work together should our patient care environment shift and need additional support. We will continue to monitor for any changes in short or long term needs for our patients and the team. I thank the entire Clinical Staffing Committee for their time and effort to create a safe environment in our hospital.

| Additional Care Team Members | | | |
|--|-----------------------|---------|-------|
| <u>Skills</u> | <u>Shift Coverage</u> | | |
| | Day | Evening | Night |
| Unit Nurse Management | X | | |
| Assistant Nurse Management | | | X |
| Staff Educator | X | | X |
| Unit Clerical Support | X | X | |
| 1:1 Patient Observer/sitter | X | X | X |
| Patient Transport Team | X | X | |
| Rapid Response Team | X | X | X |
| Respiratory Therapy Support | X | X | X |
| Nutritionist | X | | |
| Rehab Activities (OT, PT, Speech) | X | X | |
| Clinical Pharmacist | X | X | X |
| Licensed Social Services / Case Management | X | | |
| Phlebotomist | X | | |
| Spiritual Services | X | X | X |
| Hospitalist / NP / PA | X | X | X |
| Nursing Students | X | | |
| Other | | | |

The list of caregivers in these boxes were provided to all hospitals.

Submitted by Lorraine Chambers Lewis

LIJ Forest Hills

June 27, 2023

Long Island Jewish Forest Hills Executive Director Decision

Acute Care Inpatient Units Staffing Plan
6 South
Medical Surgical Unit
30 Licensed Beds

| | | |
|---|-------------------------------------|----|
| Unit Description: 6 South is a 30 bedded Medical Surgical Unit. There are nurse practitioners and medical residents that provide oversight for all patients on 6 South 24/7. Staffing is adjusted according to the acuity on the unit. Patient acuity is assessed every 12 hours by nursing leadership and staffing adjustments made accordingly. | Average Number of Patients Per Day: | 24 |
|---|-------------------------------------|----|

| Staffing Submitted by Committee Co-leads | | | | | | | | |
|---|--------------------------|--------------|------------------------------|------------------------|------------------------------|------------------------|------------------------------|------------------------|
| Direct Caregivers | Scheduled Hours | Shift Length | Day | | Evening | | Night | |
| | | | Direct Care Co-lead Proposal | Admin Co-lead Proposal | Direct Care Co-lead Proposal | Admin Co-lead Proposal | Direct Care Co-lead Proposal | Admin Co-lead Proposal |
| RN | 7am-7pm and 7pm-7am | 12.00 | No Proposal | 3 | N/A | N/A | No Proposal | 3 |
| Unlicensed Assistive Personnel (NA/PCA/PCT/BHA) | 7a-3p, 3p-11p and 11p-7a | 8.00 | No Proposal | 3 | No Proposal | 3 | No Proposal | 3 |
| CSA | 7a-3p and 3p-11p | 8.00 | No Proposal | 1 | No Proposal | 1 | No Proposal | 0 |
| Charge RN/Asst Nurse Mgr | 8p-8a | 12.00 | No Proposal | 0 | No Proposal | 0 | No Proposal | 1 |

Final Recommendations by Executive Director

| Unit Name – [Name of Unit] | | | | | | |
|---|--------------------------|--------------|-----|---------|-------|--|
| Direct Caregivers | Scheduled Hours | Shift Length | Day | Evening | Night | |
| RN | 7am-7pm and 7pm-7am | 12.00 | 3 | N/A | 3 | |
| Unlicensed Assistive Personnel (NA/PCA/PCT/BHA) | 7a-3p, 3p-11p and 11p-7a | 8.00 | 3 | 3 | 3 | |
| CSA | 7a-3p and 3p-11p | 8.00 | 1 | 1 | 0 | |
| Charge RN/Asst Nurse Mgr | 8p-8a | 12.00 | 0 | 0 | 1 | |

Findings and Conclusions

In my role as executive director LIJ Forest Hills hospital, I have the responsibility of reviewing the staffing plans recommended by the Clinical staffing committee. We aim to offer quality care to our community and providing a safe work environment for our team members.

Factors that are part of my evaluation include, but are not limited to quality metrics, the average daily census and the level of acuity of our patients.

Rationale for Decision

In reviewing our average daily census, acuity of our patient and the overall quality metrics, there are no material changes to support specific revisions of unit staffing. Administration provided me with their proposed staffing plan for review. Other proposed staffing plans were not made available.

With the above stated review in mind, and the absence of any significant changes in clinical programs, I am currently not recommending any staffing changes.

For the safety of our patients, our nursing leadership team has processes in place to consistently re-evaluate our staffing needs and responding to the acuity and increases in patient volume. Our team members also have clear mechanisms to raise staffing concerns for nursing leadership to address. These processes provide effective communication opportunities regarding the safety of patient care for the entire team to work together should our patient care environment shift and need additional support. We will continue to monitor for any changes in short or long term needs for our patients and the team. I thank the entire Clinical Staffing Committee for their time and effort to create a safe environment in our hospital.

| Additional Care Team Members | | | |
|--|-----------------------|---------|-------|
| <u>Skills</u> | <u>Shift Coverage</u> | | |
| | Day | Evening | Night |
| Unit Nurse Management | X | | |
| Assistant Nurse Management | | | X |
| Staff Educator | X | | X |
| Unit Clerical Support | X | X | |
| 1:1 Patient Observer/sitter | X | X | X |
| Patient Transport Team | X | X | |
| Rapid Response Team | X | X | X |
| Respiratory Therapy Support | X | X | X |
| Nutritionist | X | | |
| Rehab Activities (OT, PT, Speech) | X | X | |
| Clinical Pharmacist | X | X | X |
| Licensed Social Services / Case Management | X | | |
| Phlebotomist | X | | |
| Spiritual Services | X | X | X |
| Hospitalist / NP / PA | X | X | X |
| Nursing Students | X | | |
| Other | | | |

The list of caregivers in these boxes were provided to all hospitals.

Submitted by Lorraine Chambers Lewis

LIJ Forest Hills

June 27, 2023

Long Island Jewish Forest Hills
Executive Director Decision

Acute Care Procedural Unit Staffing Plan
Acute Dialysis

| | | |
|---|-------------------------------------|-----|
| Unit Description: The acute dialysis unit is an inpatient dialysis unit consisting of 3 patient bay areas. The acute dialysis unit provides hemodialysis for adults who have been diagnosed with acute or chronic renal failure and other conditions which may respond to dialysis treatment as determined by the nephrologist. | Average Number of Patients Per Day: | 5.6 |
|---|-------------------------------------|-----|

| Staffing Submitted by Committee Co-leads | | | | | | | | |
|---|--------------------------|--------------|------------------------------|------------------------|------------------------------|------------------------|------------------------------|------------------------|
| Direct Caregivers | Scheduled Hours | Shift Length | Day | | Evening | | Night | |
| | | | Direct Care Co-lead Proposal | Admin Co-lead Proposal | Direct Care Co-lead Proposal | Admin Co-lead Proposal | Direct Care Co-lead Proposal | Admin Co-lead Proposal |
| RN | 8am-8pm | 12.00 | No Proposal | 2 | N/A | N/A | N/A | N/A |
| Unlicensed Assistive Personnel (NA/PCA/PCT/BHA) | 7a-3p, 3p-11p and 11p-7a | 8.00 | No Proposal | 1 | No Proposal | 0 | N/A | N/A |
| CSA | 8a-4p | 8.00 | No Proposal | 0 | No Proposal | 0 | N/A | N/A |

Final Recommendations by Executive Director

| Unit Name – [Name of Unit] | | | | | | |
|--|-----------------|--------------|-----|---------|-------|--|
| Direct Caregivers | Scheduled Hours | Shift Length | Day | Evening | Night | |
| RN | 8am-8pm | 12.00 | 2 | N/A | N/A | |
| Unlicensed Assistive Personnel Hemodialysis Tech | 7a-3p | 8.00 | 1 | 0 | 0 | |

Findings and Conclusions

In my role as executive director LIJ Forest Hills hospital, I have the responsibility of reviewing the staffing plans recommended by the Clinical staffing committee. We aim to offer quality care to our community and providing a safe work environment for our team members. Factors that are part of my evaluation include, but are not limited to quality metrics, the average daily census and the level of acuity of our patients.

Rationale for Decision

In reviewing our average daily census, acuity of our patient and the overall quality metrics, there are no material changes to support specific revisions of unit staffing. Administration provided me with their proposed staffing plan for review. Other proposed staffing plans

were not made available.

With the above stated review in mind, and the absence of any significant changes in clinical programs, I am currently not recommending any staffing changes.

For the safety of our patients, our nursing leadership team has processes in place to consistently re-evaluate our staffing needs and responding to the acuity and increases in patient volume. Our team members also have clear mechanisms to raise staffing concerns for nursing leadership to address. These processes provide effective communication opportunities regarding the safety of patient care for the entire team to work together should our patient care environment shift and need additional support. We will continue to monitor for any changes in short or long term needs for our patients and the team. I thank the entire Clinical Staffing Committee for their time and effort to create a safe environment in our hospital.

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| <u>Skills</u> | Day |
|-------------------------------|-----|
| Unit Nurse Management | X |
| Staff Educator | X |
| 1:1 Patient Observer/sitter | X |
| Patient Transport Team | X |
| Monitor/Telemetry Technician | X |
| Respiratory Therapy Support | X |
| Rapid Response Team | X |
| Nephrologists | X |
| Medical Residents / NPs / PAs | X |

Long Island Jewish Forest Hills Executive Director Decision

Acute Care Emergency Room Staffing Plan
ER Holding
16 Bed Capacity

| | | |
|---|-------------------------------------|---|
| Unit Description: ER Holding consists of 16 bays. Patient care provided by interdisciplinary team prior to admission and transfer to inpatient bed. | Average Number of Patients Per Day: | 8 |
|---|-------------------------------------|---|

| Staffing Submitted by Committee Co-leads | | | | | | | | |
|--|--------------------------|--------------|------------------------------|------------------------|------------------------------|------------------------|------------------------------|------------------------|
| Direct Caregivers | Scheduled Hours | Shift Length | Day | | Evening | | Night | |
| | | | Direct Care Co-lead Proposal | Admin Co-lead Proposal | Direct Care Co-lead Proposal | Admin Co-lead Proposal | Direct Care Co-lead Proposal | Admin Co-lead Proposal |
| RN | 7am-7pm and 7pm-7am | 12.00 | No Proposal | 1 | N/A | N/A | No Proposal | 1 |
| Unlicensed Assistive Personnel PCA | 7a-3p, 3p-11p and 11p-7a | 8.00 | No Proposal | 1 | No Proposal | 1 | No Proposal | 1 |
| CSA | 7a-3p and 3p-11p | 8.00 | No Proposal | 1 | No Proposal | 1 | No Proposal | 0 |

Final Recommendations by Executive Director

| Unit Name – ED Holding | | | | | | |
|---------------------------------------|---------------------------|--------------|-----|---------|-------|--|
| Direct Caregivers | Scheduled Hours | Shift Length | Day | Evening | Night | |
| RN | 7am-7pm and 7pm-7am | 12.00 | 1 | N/A | 1 | |
| Unlicensed Assistive Personnel PCA | 7a-3p, 3p-11p, and 11p-7a | 8.00 | 1 | 1 | 1 | |
| CSA | 7a-3p and 3p-11pm | 8.00 | 1 | 1 | 0 | |

Findings and Conclusions

In my role as executive director LIJ Forest Hills hospital, I have the responsibility of reviewing the staffing plans recommended by the Clinical staffing committee. We aim to offer quality care to our community and providing a safe work environment for our team members. Factors that are part of my evaluation include, but are not limited to quality metrics, the average daily census and the level of acuity of our patients.

Rationale for Decision

In reviewing our average daily census, acuity of our patient and the overall quality metrics, there are no material changes to support specific revisions of unit staffing. Administration provided me with their proposed staffing plan for review. Other proposed staffing plans were not made available.

With the above stated review in mind, and the absence of any significant changes in clinical programs, I am currently not recommending any staffing changes.

For the safety of our patients, our nursing leadership team has processes in place to consistently re-evaluate our staffing needs and responding to the acuity and increases in patient volume. Our team members also have clear mechanisms to raise staffing concerns for nursing leadership to address. These processes provide effective communication opportunities regarding the safety of patient care for the entire team to work together should our patient care environment shift and need additional support. We will continue to monitor for any changes in short or long term needs for our patients and the team. I thank the entire Clinical Staffing Committee for their time and effort to create a safe environment in our hospital.

| Skills | Day | Evening | Night |
|---|-----|---------|-------|
| Unit Director | X | | |
| Staff Educator | X | | X |
| 1:1 Patient Observer/sitter | X | X | X |
| Patient Transport Team | X | X | X |
| Monitor/Telemetry Technician | X | X | X |
| Unit Clerical Support | X | X | X |
| Respiratory Therapy Support | X | X | X |
| Rehab Activities (OT, PT, Speech) | X | X | |
| Rapid Response Team | X | X | X |
| Clinical Pharmacist | X | X | X |
| Licensed Social Services /Case Management | X | | |
| Spiritual Services | X | X | X |
| Hospitalists / NPs / PAs | X | X | X |

Long Island Jewish Forest Hills Executive Director Decision

Acute Care Emergency Room Staffing Plan
Emergency Department

| | | |
|--|-------------------------------------|-----|
| Unit Description: The Emergency Department of LIJ Forest Hills' scope of services includes the diagnostic evaluation, consultation, treatment, and admission of patients presenting to the Emergency Department, including life threatening illness and injury. This includes, but is not limited to, evaluation and management of the acute phase of disorders involving the following areas: medicine attending physicians, nurse practitioners, and emergency nurses. All patients are met by an emergency nurse who will determine their severity of illness | Average Number of Patients Per Day: | 160 |
|--|-------------------------------------|-----|

| Staffing Submitted by Committee Co-leads | | | | | | | | |
|--|---------------------------|--------------|------------------------------|------------------------|------------------------------|------------------------|------------------------------|------------------------|
| Direct Caregivers | Scheduled Hours | Shift Length | Day | | Evening | | Night | |
| | | | Direct Care Co-lead Proposal | Admin Co-lead Proposal | Direct Care Co-lead Proposal | Admin Co-lead Proposal | Direct Care Co-lead Proposal | Admin Co-lead Proposal |
| RN | 7am-7pm and 7pm-7am | 12.00 | No Proposal | 8* | N/A | N/A | No Proposal | 8* |
| Unlicensed Assistive Personnel PCA | 7a-3p, 3p-11p and 11p-7a | 8.00 | No Proposal | 5 | No Proposal | 5 | No Proposal | 4 |
| ED Clerk | 7a-3p, 3p-11p, and 11p-7a | 8.00 | No Proposal | 2 | No Proposal | 2 | No Proposal | 2 |
| Charge RN/Asst Nurse Mgr | 8p-830a | 12.00 | No Proposal | | No Proposal | 1 | No Proposal | 1 |

*4 additional RNs added at 11a-11p to total 12 RNs in department at peak volume times

Final Recommendations by Executive Director

| Unit Name – Emergency Department | | | | | | |
|---------------------------------------|----------------------------|--------------|-----|---------|-------|--|
| Direct Caregivers | Scheduled Hours | Shift Length | Day | Evening | Night | |
| RN | 7am-7pm and 7pm-7am | 12.00 | 8* | N/A | 8* | |
| Charge RN/Asst Nurse Mgr | 8p-830a | 12.00 | | 1 | 1 | |
| Unlicensed Assistive Personnel PCA | 7a-3p, 3p-11p, and 11p-7a | 8.00 | 5 | 5 | 4 | |
| ED Clerk | 7a-3p, 3p-11p and 11pm-7am | 8.00 | 2 | 2 | 2 | |

*4 additional RNs added midshift, varying shifts to total 12 RNs in department at peak volume times

Findings and Conclusions

In my role as executive director LIJ Forest Hills hospital, I have the responsibility of reviewing the staffing plans recommended by the Clinical staffing committee. We aim to offer quality care to our community and providing a safe work environment for our team members. Factors that are part of my evaluation include, but are not limited to quality metrics, the average daily census and the level of acuity of our patients.

Rationale for Decision

In reviewing our average daily census, acuity of our patient and the overall quality metrics, there are no material changes to support specific revisions of unit staffing. Administration provided me with their proposed staffing plan for review. Other proposed staffing plans were not made available.

With the above stated review in mind, and the absence of any significant changes in clinical programs, I am currently not recommending any staffing changes.

For the safety of our patients, our nursing leadership team has processes in place to consistently re-evaluate our staffing needs and responding to the acuity and increases in patient volume. Our team members also have clear mechanisms to raise staffing concerns for nursing leadership to address. These processes provide effective communication opportunities regarding the safety of patient care for the entire team to work together should our patient care environment shift and need additional support. We will continue to monitor for any changes in short or long term needs for our patients and the team. I thank the entire Clinical Staffing Committee for their time and effort to create a safe environment in our hospital.

| <u>Skills</u> | Day | Evening | Night |
|---|-----|---------|-------|
| Unit Nurse Manager | X | | |
| Assistant Nurse Manager | X | X | X |
| Staff Educator | X | | X |
| 1:1 Patient Observer/sitter | X | X | X |
| Patient Transport Team | X | X | X |
| Monitor/Telemetry Technician | X | X | X |
| Unit Clerical Support | X | X | X |
| Respiratory Therapy Support | X | X | X |
| Rehab Activities (OT, PT, Speech) | X | X | |
| Rapid Response Team | X | X | X |
| Clinical Pharmacist | X | | |
| Licensed Social Services /Case Management | X | X | X |
| Spiritual Services | X | X | X |
| Medical Residents / NPs / PAs | X | X | |
| Emergency Medicine Physicians | X | X | X |

Long Island Jewish Forest Hills
Executive Director Decision

Acute Care Inpatient Units Staffing Plan
ICU
Critical Care Unit
18 Licensed Beds

| | | |
|---|-------------------------------------|----|
| Unit Description: The ICU is an 18 bedded mixed medical and surgical Intensive Care Unit. All ICU patients are admitted under the care of an intensivist and with intensivists coverage in the unit 24/7. There is a dedicated critical care Nurse Practitioner and a critical care fellow that cares for this population as well. Staffing is adjusted according to the acuity. This is assessed every 12 hours by nursing leadership. | Average Number of Patients Per Day: | 14 |
|---|-------------------------------------|----|

| Staffing Submitted by Committee Co-leads | | | | | | | | |
|---|--------------------------|--------------|------------------------------|------------------------|------------------------------|------------------------|------------------------------|------------------------|
| Direct Caregivers | Scheduled Hours | Shift Length | Day | | Evening | | Night | |
| | | | Direct Care Co-lead Proposal | Admin Co-lead Proposal | Direct Care Co-lead Proposal | Admin Co-lead Proposal | Direct Care Co-lead Proposal | Admin Co-lead Proposal |
| RN | 7am-7pm | 12.00 | No Proposal | 7 | N/A | N/A | No Proposal | 7 |
| Unlicensed Assistive Personnel (NA/PCA/PCT/BHA) | 7a-3p, 3p-11p and 11p-7a | 8.00 | No Proposal | 1 | No Proposal | 1 | No Proposal | 1 |
| CSA | 7a-3p and 3p-11p | 8.00 | No Proposal | 1 | No Proposal | 1 | No Proposal | 0 |
| Charge RN/Asst Nurse Mgr | 6p-4a | 10.00 | No Proposal | 0 | No Proposal | 0 | No Proposal | 1 |

Final Recommendations by Executive Director

| Unit Name – [Name of Unit] | | | | | | |
|---|--------------------------|--------------|-----|---------|-------|--|
| Direct Caregivers | Scheduled Hours | Shift Length | Day | Evening | Night | |
| RN | 7am-7pm and 7pm-7am | 12.00 | 7 | N/A | 7 | |
| Unlicensed Assistive Personnel (NA/PCA/PCT/BHA) | 7a-3p, 3p-11p and 11p-7a | 8.00 | 1 | 1 | 1 | |
| CSA | 7a-3p and 3p-11p | 8.00 | 1 | 1 | 0 | |
| Charge RN/Asst Nurse Mgr | 6p-4a | 10.00 | 0 | 0 | 1 | |

Findings and Conclusions

In my role as executive director LIJ Forest Hills hospital, I have the responsibility of reviewing the staffing plans recommended by the

Clinical staffing committee. We aim to offer quality care to our community and providing a safe work environment for our team members. Factors that are part of my evaluation include, but are not limited to quality metrics, the average daily census and the level of acuity of our patients.

Rationale for Decision

In reviewing our average daily census, acuity of our patient and the overall quality metrics, there are no material changes to support specific revisions of unit staffing. Administration provided me with their proposed staffing plan for review. Other proposed staffing plans were not made available.

With the above stated review in mind, and the absence of any significant changes in clinical programs, I am currently not recommending any staffing changes.

For the safety of our patients, our nursing leadership team has processes in place to consistently re-evaluate our staffing needs and responding to the acuity and increases in patient volume. Our team members also have clear mechanisms to raise staffing concerns for nursing leadership to address. These processes provide effective communication opportunities regarding the safety of patient care for the entire team to work together should our patient care environment shift and need additional support. We will continue to monitor for any changes in short or long term needs for our patients and the team. I thank the entire Clinical Staffing Committee for their time and effort to create a safe environment in our hospital.

| Additional Care Team Members | | | |
|--|-----------------------|---------|-------|
| <u>Skills</u> | <u>Shift Coverage</u> | | |
| | Day | Evening | Night |
| Unit Nurse Management | X | | |
| Assistant Nurse Management | | | X |
| Staff Educator | X | | X |
| Unit Clerical Support | X | X | |
| 1:1 Patient Observer/sitter | X | X | X |
| Patient Transport Team | X | X | |
| Rapid Response Team | X | X | X |
| Respiratory Therapy Support | X | X | X |
| Nutritionist | X | | |
| Rehab Activities (OT, PT, Speech) | X | X | |
| Clinical Pharmacist | X | X | X |
| Licensed Social Services / Case Management | X | | |
| Phlebotomist | X | | |
| Spiritual Services | X | X | X |
| Intensivist | X | X | X |
| NP/Residents/ Critical Care Fellow | X | X | X |
| Nursing Students | X | | |
| Other | | | |

The list of caregivers in these boxes were provided to all hospitals.

Submitted by Lorraine Chambers Lewis

LIJ Forest Hills

June 27, 2023

Long Island Jewish Forest Hills
Executive Director Decision

Acute Care Inpatient Units Staffing Plan
Postpartum Unit
Obstetrics
23 Licensed Beds

| | | |
|---|-------------------------------------|----|
| Unit Description: The postpartum unit is a 23 bedded unit. All postpartum patients are admitted under the care of an OB/GYN attending and with coverage in the unit 24/7. There are OB/GYN physician assistants that cares for this population as well. The unit has an infant abduction security system in place for enhance security. All staff are trained to operate this system and given access to unit. Staffing is adjusted according to the acuity. This is assessed every 12 hours by nursing leadership. All registered nurses on this unit are trained and competent to interpret, monitor and appropriately respond to electronic fetal monitoring | Average Number of Patients Per Day: | 13 |
|---|-------------------------------------|----|

| Staffing Submitted by Committee Co-leads | | | | | | | | |
|---|--------------------------|--------------|------------------------------|------------------------|------------------------------|------------------------|------------------------------|------------------------|
| Direct Caregivers | Scheduled Hours | Shift Length | Day | | Evening | | Night | |
| | | | Direct Care Co-lead Proposal | Admin Co-lead Proposal | Direct Care Co-lead Proposal | Admin Co-lead Proposal | Direct Care Co-lead Proposal | Admin Co-lead Proposal |
| RN | 7am-7pm and 7p-7am | 12.00 | No Proposal | 3 | No Proposal | N/A | No Proposal | 3 |
| Unlicensed Assistive Personnel (NA/PCA/PCT/BHA) | 7a-3p, 3p-11p and 11p-7a | 8.00 | No Proposal | 2 | No Proposal | 2 | No Proposal | 2 |
| CSA | 7a-3p and 3p-11p | 8.00 | No Proposal | 1 | No Proposal | 1 | No Proposal | 0 |
| Charge RN/Asst Nurse Mgr | 8p-830a | 12.00 | No Proposal | 0 | No Proposal | 0 | No Proposal | 1 |

Final Recommendations by Executive Director

| Unit Name – [Name of Unit] | | | | | | |
|---|--------------------------|--------------|-----|---------|-------|--|
| Direct Caregivers | Scheduled Hours | Shift Length | Day | Evening | Night | |
| RN | 7am-7pm and 7pm – 7am | 12.00 | 3 | N/A | 3 | |
| Unlicensed Assistive Personnel (NA/PCA/PCT/BHA) | 7a-3p, 3p-11p and 11p-7a | 8.00 | 2 | 2 | 2 | |
| CSA | 7a-3p and 3p-11p | 8.00 | 1 | 1 | 0 | |
| Charge RN/Asst Nurse Mgr | 8p-830a | 12.00 | 0 | 0 | 1 | |

Findings and Conclusions

In my role as executive director LIJ Forest Hills hospital, I have the responsibility of reviewing the staffing plans recommended by the Clinical staffing committee. We aim to offer quality care to our community and providing a safe work environment for our team members. Factors that are part of my evaluation include, but are not limited to quality metrics, the average daily census and the level of acuity of our patients.

Rationale for Decision

In reviewing our average daily census, acuity of our patient and the overall quality metrics, there are no material changes to support specific revisions of unit staffing. Administration provided me with their proposed staffing plan for review. Other proposed staffing plans were not made available.

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| Additional Care Team Members | | | |
|--|----------------|---------|-------|
| Skills | Shift Coverage | | |
| | Day | Evening | Night |
| Unit Nurse Management | X | | |
| Assistant Nurse Management | | | X |
| Staff Educator | X | | X |
| Unit Clerical Support | X | X | X |
| 1:1 Patient Observer/sitter | X | X | X |
| Patient Transport Team | | | |
| Rapid Response Team | X | X | X |
| Respiratory Therapy Support | X | X | X |
| Lactation Specialist | X | | |
| Nutritionist | X | | |
| Rehab Activities (OT, PT, Speech) | X | X | |
| Clinical Pharmacist | X | X | X |
| Licensed Social Services / Case Management | X | | |
| Phlebotomist | X | | |
| Spiritual Services | X | X | X |
| OB GYN Attending | X | X | X |
| Anesthesiologist/ CRNA | X | X | X |
| Other | | | |

The list of caregivers in these boxes were provided to all hospitals.

Submitted by Lorraine Chambers Lewis

LIJ Forest Hills

June 27, 2023