HOSPITAL INFORMATION

Region	Metropolitan Area Regional Office
County	Nassau
Council	Long Island
Network	NORTHWELL HEALTH
Reporting Organization	Syosset Hospital
Reporting Organization Id	0550
Reporting Organization Type	Hospital (pfi)
Data Entity	Syosset Hospital

RN DAY SHIFT STAFFING

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Planned average number of Registered Nurses (RN) on the unit providing direct patient care per day on the Day Shift? (Please provide a number with up to 4 digits. Ex: 10.50)	Planned total hours of RN nursing care per patient including adjustment for case mix and acuity on the Day Shift (Please provide a number with up to 4 digits. Ex: 10.50)	Planned average number of patients on the unit per day on the Day Shift? (Please provide a number with up to 4 digits. Ex: 10.50)	What is the planned average number of patients for which one RN on the unit will provide direct patient care per day on the Day Shift (Please provide a number with up to 4 digits. Ex: 10.50)?
Behavioral health unit that is closed to behavioral				
health patients since Apr.				
2020, 1st floor	2	1.07	15	10
32 bed orthopedic unit with		1.07	15	10
post op orthopedic patients				
and med/surg patients, 2nd				
floor	2	1	16	8
ICU caring for acute critical				
patients requiring multiple				
complex modalities, 4th				
floor	3	3.83	6	2
Telemetry/ med/surg unit				
providing cardiac and pulse				
ox monitoring on the 1st				
floor	3	1.6	15	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 4 digits. Ex: 10.50)	Planned total hours of LPN care per patient including adjustment for case mix and acuity on the Day Shift (Please provide a number with up to 4 digits. Ex: 10.50)
Behavioral health unit that is closed to behavioral		
health patients since Apr.	0	0
2020, 1st floor	0	0
32 bed orthopedic unit with		
post op orthopedic patients and med/surg patients, 2nd		
floor	0	0
ICU caring for acute critical	J	0
patients requiring multiple		
complex modalities, 4th		
floor	0	0
Telemetry/ med/surg unit		
providing cardiac and pulse		
ox monitoring on the 1st		
floor	0	0

DAY SHIFT ANCILLARY STAFF

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Planned average number of ancillary members of the frontline team on the unit per day on the Day Shift? (Please provide a number with up to 4 digits. Ex: 10.50)	Planned total hours of ancillary members of the frontline team including adjustment for case mix and acuity on the Day Shift (Please provide a number with up to 4 digits. Ex: 10.50)
Behavioral health unit that is closed to behavioral		
health patients since Apr.		
2020, 1st floor	5	13.8
32 bed orthopedic unit with		
post op orthopedic patients		
and med/surg patients, 2nd	_	
floor	5	68
ICU caring for acute critical		
patients requiring multiple		
complex modalities, 4th	_	10.7
floor	5	19.7
Telemetry/ med/surg unit		
providing cardiac and pulse ox monitoring on the 1st		
floor	5	37.5

DAY SHIFT UNLICENSED STAFFING

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

Behavioral health unit that		
is closed to behavioral		
health patients since Apr.		
2020, 1st floor	2	1.07
32 bed orthopedic unit with		
post op orthopedic patients		
and med/surg patients, 2nd		
floor	2	1
ICU caring for acute critical		
patients requiring multiple		
complex modalities, 4th		
floor	1	1.33
Telemetry/ med/surg unit		
providing cardiac and pulse		
ox monitoring on the 1st		
floor	2	1.07

DAY SHIFT ADDITIONAL RESOURCES

	Description of additional
	resources available to
	support unit level
	patient care on the Day
	Shift. These resources
	include but are not
	limited to unit clerical
Provide a description of	staff,
Clinical Unit, including a	admission/discharge
description of typical	nurse, and other
patient services provided	coverage provided to
on the unit and the	registered nurses,
unit's location in	licensed practical nurses,
the hospital.	and ancillary staff.

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Behavioral health unit that is closed to behavioral health patients since Apr. 2020, 1st floor	Unit secretary, occupational therapist, nurse manager, assistant nurse manager, recreational therapist, NP, rapid response team, Hospitalist, Psychiatrist, dietician, educator, Spiritual services, environmental services
32 bed orthopedic unit with post op orthopedic patients and med/surg patients, 2nd floor	Unit secretary, admission/discharge nurse, nurse manager, assistant nurse manager, nursing tech, educator, rapid response team, dietician, Spiritual services, Hospitalist, PA, environmental service staff
ICU caring for acute critical patients requiring multiple complex modalities, 4th floor	Unit secretary, Nurse Manager, Assistant Nurse Manager, nursing tech, educator, rapid response team, dietician, Spiritual services, Hospitalist, PA, environmental service staff
Telemetry/ med/surg unit providing cardiac and pulse ox monitoring on the 1st floor	Unit secretary, nurse manager, assistant nurse manager, educator, rapid response team, dietician, Spiritual services, Hospitalist, PA, environmental service 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.	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):
	<u>.</u>	considered both rationales and determined the		
		outcomes as listed.		
		Decisions were based on		
		our enhanced model of		
		patient care delivery, the		
		collaboration between		
		disciplines, and budgetary		
		constraints.		
		The members of the Clinical		
		Staffing Committee worked		
		diligently over the last few		
		months and reached		
		consensus on several	The general hospital	
		components of the staffing	administration committee	
		plan. However, there were	staffing plan includes a unit	
		a number of items upon	specific staffing plan. The	
		which the Committee was	plan includes minimal	
		unable to agree, and I was	staffing for each shift based	
		called upon to render a	on the New York State	
		decision.	Nurses Association	
		At this time the	collective bargaining	
		management	agreement. The rational for	
		representatives have	the staffing plan includes	
Behavioral health unit that		provided me with written	impact on nursing sensitive	
is closed to behavioral		justification of their	indicators, employee	
health patients since Apr.	.,	proposal, the labor	engagement, patient	
2020, 1st floor	No	representatives have not	experience, and acuity.	Rationale not provided

		considered both rationales		
		and determined the		
		outcomes as listed.		
		Decisions were based on		
		our enhanced model of		
		patient care delivery, the		
		collaboration between		
		disciplines, and budgetary		
		constraints.		
		The members of the Clinical		
		Staffing Committee worked		
		diligently over the last few		
		months and reached		
		consensus on several	The general hospital	
		components of the staffing	administration committee	
		plan. However, there were	staffing plan includes a unit	
		a number of items upon	specific staffing plan. The	
		which the Committee was	plan includes minimal	
		unable to agree, and I was	staffing for each shift based	
		called upon to render a	on the New York State	
		decision.	Nurses Association	
		At this time the	collective bargaining	
		management	agreement. The rational for	
		representatives have	the staffing plan includes	
32 bed orthopedic unit with		provided me with written	impact on nursing sensitive	
post op orthopedic patients		justification of their	indicators, employee	
and med/surg patients, 2nd		proposal, the labor	engagement, patient	
floor	No	representatives have not	experience, and acuity.	Rationale not provided.

		considered both rationales		
		and determined the		
		outcomes as listed.		
		Decisions were based on		
		our enhanced model of		
		patient care delivery, the		
		collaboration between		
		disciplines, and budgetary		
		constraints.		
		The members of the Clinical		
		Staffing Committee worked		
		diligently over the last few		
		months and reached		
		consensus on several	The general hospital	
		components of the staffing	administration committee	
		plan. However, there were	staffing plan includes a unit	
		a number of items upon	specific staffing plan. The	
		which the Committee was	plan includes minimal	
		unable to agree, and I was	staffing for each shift based	
		called upon to render a	on the New York State	
		decision.	Nurses Association	
		At this time the	collective bargaining	
		management	agreement. The rational for	
		representatives have	the staffing plan includes	
ICU caring for acute critical		provided me with written	impact on nursing sensitive	
patients requiring multiple		justification of their	indicators, employee	
complex modalities, 4th		proposal, the labor	engagement, patient	
floor	No	representatives have not	experience, and acuity.	Rationale not provided.

		considered both rationales		
		and determined the		
		outcomes as listed.		
		Decisions were based on		
		our enhanced model of		
		patient care delivery, the		
		collaboration between		
		disciplines, and budgetary		
		constraints.		
		The members of the Clinical		
		Staffing Committee worked		
		diligently over the last few		
		months and reached		
		consensus on several	The general hospital	
		components of the staffing	administration committee	
		plan. However, there were	staffing plan includes a unit	
		a number of items upon	specific staffing plan. The	
		which the Committee was	plan includes minimal	
		unable to agree, and I was	staffing for each shift based	
		called upon to render a	on the New York State	
		decision.	Nurses Association	
		At this time the	collective bargaining	
		management	agreement. The rational for	
		representatives have	the staffing plan includes	
Telemetry/ med/surg unit		provided me with written	impact on nursing sensitive	
providing cardiac and pulse		justification of their	indicators, employee	
ox monitoring on the 1st		proposal, the labor	engagement, patient	
floor	No	representatives have not	experience, and acuity.	No rationale was provided.

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 4 digits. Ex: 10.50)	Planned total hours of RN nursing care per patient including adjustment for case mix and acuity on the Evening Shift (Please provide a number with up to 4 digits. Ex: 10.50)	Planned average number of patients on the unit per day on the Evening Shift? (Please provide a number with up to 4 digits. Ex: 10.50)	What is the planned average number of patients for which one RN on the unit will provide direct patient care per day on the Evening Shift (Please provide a number with up to 4 digits. Ex: 10.50)?
Behavioral health unit that is closed to behavioral				
health patients since Apr.				
2020, 1st floor	2	1.07	15	10
32 bed orthopedic unit				
caring for post op				
orthopedic and med/surg				
patients, 2nd floor	2	1	16	8
ICU caring for acute critical				
patients requiring multiple				
complex modalities, 4th			_	
floor	3	3.83	6	2
Telemetry/ med/surg unit providing cardiac and pulse ox monitoring, 1st floor	3	1.6	15	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 4 digits. Ex: 10.50)	Planned total hours of LPN care per patient including adjustment for case mix and acuity on the Evening Shift (Please provide a number with up to 4 digits. Ex: 10.50)
Behavioral health unit that	up or angues am actory	up or anguer in its a
is closed to behavioral		
health patients since Apr.		
2020, 1st floor	0	0
32 bed orthopedic unit		
caring for post op		
orthopedic and med/surg		
patients, 2nd floor	0	0
ICU caring for acute critical		
patients requiring multiple		
complex modalities, 4th	_	_
floor	0	0
Telemetry/ med/surg unit providing cardiac and pulse		
ox monitoring, 1st floor	0	0

EVENING SHIFT ANCILLARY STAFF

		Planned total hours of
Provide a description of	Planned average number	ancillary members of the
Clinical Unit, including a	of ancillary members of	frontline team including
description of typical	the frontline team on the	adjustment for case mix
patient services provided	unit per day on the	and acuity on the
on the unit and the	Evening Shift? (Please	Evening Shift (Please
unit's location in	provide a number with	provide a number with
the hospital.	up to 4 digits. Ex: 10.50)	up to 4 digits. Ex: 10.50)

Behavioral health unit that		
is closed to behavioral		
health patients since Apr.		
2020, 1st floor	5	2.7
32 bed orthopedic unit		
caring for post op		
orthopedic and med/surg		
patients, 2nd floor	5	16.3
ICU caring for acute critical		
patients requiring multiple		
complex modalities, 4th		
floor	5	5.4
Telemetry/ med/surg unit		
providing cardiac and pulse		
ox monitoring, 1st floor	5	7

EVENING SHIFT UNLICENSED STAFFING

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Planned average number of unlicensed personnel on the unit providing direct patient care per day on the Evening Shift? (Please provide a number with up to 4 digits. Ex: 10.50)	Planned total hours of unlicensed personnel care per patient including adjustment for case mix and acuity on the Evening Shift (Please provide a number with up to 4 digits. Ex: 10.50)
Behavioral health unit that is closed to behavioral		
health patients since Apr.		
2020, 1st floor	2	1.07
32 bed orthopedic unit		
caring for post op		
orthopedic and med/surg		
patients, 2nd floor	2	1

ICU caring for acute critical patients requiring multiple complex modalities, 4th		
floor	1	1.33
Telemetry/ med/surg unit		
providing cardiac and pulse		
ox monitoring, 1st floor	2	1.07

EVENING SHIFT ADDITIONAL RESOURCES

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Description of additional resources available to support unit level patient care on the Evening Shift. These resources include but are not limited to unit clerical staff, admission/discharge nurse, and other coverage provided to registered nurses, licensed practical nurses, and ancillary staff.
the nospital.	and andmary starr.
Behavioral health unit that is closed to behavioral health patients since Apr. 2020, 1st floor	Unit secretary, Assistant Nurse Manager, educator, rapid response team, dietician, Spiritual services, Hospitalist, PA, NP, environmental service staff

32 bed orthopedic unit caring for post op orthopedic and med/surg patients, 2nd floor	Unit secretary, nursing tech, admission/discharge nurse, Assistant Nurse Manager, educator, rapid response team, dietician, Spiritual services, Hospitalist, PA, environmental service staff
	Unit secretary, Assistant
	Nurse Manager, nursing
	tech, educator, rapid
ICU caring for acute critical	response team, dietician,
patients requiring multiple	Spiritual services,
complex modalities, 4th	Hospitalist, PA,
floor	environmental service staff
	Unit secretary, Assistant
	Nurse Manager, nursing
	tech, educator, rapid
	response team, dietician,
Telemetry/ med/surg unit	Spiritual services,
providing cardiac and pulse	Hospitalist, PA,
ox monitoring, 1st floor	environmental service staff

EVENING SHIFT CONSENSUS INFORMATION

Provide a description of			
Clinical Unit, including a			Statement by members
description of typical		If no,	of clinical staffing
patient services provided	Our Clinical Staffing	Chief Executive Officer	committee selected by
on the unit and the	Committee reached	Statement in support of	the general hospital
unit's location in	consensus on the clinical	clinical staffing plan for	administration
the hospital.	staffing plan for this unit:	this unit:	(management members):

	considered both rationales		
	and determined the		
	outcomes as listed.		
	Decisions were based on		
	our enhanced model of		
	patient care delivery, the		
	collaboration between		
	disciplines, and budgetary		
	constraints.		
	The members of the Clinical		
	Staffing Committee worked		
	diligently over the last few		
	months and reached		
	consensus on several	The general hospital	
	components of the staffing	administration committee	
	plan. However, there were	staffing plan includes a unit	
	a number of items upon	specific staffing plan. The	
	which the Committee was	plan includes minimal	
	unable to agree, and I was	staffing for each shift based	
	called upon to render a	on the New York State	
	decision.	Nurses Association	
	At this time the	collective bargaining	
	management	agreement. The rational for	
	representatives have	the staffing plan includes	
	provided me with written	impact on nursing sensitive	
	justification of their	indicators, employee	
	proposal, the labor	engagement, patient	
No	representatives have not	experience, and acuity.	
	No	and determined the outcomes as listed. Decisions were based on our enhanced model of patient care delivery, the collaboration between disciplines, and budgetary constraints. The members of the Clinical Staffing Committee worked diligently over the last few months and reached consensus on several components of the staffing plan. However, there were a number of items upon which the Committee was unable to agree, and I was called upon to render a decision. At this time the management representatives have provided me with written justification of their proposal, the labor	and determined the outcomes as listed. Decisions were based on our enhanced model of patient care delivery, the collaboration between disciplines, and budgetary constraints. The members of the Clinical Staffing Committee worked diligently over the last few months and reached consensus on several components of the staffing plan. However, there were a number of items upon which the Committee was unable to agree, and I was called upon to render a decision. At this time the management representatives have provided me with written justification of their proposal, the labor

		considered both rationales		
		and determined the		
		outcomes as listed.		
		Decisions were based on		
		our enhanced model of		
		patient care delivery, the		
		collaboration between		
		disciplines, and budgetary		
		constraints.		
		The members of the Clinical		
		Staffing Committee worked		
		diligently over the last few		
		months and reached		
		consensus on several	The general hospital	
		components of the staffing	administration committee	
		plan. However, there were	staffing plan includes a unit	
		a number of items upon	specific staffing plan. The	
		which the Committee was	plan includes minimal	
		unable to agree, and I was	staffing for each shift based	
		called upon to render a	on the New York State	
		decision.	Nurses Association	
		At this time the	collective bargaining	
		management	agreement. The rational for	
		representatives have	the staffing plan includes	
32 bed orthopedic unit		provided me with written	impact on nursing sensitive	
caring for post op		justification of their	indicators, employee	
orthopedic and med/surg		proposal, the labor	engagement, patient	
patients, 2nd floor	No	representatives have not	experience, and acuity.	

		considered both rationales		
		and determined the		
		outcomes as listed.		
		Decisions were based on		
		our enhanced model of		
		patient care delivery, the		
		collaboration between		
		disciplines, and budgetary		
		constraints.		
		The members of the Clinical		
		Staffing Committee worked		
		diligently over the last few		
		months and reached		
		consensus on several	The general hospital	
		components of the staffing	administration committee	
		plan. However, there were	staffing plan includes a unit	
		a number of items upon	specific staffing plan. The	
		which the Committee was	plan includes minimal	
		unable to agree, and I was	staffing for each shift based	
		called upon to render a	on the New York State	
		decision.	Nurses Association	
		At this time the	collective bargaining	
		management	agreement. The rational for	
		representatives have	the staffing plan includes	
ICU caring for acute critical		provided me with written	impact on nursing sensitive	
patients requiring multiple		justification of their	indicators, employee	
complex modalities, 4th		proposal, the labor	engagement, patient	
floor	No	representatives have not	experience, and acuity.	

	•		
		considered both rationales	
		and determined the	
		outcomes as listed.	
		Decisions were based on	
		our enhanced model of	
		patient care delivery, the	
		collaboration between	
		disciplines, and budgetary	
		constraints.	
		The members of the Clinical	
		Staffing Committee worked	
		diligently over the last few	
		months and reached	
		consensus on several	The general hospital
		components of the staffing	administration committee
		plan. However, there were	staffing plan includes a unit
		a number of items upon	specific staffing plan. The
		which the Committee was	plan includes minimal
		unable to agree, and I was	staffing for each shift based
		called upon to render a	on the New York State
		decision.	Nurses Association
		At this time the	collective bargaining
		management	agreement. The rational for
		representatives have	the staffing plan includes
		provided me with written	impact on nursing sensitive
Telemetry/ med/surg unit		justification of their	indicators, employee
providing cardiac and pulse		proposal, the labor	engagement, patient
ox monitoring, 1st floor	No	representatives have not	experience, and acuity.

RN NIGHT SHIFT STAFFING

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 4 digits. Ex: 10.50)	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 4 digits. Ex: 10.50)	Planned average number of patients on the unit per day on the Night Shift? (Please provide a number with up to 4 digits. Ex: 10.50)	What is the planned average number of patients for which one RN on the unit will provide direct patient care per day on the Night Shift (Please provide a number with up to 4 digits. Ex: 10.50)?
Behavioral health unit that is closed to behavioral				
health patients since Apr.				
2020, 1st floor	2	1.07	15	10
32 bed orthopedic unit caring for post op orthopedic and med/surg patients, 2nd floor	2	1	16	8
ICU caring for acute critical patients requiring multiple complex modalities, 4th				
floor	3	3.83	6	2
Telemetry/ med/surg unit providing cardiac and pulse ox monitoring, 1st floor	3	1.6	15	6

LPN NIGHT SHIFT STAFFING

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

Behavioral health unit that		
is closed to behavioral		
health patients since Apr.		
2020, 1st floor	0	0
32 bed orthopedic unit		
caring for post op		
orthopedic and med/surg		
patients, 2nd floor	0	0
ICU caring for acute critical		
patients requiring multiple		
complex modalities, 4th		
floor	0	0
Telemetry/ med/surg unit		
providing cardiac and pulse		
ox monitoring, 1st floor	0	0

NIGHT SHIFT ANCILLARY STAFF

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Planned average number of ancillary members of the frontline team on the unit per day on the Night Shift? (Please provide a number with up to 4 digits. Ex: 10.50)	Planned total hours of ancillary members of the frontline team including adjustment for case mix and acuity on the Night Shift (Please provide a number with up to 4 digits. Ex: 10.50)
Behavioral health unit that is closed to behavioral		
health patients since Apr. 2020, 1st floor	2	0.5
32 bed orthopedic unit		
caring for post op		
orthopedic and med/surg		
patients, 2nd floor	2	3.2

ICU caring for acute critical patients requiring multiple complex modalities, 4th		
floor	2	2.4
Telemetry/ med/surg unit		
relemently/ med/surg unit		
providing cardiac and pulse		

NIGHT SHIFT UNLICENSED STAFFING

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Planned average number of unlicensed personnel on the unit providing direct patient care per day on the Night Shift? (Please provide a number with up to 4 digits. Ex: 10.50)	Planned total hours of unlicensed personnel care per patient including adjustment for case mix and acuity on the Night Shift (Please provide a number with up to 4 digits. Ex: 10.50)
Behavioral health unit that	anguar ann acrosq	ap to talgree an accept
is closed to behavioral		
health patients since Apr.		
2020, 1st floor	2	1.07
32 bed orthopedic unit		
caring for post op		
orthopedic and med/surg		
patients, 2nd floor	2	1
ICU caring for acute critical		
patients requiring multiple		
complex modalities, 4th		
floor	1	1.33
Telemetry/ med/surg unit providing cardiac and pulse ox monitoring, 1st floor	2	1.07

NIGHT 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 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.
Behavioral health unit that is closed to behavioral health patients since Apr. 2020, 1st floor	rapid response team, Spiritual services, Hospitalist, PA, environmental service staff
32 bed orthopedic unit caring for post op orthopedic and med/surg patients, 2nd floor	nursing tech, rapid response team, Spiritual services, Hospitalist, PA, environmental service staff
ICU caring for acute critical patients requiring multiple complex modalities, 4th floor	nursing tech, rapid response team, Spiritual services, Hospitalist, PA, environmental service staff
Telemetry/ med/surg unit providing cardiac and pulse ox monitoring, 1st floor	nursing tech, rapid response team, Spiritual services, Hospitalist, PA, environmental service 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.	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):
	<u>.</u>	considered both rationales and determined the		
		outcomes as listed.		
		Decisions were based on		
		our enhanced model of		
		patient care delivery, the		
		collaboration between		
		disciplines, and budgetary		
		constraints.		
		The members of the Clinical		
		Staffing Committee worked		
		diligently over the last few		
		months and reached		
		consensus on several	The general hospital	
		components of the staffing	administration committee	
		plan. However, there were	staffing plan includes a unit	
		a number of items upon	specific staffing plan. The	
		which the Committee was	plan includes minimal	
		unable to agree, and I was	staffing for each shift based	
		called upon to render a	on the New York State	
		decision.	Nurses Association	
		At this time the	collective bargaining	
		management	agreement. The rational for	
		representatives have	the staffing plan includes	
Behavioral health unit that		provided me with written	impact on nursing sensitive	
is closed to behavioral		justification of their	indicators, employee	
health patients since Apr.	.,	proposal, the labor	engagement, patient	
2020, 1st floor	No	representatives have not	experience, and acuity.	Rationale not provided

		considered both rationales		
		and determined the		
		outcomes as listed.		
		Decisions were based on		
		our enhanced model of		
		patient care delivery, the		
		collaboration between		
		disciplines, and budgetary		
		constraints.		
		The members of the Clinical		
		Staffing Committee worked		
		diligently over the last few		
		months and reached		
		consensus on several	The general hospital	
		components of the staffing	administration committee	
		plan. However, there were	staffing plan includes a unit	
		a number of items upon	specific staffing plan. The	
		which the Committee was	plan includes minimal	
		unable to agree, and I was	staffing for each shift based	
		called upon to render a	on the New York State	
		decision.	Nurses Association	
		At this time the	collective bargaining	
		management	agreement. The rational for	
		representatives have	the staffing plan includes	
32 bed orthopedic unit		provided me with written	impact on nursing sensitive	
caring for post op		justification of their	indicators, employee	
orthopedic and med/surg		proposal, the labor	engagement, patient	
patients, 2nd floor	No	representatives have not	experience, and acuity.	Rationale not provided

		considered both rationales		
		and determined the		
		outcomes as listed.		
		Decisions were based on		
		our enhanced model of		
		patient care delivery, the		
		collaboration between		
		disciplines, and budgetary		
		constraints.		
		The members of the Clinical		
		Staffing Committee worked		
		diligently over the last few		
		months and reached		
		consensus on several	The general hospital	
		components of the staffing	administration committee	
		plan. However, there were	staffing plan includes a unit	
		a number of items upon	specific staffing plan. The	
		which the Committee was	plan includes minimal	
		unable to agree, and I was	staffing for each shift based	
		called upon to render a	on the New York State	
		decision.	Nurses Association	
		At this time the	collective bargaining	
		management	agreement. The rational for	
		representatives have	the staffing plan includes	
ICU caring for acute critical		provided me with written	impact on nursing sensitive	
patients requiring multiple		justification of their	indicators, employee	
complex modalities, 4th		proposal, the labor	engagement, patient	
floor	No	representatives have not	experience, and acuity.	Rationale not provided.

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		considered both rationales		
		and determined the		
		outcomes as listed.		
		Decisions were based on		
		our enhanced model of		
		patient care delivery, the		
		collaboration between		
		disciplines, and budgetary		
		constraints.		
		The members of the Clinical		
		Staffing Committee worked		
		diligently over the last few		
		months and reached		
		consensus on several	The general hospital	
		components of the staffing	administration committee	
		plan. However, there were	staffing plan includes a unit	
		a number of items upon	specific staffing plan. The	
		which the Committee was	plan includes minimal	
		unable to agree, and I was	staffing for each shift based	
		called upon to render a	on the New York State	
		decision.	Nurses Association	
		At this time the	collective bargaining	
		management	agreement. The rational for	
		representatives have	the staffing plan includes	
		provided me with written	impact on nursing sensitive	
Telemetry/ med/surg unit		justification of their	indicators, employee	
providing cardiac and pulse		proposal, the labor	engagement, patient	
ox monitoring, 1st floor	No	representatives have not	experience, and acuity.	No rationale was provided.

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

Our general hospital's collective bargaining agreement with New York State Nurses Association expires on the following date:	10/31/20 25 12:00 AM
The number of hospital employees represented by New York State Nurses Association is:	161
Our general hospital's collective bargaining agreement with SEIU 1199 expires on the following date:	09/30/20 26 12:00 AM

