



June 28, 2024

Via email: hospitalstaffingplans@health.ny.gov

Stephanie Shulman, Dr.PH, MS
Director, Division of Hospitals & Treatment Centers
New York State Department of Health
Empire State Plaza, Corning Tower
Albany, New York 12237

RE: St. Anthony Community Hospital PFI #000704
Clinical Staffing Committee, Chapter 155 of Laws of 2021 (§2805-t)

Dear Dr. Shulman:

Attached please find the staffing guidelines in PDF format for St. Anthony Community Hospital RELATED TO New York State Public Health Law Section 2805-t and as per your letter dated June 12, 2024 (DHDTTC DAL#: 24-04), complete with the information required by the law in addition to the Clinical Staffing guidelines that did or did not reach consensus by Management, frontline workforce, and respective Collective Bargaining agreements.

The Clinical Staffing Committee was implemented in December 2021. Representatives include representatives of New York State Nurses Association (NYSNA) and 1199 in addition to registered nurses and ancillary members of the frontline patient care team; and hospital administration including the chief nursing executive, the chief financial officer designee, human resource personnel, and labor representation as well as patient care unit managers. Nurse Staffing and Delivery of Care Policy and Staffing Complaint Process policy were mutually developed and approved. Ratios were determined based on the needs of the patients in addition to the additional variables outlined needing to be considered with staffing needs on each respective unit. The daily staffing plan is posted in a publicly conspicuous area on each patient care unit for each shift as well as relevant staffing.

Sincerely,

Sophie Crawford-Rosso, RN MSN NE-BC

Chief Nursing Officer Bon Secours Charity Health System

000704 St. Anthony Community Hospital 2024 submission

St. Anthony Community Hospital in Warwick, NY, licensed for 60 beds, has served the residents of Orange County, NY, Passaic and Sussex Counties, NJ for over 80 years. Bon Secours Charity Health System joined WMCHHealth in 2015 and continues to serve its community offering acute care services, a 24-hour emergency department, ICU, Obstetrical/Gynecological, and Outpatient services. The comprehensive surgery program includes Joint replacement, Vascular, Gynecological. Urological, Pulmonary, Ophthalmic, Plastic surgery, Hand, Foot, same day, and general surgery. Inpatient discharges totaled 2099 with a Total CMI of 1.4 for 2023.

Medical Surgical Nursing Unit/ Telemetry

Consensus reached.

Bed capacity 35; Average Daily Census 13.8

Description: This unit serves: adult through geriatric patients including any inpatient with a medical or surgical diagnosis, Telemetry cardiac monitoring, extended surgical stay patients, and out-patient infusion therapy patients.

Scope of Care: Medical and surgical needs are defined by the inter-professional patient assessments which are individualized to meet the patient’s needs. Clinical services may include, but are not limited to, nursing, nutrition, environmental, cultural, religious, spiritual, rehabilitation, cardiopulmonary, diagnostic testing, and case management. As needed, patients are transferred for services not available at St. Anthony Community Hospital.

Inter-professional department: Respiratory Therapy, Nutritional Therapy, Physical and Occupational Therapy, Laboratory, Radiology, Palliative Care, Case Management, Social Service, and Pharmacy support the daily care of the patient. The unit is equipped with the most current state of the art equipment for multiple parameter monitoring, visualization, medication management, medication bar coding, therapeutic beds that adapt to the multiple service specialties, including, but not limited to the patient population it serves. A culture of safety is one of the primary objectives in safe and effective patient care.

Cost center # 65209	Med/Surg 1	RN Ratio 1:5.5	Care Partner Ratio 1:8 Days Care Partner Ratio 1:10 Nights	Unit Secretary (1) (7am – 7pm) (when census 8+)
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Medical Surgical Orthopedics

Consensus reached.

Bed capacity 7; Average Daily Census 2.7

Description: This unit serves post-surgical adult through geriatric patient population.

Scope of Care: Surgical needs are defined by the inter-professional patient assessments which are individualized to meet the patient's needs. Clinical services may include but are not limited to nursing, nutrition, environmental, cultural, religious, spiritual, rehabilitation, cardiopulmonary, diagnostic testing, and case management.

Inter-professional department: Respiratory Therapy, Nutritional Therapy, Physical and Occupational Therapy, Laboratory, Radiology, Palliative Care, Case Management, Social Service, and Pharmacy support the daily care of the patient. The unit is equipped with the most current state of the art equipment for multiple parameter monitoring, visualization, medication management, medication bar coding, therapeutic beds that adapt to the multiple service specialties, including, but not limited to the patient population it serves. A culture of safety is one of the primary objectives in safe and effective patient care.

Cost center # 65212	Med/Surg 4 Orthopedics	RN Day/Night 1:4 (Ortho patients)	1 Care Partner Day/Night when only 1 RN
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LDRP (Labor Delivery Recovery Postpartum Nursing Unit/ Telemetry)

Consensus not reached.

LABOR AND DELIVERY DEPARTMENT

Bed capacity 8; Average Daily Census 1

Description: The primary goal of the Labor and Delivery unit is to provide quality standard of care. This is achieved through a planned and systematic process of on-going evaluation of the quality and appropriateness of patient care as measured by patient outcomes. Practice standards are set, and problems are identified and resolved within a Continuous Quality Improvement process of an inter-professional collaborative framework.

Scope of Care: The Labor and Delivery unit is dedicated to the Provision of Family Centered Care which supports the maternal child department's couplet care philosophy. Both low risk and high-risk delivery care are available for obstetrical patients. Antepartum patients may include, but are limited to, various stages of labor, preterm labor, pregnancy induced hypertension, hyperemesis gravidarum, diabetes associated with pregnancy, placenta previa, premature rupture of membranes, scheduled inductions/cesareans sections, and Non-Stress Testing, which are done in the unit. The unit has eight Birthing rooms, one OR, one Triage/Treatment room and three antepartum/GYN rooms, two of which could accommodate two patients. The antepartum rooms can be used for postpartum patient overflow.

Admission/Discharge Criteria: Total assessment of the antepartum mother, including but not limited to, the monitoring and assessment of Fetal Heart Rate, Maternal and fetal well-being, stabilization of the postpartum mother, treatment of antepartum, intrapartum and postpartum complications, evaluation of the mother-baby unit with regards to their physical, psychosocial and educational needs.

POSTPARTUM AND NEWBORN NURSERY

Bed capacity 8; Average Daily Census 1

Description: The primary goal of Postpartum/Newborn Nursery is to provide quality standard of care. This is achieved through a planned and systematic process of on-going evaluation of the quality and appropriateness of patient care as measured by patient outcomes. Practice standards are set, and problems are resolved within a Continuous Quality Improvement process of an inter-professional collaborative framework.

Scope of Care: The service specializes in the care of women of childbearing age who have had vaginal or cesarean deliveries. This unit provides family centered care with special focus on mother-baby couplet care as the nursing model used within the Maternity unit. Although we encourage rooming in and the concept of non-separation of mother-baby, our patients have the option of utilizing the nursery.

Admission/Discharge Criteria: Total assessment and management of the postpartum patient include, but is not limited to, recognition and treatment of postpartum complications, management of pain, education related to care of mother and newborn, circumcision care, lactation consultation, and the availability of Social Services and Discharge planning.

<p>Cost center # 65260</p>	<p>LDRP</p>	<p>RN Day/Night 2- 3</p>	<p>OB Tech per diem Nights</p>	<p>Unit Secretary (1) days</p>	<p>Consensus not reached: Additional RN, for each shift, was requested by Labor; Management denied the request based on lack of increased, sustained, significant volume. Members of hospital senior administration met with employee members and union representatives on multiple occasions to review the proposed staffing plan and volume indicators. Consensus was not reached based on the employees request for additional minimal staffing. The discussion included open dialogue between labor and management regarding assignments and flow of the department. Ultimately, management could not agree to the request.</p>
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ICU

Consensus reached.

Bed Capacity 8 beds (Coronary Care -4 beds, ICU beds -4) average daily census 3.2

Description: The ICU unit is designed to serve the following patient types: Patients 18 years or older, patients presenting with potentially life threatening medical or surgical conditions.

Scope of Care: Therapies include (but not exclusive of):

- Vasoactive drug administration
- ECG monitoring
- Oximetry
- Ventilatory support
- Telemetry monitoring
- Arterial Lines
- Administration of antiarrhythmic medications
- Cardioversion
- Pacemaker -external pacing
- Conscious sedation
- Wound
- Diabetes
- Recovering of patients after PACU hours

Inter-professional department: Respiratory Therapy, Nutritional Therapy, Physical and Occupational Therapy, Laboratory, Radiology, Palliative Care, Case Management, Social Service, and Pharmacy support the daily care of the patient. The unit is equipped with the most current state of the art equipment for multiple parameter monitoring, visualization, medication management, medication bar coding, therapeutic beds that adapt to the multiple service specialties, including, but not limited to the patient population it serves. A culture of safety is one of the primary objectives in safe and effective patient care.

Cost Center# 65209	ICU	RN Ratio Day/Night 1:2
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Emergency Department

Consensus not reached.

Average daily volume 33.6

Description: The Emergency Department offers emergency health services 24 hours a day to all acutely ill, urgent, and non-urgent patients, from newborn to 100+ years. The department accepts all emergencies ranging from life-threatening to minor injuries and is served by volunteer and non-volunteer ambulance corps. The eleven-bed unit includes two isolation bays.

Scope of Care: The emergency services are organized to provide prompt physician evaluation of patients presenting in emergencies, provide definitive care of those patients not requiring in-depth medical/surgical care, initial treatment and stabilization or management, transfer if indicated to tertiary centers for acute psychosis, major trauma, Obstetrical high-risk, third-degree burns, neurological illnesses, and pediatric cases requiring special care.

Common diagnoses and complaints of patients seen may include UTI, chest pain, shortness of breath, seizures, trauma, diabetic emergencies, pneumonia, abdominal pain, wound lacerations, fractures. Procedures and treatments are provided by physician, nursing, respiratory, laboratory and radiology personnel. Standards of care and practice developed for the Emergency Department to follow hospital standards, ED physicians/providers as set by CHS, COBRA, TJC, and NYSDOH.

Inter-professional team consists of: Registered Professional Nurses, ED Technicians, ED Physicians, Physician Assistants, Nurse Practitioners, Case Management, Social Worker (Screener), Physical Therapy, Mental Health staff via Tele Health as needed, Spiritual Care, Nutritional support, Lab, Radiology, and support as needed from the Palliative Care Team.

Cost Center# 75810	Emergency Department	5 RNs in 24 hours 2-3 ED Techs in 24 hours	Consensus not reached: Additional RN flex requested by Labor; Management denied based on lack of increased and sustained volume. Members of hospital senior administration met with employee members and union representatives on multiple occasions to review the proposed staffing plan and volume indicators. Consensus was not reached based on the employees request for additional minimal staffing. The discussion included open dialogue between labor and management regarding assignments and flow of the department. Ultimately, management could not agree to the request.
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Operating Room, Endo Room, PAT, Same Day Surgery, and Recovery Room

Consensus not reached.

Description: The Operating Room offers 24-hour care to patients. After regular hours, the services in the Operating Room continue on a scheduled “on call” basis.

St. Anthony has four Operating Rooms, two Endoscopy rooms, and an OR attached to the OB unit for C-Sections. Services provided include major and minor surgical procedures under the care of credentialed surgeons; Anesthesia - General, local, IV sedation, and regional block anesthesia (under the care of credentialed anesthesiologists). Specialized areas of surgery under the care of credentialed physicians in that specialty: Orthopedics, Urology, ENT, Ophthalmology, Maxillo-Facial, Foot, Hand, Obstetrical, Gynecological, Endoscopy, Podiatry, Plastics, and Otolaryngology.

The management of the Operating Room Suite is the inter-professional responsibility of the Chief of Surgery, the Chief of Anesthesia, the Surgical Committee, the Clinical Leader, and the Management of St. Anthony Community Hospital.

Inter-professional team consists of: Registered Professional Nurses, Surgeons, Anesthesiologist, RN First Assist, Physician Assistants, Surgical Techs, Scheduler, Respiratory, EKG, Infection Control, and Environmental Services.

Cost Center# 76010	OR	Average Daily cases 9	1 RN, 1 Surgical Tech per OR Room Mon-Fri On-call after day shift ends Mon-Fri, 24/7 weekends & holidays	Consensus reached
Cost Center# 76210	PACU	Average Daily cases 8	2 RNs 10–12-hour days On-call 7am-11pm Saturday/Sunday & Holidays	Consensus not reached: Additional RN requested by Labor during Pediatric ENT cases; Management denied based on industry standards. Members of hospital senior administration met with employee members and union representatives on multiple occasions to review the proposed staffing plan and volume indicators. Consensus was not reached based on the employees request for additional minimal staffing.

				The discussion included open dialogue between labor and management regarding assignments and flow of the department. Ultimately, management could not agree to the request.
Cost Center# 76020	SDS	Average Daily cases 20	6am – 7:12pm 5 RNs (Endo days) 2-4 RNs (non-Endo days)	Consensus not reached: Flat staffing, without flexing for decrease in volume, was requested by Labor. Management denied based on lower volumes compared to previous year. Members of hospital senior administration met with employee members and union representatives on multiple occasions to review the proposed staffing plan and volume indicators. Consensus was not reached based on the employees request for additional minimal staffing. The discussion included open dialogue between labor and management regarding assignments and flow of the department. Ultimately, management could not agree to the request.
Cost Center# 76020	PAT	Average Daily cases 3.7	1 RN 7am – 3pm	Consensus reached
Cost Center# 76042	Endo	Average Daily cases 8	1 RN, 1 Surgical Tech (per physician) 7am – 3pm	Consensus reached

Outpatient Foot Care Clinic

Consensus not reached.

Average cases 6

Description: Outpatient Foot Care Clinic offers evaluation and treatment of wounds below the ankle. We offer a variety of treatments, moist wound healing, diabetic screenings, and skin grafts.

Clinic hours are weekly Tuesdays and Thursdays 8am to 4pm

Inter-professional team members include Nutritional support, Physical and Occupational Therapy, Laboratory, Case Management, Social Service, and Pharmacy to support the care of the patient as needed. The unit is equipped with equipment for client visualization, medication management, and medication bar coding. A culture of safety is one of the primary objectives in safe and effective patient care.

Cost Center# 74750	Foot Care	1 RN 9am – 4pm (Foot Care Clinic days)	Consensus not reached: A care partner was requested by Labor. Management denied based on volumes that do not justify additional staffing. Members of hospital senior administration met with employee members and union representatives on multiple occasions to review the proposed staffing plan and volume indicators. Consensus was not reached based on the employees request for additional minimal staffing. The discussion included open dialogue between labor and management regarding assignments and flow of the department. Ultimately, management could not agree to the request.
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Outpatient Infusion Services

Consensus not reached.

Average daily cases 6.6 patients

Description: Infusion therapy is delivered to adult patients in the outpatient setting.

Outpatient Infusion department operates Mon to Friday, 8am-4pm and weekends when needed.

Infusion Services Offered: Blood and blood products, IV antibiotic therapies, IVIG, Fluid and electrolyte therapy, Biologic therapy infusions (for auto immune disorders), Lab draws from ports, Ports flushed, and other medication infusions as prescribed by physicians, Therapeutic Phlebotomies, and Chemotherapy.

Cost Center# 76030	Infusion	2 RNs 7:45am –3:30pm Weekends rotated according to need	Consensus not reached: A care partner was requested by Labor during Chemotherapy sessions. Management denied since Chemotherapy is not being offered at the present time. Members of hospital senior administration met with employee members and union representatives on multiple occasions to review the proposed staffing plan and volume indicators. Consensus was not reached based on the employees request for additional minimal staffing. The discussion included open dialogue between labor and management regarding assignments and flow of the department. Ultimately, management could not agree to the request.
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Radiology and Imaging Services

Consensus reached.

Average daily cases 4 patients.

Description: Radiology Nursing services include assessment of all outpatients and inpatients receiving contrast, collecting pertinent bloodwork, closely monitoring BUN/CREATININE/GFR prior to injection of contrast to maintain patient safety.

Patients that have had prior contrast reactions will be assessed by Radiology nurse, each case is reviewed with Radiologist; some patients will be pre-medicated per SACH protocol/ per Radiologist following patient safety protocols.

Radiology Nurses assess NM patients that are receiving pharmacological interventions as part of our outpatient services to include renal scans and cardiology studies.

Radiology Nurses assess Women’s Imaging Center patients arriving for Ultrasound Guided Breast Biopsies/Stereotactic Breast Biopsies, including education and medication holds prior to procedures.

Nurses work closely with scheduling, assessing patients that require Hysterosalpingograms under Fluoroscopy, including education to patients prior to scheduled procedure date.

Nurses assess and assist patients to be scheduled for paracentesis, thoracentesis, abscess draining, liver biopsies, and arthrograms.

OPERATES from Monday -Friday 8 am - 4 pm.

Cost Center# 76030	Interventional Radiology	1 RN Monday through Friday 8am to 4pm Additional RN on Biopsy/Procedure days
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