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**Bellevue Hospital  
Center Staffing Plan  
2024  
PFI# 001438**

- 1. Bellevue Hospital Center's Final Staffing Plan 2024– *See attached***
- 2. Union's Proposal and rationale for areas where there was no consensus – *Moira Dolan, DC37:***

Good Afternoon Omar,

We are writing in response to the staffing meeting and proposals from management on the ratios for clerical, ancillary and behavioral health staff for 2024 year.

Med Surgical Units - We are restating our 2022 proposal of 1:8 for PCA /Nurse Aide staffing on the medical surgical units. The timing ratio of 52 minutes per day versus 35 minutes per day, as we stated last year is much better for patient safety and quality of care. It also allows for coverage for lunch and breaks more effectively. Last year Bellevue indicated the Average Daily Census was often below 12 patients. Since those figures are no longer published at HH Board meetings it is not clear to us how often that is true. If it is true, it should make the case that the effective daily ratio is lower than 1:12 and should be maintained rather than risking problems when the census does increase. We all acknowledge the difficulty in hiring and retention but one factor in retention is stress and overwork.

Behavioral Health Units - we understand that in BH 2.0, additional headcount in the form of Psych Techs or PCA's where available will be added to the BH units. The Bellevue proposal is 3 BHA's and 2 PCA's per unit. This is two additional people compared to the 2023 proposal and is an improvement.

However, the Union proposal is 4 BHA's per unit, 2 Psych Techs and 2 PCAs for this particular Bellevue population. Additionally, the Union feels strongly that BHA's should have assigned patients, or particular sides of the floor, to the greatest extent possible, in order to more closely monitor and assist individual patients in order to safely provide care.

Clerical - we are in agreement with the 1 clerical per Tour 2 and Tour 3 per major medical units, with the exception of the medical monitoring lines part of Telemetry. We support the continuation of the 14 identified units for Tour 1 as in the 2023 proposal. The float pool for day and evening coverage is referenced on the 2023 proposal but not on the chart. We would like to see that represented on the chart as well.

We are in support of all proposals made by NYSNA.

Thank you for your attention to this matter.

Regards,  
Moiria Dolan  
Sr. Assistant Director  
Research & Negotiations  
DC 37 AFSCME  
212-815-7507

**3. Bellevue Hospital Center's Management's Proposal and rationale for areas without consensus:**

**PCAs**

Bellevue Hospital Center does not have consensus with DC37 regarding the staffing model for PCAs.

Bellevue proposes a Nursing Support (PCA) ratio of one (1) nursing support person to twelve (12) patients. A review of the average daily census and bed count at Bellevue indicates that nursing support staff will often have fewer than twelve patients. Bellevue's rationale for selecting the 1:12 nursing support (PCA) ratio is that staffing studies and literature support a 1:12 ratio where the RN ratio is 1:6, as it is in all of Bellevue's Med/Surg units. Our Stepdown, ICU and other critical care units supports a ratio of 1:2 and 1:4.

### **BHAs**

- Behavioral Health Associates (BHAs) at Bellevue Hospital work primarily in behavioral health units. They perform crisis and de-escalation interventions, therapeutic observations, and patient supervision. As a public health care hospital that sees some of New York City's most acute psychiatric patients, our BHAs are essential to the functioning of our behavioral health units.
- Our proposal for BHAs is 2 per unit for the following reasons:
  - 3 Psych Techs on the unit in support
  - BHAs are not assigned to specific patients, but rather perform de-escalation functions and routine observations

### **BHAs in the ED**

Bellevue Hospital Center strongly believes that two (2) BHAs per tour in the Emergency Department is satisfactory. Additionally, staffing is enhanced with additional support nurse staffing to reinforce the BHA's ability to perform de-escalation and routine observation functions. As noted above, BHAs are not assigned to individual patients but as unit support.

Bellevue believes that the proposed model for BHA staffing in the ED is adequate.

### **Clerical**

Bellevue Hospital Center supports staffing of one (1) Clerical staff on Tour 2 and Tour 3. The facility also has strategically added clerical staff on our patient-care units on Tour 1.

We believe that Bellevue surpasses DC37 requests.

**4. CEO's written submission explaining the elements that did not gain consensus and brief explanation of determination.**

Bellevue Hospital Center provides care and services to diverse and complex patient population which requires a nurse staffing model that addresses the needs of our patients. As a Level 1 Trauma Center, Level 2 Pediatric Trauma Center and one of the largest providers of psychiatric services in New York City, Bellevue is committed to providing safe care to our patients by allocating appropriate resources, including safe staffing ratios, since appropriate staffing levels lead to improved quality of care, nurse recruitment and retention in hospitals.

Since February 2022, the leadership of Bellevue Hospital Center has met with frontline nursing staff to discuss and harmonize appropriate staffing models for RNs, PCAs, BHAs and other Support Services staff. Similar meetings were held with bargaining partners. A Facility Staffing Committee was also convened to gauge consensus and vote on staffing ratios.

Below is the CEO's rational that supports Bellevue's determination:

**RNs**

Bellevue Hospital Center reached consensus with our bargaining partners on the RN staffing model.

Bellevue has a robust RN staff ratio as reflected in our staffing plan. RN ratios were agreed upon by frontline staff, union and management alike. At Bellevue, RNs and nursing support work as a team. By ensuring strong RN ratios of 1:6, our model enables RNs to aid nursing support staff.

**PCAs**

Bellevue was unable to achieve consensus with bargaining partners DC 37, Local 420 and Local 1549 on Nursing Support (PCAs) ratios. DC37 believes that a 1:12 ratio for Support Staff (PCA) is insufficient to provide a safe level of care for our patients. DC37 recommends a 1:8 ratio which they believe would increase PCAs' ability to appropriately provide patient care.

Bellevue Hospital Center agrees with DC37 that PCAs perform many vital functions including obtaining specimen, performing specimen screening tests and other important tasks, however, Bellevue proposes a Nursing Support (PCA) ratio of one (1) nursing support person to twelve (12) patients.

A review of the average daily census and bed count at Bellevue indicate that nursing support staff will often have fewer than twelve patients. The rationale behind the 1:12 nursing support ratio is as follows:

Staffing studies and literature support a 1:12 ratio where the RN ratio is 1:6, as it is in Bellevue's Med/Surg units, with Stepdown, ICU and other critical care units being 1:2 and 1:4. The most robust study of RNs and supporting frontline staff has reinforced a model of two (2) non-RN nursing personnel for every 25 patients, equating to a 1:12.5 ratio. A study 'Health Workforce Baseline and Surge Ratio', conducted by the Health force Center at the University of California San Francisco in March 21, 2020 concluded that the "the effect of substituting one nurse assistant for one professional nurse to care for every 25 patients— reduces the skill mix from 66.7% to 50%, or by 16.7%—increases the odds-on mortality by 21%."

**Bellevue is committed to ensuring that nursing support staff does not exceed twelve (12) patients and is creating a nursing support pool that would address any unforeseen surges and assures additional coverage during one-to-one assignments on our clinical units.**

### **BHAs**

- Behavioral Health Associates (BHAs) at Bellevue Hospital work primarily in behavioral health units. They perform crisis and de-escalation interventions, therapeutic observations, and patient supervision. As a public health care hospital that sees some of New York City's most acute psychiatric patients, our BHAs are essential to the functioning of our behavioral health units.
- Our proposal for BHAs is 2 per unit for the following reasons:
  - 3 Psych Techs on the unit in support
  - BHAs are not assigned to specific patients, but rather perform de- escalation functions and routine observations

## **BHAs in the ED**

Bellevue Hospital Center disagrees with DC37's assertion that the Emergency Department requires 3 BHAs to ensure appropriate staffing.

Bellevue strongly believes that two (2) BHAs per tour in the Emergency Department is satisfactory. Additionally, staffing is enhanced with additional support nurse staffing to reinforce the BHA's ability to perform de-escalation and routine observation functions. As noted above, BHAs are not assigned to individual patients but as unit support.

Bellevue believes that the proposed model for additional BHA staffing in the ED is adequate.

## **Clerical Staff**

Bellevue Hospital Center supports staffing of one (1) Clerical staff on Tour 2 and Tour 3. The facility will also strategically add clerical staff on our patient-care units on Tour 1.

We believe that Bellevue surpasses DC37 requests.

*Williams Hicks*  
William Hicks, CEO

Type text here  
*Omar Abedalrhman*  
Omar Abedalrhman, CNO

BE					RN		Nursing Support			BHA			HN			Clerical			Consensus Reached
Dept Name	Service	Functional Service	Physical Bed Count	ADC	Shift 1 Ratio	Shift 2 Ratio	Shift 1 Ratio	Shift 2 Ratio	Shift 3 Ratio	Shift 1 Ratio	Shift 2 Ratio	Shift 3 Ratio	Shift 1 Ratio	Shift 2 Ratio	Shift 3 Ratio	Shift 1 Ratio	Shift 2 Ratio	Shift 3 Ratio	
BE IP 15E SURG	Med/Surg	Med/Surg	32.0	EPIC	1:6	1:6	1:12	1:12	1:12	N/A	N/A	N/A		1:Unit		N/A	1:Unit	1:Unit	
BE IP 15N TRAUMA	Med/Surg	Med/Surg	30.0	EPIC	1:6	1:6	1:12	1:12	1:12	N/A	N/A	N/A		1:Unit		1:Unit	1:Unit	1:Unit	
		Stepdown		45% of ADC	1:4	1:4													
BE IP 15W GENERAL SURG	Med/Surg	Med/Surg	38.0	EPIC	1:6	1:6	1:12	1:12	1:12	N/A	N/A	N/A		1:Unit		N/A	1:Unit	1:Unit	
		Stepdown		1:4	1:4														
BE IP 16E NEURO/MED	Med/Surg	Med/Surg	34.0	EPIC	1:6	1:6	1:12	1:12	1:12	N/A	N/A	N/A		1:Unit		1:Unit	1:Unit	1:Unit	
		Stroke/EEG		12% of ADC	1:4	1:4													
							2 per shift	2 per shift	2 per shift	N/A	N/A	N/A		N/A		N/A	N/A	N/A	
BE IP 16N ACUTE MED	Med/Surg	Med/Surg	38.0	EPIC	1:6	1:6	1:12	1:12	1:12	N/A	N/A	N/A		1:Unit		N/A	1:Unit	1:Unit	
BE IP 16S MED STEPDOWN	Stepdown	Stepdown	14.0	EPIC	1:4	1:4	2 per shift	2 per shift	2 per shift	N/A	N/A	N/A		1:Unit		N/A	1:Unit	1:Unit	
BE IP 16W ONCOLOGY/MED	Med/Surg	Med/Surg	34.0	EPIC	1:6	1:6	1:12	1:12	1:12	N/A	N/A	N/A		1:Unit		N/A	1:Unit	1:Unit	
BE IP 17S ICU/SDU STEPDOWN	Stepdown	Stepdown	11.0	EPIC	1:4	1:4	2 per shift	2 per shift	2 per shift	N/A	N/A	N/A		1:Unit		1:Unit	N/A	N/A	
BE IP 17W MEDICINE	Med/Surg	Med/Surg	24.0	EPIC	1:6	1:6	1:12	1:12	1:12	N/A	N/A	N/A		1:Unit		N/A	1:Unit	1:Unit	
BE IP 19S PRIS HEALTH	Med/Surg	Prison Medicine	34.0	EPIC	1:4	1:4	1:4	1:4	1:4	2:Shift	2:Shift	2:Shift		1:Unit		1:Unit	1:Unit	1:Unit	
BE IP 6S REHAB	Med/Surg	Rehab/TBI	30.0	EPIC	1:6	1:6	1:12	1:12	1:12	N/A	N/A	N/A		1:Unit					
							2 per shift	2 per shift	2 per shift										
BE IP 6W REHAB/MED	Med/Surg	REHAB/MED	16.0	EPIC	1:6	1:6	2 per shift	2 per shift	2 per shift	N/A	N/A	N/A		1:Unit		N/A	1:Unit	1:Unit	
BEL IP 7W MEDICINE	Med/Surg	Med/Surg	19.0	EPIC	1:6	1:6	1:12	1:12	1:12					1:Unit		1:Unit	1:Unit	1:Unit	
BE IP 7N MEDICINE	Med/Surg	Med/Surg	38.0	EPIC	1:6	1:6	1:12	1:12	1:12	N/A	N/A	N/A		1:Unit		1:Unit	1:Unit	N/A	
BE IP 17E MED/TELE	Med/Surg	Cardiac Telemetry	26.0	EPIC	1:4	1:4	1:12	1:12	1:12	N/A	N/A	N/A		1:Unit		N/A	1:Unit	1:Unit	
		Monitor Tech		N/A	N/A			1:Unit	1:Unit	1:Unit									
BE IP 17N MED/TELE	Med/Surg	Cardiac Telemetry	48.0	EPIC	1:4	1:4	1:12	1:12	1:12	N/A	N/A	N/A		1:Unit		1:Unit	1:Unit	1:Unit	
		Monitor Tech		N/A	N/A			1:Unit	1:Unit	1:Unit									
BE IP 10E/N ICU/SDU	ICU	Cardiac CCU	20.0	EPIC	1:1.5	1:1.5	1:12	1:12	1:12	N/A	N/A	N/A		1:Unit		1:Unit	1:Unit	1:Unit	
BE IP 10E/S MICU	ICU	ICU	18.0	EPIC	1:2	1:2	1:12	1:12	1:12	N/A	N/A	N/A		1:Unit		1:Unit	1:Unit	1:Unit	
BEL01 10Sw MED/SURG ICU	ICU	ICU	0.0	EPIC	Closed	Closed	Closed	Closed	Closed	Closed	Closed	Closed	Closed	Closed	Closed	N/A	Closed	Closed	
BE IP 10W/N SICU	ICU	ICU	18.0	EPIC	1:2	1:2	1:12	1:12	1:12	N/A	N/A	N/A		1:Unit		1:UNIT	1:Unit	1:Unit	
BE IP 15S SUR STEPDOWN	ICU	ICU	10.0	EPIC	1:2	1:2	1:12	1:12	1:12	N/A	N/A	N/A		1:Unit		N/A	N/A	N/A	
BE IP 11N CV	ICU	Cardiac ICU	8.0	EPIC	1:1.5	1:1.5	1:12	1:12	1:12	N/A	N/A	N/A		1:Unit		1:Unit	1:Unit	N/A	
BE IP 8N PEDIATRICS	Mat/Child	PEDS	15.0	EPIC	1:6	1:6	1:12	1:12	1:12	N/A	N/A	N/A		N/A		1:Unit	1:Unit	1:Unit	
BE IP 8S PICU	Mat/Child	PICU	7.0	EPIC	1:2	1:2	1:12	1:12	1:12	N/A	N/A	N/A		N/A		N/A	N/A	N/A	
BE IP 9E MOTHER BABY	Mat/Child	Mat/Child	22.0	EPIC	1:3	1:3	1:12	1:12	1:12	N/A	N/A	N/A		1:Unit		1:Unit	1:Unit	1:Unit	
BE IP 9N NICU	Mat/Child	NICU Lv 4	25.0	EPIC	1:1.5	1:1.5	1:12	1:12	1:12	N/A	N/A	N/A		1:Unit		1:Unit	1:Unit	1:Unit	
BE IP 8N PICU	Mat/Child	PICU SD	4.0	EPIC	Closed	Closed	Closed	Closed	Closed	Closed	Closed	Closed	Closed	Closed	Closed	N/A	Closed	Closed	
BE IPP 12S ADULT PSYCH	BH	Adult Med Psych	28.0	EPIC	1:6	1:6	3:Unit	3:Unit	3:Unit	3:Unit	3:Unit	3:Unit		1:Unit		N/A	1:Unit	1:Unit	
BE IPP 18N ADULT PSYCH	BH	Extended Care Psych	30.0	EPIC	1:7	1:7	2:Unit	2:Unit	2:Unit	3:Unit	3:Unit	3:Unit		1:Unit		N/A	1:Unit	1:Unit	
BE IPP 18S ADULT PSYCH	BH	Adult Psych	30.0	EPIC	1:7	1:7	2:Unit	2:Unit	2:Unit	3:Unit	3:Unit	3:Unit		1:Unit		N/A	1:Unit	1:Unit	
BE IPP 18W ADULT PSYCH	BH	Adult Psych	30.0	EPIC	1:7	1:7	2:Unit	2:Unit	2:Unit	3:Unit	3:Unit	3:Unit		1:Unit		N/A	1:Unit	1:Unit	
BE IPP 19N FOREN PSY	BH	Prison Psych	29.0	EPIC	1:6	1:6	3:Unit	3:Unit	3:Unit	3:Unit	3:Unit	3:Unit		1:Unit		N/A	1:Unit	1:Unit	
BE IPP 19W FOREN PSY	BH	Prison Psych	39.0	EPIC	1:6	1:6	3:Unit	3:Unit	3:Unit	3:Unit	3:Unit	3:Unit		1:Unit		N/A	1:Unit	1:Unit	
BE IPP 20E ADULT PSYCH	BH	Adult Psych	27.0	EPIC	1:7	1:7	2:Unit	2:Unit	2:Unit	3:Unit	3:Unit	3:Unit		1:Unit		N/A	1:Unit	1:Unit	
BE IPP 20N ADULT PSYCH	BH	Adult Psych	19.0	EPIC	1:7	1:7	2:Unit	2:Unit	2:Unit	3:Unit	3:Unit	3:Unit		1:Unit		N/A	1:Unit	1:Unit	
BE IPP 20W ADULT PSYCH	BH	Adult Psych	28.0	EPIC	1:7	1:7	2:Unit	2:Unit	2:Unit	3:Unit	3:Unit	3:Unit		1:Unit		N/A	1:Unit	1:Unit	
BE IPP 21N ADOL PSYCH	BH	Child Psych	15.0	EPIC	1:5	1:5	2:Unit	2:Unit	2:Unit	2:Unit	2:Unit	2:Unit		1:Unit		N/A	1:Unit	1:Unit	
BE IPP 21S PEDS PSYCH	BH	Child Psych	15.0	EPIC	1:5	1:5	2:Unit	2:Unit	2:Unit	2:Unit	2:Unit	2:Unit		1:Unit		N/A	1:Unit	1:Unit	
BE IPP 21W ADOL PSYCH	BH	Child Psych	15.0	EPIC	1:5	1:5	2:Unit	2:Unit	2:Unit	2:Unit	2:Unit	2:Unit		1:Unit		N/A	1:Unit	1:Unit	
BE IP 9S L&D	L&D	Labor and Delivery		EPIC	1:2	1:2	1:12	1:12	1:12	N/A	N/A	N/A		N/A	1:Unit	N/A	N/A	N/A	
IP EBOLA	Other		N/A	N/A	4:Unit	4:Unit	N/A	N/A	N/A	N/A	N/A	N/A		N/A	N/A	N/A	N/A	N/A	
ECT	Other		N/A	N/A	N/A	1:Unit	N/A	N/A	N/A	N/A	1:Unit	N/A		N/A	N/A	N/A	N/A	N/A	
BE IPP 1 to 1 Patient Coverage Pool	Staff Pool	1 to 1 Patient Coverage Assignments	N/A	EPIC	N/A	N/A	1:1**	1:1**	1:1**	N/A	N/A	N/A		N/A	N/A	N/A	N/A	N/A	

**Nursing Support Titles**  
 PCA  
 PCT  
 Nurse Aide  
 PSHT

**Adult Emergency Department**

		RN		Nursing Support			BHA		
		Shift 1 Ratio	Shift 2 Ratio	Shift 1 Ratio	Shift 2 Ratio	Shift 3 Ratio	Shift 1 Ratio	Shift 2 Ratio	Shift 3 Ratio
<b>Applies to All Adult Emergency Departments</b>	ESI 1	1 : 1	1 : 1	1 : 12	1 : 12	1 : 12	2: Shift	2: Shift	2: Shift
	ESI 2	1 : 2	1 : 2						
	ESI 3	1 : 5	1 : 5						
	ESI 4 + 5	1 : 8	1 : 8						

Ratio does not change based on ESI

**PEDS Emergency Department**

		RN		Nursing Support			BHA		
		Shift 1 Ratio	Shift 2 Ratio	Shift 1 Ratio	Shift 2 Ratio	Shift 3 Ratio	Shift 1 Ratio	Shift 2 Ratio	Shift 3 Ratio
<b>Applies to All PEDs Emergency Departments</b>	ESI 1	1 : 1	1 : 1	1 : 12	1 : 12	1 : 12	N/A	N/A	N/A
	ESI 2	1 : 2	1 : 2						
	ESI 3	1 : 5	1 : 5						
	ESI 4 + 5	1 : 8	1 : 8						

Ratio does not change based on ESI

**Adult Psychiatric Emergency Department**

		RN		Nursing Support			BHA/PSHT/PCA		
		Shift 1 Ratio	Shift 2 Ratio	Shift 1 Ratio	Shift 2 Ratio	Shift 3 Ratio	Shift 1 Ratio	Shift 2 Ratio	Shift 3 Ratio
		7: Shift	7: Shift	NA	NA	NA	16: Shift	16: Shift	16: Shift

**Pediatric Psychiatric Emergency Department**

		RN		Nursing Support			BHA		
		Shift 1 Ratio	Shift 2 Ratio	Shift 1 Ratio	Shift 2 Ratio	Shift 3 Ratio	Shift 1 Ratio	Shift 2 Ratio	Shift 3 Ratio
		3: Shift	3: Shift	2: Shift	2: Shift	2: Shift	2: Shift	2: Shift	2: Shift

**Nursing Support Titles**

- PCA
- PCT
- PSHT
- Nurse Aide



**Operating Room**

	RN		Surgical Tech			Nursing Support		
	Shift 1 Ratio	Shift 2 Ratio	Shift 1 Ratio	Shift 2 Ratio	Shift 3 Ratio	Shift 1 Ratio	Shift 2 Ratio	Shift 3 Ratio
Operating Room	1 : 1	1 : 1	1 : 1	1 : 1	1 : 1	N/A	N/A	N/A

Nursing Support Titles

PCA

PCT

PSHT

Nurse Aide





Depart - DOH Required	Facility Depart	Inpatient or Outpatient	Service Line	RN Shift Time (Day):	# of RN during Day Shift	RN Shift Time (Evening):	# of RN during evening shift	RN Shift Time (Night):	# of RN during night shift	LPN Shift Time (Day):	# of LPN during Day Shift	LPN Shift Time (Evening):	# of LPN during evening shift	LPN Shift Time (Night):	# of LPN during night shift	Ancillary Members Shift Time (Day):	# of Ancillary Members during Day Shift	Ancillary Members Shift Time (Evening):	# of Ancillary Members during evening shift	Ancillary Members Shift Time (Night):	# of Ancillary Members during night shift	unlicensed personnel Shift Time (Day):	# of unlicensed personnel during Day Shift	unlicensed personnel Shift Time (Evening):	# of unlicensed personnel during evening shift	unlicensed personnel Shift Time (Night):	# of unlicensed personnel during night shift	Additional Resource Support Shift Time (Day):	# of Additional Resource Support during Day Shift	Additional Resource Support Shift Time (Evening):	# of Additional Resource Support during evening shift	Additional Resource Support Shift Time (Night):	# of Additional Resource Support during night shift		
Mental Health Services O/P	METHADONE	Outpatient	Mental Health Services	7a-3:30p	5	10:30a-7p	2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	7a-3:30p	1	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
Mental Health Services O/P	ACT PROGRAM 1	Outpatient	Mental Health Services	8a-6:30p	2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
Mental Health Services O/P	CHEMICAL DEPENDENCY	Outpatient	Mental Health Services	8a-4:30p	1	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
Nuclear Medicine/Radiology	INTERVENTIONAL RADIOLOGY	Outpatient	Radiology	7a-5:30p	3	N/A	N/A	On call - 7p-7:30a	2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
Outpatient Clinics	Dermatology	Outpatient	Ambulatory Care	7a-3:30p	1	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	8a-4:30p	2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
				8a-4:30p	2																		8:30a-5p	1											
				8:30a-5p	1																			9a-5:30p	1										
				9a-5:30p	2																			10a-6:30p	1										
	Ophthalmology/Ear Nose & Throat	Outpatient	Ambulatory Care	7a-3:30p	1	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	8a-4:30p	1	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
				7:30a-4p	1																			9a-5:30p	1										
				8a-4:30p	2																														
				8:30a-5p	2																														
				9a-5:30p	2																														

Depart - DOH Required	Facility Depart	Inpatient or Outpatient	Service Line	RN Shift Time (Day):	# of RN during Day Shift	RN Shift Time (Evening):	# of RN during evening shift	RN Shift Time (Night):	# of RN during night shift	LPN Shift Time (Day):	# of LPN during Day Shift	LPN Shift Time (Evening):	# of LPN during evening shift	LPN Shift Time (Night):	# of LPN during night shift	Ancillary Members Shift Time (Day):	# of Ancillary Members during Day Shift	Ancillary Members Shift Time (Evening):	# of Ancillary Members during evening shift	Ancillary Members Shift Time (Night):	# of Ancillary Members during night shift	unlicensed personnel Shift Time (Day):	# of unlicensed personnel during Day Shift	unlicensed personnel Shift Time (Evening):	# of unlicensed personnel during evening shift	unlicensed personnel Shift Time (Night):	# of unlicensed personnel during night shift	Additional Resource Support Shift Time (Day):	# of Additional Resource Support during Day Shift	Additional Resource Support Shift Time (Evening):	# of Additional Resource Support during evening shift	Additional Resource Support Shift Time (Night):	# of Additional Resource Support during night shift				
	Medical Clinic	Outpatient	AMBULATORY CARE	8a-4:30p	1	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	8a-4:30p	2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A			
				8:30a-5p	1																	8:30a-5p	2														
				9a-5:30p	1																	9a-5:30p	3														
				9:30a-6p	1																																
	Primary Care Clinic	Outpatient	Ambulatory Care	7a-3:30p	1	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	8a-4:30p	5	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A		
				8a-4:30p	2																	8:30a-5p	11														
				8:30a-5p	14																	10:30a-7p	7														
	Surgical Clinic Adult	Outpatient	Ambulatory Care	7a-3:30p	1	N/A	N/A	N/A	N/A	9a-5:30p	1	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	7a-3:30p	1		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
				7:30a-4p	1																	7:30a-4p	3														
				8a-4:30p	3																	8a-4:30p	3														
				9a-5:30p	1																	8:30a-5p	1														
																						9a-5:30p	5														
	Virology Adult	Outpatient	Ambulatory Care	8a-4:30p	1	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	8a-4:30p	1	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
				8:30a-5p	2																	8:30a-5p	2														

Depart - DOH Required	Facility Depart	Inpatient or Outpatient	Service Line	RN Shift Time (Day):	# of RN during Day Shift	RN Shift Time (Evening):	# of RN during evening shift	RN Shift Time (Night):	# of RN during night shift	LPN Shift Time (Day):	# of LPN during Day Shift	LPN Shift Time (Evening):	# of LPN during evening shift	LPN Shift Time (Night):	# of LPN during night shift	Ancillary Members Shift Time (Day):	# of Ancillary Members during Day Shift	Ancillary Members Shift Time (Evening):	# of Ancillary Members during evening shift	Ancillary Members Shift Time (Night):	# of Ancillary Members during night shift	unlicensed personnel Shift Time (Day):	# of unlicensed personnel during Day Shift	unlicensed personnel Shift Time (Evening):	# of unlicensed personnel during evening shift	unlicensed personnel Shift Time (Night):	# of unlicensed personnel during night shift	Additional Resource Support Shift Time (Day):	# of Additional Resource Support during Day Shift	Additional Resource Support Time (Evening):	# of Additional Resource Support during evening shift	Additional Resource Support Shift Time (Night):	# of Additional Resource Support during night shift
	WTC NON-RESPONDER GRANT	Outpatient	Ambulatory Care	8:30 a-5p	2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	8a-4:30p	2	N/A	N/A	N/A	N/A	Nurse Aide - Patient Transport - 9a-3:45p	1	N/A	N/A	N/A	N/A
				9a-5:30p	2																	9a-5:30p	2										
	PEDS primary care	Outpatient	AMBULATORY CARE	8a-4:30p	2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	8a-4:30p	2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
				8:45 a-5:15p	6																	8:30a-5p	2										
				9:30 a-6p	1																	8:45a-5:15p	5										
																						9a-5:30p	3										
				8:45 a-5:15p	6																	8:30a-5p	2										
				9:30 a-6p	1																	8:45a-5:15p	5										
																						9a-5:30p	3										
	Pulmonary	Outpatient	Ambulatory Care	8:30 a-5p	2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	8:30a-5p	2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
	Stress Lab (non-invasive)	Radiology	Radiology	7:30 a-6p	3	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	7a-3:30p	1	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	CT scan	Radiology	Radiology	7:30 a-6p	6	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	7:30a-4p	2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

Depart - DOH Required	Facility Depart	Inpatient or Outpatient	Service Line	RN Shift Time (Day):	# of RN during Day Shift	RN Shift Time (Evening):	# of RN during evening shift	RN Shift Time (Night):	# of RN during night shift	LPN Shift Time (Day):	# of LPN during Day Shift	LPN Shift Time (Evening):	# of LPN during evening shift	LPN Shift Time (Night):	# of LPN during night shift	Ancillary Members Shift Time (Day):	# of Ancillary Members during Day Shift	Ancillary Members Shift Time (Evening):	# of Ancillary Members during evening shift	Ancillary Members Shift Time (Night):	# of Ancillary Members during night shift	unlicensed personnel Shift Time (Day):	# of unlicensed personnel during Day Shift	unlicensed personnel Shift Time (Evening):	# of unlicensed personnel during evening shift	unlicensed personnel Shift Time (Night):	# of unlicensed personnel during night shift	Additional Resource Support Time (Day):	# of Additional Resource Support during Day Shift	Additional Resource Support Time (Evening):	# of Additional Resource Support during evening shift	Additional Resource Support Time (Night):	# of Additional Resource Support during night shift
PACU	Peri Op	Outpatient	Peri Op	7:30 a-8p	7	10a-10:30p	1	7p-7:30a	2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	7:30a-4p	2	3p-11:30p	1	11p-7:30a	1	N/A	N/A	N/A	N/A	N/A	N/A
				9a-9:30p	3	11a-11:30p	1																										
Occupational Health Services	Ambulatory Care	Outpatient	Ambulatory Care	6a-2:30p	1	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	6a-2:30pm	2	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
				7a-3:30p	2																	7a-3:30p	2										
				8a-4:30p	4																	8a-4:40p	3										
Cardiac Rehab	Ambulatory Care	Outpatient	Cardiac Rehab	7a-3:30p	1	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	7a-3:30p	3	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A