HOSPITAL INFORMATION

Region	Metropolitan Area Regional Office
County	New York
Council	New York City
Network	MOUNT SINAI HEALTH SYSTEM
Reporting Organization	Mount Sinai Morningside
Reporting Organization Id	1469
Reporting Organization Type	Hospital (pfi)
Data Entity	Mount Sinai Morningside

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)?
5W CHILD ADOLESCENT				
PSYCH-Nursing - Adolescent				
Psych	3	2	12	5
CLARK 8 ADULT PSYCH UNIT- Nursing - Adult Psych	4	1.1	29	7
7E ICU-Nursing - Critical	4	1.1	23	/
Care	10	4	20	2
6E CCU / OPEN HEART ICU /		7	20	2
CSICU-Nursing - Critical Care				
Cardiac	11	4.89	18	1.7
4 WEST-Nursing- Cardiac			-	
Stepdown	3	3	8	3.5
10E TELE / STEP DOWN UNIT-Nursing - Telemetry				
Cardiac	7	2	28	4
9 EASTNursing - Telemetry				
Med Surg	8	2.13	30	4.5
8 WESTNursing -				
Ortho/Stepdown	4	2.29	14	4.65
8E SURGICAL UNIT - Nursing				
Surgery	8	2	32	4.65
9W MEDICAL UNIT -Nursing Med Surg	6	1.66	29	5

7W MEDICAL UNIT -Nursing				
Med Surg	7	1.75	32	5
6W MEDICAL UNIT -Nursing				
Med Surg	6	1.71	28	5
STUY 6 REHAB UNIT-				
Nursing - Rehab	3	1.6	15	5
Clark 5 - Nursing - Med				
Surg	5	1.82	22	5

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)
5W CHILD ADOLESCENT PSYCH-Nursing - Adolescent Psych	0	0
CLARK 8 ADULT PSYCH UNIT-	0	0
7E ICU-Nursing - Critical Care	0	0
6E CCU / OPEN HEART ICU / CSICU-Nursing - Critical Care Cardiac	0	0
4 WEST-Nursing- Cardiac Stepdown	0	0

10E TELE / STEP DOWN		
UNIT-Nursing - Telemetry		
Cardiac	0	0
9 EASTNursing - Telemetry		
Med Surg	0	0
8 WESTNursing -		
Ortho/Stepdown	0	0
8E SURGICAL UNIT - Nursing		
Surgery	0	0
9W MEDICAL UNIT -Nursing -		
Med Surg	0	0
7W MEDICAL UNIT -Nursing		
Med Surg	0	0
6W MEDICAL UNIT -Nursing		
Med Surg	0	0
STUY 6 REHAB UNIT-		
Nursing - Rehab	0	0
Clark 5 - Nursing - Med		
Surg	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)
5W CHILD ADOLESCENT		
PSYCH-Nursing - Adolescent		
Psych	0	0
CLARK 8 ADULT PSYCH UNIT-		
Nursing - Adult Psych	0	0

7E ICU-Nursing - Critical		
Care	0	0
6E CCU / OPEN HEART ICU /		
CSICU-Nursing - Critical Care		
Cardiac	0	0
4 WEST-Nursing- Cardiac		
Stepdown	0	0
10E TELE / STEP DOWN		
UNIT-Nursing - Telemetry		
Cardiac	0	0
9 EASTNursing - Telemetry		
Med Surg	0	0
8 WESTNursing -		
Ortho/Stepdown	0	0
8E SURGICAL UNIT - Nursing		
Surgery	0	0
9W MEDICAL UNIT -Nursing -		
Med Surg	0	0
7W MEDICAL UNIT -Nursing -		
Med Surg	0	0
6W MEDICAL UNIT -Nursing -		
Med Surg	0	0
STUY 6 REHAB UNIT-		
Nursing - Rehab	0	0
Clark 5 - Nursing - Med		
Surg	0	0

DAY SHIFT UNLICENSED STAFFING

	Planned average number	Planned total hours of
	of unlicensed personnel	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)	

5W CHILD ADOLESCENT		
PSYCH-Nursing - Adolescent		
Psych	4	2.66
CLARK 8 ADULT PSYCH UNIT-		
Nursing - Adult Psych	5	1.37
7E ICU-Nursing - Critical		
Care	2	0.8
6E CCU / OPEN HEART ICU /		
CSICU-Nursing - Critical Care		
Cardiac	2	0.89
4 WEST-Nursing- Cardiac		
Stepdown	2	2.21
10E TELE / STEP DOWN		
UNIT-Nursing - Telemetry		
Cardiac	3	1.07
9 EASTNursing - Telemetry		
Med Surg	3	1.01
8 WESTNursing -		
Ortho/Stepdown	2	1.35
8E SURGICAL UNIT - Nursing		
Surgery	3	0.96
9W MEDICAL UNIT -Nursing		
Med Surg	3	1.04
7W MEDICAL UNIT -Nursing		
Med Surg	2	0.71
6W MEDICAL UNIT -Nursing		
Med Surg	2	0.78
STUY 6 REHAB UNIT-		
Nursing - Rehab	1	0.53
Clark 5 - Nursing - Med		
Surg	2	0.73

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 description of typical	admission/discharge
	nurse, and other
patient services provided on the unit and the	• .
	registered nurses, licensed practical nurses,
unit's location in	
the hospital.	and ancillary staff.
	1 Unit Secretary. There are
	other members of the
	ancillary team that are not
	easily attributed to
	definitive work-hours whom
	support the unit on a
5W CHILD ADOLESCENT	regular basis (security, case
PSYCH-Nursing - Adolescent	managers, social workers,
Psych	physical therapists, etc)
	1 Unit Secretary / .576 FTE
	BHA / 1.7 FTE Security
	Officer.
	There are other members
	of the ancillary team that
	are not easily attributed to
	definitive work-hours whom
	support the unit on a
CLARK 8 ADULT PSYCH UNIT	regular basis (case
Nursing - Adult Psych	managers, social workers, physical therapists, etc)

2 Unit Secretary, 1 Charge Nurse (0% of this resource used for direct patient care). There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc) 2 Unit Secretary, 1 Charge Nurse (0% of this resource used for direct patient care). There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc) 1 Unit Secretary. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a		
Nurse (0% of this resource used for direct patient care). There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc) 1 Unit Secretary. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a		Nurse (0% of this resource used for direct patient care). There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical
used for direct patient care). There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc) 1 Unit Secretary. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a		,.
members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc) 1 Unit Secretary. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a		used for direct patient
attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc) 1 Unit Secretary. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a		•
the unit on a regular basis 6E CCU / OPEN HEART ICU / CSICU-Nursing - Critical Care Cardiac 1 Unit Secretary. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a		attributed to definitive
CSICU-Nursing - Critical Care Cardiac 1 Unit Secretary. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a		
Cardiac therapists, etc) 1 Unit Secretary. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a		
other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a	_	
ancillary team that are not easily attributed to definitive work-hours whom support the unit on a		1 Unit Secretary. There are
easily attributed to definitive work-hours whom support the unit on a		other members of the
definitive work-hours whom support the unit on a		•
support the unit on a		· ·
''		
I rodillar bacic (cocurity caca		• •
4 WEST-Nursing- Cardiac managers, social workers,	A WEST-Nursing- Cardiac	regular basis (security, case
Stepdown physical therapists, etc)	_	- · · · · · · · · · · · · · · · · · · ·

10E TELE / STEP DOWN UNIT-Nursing - Telemetry Cardiac	1 Unit Secretary There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc)
9 EASTNursing - Telemetry Med Surg	Unit Secretary -1 Day Shift. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc)
8 WESTNursing - Ortho/Stepdown	Unit Secretary -1 Day Shift. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc)

8E SURGICAL UNIT - Nursing Surgery	Unit Secretary -1 Day Shift. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc)
9W MEDICAL UNIT -Nursing - Med Surg	Unit Secretary -1 Day Shift. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc)
7W MEDICAL UNIT -Nursing - Med Surg	Unit Secretary -1 Day Shift. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc)

6W MEDICAL UNIT -Nursing of Med Surg	Unit Secretary -1 Day Shift. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc)
	, , ,
STUY 6 REHAB UNIT- Nursing - Rehab	Unit Secretary -1 Day shift. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc)
Clark 5 - Nursing - Med Surg	Unit Secretary -1 Day Shift. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc)

DAY SHIFT CONSENSUS INFORMATION

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Our Clinical Staffing Committee reached consensus on the clinical staffing plan for this unit:	If no, Chief Executive Officer Statement in support of clinical staffing plan for this unit:	Statement by members of clinical staffing committee selected by the general hospital administration (management members):	Statement by members of clinical staffing committee that were registered nurses, licensed practical nurses, and ancillary members of the frontline team (employee members):
		Submitted staffing plans		
		reflect knowledge, skills and		
		experiences of	Nursing/Hospital	
		hospital/nursing leadership	Management have	
		in addressing current	submitted plans which	
		clinical acuity, workflow and	constitute safe staffing and	
		unique needs of the patient	address all elements of the	
		population served. These	staffing law under	
		staffing plans are in	consideration and meets	
		accordance with elements	the clinical and emotional	
		for consideration in the	needs of our patients and	
		staffing law, national	families, operational	
5W CHILD ADOLESCENT		nursing practice standards	demands of each unit in	
PSYCH-Nursing - Adolescent		and alignment of fiscal	accordance with the	
Psych	No	responsibility.	mission of the organization.	N/A

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		Submitted staffing plans		
		reflect knowledge, skills and		
		experiences of	Nursing/Hospital	
		hospital/nursing leadership	-	
		in addressing current	submitted plans which	
		clinical acuity, workflow and	_	
		unique needs of the patient		
		population served. These	staffing law under	
		staffing plans are in	consideration and meets	
		accordance with elements	the clinical and emotional	
		for consideration in the	needs of our patients and	
		staffing law, national	families, operational	
		nursing practice standards	demands of each unit in	
CLARK 8 ADULT PSYCH UNIT-		and alignment of fiscal	accordance with the	
Nursing - Adult Psych	No	responsibility.	mission of the organization.	N/A
		Submitted staffing plans		
		reflect knowledge, skills and		
		experiences of	Nursing/Hospital	
		hospital/nursing leadership	Management have	
		in addressing current	submitted plans which	
		clinical acuity, workflow and	constitute safe staffing and	
		unique needs of the patient	address all elements of the	
		population served. These	staffing law under	
		staffing plans are in	consideration and meets	
		accordance with elements	the clinical and emotional	
		for consideration in the	needs of our patients and	
		staffing law, national	families, operational	
		nursing practice standards	demands of each unit in	
7E ICU-Nursing - Critical		and alignment of fiscal	accordance with the	
Care	No	responsibility.	mission of the organization.	N/A

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		Cultura tata al ata ffi a su al a a a		
		Submitted staffing plans		
		reflect knowledge, skills and		
		experiences of	Nursing/Hospital	
		hospital/nursing leadership	_	
		in addressing current	submitted plans which	
		clinical acuity, workflow and	_	
		unique needs of the patient		
		population served. These	staffing law under	
		staffing plans are in	consideration and meets	
		accordance with elements	the clinical and emotional	
		for consideration in the	needs of our patients and	
		staffing law, national	families, operational	
6E CCU / OPEN HEART ICU /		nursing practice standards	demands of each unit in	
CSICU-Nursing - Critical Care		and alignment of fiscal	accordance with the	
Cardiac	No	responsibility.	mission of the organization.	N/A
		Submitted staffing plans		
		reflect knowledge, skills and		
		experiences of	Nursing/Hospital	
		hospital/nursing leadership	_	
		in addressing current	submitted plans which	
		clinical acuity, workflow and	constitute safe staffing and	
		unique needs of the patient	address all elements of the	
		population served. These	staffing law under	
		staffing plans are in	consideration and meets	
		accordance with elements	the clinical and emotional	
		for consideration in the	needs of our patients and	
		staffing law, national	families, operational	
		nursing practice standards	demands of each unit in	
4 WEST-Nursing- Cardiac		and alignment of fiscal	accordance with the	
Stepdown	No	responsibility.	mission of the organization.	N/A

		Submitted staffing plans		
		reflect knowledge, skills and		
		experiences of	Nursing/Hospital	
		hospital/nursing leadership	-	
		in addressing current	submitted plans which	
		clinical acuity, workflow and	_	
		unique needs of the patient		
		population served. These	staffing law under	
		staffing plans are in	consideration and meets	
		accordance with elements	the clinical and emotional	
		for consideration in the	needs of our patients and	
		staffing law, national	families, operational	
10E TELE / STEP DOWN		nursing practice standards	demands of each unit in	
UNIT-Nursing - Telemetry		and alignment of fiscal	accordance with the	
Cardiac	No	responsibility.	mission of the organization.	N/A
		Submitted staffing plans		
		reflect knowledge, skills and		
		experiences of	Nursing/Hospital	
		hospital/nursing leadership	Management have	
		in addressing current	submitted plans which	
		clinical acuity, workflow and	constitute safe staffing and	
		unique needs of the patient	address all elements of the	
		population served. These	staffing law under	
		staffing plans are in	consideration and meets	
		accordance with elements	the clinical and emotional	
		for consideration in the	needs of our patients and	
		staffing law, national	families, operational	
		nursing practice standards	demands of each unit in	
9 EASTNursing - Telemetry		and alignment of fiscal	accordance with the	
Med Surg	No	responsibility.	mission of the organization.	N/A

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		Colouritte d'ataffin a ulana		
		Submitted staffing plans		
		reflect knowledge, skills and		
		experiences of	Nursing/Hospital	
		hospital/nursing leadership	_	
		in addressing current	submitted plans which	
		clinical acuity, workflow and	_	
		unique needs of the patient		
		population served. These	staffing law under	
		staffing plans are in	consideration and meets	
		accordance with elements	the clinical and emotional	
		for consideration in the	needs of our patients and	Union (Workforce) voted
		staffing law, national	families, operational	for staff resulting in new,
		nursing practice standards	demands of each unit in	additional allocations of
8 WESTNursing -		and alignment of fiscal	accordance with the	staff to the patient
Ortho/Stepdown	No	responsibility.	mission of the organization.	assignment.
		Submitted staffing plans		
		reflect knowledge, skills and		
		experiences of	Nursing/Hospital	
		hospital/nursing leadership	_	
		in addressing current	submitted plans which	
		clinical acuity, workflow and	_	
		unique needs of the patient		
		population served. These	staffing law under	
		staffing plans are in	consideration and meets	
		accordance with elements	the clinical and emotional	
		for consideration in the	needs of our patients and	Union (Workforce) voted
		staffing law, national	families, operational	for staff resulting in new,
		nursing practice standards	demands of each unit in	additional allocations of
8E SURGICAL UNIT - Nursing		and alignment of fiscal	accordance with the	staff to the patient
Surgery	No	responsibility.	mission of the organization.	assignment.

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		C. barren dara (Carabara		
		Submitted staffing plans		
	1	reflect knowledge, skills and		
	1	experiences of	Nursing/Hospital	
	1	hospital/nursing leadership	1	
	1	in addressing current	submitted plans which	
	1	clinical acuity, workflow and	_	
	1	unique needs of the patient		
	1	population served. These	staffing law under	
	1	staffing plans are in	consideration and meets	
	1	accordance with elements	the clinical and emotional	
	1	for consideration in the	needs of our patients and	
	1	staffing law, national	families, operational	
	1	nursing practice standards	demands of each unit in	
9W MEDICAL UNIT -Nursing	1	and alignment of fiscal	accordance with the	
Med Surg	No	responsibility.	mission of the organization.	N/A
		Submitted staffing plans		
		reflect knowledge, skills and		
		experiences of	Nursing/Hospital	
	1	hospital/nursing leadership	_	
	1	in addressing current	submitted plans which	
	1	clinical acuity, workflow and	constitute safe staffing and	
	1	unique needs of the patient	address all elements of the	
	1	population served. These	staffing law under	
	1	staffing plans are in	consideration and meets	
	1	accordance with elements	the clinical and emotional	
	1	for consideration in the	needs of our patients and	Union (Workforce) voted
		staffing law, national	families, operational	for staff resulting in new,
		nursing practice standards	demands of each unit in	additional allocations of
7W MEDICAL UNIT -Nursing -		and alignment of fiscal	accordance with the	staff to the patient
Med Surg	No	responsibility.	mission of the organization.	assignment.

	1	1	
	Submitted staffing plans		
	Submitted staffing plans reflect knowledge, skills and		
	experiences of	Nursing/Hospital	
	hospital/nursing leadership	· ·	
		1	
	in addressing current	submitted plans which	
	clinical acuity, workflow and	· ·	
	unique needs of the patient		
	population served. These	staffing law under consideration and meets	
	staffing plans are in accordance with elements	the clinical and emotional	
	for consideration in the		Linian (Mankfarea) wated
		needs of our patients and	Union (Workforce) voted
	staffing law, national	families, operational demands of each unit in	for staff resulting in new, additional allocations of
CIA/ NAEDICAL LINUT. Numering	nursing practice standards		
6W MEDICAL UNIT -Nursing	and alignment of fiscal	accordance with the	staff to the patient
Med Surg No	responsibility.	mission of the organization.	assignment.
	Submitted staffing plans		
	reflect knowledge, skills and		
	experiences of	Nursing/Hospital	
	hospital/nursing leadership	I	
	in addressing current	submitted plans which	
	clinical acuity, workflow and	· '	
	unique needs of the patient	· ·	
	population served. These	staffing law under	
	staffing plans are in	consideration and meets	
	accordance with elements	the clinical and emotional	
	for consideration in the	needs of our patients and	
	staffing law, national	families, operational	
	nursing practice standards	demands of each unit in	
STUY 6 REHAB UNIT-	and alignment of fiscal	accordance with the	
Nursing - Rehab No	responsibility.	mission of the organization.	N/A

	1			
		Submitted staffing plans		
		reflect knowledge, skills and		
		experiences of	Nursing/Hospital	
		hospital/nursing leadership	Management have	
		in addressing current	submitted plans which	
		clinical acuity, workflow and	constitute safe staffing and	
		unique needs of the patient	address all elements of the	
		population served. These	staffing law under	
		staffing plans are in	consideration and meets	
		accordance with elements	the clinical and emotional	
		for consideration in the	needs of our patients and	Union (Workforce) voted
		staffing law, national	families, operational	for staff resulting in new,
		nursing practice standards	demands of each unit in	additional allocations of
Clark 5 - Nursing - Med		and alignment of fiscal	accordance with the	staff to the patient
Surg	No	responsibility.	mission of the organization.	assignment.

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)?
5W CHILD ADOLESCENT				
PSYCH-Nursing - Adolescent		_		_
Psych	3	2	12	5
CLARK 8 ADULT PSYCH UNIT-				
Nursing - Adult Psych	4	1.1	29	7
7E ICU-Nursing - Critical				
Care	10	4	20	2
6E CCU / OPEN HEART ICU /				
CSICU-Nursing - Critical Care		4.00	40	4.7
Cardiac	11	4.89	18	1.7
4 WEST-Nursing- Cardiac Stepdown	3	3	8	3.5
10E TELE / STEP DOWN	3	3	O	J.J
UNIT-Nursing - Telemetry				
Cardiac	7	2	28	4
9 EASTNursing - Telemetry			-	
Med Surg	8	2.13	30	4.5
8 WESTNursing -				
Ortho/Stepdown	4	2.29	14	4.65
8E SURGICAL UNIT - Nursing				
Surgery	8	2	32	4.65
9W MEDICAL UNIT -Nursing				
Med Surg	6	1.66	29	5

7W MEDICAL UNIT -Nursing -				
Med Surg	7	1.75	32	5
6W MEDICAL UNIT -Nursing				
Med Surg	6	1.71	28	5
STUY 6 REHAB UNIT-				
Nursing - Rehab	3	1.6	15	5
Clark 5 - Nursing - Med				
Surg	5	1.82	22	5

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)
5W CHILD ADOLESCENT		
PSYCH-Nursing - Adolescent		
Psych	0	0
CLARK 8 ADULT PSYCH UNIT- Nursing - Adult Psych	0	0
7E ICU-Nursing - Critical Care	0	0
6E CCU / OPEN HEART ICU / CSICU-Nursing - Critical Care Cardiac	0	0
4 WEST-Nursing- Cardiac Stepdown	0	0
10E TELE / STEP DOWN UNIT-Nursing - Telemetry Cardiac	0	0
9 EASTNursing - Telemetry Med Surg	0	0

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EVENING SHIFT ANCILLARY STAFF

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Planned average number of ancillary members of the frontline team on the unit per day on the Evening Shift? (Please provide a number with up to 4 digits. Ex: 10.50)	Planned total hours of ancillary members of the frontline team including adjustment for case mix and acuity on the Evening Shift (Please provide a number with up to 4 digits. Ex: 10.50)
5W CHILD ADOLESCENT		
PSYCH-Nursing - Adolescent		
Psych	0	0
CLARK 8 ADULT PSYCH UNIT- Nursing - Adult Psych	0	0
7E ICU-Nursing - Critical		
Care	0	0
6E CCU / OPEN HEART ICU /		
CSICU-Nursing - Critical Care		
Cardiac	0	0

4 WEST-Nursing- Cardiac		
Stepdown	0	0
10E TELE / STEP DOWN		
UNIT-Nursing - Telemetry		
Cardiac	0	0
9 EASTNursing - Telemetry		
Med Surg	0	0
8 WESTNursing -		
Ortho/Stepdown	0	0
8E SURGICAL UNIT - Nursing		
Surgery	0	0
9W MEDICAL UNIT -Nursing		
Med Surg	0	0
7W MEDICAL UNIT -Nursing		
Med Surg	0	0
6W MEDICAL UNIT -Nursing		
Med Surg	0	0
STUY 6 REHAB UNIT-		
Nursing - Rehab	0	0
Clark 5 - Nursing - Med		
Surg	0	0

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)
5W CHILD ADOLESCENT		
PSYCH-Nursing - Adolescent		
Psych	4	2.66
CLARK 8 ADULT PSYCH UNIT-		
Nursing - Adult Psych	5	1.3

7E ICU-Nursing - Critical		
Care	2	0.8
6E CCU / OPEN HEART ICU /		
CSICU-Nursing - Critical Care		
Cardiac	2	0.89
4 WEST-Nursing- Cardiac		
Stepdown	2	2.21
10E TELE / STEP DOWN		
UNIT-Nursing - Telemetry		
Cardiac	3	1.07
9 EASTNursing - Telemetry		
Med Surg	3	1.01
8 WESTNursing -		
Ortho/Stepdown	2	1.35
8E SURGICAL UNIT - Nursing		
Surgery	3	0.96
9W MEDICAL UNIT -Nursing		
Med Surg	2	0.76
7W MEDICAL UNIT -Nursing		
Med Surg	2	0.71
6W MEDICAL UNIT -Nursing		
Med Surg	2	0.78
STUY 6 REHAB UNIT-		
Nursing - Rehab	1	0.53
Clark 5 - Nursing - Med		
Surg	2	0.73

EVENING SHIFT ADDITIONAL RESOURCES

	Description of additional
	resources available to
	support unit level
	patient care on the
	Evening Shift. These
	resources include but are
	not limited to unit
Provide a description of	clerical 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.
	1 Unit Secretary. There are
	other members of the
	ancillary team that are not
	easily attributed to
	definitive work-hours whom
	support the unit on a
5W CHILD ADOLESCENT	regular basis (security, case
PSYCH-Nursing - Adolescent	managers, social workers,
Psych	physical therapists, etc)
	1 Unit Secretary / .576 FTE
	BHA / 1.7 FTE Security
	Officer.
	There are other members
	of the ancillary team that
	are not easily attributed to
	definitive work-hours whom
	support the unit on a
	regular basis (case
CLARK 8 ADULT PSYCH UNIT	,
Nursing - Adult Psych	physical therapists, etc)

7E ICU-Nursing - Critical Care	2 Unit Secretary, 1 Charge Nurse (0% of this resource used for direct patient care)
6E CCU / OPEN HEART ICU / CSICU-Nursing - Critical Care Cardiac	2 Unit Secretary, 1 Charge Nurse (0% of this resource used for direct patient care). There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc)
4 WEST-Nursing- Cardiac Stepdown	1 Unit Secretary. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc)
10E TELE / STEP DOWN UNIT-Nursing - Telemetry Cardiac	1 Unit Secretary. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc)

9 EASTNursing - Telemetry Med Surg	Unit Secretary -1 Evening Shift. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc)
8 WESTNursing - Ortho/Stepdown	Unit Secretary -1 Evening Shift. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc)
8E SURGICAL UNIT - Nursing Surgery	Unit Secretary -1 Evening Shift. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc)

Unit Secretary -1 Evening Shift. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc)
, , ,
Unit Secretary -1 Evening Shift. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc)
Unit Secretary -1 Evening Shift. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc)

STUY 6 REHAB UNIT- Nursing - Rehab	Unit Secretary -1 Evening shift. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc)
Clark 5 - Nursing - Med Surg	Unit Secretary -1 Evening Shift. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc)

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):

		Submitted staffing plans		
		reflect knowledge, skills and		
		experiences of	Nursing/Hospital	
		hospital/nursing leadership	_	
		in addressing current	submitted plans which	
		clinical acuity, workflow and	_	
		unique needs of the patient	address all elements of the	
		population served. These	staffing law under	
		staffing plans are in	consideration and meets	
		accordance with elements	the clinical and emotional	
		for consideration in the	needs of our patients and	
		staffing law, national	families, operational	
5W CHILD ADOLESCENT		nursing practice standards	demands of each unit in	
PSYCH-Nursing - Adolescent		and alignment of fiscal	accordance with the	
Psych	No	responsibility.	mission of the organization.	
		Submitted staffing plans		
		reflect knowledge, skills and		
		experiences of	Nursing/Hospital	
		hospital/nursing leadership	Management have	
		in addressing current	submitted plans which	
		clinical acuity, workflow and	constitute safe staffing and	
		unique needs of the patient	address all elements of the	
		population served. These	staffing law under	
		staffing plans are in	consideration and meets	
		accordance with elements	the clinical and emotional	
		for consideration in the	needs of our patients and	
		staffing law, national	families, operational	
		nursing practice standards	demands of each unit in	
CLARK 8 ADULT PSYCH UNIT-		and alignment of fiscal	accordance with the	
Nursing - Adult Psych	No	responsibility.	mission of the organization.	

		Submitted staffing plans	
		reflect knowledge, skills and	
		experiences of	Nursing/Hospital
		hospital/nursing leadership	
		in addressing current	submitted plans which
		clinical acuity, workflow and	_
		unique needs of the patient	
		population served. These	staffing law under
		staffing plans are in	consideration and meets
		accordance with elements	the clinical and emotional
		for consideration in the	needs of our patients and
		staffing law, national	families, operational
		nursing practice standards	demands of each unit in
7E ICU-Nursing - Critical		and alignment of fiscal	accordance with the
Care	No	responsibility.	mission of the organization.
		Submitted staffing plans	
		reflect knowledge, skills and	
		experiences of	Nursing/Hospital
		hospital/nursing leadership	Management have
		in addressing current	submitted plans which
		clinical acuity, workflow and	constitute safe staffing and
		unique needs of the patient	address all elements of the
		population served. These	staffing law under
		staffing plans are in	consideration and meets
		accordance with elements	the clinical and emotional
		for consideration in the	needs of our patients and
		staffing law, national	families, operational
6E CCU / OPEN HEART ICU /		nursing practice standards	demands of each unit in
CSICU-Nursing - Critical Care		and alignment of fiscal	accordance with the
Cardiac	No	responsibility.	mission of the organization.

	Ī	1		
		Submitted staffing plans		
		Submitted staffing plans reflect knowledge, skills and		
		experiences of		
		· '	Nursing/Hospital	
		hospital/nursing leadership	_	
		in addressing current	submitted plans which	
		clinical acuity, workflow and	_	
		unique needs of the patient		
		population served. These	staffing law under	
		staffing plans are in	consideration and meets	
		accordance with elements	the clinical and emotional	
		for consideration in the	needs of our patients and	
		staffing law, national	families, operational	
		nursing practice standards	demands of each unit in	
4 WEST-Nursing- Cardiac		and alignment of fiscal	accordance with the	
Stepdown	No	responsibility.	mission of the organization.	
		Submitted staffing plans		
		reflect knowledge, skills and		
		experiences of	Nursing/Hospital	
		hospital/nursing leadership	Management have	
		in addressing current	submitted plans which	
		clinical acuity, workflow and	constitute safe staffing and	
		unique needs of the patient	address all elements of the	
		population served. These	staffing law under	
		staffing plans are in	consideration and meets	
		accordance with elements	the clinical and emotional	
		for consideration in the	needs of our patients and	
		staffing law, national	families, operational	
10E TELE / STEP DOWN		nursing practice standards	demands of each unit in	
UNIT-Nursing - Telemetry		and alignment of fiscal	accordance with the	
Cardiac	No	responsibility.	mission of the organization.	

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		Cubmitted staffing plans		
		Submitted staffing plans reflect knowledge, skills and		
		<u> </u>		
		experiences of	Nursing/Hospital	
		hospital/nursing leadership	_	
		in addressing current	submitted plans which	
		clinical acuity, workflow and	_	
		unique needs of the patient		
		population served. These	staffing law under	
		staffing plans are in	consideration and meets	
		accordance with elements	the clinical and emotional	
		for consideration in the	needs of our patients and	
		staffing law, national	families, operational	
		nursing practice standards	demands of each unit in	
9 EASTNursing - Telemetry		and alignment of fiscal	accordance with the	
Med Surg	No	responsibility.	mission of the organization.	
		Submitted staffing plans		
		reflect knowledge, skills and		
		experiences of	Nursing/Hospital	
		hospital/nursing leadership	_	
		in addressing current	submitted plans which	
		clinical acuity, workflow and	_	
		unique needs of the patient		
		population served. These	staffing law under	
		staffing plans are in	consideration and meets	
		accordance with elements	the clinical and emotional	
		for consideration in the	needs of our patients and	
		staffing law, national	families, operational	
		nursing practice standards	demands of each unit in	
8 WESTNursing -		and alignment of fiscal	accordance with the	
Ortho/Stepdown	No	responsibility.	mission of the organization.	

		C. barrella de Minerale de		
		Submitted staffing plans		
		reflect knowledge, skills and		
		experiences of	Nursing/Hospital	
		hospital/nursing leadership	_	
		in addressing current	submitted plans which	
		clinical acuity, workflow and	_	
		unique needs of the patient		
		population served. These	staffing law under	
		staffing plans are in	consideration and meets	
		accordance with elements	the clinical and emotional	
		for consideration in the	needs of our patients and	
		staffing law, national	families, operational	
		nursing practice standards	demands of each unit in	
8E SURGICAL UNIT - Nursing		and alignment of fiscal	accordance with the	
Surgery	No	responsibility.	mission of the organization.	
		Submitted staffing plans		
		reflect knowledge, skills and		
		experiences of	Nursing/Hospital	
		hospital/nursing leadership	Management have	
		in addressing current	submitted plans which	
		clinical acuity, workflow and	constitute safe staffing and	
		unique needs of the patient	address all elements of the	
		population served. These	staffing law under	
		staffing plans are in	consideration and meets	
		accordance with elements	the clinical and emotional	
		for consideration in the	needs of our patients and	
		staffing law, national	families, operational	
		nursing practice standards	demands of each unit in	
9W MEDICAL UNIT -Nursing		and alignment of fiscal	accordance with the	
Med Surg	No	responsibility.	mission of the organization.	

		Submitted staffing plans		
		reflect knowledge, skills and		
		experiences of	Nursing/Hospital	
		hospital/nursing leadership		
		in addressing current	submitted plans which	
		clinical acuity, workflow and	•	
		unique needs of the patient	_	
		population served. These	staffing law under	
		staffing plans are in	consideration and meets	
		accordance with elements	the clinical and emotional	
		for consideration in the	needs of our patients and	
		staffing law, national	families, operational	
		nursing practice standards	demands of each unit in	
7W MEDICAL UNIT -Nursing		and alignment of fiscal	accordance with the	
Med Surg	No	responsibility.	mission of the organization.	
		, ,	, and the second	
		Submitted staffing plans		
		reflect knowledge, skills and		
		experiences of	Nursing/Hospital	
		hospital/nursing leadership	Management have	
		in addressing current	submitted plans which	
		clinical acuity, workflow and	constitute safe staffing and	
		unique needs of the patient	address all elements of the	
		population served. These	staffing law under	
		staffing plans are in	consideration and meets	
		accordance with elements	the clinical and emotional	
		for consideration in the	needs of our patients and	
		staffing law, national	families, operational	
		nursing practice standards	demands of each unit in	
6W MEDICAL UNIT -Nursing		and alignment of fiscal	accordance with the	
Med Surg	No	responsibility.	mission of the organization.	

		Submitted staffing plans		
		reflect knowledge, skills and		
		experiences of	Nursing/Hospital	
		hospital/nursing leadership	_	
		in addressing current	submitted plans which	
		clinical acuity, workflow and	_	
		unique needs of the patient	address all elements of the	
		population served. These	staffing law under	
		staffing plans are in	consideration and meets	
		accordance with elements	the clinical and emotional	
		for consideration in the	needs of our patients and	
		staffing law, national	families, operational	
		nursing practice standards	demands of each unit in	
STUY 6 REHAB UNIT-		and alignment of fiscal	accordance with the	
Nursing - Rehab	No	responsibility.	mission of the organization.	
		Submitted staffing plans		
		reflect knowledge, skills and		
		experiences of	Nursing/Hospital	
		hospital/nursing leadership	Management have	
		in addressing current	submitted plans which	
		clinical acuity, workflow and	constitute safe staffing and	
		unique needs of the patient	address all elements of the	
		population served. These	staffing law under	
		staffing plans are in	consideration and meets	
		accordance with elements	the clinical and emotional	
		for consideration in the	needs of our patients and	
		staffing law, national	families, operational	
		nursing practice standards	demands of each unit in	
Clark 5 - Nursing - Med		and alignment of fiscal	accordance with the	
Surg	No	responsibility.	mission of the organization.	

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Planned average number of Registered Nurses (RN) on the unit providing direct patient care per day on the Night Shift? (Please provide a number with up to 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)?
5W CHILD ADOLESCENT			,	
PSYCH-Nursing - Adolescent Psych	3	2	12	5
CLARK 8 ADULT PSYCH UNIT- Nursing - Adult Psych	4	1.1	29	7
7E ICU-Nursing - Critical		_		
Care	10	4	20	2
6E CCU / OPEN HEART ICU / CSICU-Nursing - Critical Care				
Cardiac	11	4.89	18	1.7
4 WEST-Nursing- Cardiac Stepdown	3	3	8	3.5
10E TELE / STEP DOWN UNIT-Nursing - Telemetry Cardiac	7	2	28	4
9 EASTNursing - Telemetry	,			'
Med Surg	8	2.13	30	4.5
8 WESTNursing -				
Ortho/Stepdown	4	2.29	14	4.65
8E SURGICAL UNIT - Nursing Surgery	8	2	32	4.65
9W MEDICAL UNIT -Nursing		4.00	20	_
Med Surg	6	1.66	29	5
7W MEDICAL UNIT -Nursing - Med Surg	7	1.75	32	5

6W MEDICAL UNIT -Nursing				
Med Surg	6	1.71	28	5
STUY 6 REHAB UNIT-				
Nursing - Rehab	3	1.6	15	5
Clark 5 - Nursing - Med				
Surg	5	1.82	22	5

LPN NIGHT 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	Planned average number of Licensed Practical Nurses (LPN) on the unit providing direct patient care per day on the Night Shift? (Please provide a number with up to 4	Planned total hours of LPN care per patient including adjustment for case mix and acuity on the Night Shift (Please provide a number with
the hospital.	digits. Ex: 10.50)	up to 4 digits. Ex: 10.50)
5W CHILD ADOLESCENT PSYCH-Nursing - Adolescent		
Psych	0	0
CLARK 8 ADULT PSYCH UNIT- Nursing - Adult Psych	0	0
7E ICU-Nursing - Critical		
Care	0	0
6E CCU / OPEN HEART ICU / CSICU-Nursing - Critical Care		
Cardiac	0	0
4 WEST-Nursing- Cardiac Stepdown	0	0
10E TELE / STEP DOWN UNIT-Nursing - Telemetry		
Cardiac	0	0
9 EASTNursing - Telemetry Med Surg	0	0
8 WESTNursing - Ortho/Stepdown	0	0

8E SURGICAL UNIT - Nursing		
Surgery	0	0
9W MEDICAL UNIT -Nursing		
Med Surg	0	0
7W MEDICAL UNIT -Nursing		
Med Surg	0	0
6W MEDICAL UNIT -Nursing		
Med Surg	0	0
STUY 6 REHAB UNIT-		
Nursing - Rehab	0	0
Clark 5 - Nursing - Med		
Surg	0	0

NIGHT SHIFT ANCILLARY STAFF

NIGHT SHIFT ANCILLARY STA	ГГ	
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)
5W CHILD ADOLESCENT	-	-
PSYCH-Nursing - Adolescent		
Psych	0	0
CLARK 8 ADULT PSYCH UNIT- Nursing - Adult Psych	0	0
7E ICU-Nursing - Critical		
Care	0	0
6E CCU / OPEN HEART ICU /		
CSICU-Nursing - Critical Care		
Cardiac	0	0
4 WEST-Nursing- Cardiac		
Stepdown	0	0

0	0
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	0 0 0 0 0

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)
5W CHILD ADOLESCENT PSYCH-Nursing - Adolescent Psych	4	2
,	·	2
CLARK 8 ADULT PSYCH UNIT- Nursing - Adult Psych	5	0.83
7E ICU-Nursing - Critical	3	0.83
Care	2	0.8

6E CCU / OPEN HEART ICU /		
CSICU-Nursing - Critical Care		
Cardiac	2	0.89
4 WEST-Nursing- Cardiac	2	0.03
Stepdown	2	2.21
10E TELE / STEP DOWN	2	2.21
UNIT-Nursing - Telemetry		
= -	2	1.07
	3	1.07
= -		4.04
	3	1.01
_		
Ortho/Stepdown	2	1.35
8E SURGICAL UNIT - Nursing		
Surgery	3	0.96
9W MEDICAL UNIT -Nursing		
Med Surg	2	0.76
7W MEDICAL UNIT -Nursing		
Med Surg	2	0.71
6W MEDICAL UNIT -Nursing		
Med Surg	2	0.78
STUY 6 REHAB UNIT-		
Nursing - Rehab	1	0.53
Clark 5 - Nursing - Med		
Surg	2	0.73
Surgery 9W MEDICAL UNIT -Nursing - Med Surg 7W MEDICAL UNIT -Nursing - Med Surg 6W MEDICAL UNIT -Nursing - Med Surg STUY 6 REHAB UNIT- Nursing - Rehab Clark 5 - Nursing - Med	3 2 2 2 1	0.96 0.76 0.71 0.78 0.53

NIGHT SHIFT ADDITIONAL RESOURCES

	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
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.
	0 Unit Secretary. There are
	other members of the
	ancillary team that are not
	easily attributed to
	definitive work-hours whom
	support the unit on a
5W CHILD ADOLESCENT	regular basis (security, case
PSYCH-Nursing - Adolescent	managers, social workers,
Psych	physical therapists, etc)
	0 Unit Secretary / .576 FTE
	BHA / 1.7 FTE Security
	Officer.
	There are other members
	of the ancillary team that
	are not easily attributed to
	definitive work-hours whom
	support the unit on a
CLARK GARLIET BOYOU AND	regular basis (case
CLARK 8 ADULT PSYCH UNIT	
Nursing - Adult Psych	physical therapists, etc)

7E ICU-Nursing - Critical Care	1 Unit Secretary, 1 Charge Nurse (0% of this resource used for direct patient care). There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc)
6E CCU / OPEN HEART ICU / CSICU-Nursing - Critical Care Cardiac	1 Unit Secretary, 1 Charge Nurse (0% of this resource used for direct patient care). There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc)
4 WEST-Nursing- Cardiac Stepdown	1 Unit Secretary. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc)

10E TELE / STEP DOWN UNIT-Nursing - Telemetry Cardiac	.5 Unit Secretary. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc)
9 EASTNursing - Telemetry Med Surg	1 Unit Secretary. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc)
8 WESTNursing - Ortho/Stepdown	Unit Secretary -0 Night Shift. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc)

8E SURGICAL UNIT - Nursing Surgery	Unit Secretary -0 Night Shift. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc)
9W MEDICAL UNIT -Nursing - Med Surg	Unit Secretary -0 Night Shift. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc)
7W MEDICAL UNIT -Nursing -	Unit Secretary -0 Night Shift. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc)

6W MEDICAL UNIT -Nursing - Med Surg	Unit Secretary -0 Night Shift. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc)
	, , ,
STUY 6 REHAB UNIT- Nursing - Rehab	Unit Secretary -0 Night shift. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc)
Clark 5 - Nursing - Med Surg	Unit Secretary -0 Night Shift. There are other members of the ancillary team that are not easily attributed to definitive work-hours whom support the unit on a regular basis (security, case managers, social workers, physical therapists, etc)

NIGHT SHIFT CONSENSUS INFORMATION

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Our Clinical Staffing Committee reached consensus on the clinical staffing plan for this unit:	If no, Chief Executive Officer Statement in support of clinical staffing plan for this unit:	Statement by members of clinical staffing committee selected by the general hospital administration (management members):	Statement by members of clinical staffing committee that were registered nurses, licensed practical nurses, and ancillary members of the frontline team (employee members):
		Submitted staffing plans		
		reflect knowledge, skills and		
		experiences of	Nursing/Hospital	
		hospital/nursing leadership	Management have	
		in addressing current	submitted plans which	
		clinical acuity, workflow and	constitute safe staffing and	
		unique needs of the patient	address all elements of the	
		population served. These	staffing law under	
		staffing plans are in	consideration and meets	
		accordance with elements	the clinical and emotional	
		for consideration in the	needs of our patients and	
		staffing law, national	families, operational	
5W CHILD ADOLESCENT		nursing practice standards	demands of each unit in	
PSYCH-Nursing - Adolescent		and alignment of fiscal	accordance with the	
Psych	No	responsibility.	mission of the organization.	N/A

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		Submitted staffing plans		
		reflect knowledge, skills and		
		experiences of	Nursing/Hospital	
		hospital/nursing leadership	_	
		in addressing current	submitted plans which	
		clinical acuity, workflow and	_	
		unique needs of the patient	address all elements of the	
		population served. These	staffing law under	
		staffing plans are in	consideration and meets	
		accordance with elements	the clinical and emotional	
		for consideration in the	needs of our patients and	
		staffing law, national	families, operational	
		nursing practice standards	demands of each unit in	
CLARK 8 ADULT PSYCH UNIT-		and alignment of fiscal	accordance with the	
Nursing - Adult Psych	No	responsibility.	mission of the organization.	N/A
		Submitted staffing plans		
		reflect knowledge, skills and		
		experiences of	Nursing/Hospital	
		hospital/nursing leadership	Management have	
		in addressing current	submitted plans which	
		clinical acuity, workflow and	constitute safe staffing and	
		unique needs of the patient	address all elements of the	
		population served. These	staffing law under	
		staffing plans are in	consideration and meets	
		accordance with elements	the clinical and emotional	
		for consideration in the	needs of our patients and	
		staffing law, national	families, operational	
		nursing practice standards	demands of each unit in	
7E ICU-Nursing - Critical		and alignment of fiscal	accordance with the	
Care	No	responsibility.	mission of the organization.	N/A

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		Culturalists of attaffing values		
		Submitted staffing plans		
		reflect knowledge, skills and		
		experiences of	Nursing/Hospital	
		hospital/nursing leadership	_	
		in addressing current	submitted plans which	
		clinical acuity, workflow and	_	
		unique needs of the patient		
		population served. These	staffing law under	
		staffing plans are in	consideration and meets	
		accordance with elements	the clinical and emotional	
		for consideration in the	needs of our patients and	
		staffing law, national	families, operational	
6E CCU / OPEN HEART ICU /		nursing practice standards	demands of each unit in	
CSICU-Nursing - Critical Care		and alignment of fiscal	accordance with the	
Cardiac	No	responsibility.	mission of the organization.	N/A
		Submitted staffing plans		
		reflect knowledge, skills and		
		experiences of	Nursing/Hospital	
		hospital/nursing leadership	Management have	
		in addressing current	submitted plans which	
		clinical acuity, workflow and	constitute safe staffing and	
		unique needs of the patient	address all elements of the	
		population served. These	staffing law under	
		staffing plans are in	consideration and meets	
		accordance with elements	the clinical and emotional	
		for consideration in the	needs of our patients and	
		staffing law, national	families, operational	
		nursing practice standards	demands of each unit in	
4 WEST-Nursing- Cardiac		and alignment of fiscal	accordance with the	
Stepdown	No	responsibility.	mission of the organization.	N/A

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		College tax and at a CC and a large		
		Submitted staffing plans		
		reflect knowledge, skills and		
		experiences of	Nursing/Hospital	
		hospital/nursing leadership	-	
		in addressing current	submitted plans which	
		clinical acuity, workflow and	_	
		unique needs of the patient		
		population served. These	staffing law under	
		staffing plans are in	consideration and meets	
		accordance with elements	the clinical and emotional	
		for consideration in the	needs of our patients and	
		staffing law, national	families, operational	
10E TELE / STEP DOWN		nursing practice standards	demands of each unit in	
UNIT-Nursing - Telemetry		and alignment of fiscal	accordance with the	
Cardiac	No	responsibility.	mission of the organization.	N/A
		Submitted staffing plans		
		reflect knowledge, skills and		
		experiences of	Nursing/Hospital	
		hospital/nursing leadership	_	
		in addressing current	submitted plans which	
		clinical acuity, workflow and	_	
		unique needs of the patient	address all elements of the	
		population served. These	staffing law under	
		staffing plans are in	consideration and meets	
		accordance with elements	the clinical and emotional	
		for consideration in the	needs of our patients and	
		staffing law, national	families, operational	
		nursing practice standards	demands of each unit in	
9 EASTNursing - Telemetry		and alignment of fiscal	accordance with the	
Med Surg	No	responsibility.	mission of the organization.	N/A

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		Colouritte d'ataffin a ulana		
		Submitted staffing plans		
		reflect knowledge, skills and		
		experiences of	Nursing/Hospital	
		hospital/nursing leadership	_	
		in addressing current	submitted plans which	
		clinical acuity, workflow and	_	
		unique needs of the patient		
		population served. These	staffing law under	
		staffing plans are in	consideration and meets	
		accordance with elements	the clinical and emotional	
		for consideration in the	needs of our patients and	Union (Workforce) voted
		staffing law, national	families, operational	for staff resulting in new,
		nursing practice standards	demands of each unit in	additional allocations of
8 WESTNursing -		and alignment of fiscal	accordance with the	staff to the patient
Ortho/Stepdown	No	responsibility.	mission of the organization.	assignment.
		Submitted staffing plans		
		reflect knowledge, skills and		
		experiences of	Nursing/Hospital	
		hospital/nursing leadership	_	
		in addressing current	submitted plans which	
		clinical acuity, workflow and	_	
		unique needs of the patient		
		population served. These	staffing law under	
		staffing plans are in	consideration and meets	
		accordance with elements	the clinical and emotional	
		for consideration in the	needs of our patients and	Union (Workforce) voted
		staffing law, national	families, operational	for staff resulting in new,
		nursing practice standards	demands of each unit in	additional allocations of
8E SURGICAL UNIT - Nursing		and alignment of fiscal	accordance with the	staff to the patient
Surgery	No	responsibility.	mission of the organization.	assignment.

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		C. barren data (Charaltan		
		Submitted staffing plans		
	1	reflect knowledge, skills and		
	1	experiences of	Nursing/Hospital	
	1	hospital/nursing leadership	_	
	1	in addressing current	submitted plans which	
	1	clinical acuity, workflow and	_	
	1	unique needs of the patient		
	1	population served. These	staffing law under	
	1	staffing plans are in	consideration and meets	
	1	accordance with elements	the clinical and emotional	
	1	for consideration in the	needs of our patients and	
	1	staffing law, national	families, operational	
	1	nursing practice standards	demands of each unit in	
9W MEDICAL UNIT -Nursing	1	and alignment of fiscal	accordance with the	
Med Surg	No	responsibility.	mission of the organization.	N/A
		Submitted staffing plans		
		reflect knowledge, skills and		
		experiences of	Nursing/Hospital	
	1	hospital/nursing leadership	_	
	1	in addressing current	submitted plans which	
	1	clinical acuity, workflow and	constitute safe staffing and	
	1	unique needs of the patient	address all elements of the	
	1	population served. These	staffing law under	
	1	staffing plans are in	consideration and meets	
	1	accordance with elements	the clinical and emotional	
	1	for consideration in the	needs of our patients and	Union (Workforce) voted
		staffing law, national	families, operational	for staff resulting in new,
		nursing practice standards	demands of each unit in	additional allocations of
7W MEDICAL UNIT -Nursing -		and alignment of fiscal	accordance with the	staff to the patient
Med Surg	No	responsibility.	mission of the organization.	assignment.

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	Cubmitted staffing plans		
	Submitted staffing plans reflect knowledge, skills and		
	experiences of	Nursing/Hospital	
	hospital/nursing leadership		
	_ · · · · ·	_	
	in addressing current	submitted plans which	
	clinical acuity, workflow and	_	
	unique needs of the patient		
	population served. These	staffing law under consideration and meets	
	staffing plans are in accordance with elements	the clinical and emotional	
	for consideration in the		Union (Markforce) voted
		needs of our patients and	Union (Workforce) voted
	staffing law, national	families, operational demands of each unit in	for staff resulting in new, additional allocations of
CM/ NAFRICAL LINUT Numering	nursing practice standards		
6W MEDICAL UNIT -Nursing	and alignment of fiscal	accordance with the	staff to the patient
Med Surg No	responsibility.	mission of the organization.	assignment.
	Submitted staffing plans		
	reflect knowledge, skills and		
	experiences of	Nursing/Hospital	
	hospital/nursing leadership		
	in addressing current	submitted plans which	
	clinical acuity, workflow and	· ·	
	unique needs of the patient	_	
	population served. These	staffing law under	
	staffing plans are in	consideration and meets	
	accordance with elements	the clinical and emotional	
	for consideration in the	needs of our patients and	
	staffing law, national	families, operational	
	nursing practice standards	demands of each unit in	
STUY 6 REHAB UNIT-	and alignment of fiscal	accordance with the	
Nursing - Rehab No	responsibility.	mission of the organization.	N/A

	1			
		Submitted staffing plans		
		reflect knowledge, skills and		
		experiences of	Nursing/Hospital	
		hospital/nursing leadership	Management have	
		in addressing current	submitted plans which	
		clinical acuity, workflow and	constitute safe staffing and	
		unique needs of the patient	address all elements of the	
		population served. These	staffing law under	
		staffing plans are in	consideration and meets	
		accordance with elements	the clinical and emotional	
		for consideration in the	needs of our patients and	Union (Workforce) voted
		staffing law, national	families, operational	for staff resulting in new,
		nursing practice standards	demands of each unit in	additional allocations of
Clark 5 - Nursing - Med		and alignment of fiscal	accordance with the	staff to the patient
Surg	No	responsibility.	mission of the organization.	assignment.

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	12/31/20
date:	25 12:00
	AM
The number of hospital employees	
represented by New York State Nurses	
Association is:	797
Our general hospital's collective	09/30/20
bargaining agreement with SEIU 1199	26 12:00
expires on the following date:	AM

