

HOSPITAL INFORMATION

Region	Capital District Regional Office
County	Franklin
Council	North Country
Network	
Reporting Organization	The University of Vermont Health Network -Alice Hyde Medical Center
Reporting Organization Id	15485
Reporting Organization Type	Hospital (pfi)
Data Entity	The University of Vermont Health Network -Alice Hyde Medical Center

RN DAY SHIFT STAFFING

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Planned average number of Registered Nurses (RN) on the unit providing direct patient care per day on the Day Shift? (Please provide a number with up to 5 digits. Ex: 101.50)	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 5 digits. Ex: 101.50)	Planned average number of patients on the unit per day on the Day Shift? (Please provide a number with up to 5 digits. Ex: 101.50)	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 5 digits. Ex: 101.50) ?
Emergency Department	2.5	1.42	14	5.6
Endoscopy	1	0.5	16	16
ASU	4	1.6	20	5
Medical Oncology Cancer Center, Infusion Center	5	1.33	30	6
GI	0	0	20	0
Pain Management	0	0	15	0
Pediatrics	1	0.26	30	15
Orthopedics	0	0	20	0
Urology	1	0.53	30	15
Women's Health	1	0.32	25	25
Endocrinology	0	0	20	0
Cardiology	0	0	30	0
Walk In Clinic	0	0	20	0
Medical Practices 5- Primary Care	0	0	15	0
Medical Practices 3- Primary Care	0	0	45	0
Medical Practices 2	0	0	40	0
Medical Practices 1 - Primary Care	0	0	20	0
Intermediate Care Unit	1	4	2	2
Medical Floor	4	1.6	20	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 5 digits. Ex: 101.50)	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 5 digits. Ex: 101.50)
Emergency Department	0	0
Endoscopy	1	0.5
ASU	1	0.4
Medical Oncology Cancer Center, Infusion Center	0	0
GI	1	0.4
Pain Management	1	0.53
Pediatrics	2.5	0.66
Orthopedics	2	0.8
Urology	1	0.53
Women's Health	2	0.64
Endocrinology	2	0.8
Cardiology	2	0.53
Walk In Clinic	3	1.2
Medical Practices 5- Primary Care	1	1.06
Medical Practices 3- Primary Care	4	0.71
Medical Practices 2	2	0.4
Medical Practices 1 - Primary Care	2	0.8
Intermediate Care Unit	0	0
Medical Floor	0	0

DAY SHIFT ANCILLARY STAFF

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Planned average number of ancillary members of the frontline team on the unit per day on the Day Shift? (Please provide a number with up to 5 digits. Ex: 101.50)	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 5 digits. Ex: 101.50)
Emergency Department	2	16
Endoscopy	0	0
ASU	2	16
Medical Oncology Cancer Center, Infusion Center	2	16
GI	0	0
Pain Management	0	0
Pediatrics	0	0
Orthopedics	0	0
Urology	0	0
Women's Health	0	0
Endocrinology	0	0
Cardiology	0	0
Walk In Clinic	0	0
Medical Practices 5- Primary Care	0	0
Medical Practices 3- Primary Care	0	0
Medical Practices 2	1	8
Medical Practices 1 - Primary Care	0	0
Intermediate Care Unit	1	4
Medical Floor	3	20

DAY 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 (e.g., patient care technicians) on the unit providing direct patient care per day on the Day Shift? (Please provide a number with up to 5 digits. Ex: 101.50)	Planned total hours of unlicensed personnel care per patient including adjustment for case mix and acuity on the Day Shift (Please provide a number with up to 5 digits. Ex: 101.50)
Emergency Department	1.5	0.85
Endoscopy	0	0
ASU	0	0
Medical Oncology Cancer Center, Infusion Center	1.5	0.4
GI	1	0.4
Pain Management	1	0.53
Pediatrics	1	0.26
Orthopedics	2	0.8
Urology	1	0.26
Women's Health	2	0.64
Endocrinology	1	0.4
Cardiology	2	0.53
Walk In Clinic	2	0.8
Medical Practices 5- Primary Care	1	1.06
Medical Practices 3- Primary Care	3	0.53
Medical Practices 2	2	0.4
Medical Practices 1 - Primary Care	1	0.4
Intermediate Care Unit	0	0
Medical Floor	3	24

DAY SHIFT ADDITIONAL RESOURCES

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Description of additional resources available to support unit level patient care on the Day Shift. These resources include but are not limited to unit clerical staff, admission/discharge nurse, and other coverage provided to registered nurses, licensed practical nurses, and ancillary staff.
Emergency Department	Department Manager, lab, radiology tech, registrar, unit clerk
Endoscopy	Department Manager / RNFA
ASU	Unit Secretary, Department Manager/RNFA
Medical Oncology Cancer Center, Infusion Center	Office Manager, Radiation Therapist, Physicist
GI	Office Manager
Pain Management	Office Manager
Pediatrics	Office Manager
Orthopedics	Office Manager
Urology	Office Manager
Women's Health	Office Manager
Endocrinology	Office Manager
Cardiology	Office Manager
Walk In Clinic	Office Manager
Medical Practices 5- Primary Care	Office Manager
Medical Practices 3- Primary Care	Office Manager

Medical Practices 2	Office Manager and Medical Home RN
Medical Practices 1 - Primary Care	Office Manager
Intermediate Care Unit	respiratory therapy
Medical Floor	unit secretary, physical therapist, case coordinator, respiratory therapist, lab tech, charge nurse, house supervisor

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):
Emergency Department	Yes			
Endoscopy	Yes			
ASU	Yes			
Medical Oncology Cancer Center, Infusion Center	Yes			
GI	Yes			
Pain Management	Yes			
Pediatrics	Yes			
Orthopedics	Yes			
Urology	Yes			
Women's Health	Yes			
Endocrinology	Yes			
Cardiology	Yes			
Walk In Clinic	Yes			
Medical Practices 5- Primary Care	Yes			

Medical Practices 3- Primary Care	Yes			
Medical Practices 2	Yes			
Medical Practices 1 - Primary Care	Yes			
Intermediate Care Unit	Yes			
Medical Floor	Yes			

RN EVENING SHIFT STAFFING

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Planned average number of Registered Nurses (RN) on the unit providing direct patient care per day on the Evening Shift? (Please provide a number with up to 5 digits. Ex: 101.50)	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 5 digits. Ex: 101.50)	Planned average number of patients on the unit per day on the Evening Shift? (Please provide a number with up to 5 digits. Ex: 101.50)	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 5 digits. Ex: 101.50)?
Emergency Dept	3	1.71	14	4.6
Intermediate Care Unit	1	4	2	2
Medical Floor	4	1.6	20	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 5 digits. Ex: 101.50)	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 5 digits. Ex: 101.50)
Emergency Dept	0	0
Intermediate Care Unit	0	0
Medical Floor	0	0

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 5 digits. Ex: 101.50)	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 5 digits. Ex: 101.50)
Emergency Dept	2	12
Intermediate Care Unit	0	0
Medical Floor	1	8

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 5 digits. Ex: 101.50)	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 5 digits. Ex: 101.50)
Emergency Dept	2	1.14
Intermediate Care Unit	0.5	2
Medical Floor	3	24

EVENING SHIFT ADDITIONAL RESOURCES

Provide a description of Clinical Unit, including a description of typical patient services provided on the unit and the unit's location in the hospital.	Description of additional resources available to support unit level patient care on the Evening Shift. These resources include but are not limited to unit clerical staff, admission/discharge nurse, and other coverage provided to registered nurses, licensed practical nurses, and ancillary staff.
Emergency Dept	Lab, Nursing Supervisor, Radiology Technician, unit clerk
Intermediate Care Unit	Supervisor
Medical Floor	unit secretary, charge nurse, house supervisor

EVENING 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):
Emergency Dept	Yes			
Intermediate Care Unit	Yes			
Medical Floor	Yes			

RN NIGHT SHIFT STAFFING

Name of Clinical Unit:	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 5 digits. Ex: 101.50)	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 5 digits. Ex: 101.50)	Planned average number of patients on the unit per day on the Night Shift? (Please provide a number with up to 5 digits. Ex: 101.50)
Emergency Department	Emergency Department	2	1.3	11
Other	Intermediate Care Unit	1	4	2
Medical/Surgical	Medical Floor	4	1.6	20

LPN NIGHT SHIFT STAFFING

Name of Clinical Unit:	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 5 digits. Ex: 101.50)?	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 5 digits. Ex: 101.50)
Emergency Department	5.5	0
Other	2	0
Medical/Surgical	6	0

NIGHT SHIFT ANCILLARY STAFF

Name of Clinical Unit:	Planned total hours of LPN care per patient including adjustment for case mix and acuity on the Night Shift (Please provide a number with up to 5 digits. Ex: 101.50)	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 5 digits. Ex: 101.50)
Emergency Department	0	1
Other	0	0
Medical/Surgical	0	0.5

NIGHT SHIFT UNLICENSED STAFFING

Name of Clinical Unit:	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 5 digits. Ex: 101.50)	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 5 digits. Ex: 101.50)
Emergency Department	8	1
Other	0	0
Medical/Surgical	4	3

NIGHT SHIFT ADDITIONAL RESOURCES

Name of Clinical Unit:	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 5 digits. Ex: 101.50)
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Emergency Department	0.72
Other	0
Medical/Surgical	24

NIGHT SHIFT CONSENSUS INFORMATION

Name of Clinical Unit:	Description of additional resources available to support unit level patient care on the Night Shift. These resources include but are not limited to unit clerical staff, admission/discharge nurse, and other coverage provided to registered nurses, licensed practical nurses, and ancillary staff.	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):
Emergency Department	patient care supervisor, radiology technician, lab,	Yes		
Other	house supervisor	Yes		
Medical/Surgical	unit secretary, charge nurse with fewer patients if any	Yes		

CBA INFORMATION

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

<p>Our general hospital's collective bargaining agreement with New York State Nurses Association expires on the following date:</p>	<p>12/31/20 23 12:00 AM</p>
<p>The number of hospital employees represented by New York State Nurses Association is:</p>	<p>66</p>
<p>Our general hospital's collective bargaining agreement with SEIU 1199 expires on the following date:</p>	<p>06/30/20 23 12:00 AM</p>

**The number of hospital employees
represented by SEIU 1199 is:**

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