# **Cover Page**

The following is the nurse staffing plan for EvergreenHealth-Kirkland Campus (hospital/health system name as listed on the DOH website), submitted to the Washington State Department of Health in accordance with Revised Code of Washington 70.41.420.

#### December 19, 2022

I, the undersigned with responsibility for EvergreenHealth-Kirkland Campus (hospital/health system name), attest that the attached staffing plan and matrix was developed in accordance with RCW 70.41.420 for 2023\_ (year) and includes all units covered under our hospital license under RCW 70.41. This plan was developed with consideration given to the following elements (please check):

- ✓ Census, including total numbers of patients on the unit on each shift and activity such as patient discharges, admissions, and transfers;
- ✓ Level of intensity of all patients and nature of the care to be delivered on each shift;
- ✓ Skill mix;
- ✓ Level of experience and specialty certification or training of nursing personnel providing care;
- ✓ The need for specialized or intensive equipment;
- ✓ The architecture and geography of the patient care unit, including but not limited to placement of patient rooms, treatment areas, nursing stations, medication preparation areas, and equipment;
- ✓ Staffing guidelines adopted or published by national nursing professional associations, specialty nursing organizations, and other health professional organizations;
- ✓ Availability of other personnel supporting nursing services on the patient care unit; and
- ✓ Strategies to enable registered nurses to take meal and rest breaks as required by law or the terms of an applicable collective bargaining agreement, if any, between the hospital and a representative of the nursing staff.

This staffing plan was adopted by the hospital on: December 19, 2022

As approved by Jeffrey J Tomlin, MD, Chief Executive Officer

Signature

# **Nurse Staffing Plan Purpose**

This plan was developed for the management of scheduling and provision of daily staffing needs for the hospital, and to define a process that ensures the availability of qualified nursing staff to provide safe, reliable and effective care to our patients. This plan applies to all parts of the hospital licensed under RCW 70.41.

# **Nurse Staffing Plan Principles**

- Access to high-quality nursing staff is critical to providing patients safe, reliable and effective care.
- The optimal staffing plan represents a partnership between nursing leadership and direct nursing care staff.
- Staffing is multifaceted and dynamic. The development of the plan must consider a wide range of variables.
- Data and measurable nurse sensitive indicators should help inform the staffing plan.

# **Nurse Staffing Plan Policy**

- The nurse staffing committee (committee) is responsible for the development and oversight of the nurse staffing plan to ensure the availability of qualified nursing staff to provide safe, reliable and effective care to our patients.
- The committee's work is guided by its charter.
- The committee meets on a regular basis as determined by the committee's charter.
- The committee's work is informed by information and data from individual patient care units.
   Appropriate staffing levels for a patient care unit reflect an analysis of:
  - Individual and aggregate patient needs;
  - Staffing guidelines developed for specific specialty areas;
  - The skills and training of the nursing staff;
  - Resources and supports for nurses;
  - Anticipated absences and need for nursing staff to take meal and rest breaks;
  - o Hospital data and outcomes from relevant quality indicators; and
  - Hospital finances.

\*The American Nurses Association does not recommend a specific staffing ratio, but rather to make care assignments based on acuity, patient needs and staff competencies.

- The analysis of the above information is aggregated into the hospital's nurse staffing plan. Each
  individual patient care unit may use the Nurse Staffing Committee Checklist to guide their work.
- Staff continuously monitor individual and aggregate patient care needs and make adjustments to staffing per agreed upon policy and collective bargaining agreement (if applicable).
- The committee will perform a semiannual review of the staffing plan. If changes are made to the staffing plan throughout the calendar year, an updated staffing plan will be submitted to DOH.
- The hospital is committed to ensuing staff are able to take meal and rest breaks as required by law, or collective bargaining agreement (if applicable). The committee considers breaks and strategies to ensure breaks when developing the plan. A global break policy may be used, or individual patient care units may have discretion in structuring breaks to meet specific needs

<sup>\*</sup>These principles correspond to The American Nursing Association Principles of Safe Staffing.

while meeting the requirements of the law. Data regarding missed or interrupted breaks will be reviewed by the committee to help develop strategies to ensure nurses are able to take breaks.

# **Nurse Staffing Plan Scope**

\*Acute care hospitals licensed under <a href="RCW 70.41">RCW 70.41</a> are required by law to develop a nurse staffing plan. The plan must cover areas of the hospital that: 1) are under the hospital's license (RCW 70.41) and 2) where a nurse(s) provides patient care (i.e., "patient care unit").

The following areas of the hospital are covered by the nurse staffing plan:

- Redmond ED
- Kirkland ED
- ICU
- Medical/Surgical Unit
- Ortho Neurosurgery Unit
- Oncology Unit
- Cardiac, Neuro, and Vascular Unit
- Progressive Care Unit
- Family Maternity Center
- L & D OR Sections Rooms
- Neonatal Intensive Care Unit/Pediatrics
- Main Operating Room (Blue)
- Main Pre/Post Anesthesia (Blue)
- Comprehensive Procedural Center
- Interventional Lab-Cardiac Cath, Interventional Radiology
- Diagnostic Imaging Recovery

# **Nurse Staffing Plan Critical Elements**

The following represents critical elements about the nurse staffing plan: (List key decisions by the committee, factors listed on page one that resulted in or influenced changes in the final staffing plan, etc.)

- · Patient needs and acuity,
- Staffing guidelines per national organizations i.e. AORN, AWOHN,
- Hospital admissions (including ED, OR, and Procedural),
- Average daily census,
- NDNQI data,
- Benchmarking data.

# **Nurse Staffing Plan Matrices**

The following is an updated nurse staffing plan for EvergreenHealth-Kirkland Campus (hospital/health system name as listed on the DOH website), submitted to the Washington State Department of Health in accordance with Revised Code of Washington 70.41.420.

The following nurse staffing plan replaces the nurse staffing plan previously submitted to the Washington State Department of Health.

\*Matrices are developed as a guide for shift-by-shift unit-based staffing decisions and are adjusted up or down based on patient factors and skill-mix of hospital staff.

### **Emergency Department**

#### <u>Kirkland-Redmond Staffing Matrix 2023</u>

ED Tech Daily Schedule
0700-1930
0700-1930
0700-1930
0900-2130
1000-2230
1200-0030
1200-0030
1200-0030
1700-0530
1700-0530
1900-0730
1900-0730
ED HUC Daily Schedule
0700-1930
1100-2330
1900-0730
ED Patient Sitter Daily Schedule
0700-1930
0700-1930
1900-0730
1900-0730

### Redmond ED Staffing Matrix 2023

ED RN Daily Staffing	ED HUC/TECH Daily Staffing
0700-1930	0700-1930
0700-1930	1000-2230
1100-2330	1900-0730
1900-0730	
1900-0730	

# ICU/CCU

	DAY (	0700	- 1930)		NC	C (1	900 -	0730)				PI	RODUCTI	VITY
Census	Charge	RN	Floor NAC/HUC	Resource	Charge	RN	Floor NAC	Resource	Managers	RN RN HPPD	NAC UT HPPD	Total CARE HPPD	TARGET TARGET HPPD	
20	1.0	10.0	2.0	1.0	1.0	10.0	2.0	1.0	0.7	14.4	2.4	17.50	19.81	
19	1.0	10.0	2.0	1.0	1.0	10.0	2.0	1.0	0.7	15.2	2.5	18.38	19.81	
18	1.0	10.0	2.0	1.0	1.0	10.0	2.0	1.0	0.7	16.0	2.7	19.37	19.81	
17	1.0	9.0	2.0	1.0	1.0	9.0	2.0	1.0	0.7	15.5	2.8	19.05	19.81	
16	1.0	9.0	2.0	1.0	1.0	9.0	2.0	1.0	0.7	16.5	3.0	20.20	19.81	
15	1.0	8.0	1.0	1.0	1.0	8.0	1.0	1.0	0.7	16.0	1.6	18.30	19.81	
14	1.0	8.0	1.0	0.0	1.0	8.0	1.0	0.0	0.7	16.3	1.7	18.70	19.81	
13	1.0	7.0	1.0	0.0	1.0	7.0	1.0	0.0	0.7	15.7	1.8	18.24	19.81	
12	1.0	7.0	1.0	0.0	1.0	7.0	1.0	0.0	0.7	17.0	2.0	19.70	19.81	
11	1.0	6.0	1.0	0.0	1.0	6.0	1.0	0.0	0.7	16.4	2.2	19.25	19.81	
10	1.0	6.0	0.0	0.0	1.0	6.0	0.0	0.0	0.7	16.8	0.0	17.50	19.81	
9	1.0	5.0	0.0	0.0	1.0	5.0	0.0	0.0	0.7	16.0	0.0	16.70	19.81	
8	1.0	5.0	0.0	0.0	1.0	5.0	0.0	0.0	0.7	18.0	0.0	18.70	19.81	
7	1.0	4.0	0.0	0.0	1.0	4.0	0.0	0.0	0.7	17.1	0.0	17.84	19.81	
6	1.0	3.0	0.0	0.0	1.0	3.0	0.0	0.0	0.7	16.0	0.0	16.70	19.81	
5	1.0	3.0	0.0	0.0	1.0	3.0	0.0	0.0	0.7	19.2	0.0	19.90	19.81	
4	1.0	2.0	0.0	0.0	1.0	2.0	0.0	0.0	0.7	18.0	0.0	18.70	19.81	
3	1.0	2.0	0.0	0.0	1.0	2.0	0.0	0.0	0.7	24.0	0.0	24.70	19.81	
2	1.0	2.0	0.0	0.0	1.0	2.0	0.0	0.0	0.7	36.0	0.0	36.70	19.81	
1	1.0	2.0	0.0	0.0	1.0	2.0	0.0	0.0	0.7	72.0	0.0	72.70	19.81	1
RN =2 P	1 Charge RN RN =2 Patients NAC/HUC = 15 pts HPPD Total: 19.81						I	CU St	affing	Matı	rix 20	)23		

# Medical/Surgical Unit

	DAY	(07	00 - 19	930)		NC	OC (1	1900 - (	0730	))	
Census	Charge RN	RN	Res RN (8hr) 0700- 1530	Total NAC	HUC/ NAC	Charge RN	RN	Res RN (8hr) 1900- 0330	Total NAC	HUC/ NAC	
52	1.0	12.0	1.0	8.0	1.0	1.0	10.0	1.0	7.0	0.67	
51	1.0	12.0	1.0	8.0	1.0	1.0	10.0	1.0	7.0	0.67	
50	1.0	12.0	1.0	7.0	1.0	1.0	10.0	1.0	7.0	0.67	
49	1.0	11.0	1.0	7.0	1.0	1.0	10.0	1.0	7.0	0.67	
48	1.0	11.0	1.0	7.0	1.0	1.0	10.0	1.0	7.0	0.67	
47	1.0	11.0	1.0	7.0	1.0	1.0	10.0	1.0	7.0	0.67	
46 45	1.0	11.0	1.0	7.0	1.0	1.0	10.0	1.0	7.0	0.67	
44	1.0	10.0	1.0	7.0	1.0	1.0	9.0	1.0	6.0	0.67	
43	1.0	10.0	1.0	7.0	1.0	1.0	9.0	1.0	6.0	0.67	
42	1.0	10.0	1.0	6.0	1.0	1.0	8.0	1.0	6.0	0.67	
41	1.0	10.0	1.0	6.0	1.0	1.0	8.0	1.0	6.0	0.67	
40	1.0	10.0	1.0	6.0	1.0	1.0	8.0	1.0	6.0	0.67	
39	1.0	9.0	1.0	6.0	1.0	1.0	8.0	1.0	6.0	0.67	
38	1.0	9.0	1.0	6.0	1.0	1.0	8.0	1.0	5.0		Target ADC
37	1.0	9.0	1.0	5.0	1.0	1.0	8.0	1.0	5.0	0.67	raiget ADC
36	1.0	9.0	1.0	5.0	1.0	1.0	8.0	1.0	5.0	0.67	
35	1.0	9.0	1.0	5.0	1.0	1.0	8.0	1.0	5.0	0.67	
34	1.0	9.0	1.0	5.0	1.0	1.0	8.0	1.0	5.0	0.67	
33	1.0	9.0	1.0	5.0	1.0	1.0	8.0	1.0	5.0	0.67	
32	1.0	7.0	1.0	5.0	1.0	1.0	6.0	1.0	5.0	0.67	
31	1.0	7.0	1.0	5.0	1.0	1.0	6.0	1.0	5.0	0.67	
30	1.0	7.0	1.0	5.0	1.0	1.0	6.0	1.0	5.0	0.67	
29	1.0	6.0	1.0	5.0	1.0	1.0	5.0	1.0	5.0	0.67	
28	1.0	6.0	1.0	5.0	1.0	1.0	5.0	1.0	5.0	0.67	
27	1.0	6.0	1.0	5.0	1.0	1.0	5.0	1.0	4.0	0.67	
26	1.0	6.0	1.0	5.0	1.0	1.0	5.0	1.0	4.0	0.67	
25	1.0	6.0	1.0	5.0	1.0	1.0	5.0	1.0	4.0	0.67	
24	1.0	5.0	1.0	4.0	1.0	1.0	5.0	1.0	4.0	0.67	
23	1.0	5.0	1.0	4.0	1.0	1.0	4.0	1.0	3.0	0.67	
22	1.0	5.0	1.0	4.0	1.0	1.0	4.0	1.0	3.0	0.67	
21	1.0	5.0	1.0	3.0	1.0	1.0	4.0	1.0	3.0	0.67	
20	1.0	5.0	1.0	3.0	1.0	1.0	4.0	1.0	3.0	0.67	
19	1.0	4.0	1.0	3.0	1.0	1.0	4.0	1.0	3.0	0.67	
18	1.0	4.0	1.0	3.0	1.0	1.0	4.0	1.0	3.0	0.67	
17	1.0	4.0	1.0	3.0	1.0	1.0	3.0	1.0	3.0	0.67	
16	1.0	4.0	0.0	3.0	1.0	1.0	3.0	0.0	3.0	0.67	
15	1.0	4.0	0.0	3.0	1.0	1.0	3.0	0.0	3.0	0.67	
14	1.0	3.0	0.0	3.0	1.0	1.0	2.0	0.0	3.0	0.67	
13	1.0	3.0	0.0	3.0	1.0	1.0	2.0	0.0	3.0	0.67	
12	1.0	2.0	0.0	2.0	1.0	1.0	2.0	0.0	2.0	0.67	
11	1.0	2.0	0.0	2.0	1.0	1.0	2.0	0.0	2.0	0.67	
10	1.0	2.0	0.0	2.0	1.0	1.0	2.0	0.0	2.0	0.67	
6 8	С	harge	RN 0	atient	ts	С	harge	RN 0 pat	ients	15	
		Visit Inc.				7.50		5-6 patie			
			= 4-5 pat = 8-9 pa			1		8-10 pati			
		v	Vhen 2 Re	d is op	en, a HU	C Tech is	a prio	ority for sta	ffing		

# Ortho Neurosurgery Unit

	DAY	(07	00 - 19	930)		٨	IOC	(1900	- 07	730)	
Census	Charge RN	RN	Res RN (12hr) 0700- 1900	Tom! NAC	HUC	Charge RN	RN	Res RN (4 hr) 1 900- 2 300	Total NAC	NAC/ HUC	
32	1.0	7.0	1.0	5.0	1.0	1.0	6.0	1.0	5.0	0.67	
31	1.0	7.0	1.0	5.0	1.0	1.0	6.0	1.0	5.0	0.67	
30	1.0	7.0	1.0	5.0	1.0	1.0	6.0	1.0	5.0	0.67	ADC =
29	1.0	6.0	1.0	5.0	1.0	1.0	5.0	1.0	5.0	0.67	
28	1.0	6.0	1.0	5.0	1.0	1.0	5.0	1.0	5.0	0.67	
27	1.0	6.0	1.0	5.0	1.0	1.0	5.0	1.0	4.0	0.67	
26	1.0	6.0	1.0	5.0	1.0	1.0	5.0	1.0	4.0	0.67	
25	1.0	6.0	1.0	5.0	1.0	1.0	5.0	1.0	4.0	0.67	
24	1.0	5.0	1.0	4.0	1.0	1.0	5.0	1.0	4.0	0.67	
23	1.0	5.0	1.0	4.0	1.0	1.0	4.0	1.0	3.0	0.67	
22	1.0	5.0	1.0	4.0	1.0	1.0	4.0	1.0	3.0	0.67	
21	1.0	5.0	1.0	3.0	1.0	1.0	4.0	1.0	3.0	0.67	1
20	1.0	5.0	1.0	3.0	1.0	1.0	4.0	1.0	3.0	0.67	
19	1.0	4.0	1.0	3.0	1.0	1.0	4.0	1.0	3.0	0.67	
18	1.0	4.0	1.0	3.0	1.0	1.0	4.0	1.0	3.0	0.67	
17	1.0	4.0	1.0	3.0	1.0	1.0	3.0	1.0	3.0	0.67	
16	1.0	4.0	0.0	3.0	1.0	1.0	3.0	0.0	3.0	0.67	1
15	1.0	4.0	0.0	3.0	1.0	1.0	3.0	0.0	3.0	0.67	1
14	1.0	3.0	0.0	3.0	1.0	1.0	2.0	0.0	3.0	0.67	1
13	1.0	3.0	0.0	3.0	1.0	1.0	2.0	0.0	3.0	0.67	1
12	1.0	2.0	0.0	2.0	1.0	1.0	2.0	0.0	2.0	0.67	1
11	1.0	2.0	0.0	2.0	1.0	1.0	2.0	0.0	2.0	0.67	
10	1.0	2.0	0.0	2.0	1.0	1.0	2.0	0.0	2.0	0.67	
10											
	charge RN 0 patients RN = 4-5 patients NAC = 8-9 patients						RN =	RN 0 pa 5-6 pati 8-10 pat	ents		

# **Oncology Unit**

	DAY (0700 - 1930)							(1900 -	073	0)	
Census	Charge RN	RN	Res RN (8hr) 0700- 1530	Total NAC	нис	Charge RN	RN	Res RN (8hr) 1900- 0330	Total NAC	NAC/ HUC	
44	1.00	10.0	1.0	7.0	1.0	1.00	9.0	1.0	6.0	0.67	
43	1.00	10.0	1.0	7.0	1.0	1.00	9.0	1.0	6.0	0.67	
42	1.00	10.0	1.0	6.0	1.0	1.00	8.0	1.0	6.0	0.67	
41	1.00	10.0	1.0	6.0	1.0	1.00	8.0	1.0	6.0	0.67	
40	1.00	10.0	1.0	6.0	1.0	1.00	8.0	1.0	6.0	0.67	
39	1.00	9.0	1.0	6.0	1.0	1.00	8.0	1.0	6.0	0.67	3
38	1.00	9.0	1.0	6.0	1.0	1.00	8.0	1.0	5.0	0.67	
37	1.00	9.0	1.0	5.0	1.0	1.00	8.0	1.0	5.0	0.67	
36	1.00	9.0	1.0	5.0	1.0	1.00	8.0	1.0	5.0	0.67	
35	1.00	9.0	1.0	5.0	1.0	1.00	8.0	1.0	5.0	0.67	
34	1.00	9.0	1.0	5.0	1.0	1.00	8.0	1.0	5.0	0.67	
33	1.00	9.0	1.0	5.0	1.0	1.00	8.0	1.0	5.0	0.67	
32							6.0	1.0	5.0	0.67	Target ADC 32
31	1.0	7.0	1.0	5.0	1.0	1.0	6.0	1.0	5.0	0.67	
30	1.0	7.0	1.0	5.0	1.0	1.0	6.0	1.0	5.0	0.67	
29	1.0	6.0	1.0	5.0	1.0	1.0	5.0	1.0	5.0	0.67	
28	1.0	6.0	1.0	5.0	1.0	1.0	5.0	1.0	5.0	0.67	
27	1.0	6.0	1.0	5.0	1.0	1.0	5.0	1.0	5.0	0.67	
26	1.0	6.0	1.0	5.0	1.0	1.0	5.0	1.0	5.0	0.67	
25	1.0	6.0	1.0	5.0	1.0	1.0	5.0	1.0	5.0	0.67	
24	1.0	5.0	1.0	4.0	1.0	1.0	5.0	1.0	4.0	0.67	
23	1.0	5.0	1.0	4.0	1.0	1.0	4.0	1.0	4.0	0.67	3
22	1.0	5.0	1.0	4.0	1.0	1.0	4.0	1.0	4.0	0.67	
21	1.0	5.0	1.0	3.0	1.0	1.0	4.0	1.0	3.0	0.67	
20	1.0	5.0	1.0	3.0	1.0	1.0	4.0	1.0	3.0	0.67	
19	1.0	4.0	1.0	3.0	1.0	1.0	4.0	1.0	3.0	0.67	
18	1.0	4.0	1.0	3.0	1.0	1.0	4.0	1.0	3.0	0.67	
17	1.0	4.0	1.0	3.0	1.0	1.0	3.0	1.0	3.0	0.67	
16	1.0	4.0	0.0	3.0	1.0	1.0	3.0	0.0	3.0	0.67	
15	1.0	4.0	0.0	3.0	1.0	1.0	3.0	0.0	3.0	0.67	8
14	1.0	3.0	0.0	3.0	1.0	1.0	2.0	0.0	3.0	0.67	
13	1.0	3.0	0.0	3.0	1.0	1.0	2.0	0.0	3.0	0.67	
12	1.0	2.0	0.0	2.0	1.0	1.0	2.0	0.0	2.0	0.67	
11	1.0	2.0	0.0	2.0	1.0	1.0	2.0	0.0	2.0	0.67	
10	1.0	2.0	0.0	2.0	1.0	1.0	2.0	0.0	2.0	0.67	
	C	RN	je RN = 0 l = 4-5 pa C = 8-9 pa	tients itients	nts		RN NAC	e RN = 0 = 5-6 pat = 8-10 pa	ients itients		

### Cardiac, Neuro, and Vascular Unit

	DAY	(0700	- 193	0)			NOC	(1900	- 0730	)		PROL	DUCTIVITY
													Variance/Notes
Census	Charge	RN	NAC	huc	Resource	Charge	RN	NAC	HUC	Resource	Mngers	Total HPD	
31	1.0	8.0	4.0	1.0	1.0	1.0	8.0	4.0	0.5	0.5	0.7	11.5	
30	1.0	8.0	4.0	1.0	1.0	1.0	8.0	4.0	0.5	0.5	0.7	11.9	1
29	1.0	8.0	4.0	1.0	1.0	1.0	8.0	4.0	0.5	0.5	0.7	12.3	1
28	1.0	8.0	4.0	1.0	1.0	1.0	8.0	4.0	0.5	0.5	0.7	12.7	Target for CVN
27	1.0	7.0	4.0	1.0	1.0	1.0	7.0	4.0	0.5	0.5	0.7	12.3	
26	1.0	7.0	3.0	1.0	1.0	1.0	7.0	3.0	0.5	0.5	0.7	11.9	
25	1.0	7.0	3.0	1.0	1.0	1.0	7.0	3.0	0.5	0.5	0.7	12.3	
24	1.0	6.0	3.0	1.0	1.0	1.0	6.0	3.0	0.5	0.5	0.7	11.9	
23	1.0	6.0	3.0	1.0	1.0	1.0	6.0	3.0	0.5	0.5	0.7	12.4	
22	1.0	6.0	3.0	1.0	1.0	1.0	6.0	3.0	0.5	0.5	0.7	12.9	
21	1.0	6.0	3.0	1.0	1.0	1.0	6.0	3.0	0.5	0.5	0.7	13.5	
20	1.0	5.0	3.0	1.0	1.0	1.0	5.0	3.0	0.5	0.5	0.7	13.0	
19	1.0	5.0	3.0	1.0	1.0	1.0	5.0	3.0	0.5	0.5	0.7	13.7	
18	1.0	5.0	2.0	1.0	1.0	1.0	5.0	2.0	0.5	0.5	0.7	13.1	
17	1.0	5.0	2.0	1.0	1.0	1.0	5.0	2.0	0.5	0.5	0.7	13.9	
16	1.0	4.0	2.0	1.0	1.0	1.0	4.0	2.0	0.5	0.5	0.7	13.3	
15	1.0	4.0	2.0	1.0	0.0	1.0	4.0	2.0	0.5	0.0	0.7	13.0	
14	1.0	4.0	2.0	1.0	0.0	1.0	4.0	2.0	0.5	0.0	0.7	13.9	
13	1.0	4.0	2.0	0.0	0.0	1.0	4.0	2.0	0.0	0.0	0.7	13.6	
12	1.0	3.0	2.0	0.0	0.0	1.0	3.0	2.0	0.0	0.0	0.7	12.7	
11	1.0	3.0	2.0	0.0	0.0	1.0	3.0	2.0	0.0	0.0	0.7	13.9	
10	1.0	3.0	1.0	0.0	0.0	1.0	3.0	1.0	0.0	0.0	0.7	12.8	
9	1.0	2.0	1.0	0.0	0.0	1.0	2.0	1.0	0.0	0.0	0.7	11.6	
8	1.0	2.0	1.0	0.0	0.0	1.0	2.0	1.0	0.0	0.0	0.7	13.1	
7	1.0	2.0	1.0	0.0	0.0	1.0	2.0	1.0	0.0	0.0	0.7	14.9	
6	0.0	2.0	0.0	0.0	0.0	0.0	2.0	0.0	0.0	0.0	0.7	9.4	
5	0.0	2.0	0.0	0.0	0.0	0.0	2.0	0.0	0.0	0.5	0.7	12.5	
4	0.0	2.0	0.0	0.0	0.0	0.0	2.0	0.0	0.0	0.5	0.7	15.6	
3	0.0	2.0	0.0	0.0	0.0	0.0	2.0	0.0	0.0	0.5	0.7	20.8	
2	0.0	2.0	0.0	0.0	0.0	0.0	2.0	0.0	0.0	0.0	0.7	28.2	
1	0.0	2.0	0.0	0.0	0.0	0.0	2.0	0.0	0.0	0.0	0.7	56.4	
1Charge RN								VNS	Staffi	ng			
RN Ratio = 3-4 Patients NAC Ratio = 8-10 Pts. Target TWHPU= 13.02							Mat	rix					

# **Progressive Care Unit**

	DAY	(0700	- 193	0)			NOC	(1900	- 0730	)		PROD	UCTIVITY
													Variance/Notes
Census	Charge	RN	NAC	huc	Resource	Charge	RN	NAC	HUC	Resource	Mngers	Total HPD	
31	1.0	8.0	4.0	1.0	1.0	1.0	8.0	4.0	0.5	0.5	0.7	11.5	
30	1.0	8.0	4.0	1.0	1.0	1.0	8.0	4.0	0.5	0.5	0.7	11.9	
29	1.0	8.0	4.0	1.0	1.0	1.0	8.0	4.0	0.5	0.5	0.7	12.3	Target PCU
28	1.0	7.0	4.0	1.0	1.0	1.0	7.0	4.0	0.5	0.5	0.7	11.9	
27	1.0	7.0	4.0	1.0	1.0	1.0	7.0	4.0	0.5	0.5	0.7	12.3	
26	1.0	7.0	3.0	1.0	1.0	1.0	7.0	3.0	0.5	0.5	0.7	11.9	
25	1.0	7.0	3.0	1.0	1.0	1.0	7.0	3.0	0.5	0.5	0.7	12.3	
24	1.0	6.0	3.0	1.0	1.0	1.0	6.0	3.0	0.5	0.5	0.7	11.9	
23	1.0	6.0	3.0	1.0	1.0	1.0	6.0	3.0	0.5	0.5	0.7	12.4	
22	1.0	6.0	3.0	1.0	1.0	1.0	6.0	3.0	0.5	0.5	0.7	12.9	
21	1.0	6.0	3.0	1.0	1.0	1.0	6.0	3.0	0.5	0.5	0.7	13.5	
20	1.0	5.0	3.0	1.0	1.0	1.0	5.0	3.0	0.5	0.5	0.7	13.0	
19	1.0	5.0	3.0	1.0	1.0	1.0	5.0	3.0	0.5	0.5	0.7	13.7	
18	1.0	5.0	2.0	1.0	1.0	1.0	5.0	2.0	0.5	0.5	0.7	13.1	
17	1.0	5.0	2.0	1.0	1.0	1.0	5.0	2.0	0.5	0.5	0.7	13.9	
16	1.0	4.0	2.0	1.0	1.0	1.0	4.0	2.0	0.5	0.5	0.7	13.3	
15	1.0	4.0	2.0	1.0	0.0	1.0	4.0	2.0	0.5	0.0	0.7	13.0	
14	1.0	4.0	2.0	1.0	0.0	1.0	4.0	2.0	0.5	0.0	0.7	13.9	
13	1.0	4.0	2.0	0.0	0.0	1.0	4.0	2.0	0.0	0.0	0.7	13.6	
12	1.0	3.0	2.0	0.0	0.0	1.0	3.0	2.0	0.0	0.0	0.7	12.7	
11	1.0	3.0	2.0	0.0	0.0	1.0	3.0	2.0	0.0	0.0	0.7	13.9	
10	1.0	3.0	1.0	0.0	0.0	1.0	3.0	1.0	0.0	0.0	0.7	12.8	
9	1.0	2.0	1.0	0.0	0.0	1.0	2.0	1.0	0.0	0.0	0.7	11.6	
8	1.0	2.0	1.0	0.0	0.0	1.0	2.0	1.0	0.0	0.0	0.7	13.1	
7	1.0	2.0	1.0	0.0	0.0	1.0	2.0	1.0	0.0	0.0	0.7	14.9	
6	0.0	2.0	0.0	0.0	0.0	0.0	2.0	0.0	0.0	0.0	0.7	9.4	
5	0.0	2.0	0.0	0.0	0.0	0.0	2.0	0.0	0.0	0.0	0.7	11.3	
4	0.0	2.0	0.0	0.0	0.0	0.0	2.0	0.0	0.0	0.0	0.7	14.1	
3	0.0	2.0	0.0	0.0	0.0	0.0	2.0	0.0	0.0	0.0	0.7	18.8	
2	0.0	2.0	0.0	0.0	0.0	0.0	2.0	0.0	0.0	0.0	0.7	28.2	
1	0.0	2.0	0.0	0.0	0.0	0.0	2.0	0.0	0.0	0.0	0.7	56.4	
	e RN o = 4 Patie itio =10 Pa			Targ	et TWHPU	= 13.02		PCl	J Ma	trix 20	)23		

# **Family Maternity Center**

				Labor S	taffing			
						FIXED	STAFF	
Patient Census	Charge RN	RN	Stabilizer & Resource	Floor NAC	Stock Tech	RN Mgr/ANM	Pre-Op/ Care Planner (days)	HUC
1.00	1.00	1.00	1.00	1.00	1.00	2.00	0.60	2.00
2.00	1.00	2	1.00	1.00	1.00	2.00	0.60	2.00
3.00	1.00	3	1.00	1.00	1.00	2.00	0.60	2.00
4.00	1.00	3	1.00	1.00	1.00	2.00	0.60	2.00
5.00	1.00	4	1.00	1.00	1.00	2.00	0.60	2.00
6.00	1.00	5	1.00	1.00	1.00	2.00	0.60	2.00
7.00	1.00	6	1.00	1.00	1.00	2.00	0.60	2.00
8.00	1.00	7	1.00	1.00	1.00	2.00	0.60	2.00
9.00	1.00	8	2.00	1.00	1.00	2.00	0.60	2.00
10.00	1.00	9	2.00	1.00	1.00	2.00	0.60	2.00
11.00	1.00	9	2.00	1.00	1.00	2.00	0.60	2.00
12.00	1.00	10	2.00	1.00	1.00	2.00	0.60	2.00
13.00	1.00	11	2.00	1.00	1.00	2.00	0.60	2.00
14.00	1.00	12	2.00	1.00	1.00	2.00	0.60	2.00
15.00	1.00	13	2.00	1.00	1.00	2.00	0.60	2.00
16.00	1.00	14	2.00	2.00	1.00	2.00	0.60	2.00
17.00	1.00	15	2.00	2.00	1.00	2.00	0.60	2.00
18.00	1.00	15	2.00	2.00	1.00	2.00	0.60	2.00
19.00	1.00	16	2.00	2.00	1.00	2.00	0.60	2.00
20.00	1.00	17	2.00	2.00	1.00	2.00	0.60	2.00
21.00	1.00	18	2.00	2.00	1.00	2.00	0.60	2.00
22.00	1.00	19	2.00	2.00	1.00	2.00	0.60	2.00
23.00	1.00	20	2.00	2.00	1.00	2.00	0.60	2.00
24.00	1.00	21	2.00	2.00	1.00	2.00	0.60	2.00
25.00	1.00	21	2.00	2.00	1.00	2.00	0.60	2.00
26.00	1.00	22	2.00	2.00	1.00	2.00	0.60	2.00
27.00	1.00	23	2.00	2.00	1.00	2.00	0.60	2.00
28.00	1.00	24	2.00	2.00	1.00	2.00	0.60	2.00
29.00	1.00	25	2.00	2.00	1.00	2.00	0.60	2.00
30.00	1.00	26	2.00	2.00	1.00	2.00	0.60	2.00
31.00	1.00	27	2.00	2.00	1.00	2.00	0.60	2.00
32.00	1.00	27	2.00	2.00	1.00	2.00	0.60	2.00
33.00	1.00	28	2.00	2.00	1.00	2.00	0.60	2.00
34.00	1.00	29	2.00	2.00	1.00	2.00	0.60	2.00

<sup>\*</sup>excludes OBED, OR Circulator

# **Family Maternity Center continued**

		В	tu ut.	us Ctaff		
			ostpartu	ım Stan		CTAFF
					FIXED	STAFF
Patient Census	Charge RN	RN	Mentor	Floor NAC	Mgr/ANM	HUC
10.00	1	3	1	2	2	1
11.00	1	4	1	2	2	1
12.00	1	4	1	2	2	1
13.00	1	5	1	2	2	1
14.00	1	5	1	2	2	1
15.00	1	5	1	2	2	1
16.00	1	6	1	2	2	1
17.00	1	6	1	2	2	1
18.00	1	6	1	2	2	1
19.00	1	7	1	2	2	1
20.00	1	7	1	2	2	1
21.00	1	7	1	2	2	1
22.00	1	8	1	3	2	1
23.00	1	8	1	3	2	1
24.00	1	8	1	3	2	1
25.00	1	9	1	3	2	1
26.00	1	9	1	3	2	1
27.00	1	9	1	3	2	1
28.00	1	10	1	3	2	1
29.00	1	10	1	3	2	1
30.00	1	10	1	3	2	1
31.00	1	11	1	3	2	1
32.00	1	11	1	3	2	1
33.00	1	11	1	3	2	1
34.00	1	12	1	3	2	1
35.00	1	12	1	3	2	1
36.00	1	12	1	3	2	1
37.00	1	13	1	3	2	1
38.00	1	13	1	3	2	1
39.00	1	13	1	3	2	1
40.00	1	14	1	3	2	1
41.00	1	14	1	3	2	1
42.00	1	14	1	3	2	1
43.00	1	15	1	4	2	1
44.00	1	15	1	4	2	1
45.00	1	15	1	4	2	1
46.00	1	16	1	4	2	1
47.00	1	16	1	4	2	1
48.00	1	16	1	4	2	1
49.00	1	17	1	4	2	1

# 2 Purple OR (L & D)

OR s	taffing	Matrix					
fixed staffing							
Number of Patients	circulating RN	Surgical Tech					
0	1.0	2.0					
1	1.0	2.0					
2	2.0	2.0					

<b>OBED</b> sta	ffing Matrix
Number of Patients	RN
0	1.0
1	1.0
2	1.0
3	1.0
4	2.0
5	2.0

### **Neonatal Intensive Care Unit/Pediatrics**

	Children's staffing Matrix										
Number of Patients	Charge RN	Resource	RN LC (days)	PT /OT (days)	Total RN Day Shift	HUC	Mgr/ANM	CNA (Day)			
0	1.0	0.0	0.0	0.0	2	0.5	1.6	0.0			
1	1.0	0.0	0.0	0.0	2	0.5	1.6	0.0			
2	1.0	0.0	0.0	0.0	2	1.0	1.6	0.0			
3	1.0	0.0	0.0	0.0	3	1.0	1.6	0.0			
4	1.0	0.0	0.5	0.0	4	1.0	1.6	0.0			
5	1.0	0.0	0.5	0.5	4	1.0	1.6	0.0			
6	1.0	0.0	0.5	0.5	4	1.0	1.6	0.0			
7	1.0	0.0	0.5	0.6	5	1.0	1.6	0.4			
8	1.0	0.0	0.5	0.6	5	1.0	1.6	0.4			
9	1.0	0.0	0.5	0.6	5	1.0	1.6	0.4			
10	1.0	0.0	0.7	0.6	5	1.0	1.6	0.4			
11	1.0	0.0	0.7	0.6	6	1.0	1.6	0.4			
12	1.0	0.0	0.7	0.6	6	1.0	1.6	0.4			
13	1.0	0.0	0.7	0.6	6	1.0	1.6	0.4			
14	1.0	0.0	0.7	0.6	7	1.0	1.6	0.4			
15	1.0	0.0	0.7	0.6	7	1.0	1.6	0.4			
16	1.0	0.0	0.7	0.6	8	1.0	1.6	0.4			
17	1.0	1.0	0.7	0.6	9	1.0	1.6	0.4			
18	1.0	1.0	0.7	0.6	9	1.0	1.6	0.4			
19	1.0	1.0	0.7	0.6	9	1.0	1.6	0.4			
20	1.0	1.0	0.7	0.6	10	1.0	1.6	0.4			
21	1.0	1.0	0.7	0.6	10	1.0	1.6	0.4			
22	1.0	1.0	0.7	0.6	11	1.0	1.6	0.4			
23	1.0	1.0	0.7	0.6	11	1.0	1.6	0.4			
24	1.0	1.0	0.7	0.6	12	1.0	1.6	0.4			
25	1.0	1.0	0.7	0.6	12	1.0	1.6	0.4			
26	1.0	1.0	0.7	0.6	13	1.5	1.6	0.4			
27	1.0	1.0	0.7	0.6	13	1.5	1.6	0.4			
28	1.0	1.0	0.7	0.6	14	1.5	1.6	0.4			
29	1.0	1.0	0.7	0.6	14	1.5	1.6	0.4			
30	1.0	1.0	0.7	0.6	15	1.5	1.6	0.4			

#### **Main Operating Room (Blue)**

#### 3 Blue Staffing Matrix

3 Blue Operating Rooms are open from 6am to 10pm Monday through Friday. Monday through Friday between 10pm and 6am is a primary call team and a back-up call team. Saturday and Sunday from 7am to 7pm has 1 RN, 1 Scrub Tech, and 1 SSA. Saturday and Sunday from 7pm to 7am has a primary call team and a back up call team available.

Monday -- Friday: 6am to 4pm

	Charge Nurse	Registered Nurses	Scrub Tech/Nurses	SSA
8 Rooms	1	9	8	5
7 Rooms	1	8	7	5
6 Rooms	1	7	6	5
5 Rooms	1	6	5	5
4 Rooms	1	5	4	5
3 Rooms	1	4	3	4
2 Rooms	1	3	2	4
1 Room	1	2	1	4

#### Monday -- Friday: 4pm - 6pm

	Charge Nurse	Registered Nurses	Scrub Tech/Nurses	SSA
4 Rooms	1	5	5	3
3 Rooms	1	4	4	3
2 Rooms	1	3	3	3
1 Room	1	2	2	3

#### Monday -- Friday: 6pm -- 8pm

	Charge Nurse	Registered Nurses	Scrub Tech/Nurses	SSA
3 Rooms	1	4	4	3
2 Rooms	1	3	3	3
1 Room	1	2	2	3

#### Monday -- Friday 8pm-9pm

	Charge Nurse	Registered Nurses	Scrub Tech/Nurses	SSA
2 Rooms	1	3	3	3
1 Room	1	2	2	3

#### Monday -- Friday 9pm to 10pm

	Charge Nurse	Registered Nurses	Scrub Tech/Nurses	SSA
1 Room	1	2	2	3

#### Saturday and Sunday 7am to 7pm

	Charge Nurse	Registered Nurses	Scrub Tech/Nurses	SSA
1 Room	0	1	1	3

#### Main Pre/Post Anesthesia (Blue)

3 Blue PSCU/PACU (7030)									
EvergreenHealth 3 Blue PSCU/PACU staffing matrix									
Covering 8 OR'S CPC, DI, FMC	Charge RN	RN	HUC	PSA	Total FTE's				
Monday	4	16	2	1	23				
Tuesday	4	16	3	1	24				
Wednesday	4	16	3	1	24				
Thursday	4	16	3	1	24				
Friday	4	16	3	1	24				
Saturday	1	0	0	0	1				
Sunday	1	0	0	0	1				
Totals	22	80	14	5	121				

Total # of Staff								
FTE RN	29							
FTE HUC	5							
FTE PSA	2							
PD RN	6							
PD HUC	3							

<sup>\*</sup>FTE and all numbers are indicative of number of shifts. These is 8,10, or 12 hours shifts

	EvergreenHealth 3-Blue PSCU/PACU RN Staffing Matrix - Breakdown by Hour																	
#RN's/Time	5	6	7	' 8										18	19	20	21	22
1																		
2																		
3																		
4																	4	4
5																		
6	6	6														6		
7															7			
8			8															
9														9				
10				11														
11												11	11					
12											12							
13					13													
14										14								
15						15												
16									15									
17							16											
18																		
19																		
20				I (DCCII/DA				20										

includes 2 charge RN (PSCU/PACU)
ON CALL STAFFING

Rekday Call
Weekend Call

 Weekday Call
 Weekend Call

 22-07 = 2 RNs
 07-19 = 2 RNs

19-02 = 2 RNs

Additional Weekend staffing 06-1830 - 1 PSCU RN staffed

Notes:

Surgical services follows the ASPAN standars perioperative safe staffing and on call policies

2 RNs in PACU when pt present

Without making any changes to current FTE, our 2023 matrix changed to the following, consistent week to week (no more alternating). All the same notes apply.

	М		Т		w		TH		F	
Nurse A	Х						х		Χ	
Nurse B	Х		Х				Х			
Nurse C	Х		Χ				Х			
Nurse D	Х						х		Χ	
Nurse E	Х		Х				Х			
Nurses FGH	Х		Х		Х		х		Х	
Total RNs		8		6		3		8		5
Techs		2		2		1		2		2

#### Cath/ IR /Neuro Lab Staffing Plan

The procedure labs are open from 0600-1730 Monday – Friday with the first case starting at 0700. Each room is staffed with a team of nurses and radiology technologists with staggered start timed that vary from 0600 to 0900. There are 2 call teams that respond to emergent and urgent cases after hours and on weekends.

Daily there is a Cath/IR coordinator that is a procedure RN that assists with flow and scheduling of addons.

Daily Staffing Monday -Friday

IR Lab Procedure room 1:

- · 4 technologists
- 2 RN's

Cath lab Procedure room 2:

- · 4 technologists
- 2 RN's

Neuro/IR lab Procedure Room 3:

- · 4 technologists
- 2 RN's

The call teams consist of 2 technologists and 1 RN.

There are 2 call teams, they are Cardiac/Vascular and Neuro/IR.

DI Pre/Post Recovery Staffing Plan

DI Recovery is open Monday —Friday from 0515-1930 for pre/post Cath/IR /Neuro lab patients. There are 12 beds total that are in two different areas.

Nurse to patient ratio is 4:1 for pre- procedure patients and 3:1 for post procedure phase 2 recovery

DI Recovery is fully staffed by RNs to include 1 charge RN.

RN's work a combination 10's, 12's and 8' hour shifts to cover the needs the of the unit.

RN's	Minimum Staffing	Maximum Staffing
Monday	6	7
Tuesday	6	7
Wednesday	6	7
Thursday	6	7
Friday	6	7