

Cover Page

The following is the comprehensive nurse staffing plan for **Confluence Health Hospital** submitted to the Washington State Department of Health in accordance with Revised Code of Washington 70.41.420 for the year 2023.

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Attestation Form

Nurse Staffing Coalition

June 30, 2023

I, the undersigned with responsibility for Confluence Health Hospital, attest that the attached staffing plan and matrix was developed in accordance with RCW 70.41.420 for 2023 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):

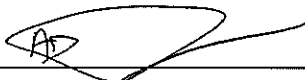
- Census, including total numbers of patients on the unit on each shift and activity such as patient discharges, admissions, and transfers.
- Level of intensity of all patients and nature of the care to be delivered on each shift
- Skill mix
- Level of experience and specialty certification or training 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
- 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.

As approved by Andrew Jones, MD, Confluence Health Chief Executive Officer.

Signature

Andrew Jones, MD

Printed Name



Date June 28, 2023

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 RCW70.41.

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 a 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;
- Hospital data and outcomes from relevant data, quality indicators; and
- Hospital finances.

The American Nurses Association recommendations include to make care assignments based on acuity, patient needs and staff competencies.

- 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 ensuring 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.

Nurse Staffing Plan Scope

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

- Intensive Care Unit
- Progressive Care Unit
- Medical/Oncology Unit
- Surgical/Orthopedic Unit
- Mother/Baby Unit, Labor & Delivery, Special Care Nursery
- Pediatrics Unit
- Medical Unit One
- Resource Unit
- Emergency Department
- Perioperative Services – Operating Room, Pre-op/Post-op, Recovery Room
- Endoscopy
- Cath Lab, Electrophysiology Lab, Interventional Radiology
- Home Health & Hospice
- Wound Care & Ostomy
- Inpatient Care Management
- Oncology Clinic & Infusion Center
- CHH Mares Campus Medical-Surgical & Inpatient Rehabilitation
- CHH Mares Campus Operating Room & Central Processing
- CHH Mares Campus Pre-OP/PACU/Recovery
- CHH Mares Campus Emergency Department
- CHH Mares Campus Walk in Clinic
- Moses Lake Walk in Clinic
- WWH GI Department
- Behavioral Health
- Brewster Clinic- Family Medicine
- East Wenatchee Pediatrics
- East Wenatchee Family Medicine and Walk in Clinic
- Employee Health
- Ephrata Family Medicine
- Geriatrics
- Internal Medicine
- Methow Valley Clinic – Family Medicine
- Anticoagulation Clinics – Moses Lake, Ephrata, Wenatchee, E. Wenatchee, Cashmere, Brewster, Omak, Tonasket, Oroville)
- Moses Lake Cardiology
- Moses Lake General Surgery
- Moses Lake Orthopedics
- Moses Lake Internal Medicine
- Moses Lake Clinic – Pediatrics
- Moses Lake Clinic – OB/GYN
- Moses Lake Family Medicine
- Omak Family Medicine
- Omak Walk in Clinic

- Oroville Clinic
- Chelan Street Orthopedic
- Smith Building Orthopedic
- Palliative Care
- Royal City Family Medicine
- Tonasket Clinic
- Waterville Family Medicine
- Wenatchee Family Medicine 2nd Floor
- Wenatchee Family Medicine
- Wenatchee Pediatrics
- CHH Mares Campus – Allergy
- CHH Mares Campus - ENT
- CHH Mares Campus – Dermatology
- CHH Mares Campus – General Surgery
- CHH Mares Campus – Urology

Nurse Staffing Plan Critical Elements

The following represents critical elements about the nurse staffing plan:

- Census
- Admissions, Discharges, & Transfers
- Acuity
- Level of staff experience
- Staffing guidelines/recommendations per specialty nursing organizations
- Strategies to enable Registered Nurses to take breaks & lunches
- Availability of support staff
- The need for specialty or specialized equipment

Nurse Staffing Plan Matrices

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

Intensive Care Unit Staffing Guidelines

Unit Leadership:

Connie Barnes, ICU/PCU/ED Director
Toni Holder, BSN, RN ICU Clinical Manager
Scottie Burt, RN, ICU Supervisor
Stephen Williams, BSN, RN ICU

1:1 or 1:2 depending on acuity.

***ICU Critical Response RN:** Refer to ICU Critical Response Nurse when planning staffing for the shift.

Notes:

- OHS patients are 1:1s only until extubated unless on an IABP or Impella. First case open heart patients may arrive before 1100, check the surgery schedule for time allotted for each case.
- Impella patients are 1:1s and will need 2 RNs *for the first hour*
- Pneumonectomy patients *are 1:1s IF they come direct from OR for the first hour*
- TEVAR with lumbar drains are 1:1s *for the first hour*
- Insulin drips are not 1:1s
- Hyponatremia patients are 1:1s until they move to Q2h labs

Station Fill Guidelines:

1. There must always be two ICU RNs in house. If there are zero patients in ICU, these two RNs can be house floating but cannot be assigned to patients.
2. For very low numbers:
 - 1 patient – 3 RNs
 - 2 patients – 3 RNs
 - 3 patients – 3 RNs
 - 4 patients – 4 RN

Progressive Care Unit Staffing Guidelines

Unit Leadership:

Connie Barnes, ICU/PCU/ED Director
Todd Warman, RN Clinical Manager
Nicole Jacobs, RN Clinical Supervisor
Lorna Sebastian, RN Unit PCU Unit Rep

PC3 Staffing Grid

Day/Evenings			Evening/Nights			HPPD
With Charge			With Charge			
# Pts.	RN	CNA	# Pts.	RN	CNA	
9	4	0	9	4	0	10.60
10	4	1	10	4	1	12.00
11	5	1	11	5	1	13.09
12	5	1	12	5	1	12.00
13	5	2	13	5	2	12.92
14	5	2	14	5	2	12.00
15	5	2	15	5	2	11.20
16	6	2	16	6	2	12.00
17	6	2	17	6	2	11.29
18	6	2	18	6	2	10.67
19	6	3	19	6	3	11.36
20	7	3	20	7	3	12.00
21	7	3	21	7	3	11.42
22	7	3	22	7	3	10.90
23	7	3	23	7	3	10.43
24	8	3	24	8	3	11.00
25	8	3	25	8	3	10.56
26	8	4	26	8	4	11.07
27	9	4	27	9	4	11.55
28	9	4	28	9	4	11.14
29	9	4	29	9	4	10.75
30	9	4	30	9	4	10.40
31	10	4	31	10	4	10.83
32	10	4	32	10	4	10.50
33	10	5	33	10	5	10.90
34	10	5	34	10	5	10.59
35	11	5	35	11	5	10.97
36	11	5	36	11	5	10.67
37	11	5	37	11	5	10.38
38	11	5	38	11	5	10.11
39	11	5	39	11	5	10.46
40	12	5	40	12	5	10.40
41	13	6	41	13	6	11.12
42	13	6	42	13	6	10.86
						11.12

PC4 Staffing Grid

Day/Evenings			Evening/Nights			HPPD
With Charge			With Charge			
# Pts.	RN	CNA	# Pts.	RN	CNA	
2	2	0	2	2	0	24.00
3	2	0	3	2	0	16.00
4	2	1	4	2	0	15.00
5	2	1	5	2	1	14.40
6	2	1	6	2	1	8.00
7	2	1	7	2	1	6.85
8	2	1	8	2	1	6.00

Unit Leadership:
 Thea Wertman, RN, MSN, CVRN, Director
 Heather Curry, RN Manager
 Keri Baker, RN Supervisor
 Mayra Rivera-Martinez, RN Unit Rep

Current Staffing Patterns (Core):

Medical Oncology Staffing Grid														
0700-1500			1500-1930			1900-2300			2300-0730			HPPD		
Pt	RN	CNA	Pt	RN	CNA	Pt	RN	CNA	Pt	RN	CNA	RN	CNA	Total
12	4	2	12	4	2	12	4	2	12	3	1	7.33	3.33	10.67
13	4	2	13	4	2	13	4	2	13	3	1	6.77	3.08	9.85
14	4	2	14	4	2	14	4	2	14	3	2	6.29	3.43	9.71
15	5	2	15	4	2	15	4	2	15	4	2	6.93	3.20	10.13
16	5	2	16	5	2	16	5	2	16	4	2	7.00	3.00	10.00
17	5	3	17	5	2	17	5	2	17	4	2	6.59	3.29	9.88
18	5	3	18	5	3	18	5	2	18	5	2	6.67	3.33	10.00
19	5	3	19	5	3	19	5	3	19	5	2	6.32	3.37	9.69
20	6	3	20	6	3	20	6	3	20	5	2	6.80	3.20	10.00
21	6	3	21	6	3	21	6	3	21	5	3	6.48	3.43	9.90
22	6	3	22	6	3	22	6	3	22	6	3	6.55	3.27	9.82
23	6	3	23	6	3	23	6	3	23	6	3	6.26	3.13	9.39
24	7	4	24	7	3	24	7	3	24	6	3	6.67	3.33	10.00
25	7	4	25	7	4	25	7	3	25	7	3	6.72	3.36	10.08
26	8	4	26	8	4	26	7	3	26	7	3	6.92	3.23	10.15
27	8	4	27	8	4	27	8	4	27	7	3	6.81	3.26	10.07
28	8	4	28	8	4	28	8	4	28	8	3	6.86	3.14	10.00
29	9	4	29	8	4	29	8	4	29	8	3	6.90	3.03	9.93
30	9	4	30	9	4	30	9	4	30	8	4	6.93	3.20	10.13
31	9	5	31	9	4	31	9	4	31	8	4	6.71	3.35	10.06
32	10	5	32	9	5	32	9	4	32	8	4	6.75	3.38	10.13
33	10	5	33	10	5	33	9	4	33	9	4	6.91	3.27	10.18
34	10	5	34	10	5	34	10	4	34	9	4	6.82	3.18	10.00
35	10	5	35	10	5	35	10	4	35	9	4	6.63	3.09	9.71
36	11	5	36	10	5	36	10	5	36	10	4	6.89	3.11	10.00
37	11	5	37	11	5	37	10	5	37	10	5	6.81	3.24	10.05
38	11	5	38	11	5	38	11	5	38	10	5	6.74	3.16	9.89
39	11	6	39	11	5	39	11	5	39	11	5	6.77	3.28	10.05
40	12	6	40	12	6	40	11	5	40	11	5	6.90	3.30	10.20
41	12	6	41	12	6	41	12	5	41	11	5	6.83	3.22	10.05
42	12	6	42	12	6	42	12	6	42	12	5	6.86	3.24	10.10

Surgical/Orthopedics Unit Staffing Guidelines

Unit Leadership:

Thea Wertman, RN, MSN, CVRN, Director

Kim Kohlman, RN, Clinical Manager

Misti Baird, RN Supervisor

Simon Morton, RN Unit Rep

E/N shift need to review surgery schedule to determine D/E staffing, review if 0900 person scheduled

Surgical/Orthopedic Staffing Grid														
0700-1500			1500-1930			1900-2300			2300-0730			HPPD		
Pt	RN	CNA	Pt	RN	CNA	Pt	RN	CNA	Pt	RN	CNA	RN	CNA	Total
12	4	2	12	4	2	12	4	2	12	3	1	7.33	3.33	10.67
13	4	2	13	4	2	13	4	2	13	3	1	6.77	3.08	9.85
14	4	2	14	4	2	14	4	2	14	3	2	6.29	3.43	9.71
15	5	2	15	4	2	15	4	2	15	4	2	6.93	3.20	10.13
16	5	2	16	5	2	16	5	2	16	4	2	7.00	3.00	10.00
17	5	3	17	5	2	17	5	2	17	4	2	6.59	3.29	9.88
18	5	3	18	5	3	18	5	2	18	5	2	6.67	3.33	10.00
19	5	3	19	5	3	19	5	3	19	5	2	6.32	3.37	9.69
20	6	3	20	6	3	20	6	3	20	5	2	6.80	3.20	10.00
21	6	3	21	6	3	21	6	3	21	5	3	6.48	3.43	9.90
22	6	3	22	6	3	22	6	3	22	6	3	6.55	3.27	9.82
23	6	3	23	6	3	23	6	3	23	6	3	6.26	3.13	9.39
24	7	4	24	7	3	24	7	3	24	6	3	6.67	3.33	10.00
25	7	4	25	7	4	25	7	3	25	7	3	6.72	3.36	10.08
26	8	4	26	8	4	26	7	3	26	7	3	6.92	3.23	10.15
27	8	4	27	8	4	27	8	4	27	7	3	6.81	3.26	10.07
28	8	4	28	8	4	28	8	4	28	8	3	6.86	3.14	10.00
29	9	4	29	8	4	29	8	4	29	8	3	6.90	3.03	9.93
30	9	4	30	9	4	30	9	4	30	8	4	6.93	3.20	10.13
31	9	5	31	9	4	31	9	4	31	8	4	6.71	3.35	10.06
32	10	5	32	9	5	32	9	4	32	8	4	6.75	3.38	10.13
33	10	5	33	10	5	33	9	4	33	9	4	6.91	3.27	10.18
34	10	5	34	10	5	34	10	4	34	9	4	6.82	3.18	10.00
35	10	5	35	10	5	35	10	4	35	9	4	6.63	3.09	9.71
36	11	5	36	10	5	36	10	5	36	10	4	6.89	3.11	10.00
37	11	5	37	11	5	37	10	5	37	10	5	6.81	3.24	10.05
38	11	5	38	11	5	38	11	5	38	10	5	6.74	3.16	9.90
39	11	6	39	11	5	39	11	5	39	11	5	6.77	3.28	10.05
40	12	6	40	12	6	40	11	5	40	11	5	6.90	3.30	10.20
41	12	6	41	12	6	41	12	5	41	11	5	6.83	3.22	10.05
42	12	6	42	12	6	42	12	6	42	12	5	6.86	3.24	10.10

Nurse Staffing Plan

2023 Staffing Unit Plan Overview

MBU Staffing Guidelines

Unit Leadership:

Barb Lawson, RN Director

Tami Clark, RN Clinical Manager

Mandy Cortes, RN Clinical Supervisor

Sara Walker, RN Unit Rep

Staffing Grid for Patient Census

Staffing is based on AWHONN Standards for Professional Registered Nurse Staffing for Perinatal Units (see attached).

TABLE 1 STANDARDS FOR PROFESSIONAL REGISTERED NURSE STAFFING FOR PERINATAL UNITS ^a	
Nurse-to-Woman or Nurse-to-Baby Ratio	Patient Type/Clinical Situation
Antepartum	
1 to 2-3	Women during nonstress testing
1 to 1	Woman presenting for initial obstetric triage
1 to 2-3	Women in obstetric triage after initial assessment and in stable condition
1 to 3	Women with antepartum complications in stable condition
1 to 1	Woman with antepartum complications who is unstable
1 to 1	Continuous bedside attendance for woman receiving IV magnesium sulfate for the first hour of administration for preterm labor prophylaxis and no more than 1 additional couplet or woman for a nurse caring for a woman receiving IV magnesium sulfate in a maintenance dose
1 to 2	Women receiving pharmacologic agents for cervical ripening
Intrapartum	
1 to 1	Woman with medical (such as diabetes, pulmonary or cardiac disease, or morbid obesity) or obstetric (such as preeclampsia, hypertensive crisis, multiple gestation, fetal demise, some indeterminate and all abnormal FHR patterns, women having a trial of labor attempting vaginal birth after cesarean birth) complications during labor
1 to 1	Woman receiving oxytocin during labor
1 to 1	Woman laboring with minimal to no pain relief or medical interventions
1 to 1	Woman whose fetus is being monitored via intermittent auscultation
1 to 1	Continuous bedside nursing attendance to woman receiving IV magnesium sulfate for the first hour of administration; ratio of 1 nurse to 1 woman during labor and until at least 2 hours postpartum and no more than 1 additional couplet or woman in the patient assignment for a nurse caring for a woman receiving IV magnesium sulfate during postpartum
1 to 1	Continuous bedside nursing attendance during initiation of regional anesthesia until condition is stable (at least for the first 30 minutes after initial dose)
1 to 1	Continuous bedside nursing attendance to woman during the active pushing phase of second-stage labor
1 to 2	Women in labor without complications
2 to 1	Birth; 1 nurse responsible for the mother and 1 nurse whose sole responsibility is the baby
Postpartum and Newborn Care	
1 to 1	Continuous bedside nursing attendance to woman in the immediate postoperative recovery period (for at least 2 hours)
1 to 3	Mother-baby couplets after the 2-hour recovery period (with consideration for assignments with mixed acuity rather than all recent postcesarean cases)
1 to 2	Women on the immediate postoperative day who are recovering from cesarean birth as part of the nurse-to-patient ratio of 1 nurse to 3 mother-baby couplets
1 to 5	Women postpartum without complications (no more than 2-3 women on the immediate postoperative day who are recovering from cesarean birth as part of the nurse-to-patient ratio of 1 nurse to 5 women without complications); their newborns are cared for by another nurse
1 to 3	Women postpartum with complications who are stable
1 to 5	Healthy newborns in the nursery requiring only routine care whose mothers cannot or do not desire to keep their baby in the postpartum room; their mothers are cared for by another nurse
1	At least 1 nurse physically present at all times in each occupied basic care nursery when babies are physically present in the nursery

(continued on next page)

Nurse-to-Woman or Nurse-to-Baby Ratio	Patient Type/Clinical Situation
1 to 1	Newborns undergoing circumcision or other surgical procedures during the immediate preoperative, intraoperative, and immediate postoperative periods
1 to 3-4	Newborns requiring continuing care
1 to 2-3	Newborns requiring intermediate care
1 to 1-2	Newborns requiring intensive care
1 to 1	Newborn requiring multisystem support
1 or more to 1	Unstable newborn requiring complex critical care
1	At least 1 nurse available at all times with skills to care for newborns who may develop complications and/or need resuscitation
2	Situations involving neonatal specialty care for fewer than 6 intermediate-care babies or 4 or fewer intensive care babies require a minimum of 2 registered nurses with neonatal expertise and training
Minimum Staffing	
2	A minimum of 2 nurses in the hospital as minimum staffing, even when there are no perinatal patients. Two nurses are needed to be able to safely care for a woman who presents with an obstetric emergency that may require cesarean birth (1 nurse circulator and 1 baby nurse, one or both of whom should have obstetric triage, labor, and fetal assessment skills; the baby nurse must be skilled in neonatal resuscitation as per the American Academy of Pediatrics and the American Heart Association neonatal resuscitation program). A scrub nurse or surgical tech should be available in the hospital or on call such that an emergency birth can be accomplished in a timely manner consistent with the patient's clinical situation. Another labor nurse should be called in to be available to care for any other pregnant woman who may present for care while the first 2 nurses are caring for the woman undergoing cesarean birth and during postanesthesia recovery.

Note. See the full text for presumptions and conditions that may affect the stated ratios in each instance. FHR = fetal heart rate; IV = intravenous.
 *It should be recognized that these staffing ratios represent minimal staffing, require further consideration based on acuity and needs of the service, and presume that there will be ancillary personnel to support the nurse.

Nurse Staffing Plan Template

2023 Staffing Unit Plan Overview

Pediatrics Staffing Guidelines

Unit Leadership:

Barb Lawson, RN Director
 Tami Clark, RN Clinical Manager
 Mandy Cortes, RN Clinical Supervisor
 Peggie Griffith, RN Unit Rep

DE Shift

Census	RN's	CNA	Notes
0-3	1		
4-6	2	1 (as needed)	Could do 1 RN + CNA for 4 pts-dependng on acuity
7-9	3	1 (as needed/available)	Could do 2 RNs + CNA for 7 pts-dependng on acuity

Infusion Patients			
1-3	1-2		Depending on monitoring needs during infusion

EN Shift

Census	RN's	CNA	Notes
0-3	1		
4-6	2	1 (as needed)	Could do 1 RN + CNA for 4 pts-depending on acuity
7-9	3	1 (as needed)	Could do 2 RNs + CNA for 7 pts-depending on acuity

Medical Unit One Staffing Guidelines

Unit Leadership:

Thea Wertman RN, MSN, CVRN, Director

Leeza Thomas, RN, Manager

Erica Reinfeld, RN Staff Representative

Medical Unit 1 Staffing Grid														
07-1530			1500-1930			19-2300			2300-0730			HPPD		
Pt	RN	CNA	Pt	RN	CNA	Pt	RN	CNA	Pt	RN	CNA	7.45	5.35	12.8
												RN	CNA	Total
1	2	0	1	2	0	1	2	0	1	2	0	48.00	0.00	48.00
2	2	0	2	2	0	2	2	0	2	2	0	24.00	0.00	24.00
3	2	0	3	2	0	3	2	0	3	2	0	16.00	0.00	16.00
4	2	0	4	2	0	4	2	0	4	2	0	12.00	0.00	12.00
5	2	1	5	2	1	5	2	1	5	2	1	9.60	4.80	14.40
6	2	1	6	2	1	6	2	1	6	2	1	8.00	4.00	12.00
7	2	2	7	2	2	7	2	1	7	2	1	6.86	5.14	12.00
8	3	2	8	2	2	8	2	2	8	2	1	7.00	5.00	12.00
9	3	2	9	3	2	9	3	2	9	2	2	7.11	5.33	12.44
10	3	2	10	3	2	10	3	2	10	3	2	7.20	4.80	12.00

2023 Staffing Unit Plan Overview

Resource Department/Vascular Access Department Staffing Guidelines

Unit Leadership:

Kim Collier, RN, Director
Steve Dickens, RN, Clinical Manager
Angie Berry, RN Unit Rep

Staffing Grid for Patient Census

Since the Resource Department does not have any patients in the department we staff based on a fixed rate for each role.

Vascular Access Nurse = 1 Nurse per shift

Resource Nurse D/E = 2-3 Nurses per shift

Resource Nurse E/N = 1-2 Nurses per shift

Stat CNA D/E = 2 CNAs per shift

Stat CNA E/N = 1 CNA per shift

Resource CNA D/E = 2-3 CNAs per shift

Resource CNA E/N = 2-3 CNAs per shift

House Supervisor = 2 per shift Monday – Friday, 1 per shift Saturday and Sunday

Staffing Office = 1 clerk 0430-1500 daily, 1 clerk 1430-2300 Monday – Friday, 1 clerk 1230-2230 daily

Non-clinical sitter = 1 per shift

Nurse Staffing Plan

2023 Staffing Unit Plan Overview

ED Staffing Guidelines

Unit Leadership:

Janna Finley, RN, Interim Director
Janna Finley, RN, Interim Clinical Manager
Erin Schwartz, RN, Staff Co-Chair
Jasmine Hutchinson, RN, Staff Representative

Staffing Grid for Patient Census

	0700	0800	0900	1000	1100	1200	1300	1400	1500	1600	1700	1800
RN	5	5	6	7	9	9	10	11	11	11	10	10
EDT	2	2	2	3	3	3	3	3	4	4	4	4
NUC	1	1	1	1	1	1	1	1	1	1	1	1
	1900	2000	2100	2200	2300	2400	0100	0200	0300	0400	0500	0600
RN	10	10	10	9	7	7	6	6	5	5	5	5
EDT	4	4	4	3	3	3	3	3	2	2	2	2
NUC	1	1	1	1	1	1	1	1	1	1	1	1

Surgical Services – Pre-Op and Post-Op Unit Staffing Guidelines

Unit Leadership:

Liz Dittbrender, RN, MSN, Director of Perioperative Services

Tonya Rivera, RN, Peri-Op Clinical Manager

Billie Ritzke, RN, Peri-Op Supervisor

Jaylene Spitler, RN, Staff Representative

Pre-Admit Office Hours 0800-1830

RNs (used to backfill for sick calls and as staffing resource when patient census is high)

Staff	Monday	Tuesday	Wednesday	Thursday	Friday
RNs	3	3	3	3	3

Pre-Op Hours 0500-1700

Charge RNs (0530-1800)

RNs (Shift start times – 0515, 0530, 0545, 0600)

HUC (0500-1330)

CNA (Shift start times – 0530, 0545)

Staff	Monday	Tuesday	Wednesday	Thursday	Friday
Charge RN	1	1	1	1	1
RNs	7	7	7	7	5
HUC	1	1	1	1	1
CNA	2	2	2	2	2

*Mondays & Wednesdays Cataract/Eye block (3 additional RNs needed and 1 additional CNA)

Post-Op Hours 0800-2100

RNs (Shift start times – 0800, 0900, 0930, 1030)

CNA (0800,0900)

HUC (0730,0900)

Staff	Monday	Tuesday	Wednesday	Thursday	Friday
RNs	6	6	6	6	6

CNA	2	2	2	2	2
HUC	2	2	2	2	2
Total RNs	17	17	17	17	15
Total Staff	24	24	24	24	22

- Pre-Op breaks/lunches during the gaps of patients arriving
- Post-Op breaks/lunches – RNs assigned to cover
- Staffing Office is not utilized in this area for ill calls
- Increase in NORA block approved on Mondays and Fridays
- Same day D/C for Total Joints, Spines, GYN & Cardiac cases that used to go to inpatient
- Staffing adjustments based on patient census expected to come through the department from Recovery Phase I, OR, GI, Pulmonary, IR, DI, Cath Lab NORA (non-anesthesia procedures)

Uncapped Otholomology Block Monday-Thursday

Surgical Services Staffing Guidelines

Unit Leadership:

Liz Dittbrender, RN, MSN, Director of Perioperative Services

Dawna Fox, RN, Manager

Catherine Shellabarger, RN Unit rep

AM Shift Weekday 0630-1700 including OH and SSR (if OH include one perfusionist for the entirety of the case) M-Th including SSRs.

Census	RN's (incl. charge)	CSTs	ATs	SSTs	RNFAs
10 ORs	21-23	18-20	4	10	3

AM Shift Weekday 0630-1700 including OH and SSR (if OH include one perfusionist for the entirety of the case) Friday including SSRs.

Census	RN's	CSTs	ATs	SSTs	RNFAs
8 ORs	15-17	12	3	8	2

Evening Shift Weekday 1700-1900 ((if OH include one perfusionist for the entirety of the case)

Census	RN's	CSTs	ATs	SSTs	RNFAs
5 ORs	10	10	4	4	2

PM Shift Weekday 1930-2130

Census	RN's	CSTs	ATs	SSTs	RNFAs
2 ORs	3	2	1	2	variable

NOC shift 2130-0700 On call for emergencies only Sunday- Thursday including OH (if OH include one perfusionist for the entirety of the case)

Census	RN's	CSTs	ATs	SSTs	RNFAs
OR 2	3	3	1 on call	0	0

Weekend 0700-01930 including OH (if OH include one perfusionist for the entirety of the case)

Census	RN's	CSTs	ATs	SSTs	RNFAs
3 ORs	6	6	1 on call	1 on call	variable

Weekend 1930-2130 including OH (if OH include one perfusionist for the entirety of the case)

Census	RN's	CSTs	ATs	SSTs	RNFAs
2 ORs	4	3	1	0	variable

Holiday 0700-1930 including OH (if OH include one perfusionist for the entirety of the case). The department is closed (except for Black Friday) so all assignments are on call.

Census	RN's	CSTs	ATs	SSTs	RNFAs
3 ORs	5	4	1	1	variable

Holiday 1930-0700 including OH (if OH include one perfusionist for the entirety of the case). The department is closed (except for Black Friday) so all assignments are on call.

Census	RN's	CSTs	ATs	SSTs	RNFAs
2 ORs	4	3	1	1	variable

Recovery Room Staffing Guidelines

Unit Leadership:

Liz Dittbrender, RN, MSN, Director of Perioperative Services
 Tonya Rivera, RN, Peri-Op Clinical Manager
 Billie Ritzke, RN, Peri-Op Supervisor

Recovery Hours 24/7 for 365 days

Mandatory Call Department-weeknights, weekends, Holidays

RNs (0730, 0800, 0830, 0900, 0930)

RNs (2100-0930 Friday-Saturday Eve/Night On Call)

RNs (2100-0730 Sunday-Thursday Eve/Night Call LOU)

Staff	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
RNs (Day)	8	8	8	8	7	2	2
RNs (E/N Friday-Sat On Call)					2	2	
RNs (E/N Sun-Thurs Call-LOU)	2	2	2	2			2
Total	10	10	10	10	9	4	4

- Recovery breaks/lunches during the gaps of patients arriving
- RNs work 10 and 12 hours shifts with weekend and holiday standby and call back
- 2 RNs work mandatory on call weekday E/N shift on Sunday at 2100 until Friday at 0730-LOU
- Follow ASPAN Guidelines (Ratio RN/Patient):
 - 1:2 extubated stable patients
 - 1:1 for intubated patients
 - 2:1 ICU unstable patient overflow
 - 2:1 Pediatric patients
- Charge RN takes patient assignments
- No transport - RNs transport their own patients to the next level of care
- Staffing adjustments based on patient census in the Recovery Phase I and OR

Endoscopy Staffing Guidelines

Unit Leadership:

Liz Dittbrender, RN, MSN, Director of Perioperative Services
 Tonya Rivera, RN, Peri-Op Clinical Manager
 Billie Ritzke, RN, Peri-Op Clinical Supervisor
 Cynthia Konicke, RN, Unit rep

Endoscopy Hours 24/7 for 365 days

Mandatory On Call weeknights, weekends, and holidays

Staff	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Charge RN (0700-1730)	1	1	1	1	1		
RNs (0700-1930)	3	3	3	3	3	1	1
Techs (0700-1930)	3	3	3	3	3	1	1

RNs (1930-0700)	1	1	1	1	1	1	1
Techs (1930-0700)	1	1	1	1	1	1	1

- Procedures are done in OR #12, main OR, and at patient bedside
- 1 Team = 1 RN and 1 Tech
- 1 Team on call at all times when department has no scheduled cases
- Staffing plan updated to reflect additional block time
- Breaks/lunches are covered by float team if available. Procedure room pauses if no coverage available.
- Will be scheduling 1 RN and 1 Tech in addition to the On Call Team on Saturdays and Sundays

Interventional Lab Services: Electrophysiology Lab, Interventional Radiology and Cath Lab Staffing Guidelines

Unit Leadership:

Brenda Yost, RN, MHA, PhD, NEA-BC, Vice President Specialty Services

Heather Scott, RN, Nurse Clinical Supervisor

Interventional Lab Hours: 24/7 for 365 days

Mandatory On Call weeknights, weekends and holidays.

Staff	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Charge RN	1	1	1	1	1		
RN (0630-1700)	8	8	8	8	8	2	2
Tech (0630-1700)	8	8	8	8	8	2	2
RN (1700-0630)	2	2	2	2	2	2	2
Tech (1700-0630)	2	2	2	2	2	2	2

RN/Patient Ratio

1:1 for stable patients

2:1 for ICU/unstable patients

Nurse Staffing Plan Template

2023 Staffing Unit Plan Overview

Department: Wound and Ostomy

Author: Stacey Malstead

1. Nursing Department Overview

- Average daily census: 15
- Average number of admits/ discharges/transfers: N/A
- Average length of stay: N/A

2. Key Quality Indicators

No Staff turnover in 2022. No open positions in this department.

3. Staffing Grid for Patient Census

The Wound and ostomy Department covers inpatient wound and ostomy care on all inpatient hospital units. They also average 6 outpatient ostomy appointments per week.

Day Shift Monday through Friday

Census	RN's	Rehab Aides	Other	Notes
15	3-4	2		

Day shift Saturday

Census	RN's or PT	Rehab Aides	Other	Notes
5-8	1	1		

Hospice Staffing Guidelines

Unit Leadership:

Megan Collyer, MSW, Director of Home Care Services

Tana White, OT, Clinical Manager

Randi Marshall, RN, Clinical Supervisor

Lisa Bauer, RN, Staff Representative

Skill Mix:

- Admission RN
- RN Case Managers
- Charge RN
- RN on Call Position
- RN Pool
- LPN
- Hospice Medical Director
- Hospice Team Physicians
- Medical Social Workers
- Chaplains
- Certified Nursing Assistants
- MSW Volunteer Coordinator/Bereavement Coordinator
- PT, OT, SLP for consultation

**Nursing Case Managers
Average Caseloads**

RN Case Managers	12-18 patients
LPN	10-15 patients

Call Nights

- (1) Primary Call RN weekdays 1630-0800 the next day with (1) backup standby RN covering the same hours (This role covers both Home Health and Hospice).

Call Weekends

- (1) Primary Call RN for 24 hours (0800-0800 the next day) with (1) RN backup standby RN covering the same hours (This role covers both Home Health and Hospice).

Charge RN Weekday or Weekend

- Duties include assuming primary triage, coordination of staff schedules and assignments and as needed visits. These are scheduled either as 8 or 10 hour shifts.

Admit RN Weekday or Weekend

- Admission RNs are scheduled 7 days per week to meet timely admission requirements. These are scheduled either as 8 or 10 hour shifts.

Home Care Services Staffing Guidelines

Unit Leadership:

Megan Collyer, MSW, Director of Home Care Services

Tana White, OT, Clinical Manager

Rebecca Heffner, RN, Clinical Supervisor

Lisa Bauer, RN, Staff Representative

Skill Mix:

- Admission RN
- RN Case Managers
- Charge RN
- RN on Call Position
- RN Pool
- LPN
- Medical Social Workers
- Certified Nursing Assistants
- Physical Therapists
- Occupational Therapists
- Speech Language Pathology

Nursing Case Managers Average Caseloads

RN Case Managers	15-25 patients
LPN	15-25 patients

Call Nights

- (1) Primary Call RN weekdays 1630-0800 the next day with (1) backup standby RN covering the same hours (This role covers both Home Health and Hospice).

Call Weekends

- (1) Primary Call RN for 24 hours (0800-0800 the next day) with (1) RN backup standby RN covering the same hours (This role covers both Home Health and Hospice).

Charge RN Weekday or Weekend

- Duties include assuming primary triage, coordination of staff schedules and assignments and as needed visits. These are scheduled either as 8 or 10 hour shifts.

Admit RN Weekday or Weekend

- Admission RNs are scheduled 7 days per week to meet timely admission requirements. These are scheduled either as 8 or 10 hour shifts.

Nurse Staffing Plan

2023 Staffing Unit Plan Overview

Care Management Department Staffing Guidelines

Unit Leadership:

Stacy Canada, Director

Heather Hubbs, Clinical Manager

Kelsey Ferguson, Unit Rep.

4. Nursing Department Overview

- "Case Management in Hospital/Health Care Systems is a collaborative practice model including patients, nurses, social workers, physicians, other practitioners, caregivers and the community. The Case Management process encompasses communication and facilitates care along a continuum through effective resource coordination. The goals of Case Management include the achievement of optimal health, access to care and appropriate utilization of resources, balanced with the patient's right to self-determination."
- Average daily census: 144
- Average length of stay: 4.4

5. Staffing Grid for Static Bed Census

The Care Management Department has a staffing model based on a variable daily patient census and static bed assignments. The Care Management Department utilizes a daily staffing grid to indicate staff assignments and roles for their shift. The daily staffing grid is based on the staffing model published by the American Case Management Association. The Charge Nurse reviews the staffing grid each day and makes staff assignments according to continuity of patient needs, competency, training and experience. The Care Management Department Charge Nurse is available to assist with patient care.

Weekday days staffing model:

TRIAD MODEL (Utilization Management/Care Coordination/Social Work)

Discipline	Medical Beds	Surgical Beds	Specialty Areas/ED
Care Coordination Medical D/C Planning Patient Progression Readmission Avoidance	1:18-20	1:20-25	1:18
Ancillary Staff Regulatory Compliance Prior Authorizations Connecting to Post-Acute Services	1:18-20	1:20-25	1:18
Utilization Management Oversight of UM COP's Concurrent Reviews Real Time Denial Management	1:45	1:50	1:45

Clinical Social Work <i>Social D/C Planning/Regulatory Crisis Intervention Readmission Avoidance</i>	1:30	1:40	1:25
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Weekend/Holiday days staffing model:

TRIAD MODEL
(Utilization Management/Care Coordination/Social Work)

Discipline	Medical Beds	Surgical Beds	Specialty Areas/ED
Care Coordination <i>Medical D/C Planning Patient Progression Readmission Avoidance</i>	2-3:house	2-3:house	2-3:house
Ancillary Staff <i>Regulatory Compliance Prior Authorizations Connecting to Post-Acute Services</i>	1:house	1:house	1:house
Utilization Management <i>Oversight of UM COP's Concurrent Reviews Real Time Denial Management</i>	1:house	1:house	1:house
Clinical Social Work <i>Social D/C Planning/Regulatory Crisis Intervention Readmission Avoidance</i>	1:house	1:house	1:house

2023 Staffing Unit Plan Overview

Department: **Outpatient Oncology Clinic & Infusion Center**

Author: Spencer D. Green, Oncology / Infusion Service Line Director

Nursing Department Overview

Our Outpatient Medical Oncology departments provide care to patients diagnosed with cancer, averaging 1500 new analytic cases annually. We have locations in Wenatchee, Moses Lake and Omak, and are staffed with a total of 6 Medical Oncologists and 4 APRN's. Our Outpatient Infusion departments care for patients receiving treatment for both cancer and non-cancer, to include chemo analytics, non-chemo analytics, biotherapies, blood product, antibiotics, etc.

6. Staffing Grid for Patient Census

Staffing for Infusion is based on acuity. Each patient is assigned acuity based on time of infusion, number of drugs in treatment, interventions required by RN and potential for adverse reaction to medications in treatment. The acuity levels assigned are 1-5. The standard is to have a ratio of one nurse to 15-22 acuity level.

Our normal days / hours of operation are weekdays (occasional weekends) day shift, 7am – 6pm.

Per Shift

Location	RN's	MA's	Oncology RN Navigators	Notes
Wenatchee Medical Oncology		3-7 dependent on Providers in	3-5 dependent on Providers in	
Wenatchee infusion	6-7 dependent on total patient acuity			
Moses Lake Oncology		1	1	
Moses Lake Infusion	2-3 dependent on total patient acuity			
Omak Oncology		1	1	
Omak Infusion	2-3 dependent on total patient acuity			

Confluence Health Hospital Mares Campus – Medical/Surgical/Rehabilitation Staffing Guidelines

Unit Leadership:

Angie Jeske, RN, Nursing Manager

Vacant Position - Staff Representative

7. Nursing Department Overview

Confluence Health Hospital - Mares Campus is a 20-bed hospital with two separate units, Medical/Surgical and Acute Inpatient Rehab.

- Med/Surg average daily census: 5.3
- Med/Surg average length of stay: 6.0 days
- Rehab average daily census: 4.72
- Rehab average length of stay: 13.25
- Other statistics:
 - Surgical Outpatient Midnights: 448
 - Outpatient observation days: 386
 - Outpatient infusions: 667

8. Key Quality Indicators

- Falls
- HAPIS
- CAUTI
- Hand Hygiene completed percentatge
- Patient satisfaction (Would recommend facility)

9. Staffing Grid for Patient Census for planned ADC of 10

Confluence Health Hospital - Mares Campus Inpatient units utilize RNs and CNAs for patient care. This is a closed unit that does not have a resource pool of staff to be utilized.

Current Staffing Patterns (Core):

Days: 1 RN to 5 patients; 1 CNA to 5-7 patients

Nights: 1 RN to 5 patients; 1 CNA to 5-8 patients

WVH Medical-Surgical Unit

DAYS
0600-1830

# Pts	RN	CNA
1	1	0
2	1	0
3	1	1
4	1	1
5	2	1
6	2	1
7	2	1
8	2	2
9	2	2
10	3	2
11	3	2

NIGHTS
1800-0630

# Pts	RN	CNA
1	1	0
2	1	0
3	1	1
4	1	1
5	2	1
6	2	1
7	2	1
8	2	2
9	2	2
10	3	2
11	3	2

Direct
Hrs/Patient

24.00
12.00
16.00
12.00
14.40
12.00
10.29
10.50
10.67
12.0
10.91

Budget

8.49

WVH Acute Rehab Unit

DAYS
0600-1830

# Pts	RN	CNA
1	1	0
2	1	0
3	1	1
4	1	1
5	2	1
6	2	1
7	2	1
8	2	1
9	2	2

NIGHTS
1800-0630

# Pts	RN	CNA
1	1	0
2	1	0
3	1	1
4	1	1
5	2	1
6	2	1
7	2	1
8	2	1
9	2	2

Direct
Hrs/Patient

24.00
12.00
16.00
12.00
14.40
12.00
10.29
9.0
10.67

Budget

10.19

The above grid is a guideline, acuity and patient care needs should be considered. The Charge RN is included in the grid of each area, one is assigned to each unit at all times, depending on census they may take patients.

*RN patient loads are 4-5 *CNA patient loads are 7-9

Confluence Health Hospital - Mares Campus - Surgical Services/Operating Room Staffing Guidelines

Unit Leadership:

Kelly Zellefrow, RN CNOR, OR and Sterile Processing
Manager, RN,
Shane Pratt-Staff Representative

1. Nursing Department Overview

This department provides operative care for patients 6 months of age to the elderly. These patients are having predominantly elective surgical procedures or blood transfusions and other infusions. We have 6 operating rooms and 4 procedure rooms. Our hours of operation are Monday through Friday, typically from 0730 to 1730. We have on-call staff for after hours, holidays and weekends.

- Average daily census: 24.30
- Average number of infusions: 4
- Average case length: 90 minutes

2. Key Quality Indicators

- PG satisfaction Scores
- Positive Gallop Poll results
- Number of AORN certified nurses
- Medication bar code compliance
- Hand Hygiene

3. Staffing for Patient Census of 24-30 patients in the perioperative area.

The WVH Operating rooms are an outpatient/inpatient department with a staffing model based on a variable but mostly predictable daily patient census. We use AORN staffing guidelines to create a daily staff assignments and roles for their shift. The Charge Nurse creates a staff assignment daily and makes staff assignments according to patient needs and nurse competency, training, and experience. They also routinely cover breaks and lunches.

Day shift:

Nurses and CST's working 8 and 10 hours shifts

- Charge RN: 1 RN who also helps with breaks and lunches
- Each of our 6 operating rooms is staffed at minimum of a 1 RN circulator and one CST or Scrub RN
- Other licensed staff is assigned to individual ORs based on need for 2nd scrubs/camera holders and float break/lunch relief

On-Call RNs and CST's- After hours, holidays and weekends

The above staffing plan is contingent upon the follow supports/ considerations.

- Receptionists: 0600-1800
- WVH Pharmacy
- Respiratory Therapy / Lab

National Staffing Guidelines Adopted

"AORN Position Statement: Perioperative Safe Staffing and On-Call Practices." AORN, Inc.
<https://www.aorn.org/guidelines/clinical-resources/position-statements>

"Conditions of participation for hospitals; surgical services," 42 CFR 482.51 (a)(3), Centers for Medicare and Medicaid Services.

Other personnel assigned to support nursing services:

- 2.5 OR housekeepers with staggered start times
- 1 Central Processing Lead, 6 Certified Registered Central Processing Technicians with staggered start times.
- 2 Radiology Technicians provided by the Radiology Department based on need.
- 1 RN circulator and 1 scrub person are available on call after hours for emergency purposes. RN circulator will assist the recovery room RN during the post-operative phase in the event of an on-call situation.

Confluence Health Hospital - Mares Campus – Pre-Op/PACU/Recovery Staffing Guidelines

Unit Leadership:

Deb Andre, RN, BSN, CAPA-Nurse Manager

Chrissy Port, RN, BSN, CAPA-Supervisor

Kelly Hedges, RN, Staff Representative

1. Nursing Department Overview

This department provides pre-op and post-operative care for patients 6 months of age to the elderly; having predominantly elective surgical procedures or blood transfusions and other infusions. We have 6 operating rooms and 4 procedure rooms. Our hours of operation are Monday through Friday, typically from 0730 to 1930. We have on-call staff for after hours, holidays and weekends.

- Average daily census: 24.30
- Average number of transfusions/infusions: 4
- Average length of stay: Outpatient 240 minutes / Inpatient 180 minutes (prior to transfer)

2. Key Quality Indicators

- PG Satisfaction scores
- Positive Gallop Poll results
- Increase the number of CAPA certified nurses
- Hand Hygiene
- Medication Bar Code compliance

Our skill mix is primarily Registered Nurses (full-time & pool) plus Certified Nurse's aides along with ancillary staff to include Schedulers, Pre-op Case Managers, Receptionists, Case Reviewer, Radiology, Lab, and Housekeeping. Staff turnover is infrequent and typically recruitment is successful.

3. Staffing for Patient Census of 24-30 patients in the perioperative area.

The Pre-op and Recovery Department is an outpatient/inpatient department with a staffing model based on a variable but mostly predictable daily patient census. The Pre-op & Recovery Department utilizes ASPAN staffing guidelines to create a daily staff assignments and roles for their shift. Staff is crossed trained to care for patients in Pre-op, Phase One, Phase Two and Infusions. The Charge Nurse creates a staff assignment daily and makes staff assignments according to patient needs and nurse competency, training, and experience. They are available to assist with patient care, pre-op, and post phone calls.

Days: Staggered start and end times depending on census and acuity.

- Perioperative Supervisor-1 RN
- Charge RN: 1 RN helps with breaks and lunches, takes patients as needed.
- Pre-Admit: 1 RN completes patient pre- and post-op calls and helps with breaks and lunches.
- Pre-op: 2 RN + 1 CNA
- Phase 1: 2-3 RN
- Phase 2: 2-3 RN +1 CNA
- Cataract and Retina admits: 2-3 RN

- Float/Transfusions/Infusions: 1-2 RNs has needed. Also assist with break/lunch relief.
- 1 Pre-op/ Recovery Nurse on-call after hours for emergency purposes. RN circulator will assist the recovery room RN during the post-operative phase in the event of an on-call situation.

Day/Evening Shift: 7am-730pm

- 2 RNs with a 3rd PRN

National Staffing Guidelines

ASPAN, AORN

Other Personnel Assigned to Support Nursing Services:

- Receptionists: 0600-1800
- Pharmacists: CWH pharmacists utilized after hours.
- Respiratory Therapy
- Physical Therapy
- Occupational Therapy
- Perioperative Case Managers

Confluence Health Hospital - Mares Campus-Emergency Department Staffing Guidelines

Unit Leadership: vacant, Nursing Manager
Deborah Schlotfeldt, Clinical Supervisor
Beverly Battis, RN Staff Representative

1. Nursing Department Overview

- Average daily census: 50
- Average ESI: 3.5
- Average number of admits/ discharges/transfers: 1/48/2
- Average length of stay: Discharged 120 minutes, admitted 260 minutes

2. Key Quality Indicators

- Arrival to Triage
- Arrival to Provider
- LOS

3. Staffing Grid for Patient Census

The Emergency Department aligns with the Emergency Nurses Association to maintain a 4:1 patient to nurse ratio. is an outpatient department that has a staffing model based on a variable dally patient census. The Emergency Department Charge Nurse is available to assist with patient care.

	0700	0800	0900	1000	1100	1200	1300	1400	1500	1600	1700	1800
RN	3	3	4	4	5	5	5/6	5/6	5/6	5/6	5/6	5/6
EDMA	1	1	1	1	2	2	2	2	2	2	2	2
US	1	1	1	1	1	1	1	1	1	1	1	1
	1900	2000	2100	2200	2300	2400	0100	0200	0300	0400	0500	0600
RN	5/6	4/5	4	4	4	3	3	2	2	2	2	2
EDT	2	2	2	2	2	1	1	1	1	1	1	1
US	1	0	0	0	0	0	0	0	0	0	0	0

Confluence Health Hospital - Mares Campus – Walk-In Clinic Staffing Guidelines

Unit Leadership:

Kelly Allen, DNS

Deborah Schlotfeldt, Clinical Supervisor

Number of patients per day: 50-100

(Capacity)

Requirements of Staff/Skill Mix:

- There are 8 Advanced Practice Providers
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 1-3 APPs
 - 2-3 Medical Assistants
 - 1-2 RNs
 - 0-1 LPNs
 - 1–2 Receptionists
- Support Services available in department:
 - Respiratory Therapy
 - Diagnostic Imaging
 - Laboratory
 - Environmental Services

Moses Lake - Walk-In Clinic Staffing Guidelines

Unit Leadership:

Luther Thompson MD – Physician

Manager Kristen Vedder RPh, - Practice

Manager III

Skill Mix:

- RNs/LPNs x 2 per shift
- MA-C x 1 per shift

Current Staffing Patterns (Core):

- Days: M-F 0800 to 2000
 - RNs/LPNs x 2
 - MA's x 1
- S-S 0800 to 1630
 - RNs/LPNs x 2
 - MA's x 1

Other Personnel Assigned to Support Nursing Services:

- Diagnostic Imaging

- Laboratory

Confluence Health Hospital - Mares Campus - GI Department Staffing Guidelines

Unit Leadership:

Jennifer Jorgensen, MD Physician

Skylar Gouldin, Manager

Malissa Thorson, RN - Supervisor

Skill Mix:

- GI Staffing per SGNA guidelines
 - 1 RN/1 GI tech per procedure room
 - 1 GI tech washing scopes

Current Staffing Patterns (Core):

1. Patterns vary depending on procedure schedule and complexity of the patients.
2. Information from national peri-operative organizations such as AORN and ASPAN are utilized to establish staffing guidelines.

a. Procedure Room 1	1 RN (Sedation) and 1 RN/LPN or GI tech assisting MD
b. Procedure Room 2	1 RN/LPN (admit) and 1 RN/LPN or GI tech assisting MD
c. Admit/Discharge	2 RN/LPN
d. Workroom	1 RN/LPN, MA-C/MA-R or GI tech (with training)

Behavioral Health Staffing Guidelines

Unit Leadership:

Tess Timmons, Director

Craig Mott, Manager

- **Number of patients per day:**
 - Average 100 patients/day in Wenatchee.
 - Average 30 patients/day in Moses Lake
 - Average 7 patients/day in North Country

Requirements of Staff/Skill Mix:

- There are 2 Physicians, 10 ARNP, and 14 NP2s.
- Daily Staffing range shows the minimum number required up to the maximum available

Wenatchee Behavioral Health:

- 0 - 2 Physicians
- 0 - 6 ARNPs
- 1 - 2 Medical Assistants depending on number of providers
- 0 - 2 RNs
- 3 – 5 receptionists

Moses Lake Behavioral Health:

- 0 - 2 ARNPs
- 0 - 1 LPNs
- 1 receptionist

North Country Behavioral Health:

- 0 - 2 ARNPs
- Support Services available in department:
 - Receptionists
 - MA-C/MA-R
 - Integrated Behavioral Health

Staffing Plan to cover RN for planned and unplanned leave is for LPN, MA-C/MA-R staff to refer to the APPs in the department to perform necessary duties.

Brewster Clinic – Family Medicine Staffing Guidelines

Unit Leadership:

Melanie Neddo, Director
Hunter Esmiol, Manager

Number of patients per day: 40-50

Requirements of Staff/Skill Mix:

- There is 1 Physician, 1 ARNP, and 1 PA-C
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 2 providers staff the department daily with either 1 physician & 1 APP or 2 APP's
 - 1 Physician staffs the department three days per week
 - 1 ARNP and/or PA-C staffs the department daily
 - 2 – 3 Medical Assistants depending on number of providers
 - 0 RN staffs the department daily – *position posted for hire*
 - 1 – 2 receptionists staff the department daily depending on the number of providers. They also serve as reception for Dermatology who are there three to four days per week.
- Support Services available in department:
 - Integrated Behavioral Health one day per week remotely
 - Anticoagulation one day per week
 - ENT one day per month

Staffing Plan to cover Triage RNs for planned and unplanned leave: The Contact Center takes our phone calls so if anything needs to be triaged, those calls are handled by that staff. If no RN; Providers cover Walk-In Triage.

E Wenatchee Pediatrics Staffing Guidelines

Unit Leadership:

Kristen Vedder, Manager
Douglas Eisert, MD Physician Manager

Number of patients per day: 45-100

Requirements of Staff/Skill Mix:

- There are 3 Physicians, 1 ARNP, and 1 PA-Cs
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 1-3 Physicians
 - 1-2 ARNPs or PA-Cs
 - 5-8 Medical Assistants depending on number of providers
 - 2 RNs
 - 0 RN Supervisor- Manager is an RN
 - 0 Receptionists
- Support Services available in department:
 - Integrated Behavioral Health

- Case Management

Staffing Plan to cover Triage RNs for planned and unplanned leave for any questions or assistance, staff will utilize #1 RN Triage at Wenatchee Pediatrics. #2 E Wen Family RN. #3 any APP will be asked to assist (PPD read, onsite triage, Code Blue, etc.)

East Wenatchee Family Medicine and Walk In Staffing

Unit Leadership:

Allison Kuske, Manager East Wenatchee Family Medicine **EWC FMED**

FAMILY MEDICINE

Number of patients per day: 68-160

Requirements of Staff/Skill Mix:

- There are 6 Physicians, 2 ARNPs and 1 PA-C
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 1 - 6 Physicians
 - 1 - 3 ARNPs or PA-Cs
 - 5 - 18 Medical Assistants depending on number of providers
 - 0 - 1 RNs
 - 3 - 5 Receptionists
- Support Services available in department:
 - Integrated Behavioral Health
 - Integrated Pharmacist
 - Case Management

Staffing Plan to cover Triage RNs for planned and unplanned leave: _Contact Center will take all triage calls and not transfer to EWC. For any questions or assistance, staff will utilize #1 the RN in Walk In. #2 the Peds/IM RN. #3 any APP will be asked to assist (PPD read, onsite triage, Code Blue, etc.)

WALK IN

Number of patients per day: 20-91 EWC WALK IN

Requirements of Staff/Skill Mix:

- There are 3 ARNPs, and 2 PA-Cs
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 1 - 3 ARNPs or PA-Cs
 - 1-3 Medical Assistants 0-1 RNs
 - 1-3 Receptionists
- Support Services available in department:
 - Integrated Behavioral Health
 - Integrated Pharmacist
 - Case Management

Staffing Plan to cover Triage RNs for planned and unplanned leave: _Contact Center will take all triage calls and not transfer to EWC. For any questions or assistance, the staff will utilize #1 the RN in Family Medicine. #2 the Peds/IM RN. #3 any APP will be asked to assist (PPD read, onsite triage, Code Blue etc.)

Employee Health Staffing Guidelines

Unit Leadership:
Jason Morley, RN, Director of Employee Health

Number of patients per day: 5-30

Requirements of Staff/Skill Mix:

- There are 0 Physicians, 0 ARNP, and 0 PA-Cs
- Daily Staffing:
 - 3 RNs (Flexible RN coverage during COVID)
 - 1 Medical Assistant
 - 1 Program Assistant

Staffing Plan to cover Triage RNs for planned and unplanned leave: 1-2 RNs are expected to be available daily. No coverage, services would be cancelled until next available day, if all 3 RNs are out of the office.

Ephrata Family Medicine Staffing Guidelines

Unit Leadership:
Michael Delgado, Manager

Number of patients per day: 15 - 55

Requirements of Staff/Skill Mix:

- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 1 - 2 Physicians
 - 1 - 4 ARNP or PA-Cs
 - 4 - 6 Medical Assistants depending on number of Providers (converted 1 MA to a Lab Tech)
 - 1 RN
 - 1 Lab Technician
 - 1 Receptionist
- Support Services available in department:
 - Behavioral Health
 - Anticoagulation
 - Orthopedics
 - OB/Gyn

- Lab
- Radiology

Staffing Plan to cover Triage RN for planned and unplanned leave: Will be covered by the Nurse float pool.

Geriatrics Staffing Guidelines

Unit Leadership:
 Marcus Miller, Director ,
 Manager

Number of patients per day: 15-55

Requirements of Staff/Skill Mix:

- There are 3 Physicians, 3 ARNP, and 0 PA-Cs
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 1 - 2 Physicians
 - 0 - 3 ARNP or PA-Cs
 - 2 - 4 Medical Assistants depending on number of providers
 - 1 RN Supervisor
 - 1 Receptionist
- Support Services available in department:
 - **Case Management in IM or Fam Med**
 - **Social Services, as needed**

Staffing Plan to cover Triage RNs for planned and unplanned leave: If the RN Supervisor is unexpectedly out, RN coverage will be provided by one of the two RNs in Internal Medicine.

Internal Medicine Staffing Guidelines

Unit Leadership:
 Marcus Miller, Director
 Sydney Johnson, Manager

Number of patients per day: Average 145 patients per day.

Requirements of Staff/Skill Mix:

- There are 12 Physicians, 0 ARNPs, and 4 PA-Cs
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 6 - 12 Physicians
 - 0 - 4 ARNPs or PA-Cs
 - 15 - 27 Medical Assistants depending on number of providers
 - 0 – 1 RNs
 - 0 – 1 RN Supervisor

- 1 – 4 Receptionists
- Support Services available in department:
 - Integrated Behavioral Health
 - Case Management

Staffing Plan to cover Triage RNs for planned and unplanned leave: Utilization of RN's located in Family Medicine on the 1st and 2nd floor or the RN Supervisor from the Geriatric department for both telephone and in person triage as needed to cover for planned and unplanned leave.

Methow Valley Clinic – Family Medicine Staffing Guidelines

Unit Leadership:
 Melanie Neddo, Director
 Hunter Esmiol, Manager

Number of patients per day: 40-50

Requirements of Staff/Skill Mix:

- There are 2 Physicians, 1 ARNP, and 1 PA-C
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 2 providers staff the department daily with either 2 physicians, 1 Physician & 1 APP or 2 APP's
 - 1 – 2 Physician staffs the department daily
 - 1 – 2 ARNPs or PA-Cs staff the department daily
 - 2 – 3 Medical Assistants depending on number of providers
 - 1 RN staffs the department daily
 - 1 Receptionist staffs the department daily
 - 1 Referral/Pre-Auth Specialist staffs the department daily. This person also fills in for when the regular receptionists is off and/or when we need extra help.
- Support Services available in department:
 - Integrated Behavioral Health two days per week
 - We offer digital x-ray for patients needing this service

Staffing Plan to cover Triage RNs for planned and unplanned leave: The Contact Center takes our phone calls so if anything needs to be triaged, those calls are handled by that staff. There would be no one to handle walk-in triage on the days the RN is out (planned or unplanned) if the shift was not able to be covered by a pool RN. If no RN; Providers cover Walk-In Triage

Moses Lake Anticoagulation Staffing Guidelines

Unit Leadership:
 Ronni Nemeth, PharmD: Manager

Number of patients per day: 40-60

Requirements of Staff/Skill Mix:

- There are 0 Physicians, 1 ARNP, 1 PA-C and 1 Pharmacist
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 2 PA/ARNP
 - 1 Pharmacist (1-2 days per week)
 - 1 Medical Assistant
 - 1 LPN
 - 1 Receptionist

Staffing Plan to cover Triage RNs for planned and unplanned leave: Necessary RN triage and nursing duties are covered by providers in the clinic. Other duties not requiring an RN are covered by MAs within the department or by the float pool.

Ephrata Anticoagulation Staffing Guidelines

Unit Leadership:

Ronni Nemeth, PharmD: Manager

Number of patients per day: 20-30

Requirements of Staff/Skill Mix:

- There are 0 Physicians, 0 ARNPs, 1 PA-C and 1 Pharmacist
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 0 – 1 PA/ARNP
 - 1 Pharmacist (1-2 days per week)
 - 1 Medical Assistant
 - 0 RNs
 - 1 Receptionist

Staffing Plan to cover Triage RNs for planned and unplanned leave: Necessary RN triage and nursing duties are covered by providers in the clinic. Other duties not requiring an RN are covered by MAs within the department or by the float pool.

Wenatchee Anticoagulation Staffing Guidelines

Unit Leadership:

Ronni Nemeth, PharmD: Manager

Number of patients per day: 60-250

Requirements of Staff/Skill Mix:

- There are 0 Physicians, 3 ARNPs, 1 PA-C and 8 Pharmacists
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 4 PAs/ARNPs
 - 8 Pharmacists

- 6 Medical Assistants
- 1 RN
- 2 Receptionists

Staffing Plan to cover Triage RNs for planned and unplanned leave: Necessary RN triage and nursing duties are covered by providers in the clinic. Other duties not requiring an RN are covered by MAs within the department or by the float pool.

East Wenatchee Anticoagulation Staffing Guidelines

Unit Leadership:
Ronni Nemeth, PharmD: Manager

Number of patients per day: 20-30

Requirements of Staff/Skill Mix:

- There are 0 Physicians, 1 ARNP, 0 PA-C and 0 Pharmacists
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 1 PA/ARNP
 - 0 Pharmacists
 - 1 Medical Assistants
 - 0 RNs
 - 0 Receptionists

Staffing Plan to cover Triage RNs for planned and unplanned leave: Necessary RN triage and nursing duties are covered by providers in the clinic. Other duties not requiring an RN are covered by MAs within the department or by the float pool.

Cashmere Anticoagulation Staffing Guidelines

Unit Leadership:
Ronni Nemeth, PharmD: Manager

Number of patients per day: 20-25

Requirements of Staff/Skill Mix:

- There are 0 Physicians, 0 ARNP, 1 PA-C and 0 Pharmacists
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 1 PA/ARNP
 - 0 Pharmacists
 - 1 Medical Assistant
 - 0 RNs
 - 0 Receptionists

Staffing Plan to cover Triage RNs for planned and unplanned leave: Necessary RN triage and nursing duties are covered by providers in the clinic. Other duties not requiring an RN are covered by MAs within the department or by the float pool.

Brewster Anticoagulation Staffing Guidelines

Telehealth clinic APP located in Wenatchee

Unit Leadership:

Ronni Nemeth, PharmD: Manager

Number of patients per day: 20-30

Requirements of Staff/Skill Mix:

- There are 0 Physicians, 0 ARNP, 0 PA-C and 0 Pharmacists
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 0 PA/ARNP
 - 0 Pharmacists
 - 1 Medical Assistant
 - 0 RNs
 - 0 Receptionists

Staffing Plan to cover Triage RNs for planned and unplanned leave: Necessary RN triage and nursing duties are covered by providers in the clinic. Other duties not requiring an RN are covered by MAs within the department or by the float pool.

Omak Anticoagulation Staffing Guidelines

Telehealth clinic APP located in Wenatchee

Unit Leadership:

Ronni Nemeth, PharmD: Manager

Number of patients per day: 20-30

Requirements of Staff/Skill Mix:

- There are 0 Physicians, 0 ARNP, 0 PA-C and 0 Pharmacists
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 0 PA/ARNP
 - 0 Pharmacist
 - 1 Medical Assistant
 - 1 RN
 - 0 Receptionist

Staffing Plan to cover Triage RNs for planned and unplanned leave: Necessary RN triage and nursing duties are covered by providers in the clinic. Other duties not requiring an RN are covered by MAs within the department or by the float pool.

Tonasket Anticoagulation Staffing Guidelines

Telehealth clinic APP located in Wenatchee

Unit Leadership:

Ronni Nemeth, PharmD: Manager

Number of patients per day: 20-30

Requirements of Staff/Skill Mix:

- There are 0 Physicians, 0 ARNP, 0 PA-C and 0 Pharmacists
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 0 PA/ARNP
 - 0 Pharmacist
 - 0 Medical Assistant
 - 1 LPN
 - 0 RNs
 - 0 Receptionist

Staffing Plan to cover Triage RNs for planned and unplanned leave: Necessary RN triage and nursing duties are covered by providers in the clinic. Other duties not requiring an RN are covered by MAs within the department or by the float pool.

Oroville Anticoagulation Staffing Guidelines

Telehealth clinic APP located in Wenatchee

Unit Leadership:

Ronni Nemeth, PharmD: Manager

Number of patients per day: 20-30

Requirements of Staff/Skill Mix:

- There are 0 Physicians, 0 ARNP, 0 PA-C and 0 Pharmacists
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 0 PA/ARNP
 - 0 Pharmacist
 - 0 Medical Assistant
 - 1 LPN
 - 0 RN
 - 0 Receptionist

Staffing Plan to cover Triage RNs for planned and unplanned leave: Necessary RN triage and nursing duties are covered by providers in the clinic. Other duties not requiring an RN are covered by MAs within the department or by the float pool.

Moses Lake Cardiology Staffing Guidelines

Unit Leadership:
Wendy Weston, Manager

Number of patients per day: 8-20

Requirements of Staff/Skill Mix:

- There are 5 Physicians, 1 ARNP, and 2 PA-Cs
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 1 Physician (1-3 days per week)
 - 1 PA/ARNP (4 days per week)
 - 2 Medical Assistants
 - 1 RN
 - 1 Receptionist
- Support Services available in department:
 - **Echo**
 - **Nuclear Medicine**
 - **Device Clinic**

Staffing Plan to cover Triage RNs for planned and unplanned leave: Necessary RN triage and nursing duties are covered by Wenatchee RNs when applicable. Other duties not requiring an RN are done by an MA within the department. Stress testing done by RN or PA is either not scheduled for planned absences or cancelled if an unplanned absence. Other duties such as IVs are covered by other RNs in the clinic.

Moses Lake General Surgery Staffing Guidelines

Unit Leadership:
Wendy Weston, Manager

Number of patients per day: 15-30

Requirements of Staff/Skill Mix:

- There are 2 Physicians, 0 ARNP, and 1 PA-C
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 2 Physicians
 - 2 Medical Assistants
 - 1 RN

- 1 PA-C
- 1 Receptionist

Staffing Plan to cover Triage RNs for planned and unplanned leave: Covered by float pool RN. If float pool RN not available MA covers clinic and triage covered by surgeon on call. Ortho nurse or surgeon in clinic covers wound care.

Moses Lake Orthopedics Staffing Guidelines

Unit Leadership:
Wendy Weston, Manager

Number of patients per day: 35-50

Requirements of Staff/Skill Mix:

- There are 2 Physicians, 2 ARNPs, and 1 PA-C
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 2 Physicians
 - 3 Medical Assistants
 - 1 RN
 - 1 PA-C
 - 1 Surgery Scheduler
 - 1 Receptionist
 - Contact Center Specialist (shared with Wenatchee)

Staffing Plan to cover Triage RNs for planned and unplanned leave: Covered by float pool RN. If float pool RN not available MA covers clinic and triage covered by surgeon on call. Ortho nurse or surgeon in clinic covers wound care.

Moses Lake Internal Medicine Staffing Guidelines

Unit Leadership:
Vacant, Manager

Number of patients per day: 50-95

Requirements of Staff/Skill Mix:

- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 1 - 3 Physicians
 - 1 - 3 ARNP or PA-Cs
 - 4 - 7 Medical Assistants depending on number of providers
 - 1 RN
 - 1 – 3 receptionists
- Support Services available in department:
 - Integrated Behavioral Health

- Geriatrics

Staffing Plan to cover Triage RN for planned and unplanned leave: Will be covered by the Nurse float pool.

Moses Lake Clinic-Pediatric Staffing Guidelines

Unit Leadership:
Kristen Vedder, Manager

Number of patients per day: Average 90 patients per day

Requirements of Staff/Skill Mix:

- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 2 - 4 Physicians
 - 2 – 3 Medical Assistants depending on number of providers scheduled
 - 2 – 4 RNs, always a minimum of RNs to cover the department
 - 3 receptionists

Staffing Plan to cover RNs for planned and unplanned leave:

Utilize part-time RN to cover for planned and unplanned leave. RN from OB/GYN can work with a provider (use an MA to cover other providers if needed) Nurses are cross-trained to cover each other's physicians and departments.

Moses Lake Clinic-OB/GYN Staffing Guidelines

Unit Leadership:
Kristen Vedder, Manager

Number of patients per day: Average 20-40 patients/day

Requirements of Staff/Skill Mix:

- Depending on the day/schedule; there are 1 Physician, 2 ARNPs, 1 RN, 1 LPN, 1-3 MAs
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 0 – 1 Physicians
 - 0 – 2 ARNPs, Nurse Midwife
 - 1 – 3 Medical Assistants depending on number of providers scheduled
 - 1 RN
 - 0 – 1 LPNs (if the RN is out the LPN can be utilized with oversight from

- o the Pediatric RN group.
- o 2 Receptionists

Staffing Plan to cover RNs for planned and unplanned leave:

Utilize the RN from Pediatrics working with a provider (use an MA to cover the provider if needed) and or utilize part-time RN to cover. Nurses are cross-trained to cover each other's departments.

ML Family Medicine Staffing Guidelines

Unit Leadership:
Michael Delgado, Manager

Number of patients per day: 60-140

Requirements of Staff/Skill Mix:

- There are 6 Physicians, 1 ARNP, and 1 PA-C
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - o 3 - 6 Physicians
 - o 1 - 2 ARNPs or PA-Cs
 - o 8- 12 Medical Assistants depending on number of providers
 - o 1 - 2 RNs
 - o 2 – 3 receptionists
- Support Services available in department:
 - o Referrals to Integrated Behavioral Health
 - o ACO/Health Alliance Case Management
 - o Pharmacy support from Wenatchee contact center
 - o Dietary Services on site

Staffing Plan to cover Triage RNs for planned and unplanned leave: Patient Services RN at Moses Lake Contact Center and call center Triage RN in Wenatchee. When no other triage is available, utilize MA with Provider guidance/support.

Omak Family Medicine Staffing Guidelines

Unit Leadership:
Crystal Gage, Manager

Number of patients per day: 108

Requirements of Staff/Skill Mix:

- There are 6 Physicians, and 4 APPs
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 6 Physicians
 - 4 APPs
 - 6 Medical Assistants depending on number of providers
 - 4 RNs
 - 1 MAR
 - 4 MMA
- Support Services available in department:
 - Case Management
 - Integrated Behavioral Health
 - Reception Staff
 - Pharmacy support from Wenatchee Contact Center

Staffing Plan to cover Triage RNs for planned and unplanned leave: Utilize the available per diem RN or available APP.

Omak Walk-in Staffing Guidelines

Unit Leadership:
Crystal Gage, Manager

Number of patients per day: Average 30

Requirements of Staff/Skill Mix:

- There are 0 Physicians, 1 ARNP, and 1 PA-C
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 2 – ARNP/PA-C
 - 1-2 Medical Assistants depending on number of providers
 - RNs from Family to help cover our Walk-In department daily
- Support Services available in department:
 - Integrated Behavioral Health
 - Case Management
 - Reception Staff
 - Family Medicine Staff

Staffing Plan to cover Triage RN for planned and unplanned leave:

Utilize the available per diem RN or available RN staff from the Family Medicine Department

Oroville Staffing Guidelines

Unit Leadership:
Crystal Gage, Manager

Number of patients per day: Average 37

Requirements of Staff/Skill Mix:

- There are 1-2 Physicians, 1ARNPs, and 2 PA-Cs
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
- 1-2 Physicians
- 2 PAs
- 1ARNP
- 1 RN
- 1 RN Supervisor 1 day week
- 2-3 Medical Assistants

Support staff to include:

- Case Management
 - Reception Staff
 - Pharmacy Support from Wenatchee Contact Center
 - Integrated Behavioral Health Referral
-
- Staffing Plan to cover RN for planned and unplanned leave is to utilize the available per diem RN staff or the RN supervisor as needed

Chelan Street Orthopedic Staffing Guidelines

Unit Leadership:
Holly Gale, Manager

Number of patients per day: 30-120 depending on
number of providers in office.

Requirements of Staff/Skill Mix:

- There are 3 Physicians, 2 ARNPs, 3 PA-Cs
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 1-3 Physicians
 - 1 - 5 ARNPs or PAs
 - 5 - 7 Medical Assistants depending on number of providers
 - 1 RNs
 - 1 – 2 Receptionists
- Support Services available in department:

- **X-Ray staff (2 techs and 1 assistant)**
- **Authorizations Specialists x2**
- **Schedulers x4**
- **Medical Scribes (1)**
- **Cast Tech (1)**

Staffing Plan to cover Triage RNs for planned and unplanned leave: Utilize an RN from the Smith building to cover Triage. MAs that don't have a Provider in the office will cover non-RN duties for Provider(s) in need and review staff messages.

Smith Building Orthopedic Staffing Guidelines

Unit Leadership:
Holly Gale, Manager

Number of patients per day: 20-130 depending on number of providers in office.

Requirements of Staff/Skill Mix:

- There are 6 Physicians, 1 ARNP, and 6 PA-Cs and 1 PA-S
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 1 - 5 Physicians
 - 1 - 7 ARNPs or PA-Cs
 - 2 - 7 Medical Assistants depending on number of providers
 - 1 - 2 RNs
 - 1 – 2 Receptionists
- Support Services available in department:
 - **X-Ray staff (3 techs and 1 assistant)**
 - **Supervisor (1)**
 - **Cast Tech (1)**

Staffing Plan to cover Triage RNs for planned and unplanned leave: Utilize an RN that is remaining in the department, or an RN at Chelan St to cover triage in the absence of both RNs in the building. MA's that don't have a provider in office will cover other non-RN duties for provider(s) in need and review staff messages.

Palliative Care Staffing Guidelines

Unit Leadership:
Stephen Johnson, Director
Ben Hughes, Manager

Number of patients per day: 5-20 (RN, APP, MD)

Requirements of Staff/Skill Mix:

- There are 1 Physicians, 2 ARNPs, and 0 PA-Cs
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 1 Physician
 - 0 - 2 ARNPs or PA-Cs
 - 1 Medical Assistants depending on number of providers
 - 1 - 3 RNs
 - 1 Receptionist
- Support Services available in department:
 - Case Management in IM or Fam Med Clinics
 - Social Services as needed

Staffing Plan to cover Triage RNs for planned and unplanned leave: If there are no RNs to cover triage within the department, we can utilize IM (3rd floor). Our partner department (Geriatrics) has a RN Supervisor for some triage cover needs.

Royal City Family Medicine Staffing Guidelines

Unit Leadership:
Michael Delgado, Manager

Number of patients per day: 7-19

Requirements of Staff/Skill Mix:

- There are 0-.5 Physicians, 0 ARNP, and 1 PA-C
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 0 - 1 Physicians
 - 1 - ARNP or PA-C
 - 0 - 1 Medical Assistants depending on number of providers
 - 0 - 1 RNs
 - 1 - Receptionist
- Support Services available in department:
 - Referrals to Integrated Behavioral Health
 - Referrals to ACO/Health Alliance Case Management
 - Pharmacy support through Wenatchee Contact Center

Staffing Plan to cover Triage RNs for planned and unplanned leave: If RN not available, APP will perform triage support for clinic. If necessary, staff will utilize Float Pool RN, MLC FMA

RN support or Patient Access RN at Moses Lake Contact Center.

Tonasket Staffing Guidelines

Unit Leadership:
Sarah Gordon, Manager

Number of patients per day: Average 42

Requirements of Staff/Skill Mix:

- There are 1-3 Physicians, 1 ARNP, and 1 PA-C
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
- 0 - 2 Physician 1-3 days a week
- 0 - 1 PA
- 0 - 1 ARNP
- 1 – 2 RNs
- 0 - 1 RN Supervisor
- 2 - 4 Medical Assistants depending on need

Support staff to include:

- Case Management
 - Reception staff
 - Pharmacy support from Wenatchee Contact Center
 - Integrated Behavioral Health Referral
-
- Staffing Plan to cover RNs for planned and unplanned leave is to utilize the available per diem RN staff or the RN supervisor as needed

Waterville Family Medicine Staffing

Unit Leadership:
Marcus Miller, Director
Julie Kalkowski, Manager

FAMILY MEDICINE

Number of patients per day: 20-23 (Capacity)

Requirements of Staff/Skill Mix:

- There are 0 Physicians and 1 PA-C
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 0 Physicians
 - 1 PA-C
 - .5 RN (RN/LPN job share)
 - .5 LPN (RN/LPN job share)

- 1 MA-C
- 1 Receptionist (MA-R)
- Support Services available in department:
 - Case Management

Staffing Plan to cover Triage RNs for planned and unplanned leave: Contact Center will take triage calls after hours in the instance that the on-call provider cannot be reached. For any questions or assistance, APP will be asked to assist (PPD read, onsite triage, Code Blue, etc.).

Wenatchee Family Medicine 2nd Floor Staffing Guidelines

Unit Leadership:

Marcus Miller, Director
 Julie Kalkowski, Manager

Number of patients per day: 75-140

Requirements of Staff/Skill Mix:

- There are 5 Physicians, 2 ARNPs, and 2 PA-Cs
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 1-5 Physicians
 - 1-4 ARNPs or PA-Cs
 - 6-13 Medical Assistants depending on number of providers
 - 1-2 RNs
 - 0 RN Supervisor
 - 5 Receptionists
- Support Services available in department:
 - Integrated Behavioral Health
 - Case Management

Staffing Plan to cover Triage RNs for planned and unplanned leave: I have 2 RNs able to triage. If they are all out, we would reach out to Wenatchee Family 1st Floor, or E Wenatchee Clinic. Onsite triage would be done by the APPs.

Wenatchee Family Medicine Staffing

Unit Leadership:

Marcus Miller, Director
 Roger Bordon, Manager

FAMILY MEDICINE

Number of patients per day: 123-166 (Capacity)

Requirements of Staff/Skill Mix:

- There are 7 Physicians and 1 ARNP
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 3-7 Physicians
 - 0-1 ARNP
 - 6- 14 Medical Assistants depending on number of providers
 - 0-2 RNs
 - 0-1 LPNs
 - 3-4 Receptionists
- Support Services available in department:
 - Integrated Behavioral Health

Staffing Plan to cover Triage RNs for planned and unplanned leave: Contact Center will take all triage calls and not transfer to WFP. For any questions or assistance, staff will utilize #1 the RN from 2nd Floor Family Med. #2 the Peds/IM RN. #3 any APP will be asked to assist (PPD read, onsite triage, Code Blue, etc.)

Wenatchee Pediatrics Staffing Guidelines

Unit Leadership:
Jana Roy, Manager

Number of patients per day: 45-100

Requirements of Staff/Skill Mix:

- There are 4 Physicians, 1 ARNP, and 2 PA-Cs
- Daily Staffing: (the range shows the minimum number required up to the maximum available)
 - 1-4 Physicians
 - 1-3 ARNP or PA-Cs
 - 5-8 Medical Assistants depending on number of providers
 - 1 RNs
 - 0 RN Supervisor- Manager is an RN
 - 4 Receptionists
- Support Services available in department:
 - Integrated Behavioral Health

Staffing Plan to cover Triage RNs for planned and unplanned leave for any questions or assistance, staff will utilize #1 RN Triage at Wenatchee Pediatrics. #2 E Wen Family RN. #3 any APP will be asked to assist (PPD read, onsite triage, Code Blue, etc.)

Confluence Health Hospital - Allergy Staffing Guidelines

Unit Leadership:
Steven Croffut, Director
Susan Blair, Manager

Number of patients per day: 10-100 in Wenatchee, Omak and Moses Lake; major variances on allergy shot days

Requirements of Staff/Skill Mix:

- There is 1 Allergy Provider who services Wenatchee, Omak and Moses Lake
- Daily Staffing ranges include the minimum to maximum based on the number of providers scheduled each day.
- Wenatchee Allergy on any given day
 - 1 Allergy Provider
 - 1 LPN
 - 1 MA-R
 - 1 Consult/Triage RNs
- Omak Allergy on any given day
 - 1 Allergy Provider
 - 1-2 MAs
- Moses Lake Allergy on any given day
 - 1 Allergy Provider
 - 1-2 MAs

Staffing Plan to cover RNs for planned and unplanned leave: LPN/MA to utilize MD for triage. Backup RN in ENT is needed.

Confluence Health Hospital - ENT Staffing Guidelines

Unit Leadership:
Kate Sullivan, Director
Susan Blair, Manager

Number of patients per day: 20-85 in Wenatchee, Omak and Brewster

Requirements of Staff/Skill Mix:

- There are 5 Otolaryngologists who provide services in Wenatchee, Omak and Brewster
- Daily Staffing ranges include the minimum to maximum based on the number of providers scheduled each day.
- Wenatchee ENT on any given day
 - 1-5 Providers
 - 1-5 MA-Cs
 - 1 Consult/Triage RN

- Omak ENT on any given day
 - 1 ENT Provider
 - 1 MA-C
- Brewster ENT on any given day
 - 1 ENT Provider
 - 1 MA-C

Staffing Plan to cover RNs for planned and unplanned leave: MA to utilize MD for triage.

Confluence Health Hospital - Dermatology Staffing Guidelines

Unit Leadership:

Kate Sullivan, Director

Susan Blair, Manager

Number of patients per day: 140-200 in Wenatchee and in Brewster

Requirements of Staff/Skill Mix:

- There are 8 Dermatologists and 1 APP who provide services in Wenatchee and Brewster
- Daily Staffing ranges include the minimum to maximum based on the number of providers scheduled each day.
- Wenatchee Dermatology on any given day
 - 1-8 Dermatologist Providers and 1 APP
 - 1 LPN
 - 1-13 MAs
 - 1 Consult/Triage RN
- Brewster Dermatology on any given day
 - 1 Dermatologist Provider
 - 1-2 MAs

Staffing Plan to cover Consult/Triage RNs for planned and unplanned leave: The LPN/MAs will directly utilize the physician or APP if the RN is out.

Confluence Health Hospital - General Surgery Staffing Guidelines

Unit Leadership:

Kate Sullivan,
Director Emilio
Ybarra, Manager

Number of patients per day: 40-60 in

Wenatchee Requirements of Staff/Skill Mix:

- There are 6 General Surgeons and 2 ARNPs who provide service in Wenatchee
- Daily Staffing ranges include the minimum to maximum based on the number of providers scheduled each day.

- Wenatchee General Surgery any given day
 - 1-6 General Surgeons
 - 1-3 MAs
 - 1 Consult/Triage RN

Staffing Plan to cover the Consult/Triage RNs for planned and unplanned leave: The MAs will defer/refer to the physician or APP in the event the RN is out.

Confluence Health Hospital - Urology Staffing Guidelines

Unit Leadership:

Kate Sullivan,
Director Emilio
Ybarra, Manager

Number of patients per day: 80-120 in Wenatchee; 20-30 in Omak; 20-30 in Moses Lake

Requirements of Staff/Skill Mix:

- There are 6 Urologists who provide service between Wenatchee, Moses Lake and Omak

- Daily Staffing ranges include the minimum to maximum based on the number of providers scheduled each day.

- **Wenatchee Urology**
 - 1-6 Urology Providers
 - 1 APP
 - 3-12 MAs
 - 1 LPN
 - 3 Consult/Triage RNs

CHH Central Campus Nurse Staffing Plan for Submission to DOH

- **Moses Lake Urology**
 - 1 Urology Provider 4 days per month
 - 1 Medical Assistant

- **Omak**
 - 1 Urology Provider 1 day per month
 - 1-2 Medical Assistants

Staffing Plan to cover Triage RNs for planned and unplanned leave: The RNs in the Wenatchee department cover each other. The MAs/LPN refer to the available consult RN or the APP. The MA refers to the Physician in the Moses Lake or Omak Outreach Clinics.