COVER PAGE

The following is the comprehensive hospital staffing plan for Summit Pacific Medical Center submitted to the Washington State Department of Health in accordance with Revised Code of Washington 70.41.420 for the year 2025 .

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Washington State Department of HEALTH

Hospital Staffing Form

Attestation

Date: 12/31/24

I, the undersigned with responsibility for Summit Pacific Medical Center attest that the attached hospital staffing plan and matrix are in accordance with RCW 70.41.420 for 2025 , and includes all units covered under our hospital license under RCW 70.41.

As approved by: Josh Martin

Josh Martin

Josh Martin (Jan 6, 2025 09:40 PST)

Hospital Information

Name of Hospital: Summit Pacific Medical Center			
Hospital License #: HAC.FS.00000186			
Hospital Street Address: 600 E Main Street			
City/Town: Elma	State: WA	Zip code: 98541	
Is this hospital license affiliated with more than one location?	☐ Yes	☐ No	
If "Yes" was selected, please provide the location name and address	Sleep Clinic and Lab 579 East Main Street, Elma, WA 98541		
Review Type:	☐ Annual	Review Date: 12/11/25	
	☐ Update	Next Review Date:	
Effective Date: 1/1/25			
Date Approved: 11/11/24			

Hospital Information Continued (Optional)

Factors Considered in the Development of the Hospital Staffing Plan (check all that apply):

☐ Staffing guidelines adopted or published by national nursing professional associations, specialty nursing organizations, and other health professional organizations

Description:
ENA, Medical-Surgical Association, Gastroenterology Association

☐ Terms of applicable collective bargaining agreement

Description:
UFCW

☐ Relevant state and federal laws and rules including those regarding meal and rest breaks and use of overtime and on-call shifts

Description:
Labor and Industries Meals and Rest Breaks (WAC 296-131-020)

☐ Hospital finances and resources

Description:
Summit Pacific Medical Center Strategic Plan

☐ Other

Description:

Signature

CEO & Co-chairs Name:	Signature:	Date:
Josh Martin	Josh Martin Josh Martin (Jan 6, 2025 09:40 PST)	01/06/2025
Tori Bernier	Tori L. Bernier Tori L. Bernier (Jan 3, 2025 08:39 PST)	01/03/2025
Sharlene Higa	Sharlene Higa	01/03/2025
Derek Valley	Derek M. Valley Derek M. Valley (Jan 6, 2025 17:12 PST)	01/06/2025

Total Votes	
# of Approvals	# of Denials
8	0

Access unit staffing matrices here.

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Patient Volume-based Staffing Matrix Formula Template

Minimum means the minimum number of RNs, LPNs, CNAs, and UAPs per shift based on the average needs of the unit such as patient acuity, staff skill level, and patient care activities. If a unit does not utilize certain staff for that shift please put "0", do not leave it blank.

Unit/ Clinic Name:	**Acute Care Unit**		
Unit/ Clinic Type:	**Medical/Telmetry Inpatient**		
Unit/ Clinic Address:	**600 E. Main Street Elma WA 98541**		
Average Daily Census:	**8**	**Maximum # of Beds:**	**10**
Effective as of:	**11/11/2024**		

Census

Census	Shift Type	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's	Min # of RN HPUS	Min # of LPN HPUS	Min # of CNA HPUS	Min # of UAP HPUS	Total Minimum Direct Pt. Care HPUS (hours per unit of service)
1	Day	12.00	1.00	0.00	1.00	0.00	12.00	0.00	12.00	0.00	48.00
	Night	12.00	1.00	0.00	1.00	0.00	12.00	0.00	12.00	0.00	
2	Day	12.00	1.00	0.00	1.00	0.00	6.00	0.00	6.00	0.00	24.00
	Night	12.00	1.00	0.00	1.00	0.00	6.00	0.00	6.00	0.00	
3	Day	12.00	1.00	0.00	1.00	0.00	4.00	0.00	4.00	0.00	16.00
	Night	12.00	1.00	0.00	1.00	0.00	4.00	0.00	4.00	0.00	
4	Day	12.00	1.00	0.00	1.00	0.00	3.00	0.00	3.00	0.00	12.00
	Night	12.00	1.00	0.00	1.00	0.00	3.00	0.00	3.00	0.00	
5	Day	12.00	1.00	0.00	1.00	0.00	2.40	0.00	2.40	0.00	9.60
	Night	12.00	1.00	0.00	1.00	0.00	2.40	0.00	2.40	0.00	
6	Day	12.00	2.00	0.00	1.00	0.00	4.00	0.00	2.00	0.00	12.00
	Night	12.00	2.00	0.00	1.00	0.00	4.00	0.00	2.00	0.00	
7	Day	12.00	2.00	0.00	1.00	0.00	3.43	0.00	1.71	0.00	10.29
	Night	12.00	2.00	0.00	1.00	0.00	3.43	0.00	1.71	0.00	
8	Day	12.00	2.00	0.00	1.00	0.00	3.00	0.00	1.50	0.00	9.00

	Night	12.00	2.00	0.00	1.00	0.00	3.00	0.00	1.50	0.00	
9	Day	12.00	2.00	0.00	1.00	0.00	2.67	0.00	1.33	0.00	8.00
	Night	12.00	2.00	0.00	1.00	0.00	2.67	0.00	1.33	0.00	
10	Day	12.00	2.00	0.00	1.00	0.00	2.40	0.00	1.20	0.00	7.20
	Night	12.00	2.00	0.00	1.00	0.00	2.40	0.00	1.20	0.00	
11	Day	12.00	3.00	0.00	1.00	0.00	3.27	0.00	1.09	0.00	8.73
	Night	12.00	3.00	0.00	1.00	0.00	3.27	0.00	1.09	0.00	
12	Day	12.00	3.00	0.00	1.00	0.00	3.00	0.00	1.00	0.00	8.00
	Night	12.00	3.00	0.00	1.00	0.00	3.00	0.00	1.00	0.00	
13	Day	12.00	3.00	0.00	1.00	0.00	2.77	0.00	0.92	0.00	7.38
	Night	12.00	3.00	0.00	1.00	0.00	2.77	0.00	0.92	0.00	
14	Day	12.00	3.00	0.00	2.00	0.00	2.57	0.00	1.71	0.00	8.57
	Night	12.00	3.00	0.00	2.00	0.00	2.57	0.00	1.71	0.00	
15	Day	12.00	3.00	0.00	2.00	0.00	2.40	0.00	1.60	0.00	8.00
	Night	12.00	3.00	0.00	2.00	0.00	2.40	0.00	1.60	0.00	
16	Day	12.00	4.00	0.00	2.00	0.00	3.00	0.00	1.50	0.00	9.00
	Night	12.00	4.00	0.00	2.00	0.00	3.00	0.00	1.50	0.00	
17	Day	12.00	4.00	0.00	2.00	0.00	2.82	0.00	1.41	0.00	8.47
	Night	12.00	4.00	0.00	2.00	0.00	2.82	0.00	1.41	0.00	
18	Day	12.00	4.00	0.00	3.00	0.00	2.67	0.00	2.00	0.00	9.33
	Night	12.00	4.00	0.00	3.00	0.00	2.67	0.00	2.00	0.00	
19	Day	12.00	4.00	0.00	3.00	0.00	2.53	0.00	1.89	0.00	8.84
	Night	12.00	4.00	0.00	3.00	0.00	2.53	0.00	1.89	0.00	
20	Day	12.00	4.00	0.00	3.00	0.00	2.40	0.00	1.80	0.00	8.40
	Night	12.00	4.00	0.00	3.00	0.00	2.40	0.00	1.80	0.00	
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Patient Volume-based Staffing Matrix Formula Template

Minimum means the minimum number of RNs, LPNs, CNAs, and UAPs per shift based on the average needs of the unit such as patient acuity, staff skill level, and patient care activities.
If a unit does not utilize certain staff for that shift please put "0", do not leave it blank.

Unit/ Clinic Name:	**Swing Bed**		
Unit/ Clinic Type:	**Post-acute care**		
Unit/ Clinic Address:	**600 E. Main Street Elma WA 98541**		
Average Daily Census:	**0**	**Maximum # of Beds:**	**8**
Effective as of:	**11/11/2024**		
Census			

Census	Shift Type	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's	Min # of RN HPUS	Min # of LPN HPUS	Min # of CNA HPUS	Min # of UAP HPUS	Total Minimum Direct Pt. Care HPUS (hours per unit of service)
1	Day	12.00	1.00	0.00	1.00	0.00	12.00	0.00	12.00	0.00	48.00
	Night	12.00	1.00	0.00	1.00	0.00	12.00	0.00	12.00	0.00	
2	Day	12.00	1.00	0.00	1.00	0.00	6.00	0.00	6.00	0.00	24.00
	Night	12.00	1.00	0.00	1.00	0.00	6.00	0.00	6.00	0.00	
3	Day	12.00	1.00	0.00	1.00	0.00	4.00	0.00	4.00	0.00	16.00
	Night	12.00	1.00	0.00	1.00	0.00	4.00	0.00	4.00	0.00	
4	Day	12.00	1.00	0.00	1.00	0.00	3.00	0.00	3.00	0.00	12.00
	Night	12.00	1.00	0.00	1.00	0.00	3.00	0.00	3.00	0.00	
5	Day	12.00	1.00	0.00	1.00	0.00	2.40	0.00	2.40	0.00	9.60
	Night	12.00	1.00	0.00	1.00	0.00	2.40	0.00	2.40	0.00	
6	Day	12.00	1.00	0.00	1.00	0.00	2.00	0.00	2.00	0.00	8.00
	Night	12.00	1.00	0.00	1.00	0.00	2.00	0.00	2.00	0.00	
7	Day	12.00	1.00	0.00	1.00	0.00	1.71	0.00	1.71	0.00	6.86
	Night	12.00	1.00	0.00	1.00	0.00	1.71	0.00	1.71	0.00	
8	Day	12.00	1.00	0.00	1.00	0.00	1.50	0.00	1.50	0.00	6.00
	Night	12.00	1.00	0.00	1.00	0.00	1.50	0.00	1.50	0.00	
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Fixed Staffing Matrix

Minimum means the minimum number of RNs, LPNs, CNAs, and UAPs per shift based on the average needs of the unit such as patient acuity, staff skill level, and patient care activities. If a unit does not utilize certain staff for that shift please put "0", do not leave it blank.

Unit/ Clinic Name:	**Emergency Department**
Unit/ Clinic Type:	**Emergency Care**
Unit/ Clinic Address:	**600 E Main Street Elma WA 98541**
Effective as of:	**11/11/2024**
Hours of the day	

Hour of the day	Shift Type	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's
600	Day	12.00	2.00			
900	Mid 1	12.00				
1100	Mid 2	12.00				
1500	Mid 3	12.00				
1800	Night	12.00	2.00			

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Fixed Staffing Matrix

Minimum means the minimum number of RNs, LPNs, CNAs, and UAPs per shift based on the average needs of the unit such as patient acuity, staff skill level, and patient care activities. If a unit does not utilize certain staff for that shift please put "0", do not leave it blank.

Unit/ Clinic Name:	**Outpatient Procedure Services**
Unit/ Clinic Type:	**Outpatinet Endoscopy**
Unit/ Clinic Addres	**600 E Main Street Elma WA 98541**
Effective as of:	**11/11/2024**
Hours of the day	

Hour of the day	Shift Type	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's
Day	Day	10.00	2.00		2.00	

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Fixed Staffing Matrix

Minimum means the minimum number of RNs, LPNs, CNAs, and UAPs per shift based on the average needs of the unit such as patient acuity, staff skill level, and patient care activities. If a unit does not utilize certain staff for that shift please put “0”, do not leave it blank.

Unit/ Clinic	**Outpatient Procedure Services**					
Unit/ Clinic	**Outpatient Infusion Services**					
Unit/ Clinic	**600 E Main Street Elma WA 98541**					
Effective as	**11/11/2024**					
Hours of the day						
Hour of the day	Shift Type	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's
Day	Day	10.00	1.00			

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Acute Care Unit Information

Additional Care Team Members

Occupation	Shift Coverage			
	Day	Evening	Night	Weekend
Social Worker	X			Some weekends
Physical Therapist	X			
Occupational Therapist	X			
Respiratory Therapist	X	X	X	X
Registered Dietician	X			
Pharmacist	X			
Hospitalists	X	X	X	X
House Supervisor			X	X

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Swing Bed Unit Information

Additional Care Team Members

Occupation	Shift Coverage			
	Day	Evening	Night	Weekend
Social Worker	X			Some weekends
Physical Therapist	X			
Occupational Therapist	X			
Respiratory Therapist	X	X	X	X
Registered Dietician	X			
Pharmacist	X			
Hospitalists	X	X	X	X
House Supervisor			X	X

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Emergency Department Unit Information

Additional Care Team Members

Occupation	Shift Coverage			
	Day	Evening	Night	Weekend
Social Worker	X			Some weekends
Providers	X	X	X	X
House Supervisor			X	X
Respiratory Therapist	X	X	X	X
Pharmacist	X			

Unit Information

Factors Considered in the Development of the Unit Staffing Plan	(Check all that apply):

☐ Activity such as patient admissions, discharges, and transfers

☐ Patient acuity level, intensity of care needs, and the type of care to be delivered on each shift

☐ Skill mix

☐ Level of experience of nursing and patient care staff

☐ Need for specialized or intensive equipment

☐ Architecture and geography of the unit such as placement of patient rooms, treatment areas, nursing stations, medication preparation areas, and equipment

☐ Other

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Endoscopy Unit Information

Additional Care Team Members

Occupation	Shift Coverage			
	Day	Evening	Night	Weekend
Pharmacist	X			
CRNA	X			
Provider	X			
House Supervisor			X	X

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Infusion Unit Information

Additional Care Team Members

Occupation	Shift Coverage			
	Day	Evening	Night	Weekend
Pharmacist	X			
Hospitalist	X	X	X	X
House Supervisor			X	X