



DOH 346-154

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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:		Allenmore Hospital									
Unit/ Clinic Type:		2 East OrthoGenSurg									
Unit/ Clinic Address:		1901 S Union, Tacoma WA 98405. MailStop 19U-H2-SUR									
Average Daily Census:		26				Maximum # of Beds:			30		
Effective as of:		12/4/2024									
Census											
Please select metric type	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)
12	Day	12	3	0	2	0	3.00	0.00	2.00	0.00	
	Night	12	3	0	2	0	3.00	0.00	2.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	

19	Day	12	4	0	2	0	2.53	0.00	1.26	0.00	7.58
	Night	12	4	0	2	0	2.53	0.00	1.26	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
20	Day	12	4	0	2	0	2.40	0.00	1.20	0.00	7.20
	Night	12	4	0	2	0	2.40	0.00	1.20	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
21	Day	12	5	0	3	0	2.86	0.00	1.71	0.00	9.14
	Night	12	5	0	3	0	2.86	0.00	1.71	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
	Day	12	5	0	3	0	2.73	0.00	1.64	0.00	
	Night	12	5	0	3	0	2.73	0.00	1.64	0.00	

22		0	0	0	0	0	0.00	0.00	0.00	0.00	8.73
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
23	Day	12	5	0	3	0	2.61	0.00	1.57	0.00	8.35
	Night	12	5	0	3	0	2.61	0.00	1.57	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
24	Day	12	5	0	3	0	2.50	0.00	1.50	0.00	8.00
	Night	12	5	0	3	0	2.50	0.00	1.50	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
	Day	12	5	0	3	0	2.40	0.00	1.44	0.00	
	Night	12	5	0	3	0	2.40	0.00	1.44	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	

25		0	0	0	0	0	0.00	0.00	0.00	0.00	7.68
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
26	Day	12	6	0	3	0	2.77	0.00	1.38	0.00	8.31
	Night	12	6	0	3	0	2.77	0.00	1.38	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
27	Day	12	6	0	3	0	2.67	0.00	1.33	0.00	8.00
	Night	12	6	0	3	0	2.67	0.00	1.33	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
28	Day	12	6	0	3	0	2.57	0.00	1.29	0.00	
	Night	12	6	0	3	0	2.57	0.00	1.29	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	

Unit Information

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

- Activity such as patient admissions, discharges, and transfers

Description:

Average Daily Census: 26 pts. This unit is very fast-paced, mostly consisting of weekday-post op patients with admissions and discharges rapidly moving throughout the day. Our highest turnover times is between 1300-1800. We average 10-12 discharges per day, with upwards of 16-18 discharges daily. We rarely see lower than 8 discharges during the weekdays. Admissions follow the discharges, average of 8-10 post-op admissions from surgery, as well as receiving admissions from the ED, OCEDs and our other MHS facilities. Frurthermore, we occassional take direct admits from our surgical clinics (ortho/Bari/etc).

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

Description:

The acuity of the unit mainly come for the fast-paced movement of admits, discharges and transfers during the weekdays (sugical admits, procedures to and from the unit, surgical discharges, medical discharges, rapid vitals and COE measure documentation/tracking/mobility, and high education especially for the surgical post op discharges/admits). The dayshift tend to be moving quickly due to acute surgical needs, but NOCs and weekends due tend to slow down a bit as the turnover is not so intense.

Skill mix

Description:

Common Diagnoses & Procedures:?

Bariatrics (center of excellence), Orthopedics (center of excellence for total joint knee and hips), General Surgery, Urology, and Gynecology. High Volume of as needed medical inpatient care: high needs community due to low income area serviced by Allenmore.

Competencies:?

Significant push towards certifications in our largest areas of specialty- Bariatric, Ortho, and M/S general. We have advanced COE for Joints and have COE for Bariatrics. We have 10 tele boxes for low acuity tele. Some consideration to remove telemetry due to high acuity and staff movement, but not in project at this time.

~~BLS certifications for all 2E staff?~~

Level of experience of nursing and patient care staff

Description:

Need for specialized or intensive equipment

Description:

Sara Steady, Bariatric equipment, ortho/Total joint equipment. Telemetry Monitoring. Suction for SBO etc. Suction for incontinence to allow for skin maintenance with purewick but avoid foley placement. Incentive Spirometer for post surgical prevention of respiratory complications (bari excellence). Bladder Scanners for prevention of post op complication (ortho excellence). Wound and Ostomy Care more common due to surgical nature of unit, plus outside transfers for increased care needs with infections requiring surgical operative care. Ceiling Slings to prevent in bed decline due to poor mobility, particular with Orth-Hip needs and aging population. Recliners for post surgical up out of bed requirements to increase ability to discharge within 24-48 hrs.

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

Description:

Located on the 2nd floor of Allenmore Hospital

Open 24/7 365 😊

Cares for primarily adults, exceptions are made through leadership with consideration for teenagers but not younger than 16. Due to no pediatric care certified staff present and need for parental presence etc.

Unit Dynamics

Private Rooms- 10

~~Provides post-op care primarily for pts with total joint surgeries. The room is set up to accommodate work with PT/OT and has PT approved~~

- Other

Description:

We have an active Unit based shared leadership counsel who is focusing on standardizing workflows, placement of supplies, unit engagement, and processes/flow. CN team is working to standardize shift report, bed/safety huddle report, workflow, acuties, and rounding. CNAs are focused on pt service: responsiveness (call lights and toileting), RN/LPN team is working on pt service: Nursing communication with Stop, Pause, connect, and listen/reiterate the plan or story. HUCs are focusing on use of telmediq communication tool, connection to pt safety, and pt service: responsiveness. Committee members focus to send the meeting minutes and follow up gained at the meeting discussions-presented back to the unit staff. Mobility with JH is being lead by our LPN and other unit staff to improve post operative and other medical patient outcomes through the John Hopkins mobility initiative and new equipment such as sara steady and room updates(whiteboards and walk stations). Leadership goals: Staffing for safety/staffing with the appropriate needs, SCORE/burnout discussion, increasing patient service through rounding, in the moment education for safety, survey, and daily workflow.