	2013 Annual St	affing Report	
Hospital Name: Landmark Medic	cal Center	A CONTROL OF THE STATE OF THE S	
Number of Licensed Beds: 214			
Number of Staffed Beds: 140			
Number of Units in Report: 8			
Time Period Reflected in Report:	From: - 10/1/2012	9/30/2013	
Name of Person Completing Repo	ort: Charlene Elie, MS	N, RN	
Title of Person Completing Repor	t: Chief Nursing Office	er	
		and the second s	
CEO Signature:		Date:	2/20/10
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Patient Care Unit N	ame: Intensive Care	Specialty Service (i.e., orthopedics, oncology):		# of Telemetry Beds: 16		
	Т	of Unit:		1-6		
	Age Group:					
	(Cneck all	that apply)		(Check all that apply)		
X Critical Care/ Intensive Care Unit		□Psychiatric Unit		X Adult		
□Step-Down/Inter	mediate Care Unit	□Rehabilitation Uı	nit	□Pediatric		
□General Medical/S	Surgical Unit	□Transitional Car	e Unit	□Newborn		
□Obstetrical Unit/	Nursery	□Emergency Depa	rtment			
	upon which staffing p		-	10		
Emergency Departn	ient = Average numbe	er of visits per day (T	otal Visits/365 days):		
Γ		T				
Position	Shift Length	Į.	lber of Staff Ordin fixed number of pa	arily Assigned tients in an 8 hour shift)		
		Days	Evenings	Nights		
RNs	8 hours	5	5	5		
LPNs	8 hours					
CNAs/AdminCNA	8 hours	1.00	0.50	0.50		
Other (Specify):	8 hours					
	8 hours					
Total Direct (Care Providers:	6.00	5.50	5.50		
	patients and patients a Utilize Patient Safety	g complement and ratio may change due to acuity and boarding of stepdown ts and patients awaiting transfer to acute rehab/ltach. Patient Safety Aides as needed for constant observation patients. histrative CNAs also incorporate secretarial duties into role.				

Unit Name: Labor &	& Delivery	Specialty Service: health	Full range women's	# of Telemetry Beds:0
	Type o	f Unit:		Age Group:
	(Check all	that apply)		(Check all that apply)
□Critical Care/ Inte	ensive Care Unit	□Psychiatric Unit		X Adult
□Step-Down/ Interr	nediate Care Unit	□Rehabilitation Un	nit	□Pediatric
□General Medical/S	Surgical Unit	☐Transitional Care	e Unit	X Newborn
X Obstetrical Unit/	Nursery	□Emergency Depar	rtment	
Number of patients 1	ipon which staffing pl	an is based (Average	Daily Census):	variable
Emergency Departm	ent = Average numbe	r of visits per day (To	otal Visits/365 days):	
Position	Shift Length		iber of Staff Ordinari fixed number of patic	·
		Days	Evenings	Nights
RNs	8 hours	3	3	3
LPNs	8 hours			
CNAs	8 hours			
Other (Specify):	8 hours			
	8 hours			
Total Direct (Care Providers:	3.00	3.00	3.00
Comments: Staff con	nplement adjusts acco	rding to ACOG and	AWHONN guidelines	

		e., orthopedics,	# of Telemetry Beds:16			
(Check all	off a way	Type of Unit:				
	that apply)	(Check all that apply)				
are Unit	□Psychiatric Unit	X Adult				
Care Unit	□Rehabilitation Ur	nit	X Pediatric			
Unit	□Transitional Card	e Unit	□Newborn X			
	X Emergency Depa	rtment	•			
∕erage numbe	er of visits per day (T	otal Visits/365 days	s): 120			
it Length			- -			
			Nights			
hours	7	8	4			
hours						
hours	0.50	1.00	0.50			
hours						
1.14	1.00	1.00	1.00			
	Unit ich staffing pl verage numbe it Length hours hours	Unit ☐ Transitional Care X Emergency Depa ich staffing plan is based (Average verage number of visits per day (T Num (to care for a f Days hours 7 hours	Unit			

Unit Name: Progre	essive Care Unit	Specialty Service: Pr complex medical/sur	# of Telemetry Beds: 26	
	Type o			Age Group:
	(Check all	that apply)		(Check all that apply)
☐ Critical Care/ Intensive Care Unit ☐ Psychiatric Unit			X Adult	
X Step-Down/ Intermediate Care Unit			□Pediatric	
☐General Medical	/Surgical Unit	□Transitional Care	Unit	□Newborn
□Obstetrical Unit/	Nursery	□Emergency Depar	tment	
	upon which staffing pl			24
Emergency Depart	ment = Average numbe	r of visits per day (To	otal Visits/365 days	š):
		T ====		
Position	Shift Length		ber of Staff Ordin ixed number of pa	arily Assigned tients in an 8 hour shift)
		Days	Evenings	Nights
RNs	8 hours	6	5.5	5
LPNs	8 hours			
CNAs	8 hours	2.00	1.50	1.00
Other (Specify):	8 hours			
	8 hours			
Total Direct	Care Providers:	8.00	7.00	6.00
Comments:	Staffing complement a Med Tele/Medical Sur for constant observation	gical patients. Utilize		-

Unit Name: 1st Righ	Init Name: 1st Right Specialty Service (i.e., orthopedics, oncology): medical telemetry			# of Telemetry Beds:19
	Type o	f Unit:		Age Group:
	(Check all that apply)			
□Critical Care/ Inte	ensive Care Unit	□Psychiatric Unit		X Adult
□Step-Down/ Intermediate Care Unit		□Rehabilitation Un	nit	Pediatric 15+
X General Medical/	Surgical Unit	☐Transitional Care	Unit	□Newborn
□Obstetrical Unit/	Nursery	□Emergency Depar	rtment	
	upon which staffing p			15
Emergency Departm	nent = Average numbe	er of visits per day (T	otal Visits/365 days):
Position	Shift Length		ber of Staff Ordina	arily Assigned ients in an 8 hour shift)
TOSKKOI	×aav ×vagu	Days	Evenings Evenings	Nights
RNs	8 hours	3	3	3
LPNs	8 hours			
CNAs	8 hours	1.00	1.00	1.00
Other (Specify):	8 hours			
	8 hours			
Total Direct (Care Providers:	4.00	4.00	4.00
Comments:	Utilize Patient Safety .	Aides as needed for c	onstant observation	n patients.

Unit Name: 1st Wes	s t	Specialty Service: o surgical	l # of Telemetry Beds:0	
	Type o	f Unit:		Age Group:
(Check all that apply)			(Check all that apply)	
□Critical Care/ Into	ensive Care Unit	□Psychiatric Unit	X Adult	
□Step-Down/ Interi	mediate Care Unit	□Rehabilitation U	nit	X Pediatric 15+
X General Medical/	Surgical Unit	□Transitional Car	e Unit	□Newborn
Obstetrical Unit/	Nursery	□Emergency Depa	rtment	
Number of patients	upon which staffing pl	an is based (Averag	e Daily Census):	18
Emergency Departm	nent = Average numbe	r of visits per day (T	otal Visits/365 days):	
		T		
Position	Shift Length	i	iber of Staff Ordinar fixed number of patie	rily Assigned ents in an 8 hour shift)
		Days	Evenings	Nights
RNs	8 hours	3	3	3
LPNs	8 hours			
CNAs	8 hours	2.00	2.00	1.00
Other (Specify):	8 hours			
	8 hours			
Total Direct (Care Providers:	5.00	5.00	4.00
Comments:	Utilize Patient Safety A	Aides as needed for o	onstant observation	patients.

Unit Name: 1st Eas	Name: 1st East Specialty Service: oncology & medical surgical			# of Telemetry Beds:0
	Type o	f Unit:		Age Group:
	(Check all that apply)			
□ Critical Care/ Intensive Care Unit □ Psychiatric Unit			X Adult	
□Step-Down/ Intermediate Care Unit □Rehabilitation Unit			X Pediatric 15+	
XGeneral Medical	/Surgical Unit	□Transitional Care	Unit	□Newborn
□Obstetrical Unit/	Nursery	□Emergency Depar	tment	
Number of patients	upon which staffing pl	an is based (Average	Daily Census):	18
Emergency Departs	ment = Average numbe	r of visits per day (To	otal Visits/365 days):	
			ber of Staff Ordinar	, J
Position	Shift Length			nts in an 8 hour shift)
		Days	Evenings	Nights
RNs	8 hours	3	3	3
LPNs	8 hours			
CNAs	8 hours	2.00	2.00	1.00
Other (Specify):	8 hours			
	8 hours			
Total Direct	Care Providers:	5.00	5.00	4.00
Comments:	Patient Safety Aides ut	tilized as needed for c	onstant observation	patients.

Unit Name: Mental H	Health	Specialty Service (i oncology):	# of Telemetry Beds:0	
	Туре	of Unit:	****	Age Group:
	(Check al	l that apply)		(Check all that apply)
□Critical Care/ Intensive Care Unit		XPsychiatric Unit	XPsychiatric Unit	
□Step-Down/ Intermediate Care Unit		□ Rehabilitation U	nit	□Pediatric
□General Medical/Surgical Unit		☐Transitional Car	e Unit	□Newborn
□Obstetrical Unit/ Nursery		□Emergency Depa	□Emergency Department	
Number of patients up		` ` `	,	15
Emergency Departme	ent = Average numb	er of visits per day (T	Cotal Visits/365 days) :
Position	Shift Length	1	iber of Staff Ordina fixed number of pat	arily Assigned ients in an 8 hour shift)
		Days	Evenings	Nights
RNs	8 hours	3	2	2
LPNs	8 hours		1	
CNAs	8 hours	2.00	2.00	1.00
Other:	8 hours			
Patient Safety Aide	8 hours			
Total Direct Ca	are Providers:	5.00	5.00	3.00

Patient Care Unit Na	ame: Rehab	Specialty Service (i. oncology):Acute Re	# of Telemetry Beds:0	
	Type o	of Unit:		Age Group:
	(Check all that apply)			
□ Critical Care/ Intensive Care Unit □ Psychiatric Unit			XAdult	
□Step-Down/ Intermediate Care Unit X Rehabilitation Unit			XPediatric17+	
□General Medical/S	Surgical Unit	☐Transitional Care	e Unit	□Newborn
□Obstetrical Unit/ I	Nursery	□Emergency Depa	rtment	
Number of patients t	upon which staffing pl	lan is based (Average	e Daily Census):	14 - 18
Emergency Departm	ient = Average numbe	er of visits per day (T	otal Visits/365 days):
	le de la companya de deserv			
Position	Shift Length		ber of Staff Ordina	arily Assigned ients in an 8 hour shift)
		Days	Evenings	Nights
RNs	8 hours	2	2	2
LPNs	8 hours			
CNAs	8 hours	2.00	2.00	1.00
Other (Specify):	8 hours		•	
Resp. Therapist	8 hours			
Total Direct (Care Providers:	5.00	5.00	3.00
Comments:	Patient Safety Aides a	re utilized as needed	for cognitively impa	aired patients.