COVER PAGE

The following is the comprehensive hospital staffing plan for Columbia Basin Hospital 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: 6/21/24

I, the undersigned with responsibility for Columbia Basin Hospital 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: Rosalinda Kibby

Rosalinda Kibby
Rosalinda Kibby (Nov 6, 2024 07:28 PST)

Hospital Information

Name of Hospital: Columbia Basin Hospital			
Hospital License #: HAC.FS.00000045			
Hospital Street Address: 200 Nat Washington Way			
City/Town: Ephrata	State: WA	Zip code: 98823	
Is this hospital license affiliated with more than one location?	☐ Yes	☑ No	
If "Yes" was selected, please provide the location name and address			
Review Type:	☑ Annual	Review Date: 1/1/25	
	☐ Update	Next Review Date: 1/1/26	
Effective Date: 7/1/24			
Date Approved: 6/21/24			

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:
Reviewed resources from the American Hospital Association, American Nurses Association, and an article from Nurse Journal that discussed what other states are doing.

☐ Terms of applicable collective bargaining agreement

Description:
N/A: We are not union and do not have a collective bargaining agreement.

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

Description:
Coverage for meal and rest breaks is available with the staffing plan.

☑ Hospital finances and resources

Description:
Hospital finances and resources are fairly consistent. We are not proposing any additional staffing compared to our last plan.

☐ Other

Description:

Signature

CEO & Co-chairs Name:	Signature:	Date:
Rosalinda Kibby	Rosalinda Kibby	11/06/2024
Alexandrea Liebrecht	Alexandrea Liebrecht RN/NDM	06/11/2024
Amber Sams	Amber Sams	27/11/2024

Total Votes	
# of Approvals	# of Denials
6	0

Access unit staffing matrices here.

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Washington State Department of HEALTH

DOH 346-154

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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**
Unit/ Clinic Address:	**200 Nat Washington Way Ephrata WA 98823**
Effective as of:	**1/1/2025**
Day of the week	

Day of the week	Shift Type	Shift Length in Hours	Min # of RN's	Min # of LPN's	Min # of CNA's	Min # of UAP's
Sunday	7a-7p	12	1	0	1	0
	11a-11p	12	1	0	0	0
	7p-7a	12	1	0	1	0
Monday	7a-7p	12	1	0	1	0
	11a-11p	12	1	0	0	0
	7p-7a	12	1	0	1	0

Tuesday	7a-7p	12	1	0	1	0
	11a-11p	12	1	0	0	0
	7p-7a	12	1	0	1	0
Wednesday	7a-7p	12	1	0	1	0
	11a-11p	12	1	0	0	0
	7p-7a	12	1	0	1	0
Thursday	7a-7p	12	1	0	1	0
	11a-11p	12	1	0	0	0
	7p-7a	12	1	0	1	0
Friday	7a-7p	12	1	0	1	0
	11a-11p	12	1	0	0	0
	7p-7a	12	1	0	1	0
	7a-7p	12	1	0	1	0
	11a-11p	12	1	0	0	0

Saturday	7p-7a	12	1	0	1	0

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Unit Information

Additional Care Team Members

Occupation	Shift Coverage			
	Day	Evening	Night	Weekend
None				

Washington State Department of
HEALTH

DOH 346-154

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:	West Wing		
Unit/ Clinic Type:	Inpatient/SNF		
Unit/ Clinic Address:	200 Nat Washington Way Ephrata WA 98823		
Average Daily Census:	15	Maximum # of Beds:	25
Effective as of:	1/1/2025		
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)
25	7a-7p	12	2	1	3	0	0.96	0.48	1.44	0.00	6.08
	6a-2p	8	0	1	0	0	0.00	0.32	0.00	0.00	
	7p-7a	12	2	1	3	0	0.96	0.48	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	
		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	7a-7p	12	2	1	3	0	1.00	0.50	1.50	0.00	6.33
	6a-2p	8	0	1	0	0	0.00	0.33	0.00	0.00	
	7p-7a	12	2	1	3	0	1.00	0.50	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	
	7a-7p	12	2	1	3	0	1.04	0.52	1.57	0.00	
	6a-2p	8	0	1	0	0	0.00	0.35	0.00	0.00	
	7p-7a	12	2	1	3	0	1.04	0.52	1.57	0.00	

23		0	0	0	0	0	0.00	0.00	0.00	0.00	6.61
		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	
22	7a-7p	12	2	1	3	0	1.09	0.55	1.64	0.00	6.91
	6a-2p	8	0	1	0	0	0.00	0.36	0.00	0.00	
	7p-7a	12	2	1	3	0	1.09	0.55	1.64	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	7a-7p	12	2	1	3	0	1.14	0.57	1.71	0.00	7.24
	6a-2p	8	0	1	0	0	0.00	0.38	0.00	0.00	
	7p-7a	12	2	1	3	0	1.14	0.57	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	
20	7a-7p	12	2	1	3	0	1.20	0.60	1.80	0.00	7.60
	6a-2p	8	0	1	0	0	0.00	0.40	0.00	0.00	
	7p-7a	12	2	1	3	0	1.20	0.60	1.80	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	
19	7a-7p	12	2	1	3	0	1.26	0.63	1.89	0.00	8.00
	6a-2p	8	0	1	0	0	0.00	0.42	0.00	0.00	
	7p-7a	12	2	1	3	0	1.26	0.63	1.89	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	
	7a-7p	12	2	1	3	0	1.33	0.67	2.00	0.00	
	6a-2p	8	0	1	0	0	0.00	0.44	0.00	0.00	
	7p-7a	12	2	1	3	0	1.33	0.67	2.00	0.00	

18		0	0	0	0	0	0.00	0.00	0.00	0.00	8.44
		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	
17	7a-7p	12	1	1	3	0	0.71	0.71	2.12	0.00	6.82
	6a-2p	8	0	1	0	0	0.00	0.47	0.00	0.00	
	7p-7a	12	1	1	2	0	0.71	0.71	1.41	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	
16	7a-7p	12	1	1	3	0	0.75	0.75	2.25	0.00	7.25
	6a-2p	8	0	1	0	0	0.00	0.50	0.00	0.00	
	7p-7a	12	1	1	2	0	0.75	0.75	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	
15	7a-7p	12	1	1	3	0	0.80	0.80	2.40	0.00	7.73
	6a-2p	8	0	1	0	0	0.00	0.53	0.00	0.00	
	7p-7a	12	1	1	2	0	0.80	0.80	1.60	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	
14	7a-7p	12	1	1	3	0	0.86	0.86	2.57	0.00	8.29
	6a-2p	8	0	1	0	0	0.00	0.57	0.00	0.00	
	7p-7a	12	1	1	2	0	0.86	0.86	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	
	7a-7p	12	1	1	3	0	0.92	0.92	2.77	0.00	
	6a-2p	8	0	1	0	0	0.00	0.62	0.00	0.00	
	7p-7a	12	1	1	2	0	0.92	0.92	1.85	0.00	

13		0	0	0	0	0	0.00	0.00	0.00	0.00	8.92
		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	
12	7a-7p	12	1	1	2	0	1.00	1.00	2.00	0.00	8.00
	7p-7a	12	1	1	2	0	1.00	1.00	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	
		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	
11	7a-7p	12	1	1	2	0	1.09	1.09	2.18	0.00	8.73
	7p-7a	12	1	1	2	0	1.09	1.09	2.18	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	
10	7a-7p	12	1	1	2	0	1.20	1.20	2.40	0.00	8.40
	7p-7a	12	1	0	2	0	1.20	0.00	2.40	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	
9	7a-7p	12	1	0	2	0	1.33	0.00	2.67	0.00	8.00
	7p-7a	12	1	0	2	0	1.33	0.00	2.67	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	
	7a-7p	12	1	0	2	0	1.50	0.00	3.00	0.00	
	7p-7a	12	1	0	2	0	1.50	0.00	3.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	

8		0	0	0	0	0	0.00	0.00	0.00	0.00	9.00
		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	
7	7a-7p	12	1	0	2	0	1.71	0.00	3.43	0.00	10.29
	7p-7a	12	1	0	2	0	1.71	0.00	3.43	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	
6	7a-7p	12	1	0	1	0	2.00	0.00	2.00	0.00	8.00
	7p-7a	12	1	0	1	0	2.00	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	
		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	
5	7a-7p	12	1	0	1	0	2.40	0.00	2.40	0.00	9.60
	7p-7a	12	1	0	1	0	2.40	0.00	2.40	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	
4	7a-7p	12	1	0	1	0	3.00	0.00	3.00	0.00	12.00
	7p-7a	12	1	0	1	0	3.00	0.00	3.00	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	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
	7a-7p	12	1	0	1	0	4.00	0.00	4.00	0.00	
	7p-7a	12	1	0	1	0	4.00	0.00	4.00	0.00	
		0	0	0	0	0	0.00	0.00	0.00	0.00	

3		0	0	0	0	0	0.00	0.00	0.00	0.00	16.00
		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	
2	7a-7p	12	1	0	1	0	6.00	0.00	6.00	0.00	24.00
	7p-7a	12	1	0	1	0	6.00	0.00	6.00	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	
		0	0	0	0	0	0.00	0.00	0.00	0.00	
1	7a-7p	12	1	0	1	0	12.00	0.00	12.00	0.00	48.00
	7p-7a	12	1	0	1	0	12.00	0.00	12.00	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	
		0	0	0	0	0	0.00	0.00	0.00	0.00	

Washington State Department of HEALTH

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Unit Information

Additional Care Team Members

Occupation	Shift Coverage			
	Day	Evening	Night	Weekend
None				