

## Actual Versus Planned Nurse Staffing - Inpatient Areas

The table below summarises the average fill rate on each ward during **September 2018**. The fill rate is calculated by comparing planned staffing hours and actual staffing achieved.

In addition we are required to submit information on the total number of patients that were on each ward throughout the month – this is then used to calculate the “Care Hours per Patient Day” (CHPPD) metric. Our overall CHPPD for September was **7.91** care hours per patient per day.

	<b>Sep-2018</b>						
	<b>Day</b>		<b>Night</b>		<b>Care hours per patient day (CHPPD)</b>		
<b>Ward name</b>	<b>Average fill rate - registered nurses/ midwives</b>	<b>Average fill rate - care staff</b>	<b>Average fill rate - registered nurses/ midwives</b>	<b>Average fill rate - care staff</b>	<b>Registered nurses/ midwives</b>	<b>Care Support Workers</b>	<b>Overall</b>
AMU	97.4%	98.6%	97.5%	124.4%	4.23	2.79	7.02
Byland	93.5%	104.6%	84.4%	106.7%	2.70	3.49	6.19
CATT	81.9%	107.8%	86.7%	108.3%	4.68	3.37	8.06
Farndale	108.3%	90.6%	100.0%	100.0%	3.91	4.25	8.16
Granby	94.8%	105.0%	100.0%	98.3%	3.69	3.35	7.04
Harlow	101.7%	101.7%	100.0%	-	7.00	2.03	9.03
ITU/HDU	93.6%	-	94.7%	-	25.70	1.00	26.70
Jervaulx	86.8%	94.9%	90.3%	110.0%	2.75	3.53	6.28
Lascelles	100.0%	96.7%	100.0%	100.0%	4.39	3.92	8.31
Littondale	93.7%	124.0%	96.7%	123.3%	4.16	2.75	6.90
Maternity Wards	93.1%	89.2%	98.8%	81.3%	11.86	3.20	15.07
Nidderdale	94.7%	81.9%	105.2%	107.0%	3.36	2.42	5.78
Oakdale	91.4%	105.0%	89.2%	141.7%	4.45	3.21	7.66
Special Care Baby Unit	90.2%	26.8%	100.0%	-	10.38	0.75	11.13
Trinity	100.8%	92.7%	100.0%	100.0%	3.47	3.69	7.16
Wensleydale	89.3%	121.7%	100.0%	103.3%	3.32	2.51	5.83
Woodlands	82.3%	95.0%	95.6%	80.0%	10.25	2.98	13.23
<b>Trust total</b>	<b>92.6%</b>	<b>99.1%</b>	<b>95.8%</b>	<b>106.5%</b>	<b>4.83</b>	<b>3.08</b>	<b>7.91</b>

### Further information to support the September data

On the wards: CATT, Oakdale, Jervaulx and Byland, where the Registered Nurse (RN) fill rate was less than 100% against planned; this reflects current band 5 Registered Nurse vacancies and is reflective of the local and national position in particular regarding the difficulties in recruiting Registered Nurses. The Trust is engaged in an extensive recruitment plan in response to this.

In addition planned staffing levels on Jervaulx, Farndale and Nidderdale were adjusted in September to reflect the closure of beds in these areas in response to activity levels.

The ITU /HDU day and night staffing levels which appear as less than planned are flexed when not all beds are occupied and staff assist in other areas. National standards for RN's to patient ratios are maintained.

The planned staffing levels on the Delivery Suite and Pannal ward (maternity wards) have been combined to reflect the close working relationship of these two areas and the movement of staff between the wards in response to fluctuating occupancy and activity levels. Some of the Registered Midwife and care staff gaps were due to sickness in September; however a professional assessment was made on a shift by shift basis to ensure that nurse staffing numbers matched the activity.

In some wards the actual care staff hours show additional hours used for enhanced care for those patients who require intensive support. In September this is reflected on the wards; AMU, CATT, Granby, Jervaulx, Byland, Oakdale and Littondale.

For the Special Care Baby Unit (SCBU) although the day time RN and care staff hours appear as less than planned it is important to note that the bed occupancy levels fluctuate in this area and a professional assessment was undertaken on a shift by shift basis to ensure that the planned staffing matched the needs of both babies and families

The staffing complement for the children's ward, Woodlands, is designed to reflect varying levels of occupancy. Due to vacancies and sickness the day and night time RN and care staff hours are less than planned in September, however the ward occupancy levels vary considerably which means that particularly in this area the number of planned and actual nurses is kept under constant review.