

Actual Versus Planned Nurse Staffing - Inpatient Areas

The table below summarises the average fill rate on each ward during **March 2019**. 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 March was **7.95** care hours per patient per day.

	Mar-2019						
	Day		Night		Care hours per patient day (CHPPD)		
Ward name	Average fill rate - registered nurses/ midwives	Average fill rate - care staff	Average fill rate - registered nurses/ midwives	Average fill rate - care staff	Registered nurses/ midwives	Care Support Workers	Overall
AMU (MSS)	96.8%	100.0%	99.2%	98.9%	4.32	2.70	7.02
Byland	88.7%	97.6%	92.3%	123.7%	2.63	3.43	6.07
CATT (MAU)	98.7%	95.2%	106.5%	96.8%	5.02	2.64	7.66
Farndale	92.1%	84.4%	101.6%	124.2%	3.26	3.19	6.45
Granby	111.2%	132.3%	100.0%	98.4%	3.21	3.04	6.25
Harlow	102.4%	98.4%	103.2%	-	6.52	2.02	8.54
ITU/HDU	107.9%	-	116.1%	-	22.28	1.02	23.30
Jervaulx	98.9%	98.8%	90.6%	119.9%	2.84	3.44	6.28
Lascelles	96.7%	92.3%	100.0%	100.0%	4.40	3.86	8.27
Littondale	97.5%	103.2%	98.9%	132.3%	4.02	2.61	6.63
Maternity Wards	97.1%	83.9%	98.1%	93.5%	15.61	4.23	19.84
Nidderdale	100.9%	96.2%	100.0%	106.5%	3.76	2.14	5.91
Oakdale	85.6%	119.9%	91.9%	132.3%	4.29	3.38	7.67
Special Care Baby Unit	92.1%	67.7%	96.8%	-	16.06	3.18	19.24
Trinity	101.4%	100.6%	100.0%	98.4%	3.77	4.18	7.95
Wensleydale	87.5%	107.3%	100.0%	104.8%	3.83	2.74	6.57
Woodlands	81.5%	83.9%	97.8%	77.4%	10.43	2.76	13.19
Trust Total	95.9%	100.2%	100.2%	110.1%	4.93	3.01	7.95

Further information to support the March data

On the wards: Oakdale, Byland, Jervaulx, and Wensleydale 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.

On CATT, Granby and Harlow Suite the increase in RN hours above plan was to support the opening of additional escalation beds in March, when required.

On Farndale ward the daytime RN and care staff hours were less than planned due to vacancies and sickness.

The ITU/HDU staffing levels reflect periods of increased activity within the unit during March.

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 March; 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 March this is reflected on the wards; Byland, Farndale, Granby, Jervaulx, Oakdale, Littondale and Wensleydale.

For the Special Care Baby Unit (SCBU) although the 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 sickness the RN hours are less than planned in March and the care staff hours less than planned due to vacancy and sickness, 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.