

## Actual Versus Planned Nurse Staffing - Inpatient Areas

The table below summarises the average fill rate on each ward during **May 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 May was **7.98** care hours per patient per day.

	<b>May-2019</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>
Byland	82.0%	92.3%	96.8%	121.0%	2.55	3.31	5.86
Farndale	80.1%	87.1%	100.0%	111.3%	3.14	3.31	6.45
Granby	105.5%	129.0%	100.0%	101.6%	3.25	3.17	6.41
Harlow	100.0%	96.8%	103.2%	-	6.72	1.90	8.62
ITU/HDU	102.6%	-	108.4%	-	24.89	2.72	27.60
Jervaulx	90.0%	90.3%	95.5%	108.1%	2.79	3.22	6.02
Lascelles	100.6%	81.3%	100.0%	100.0%	5.14	4.01	9.14
Littondale	98.6%	89.2%	100.0%	138.7%	4.55	2.65	7.19
Maternity	95.1%	89.5%	100.0%	76.6%	14.32	3.71	18.04
Medical Assessment Unit (MAU)	94.8%	96.8%	110.1%	108.1%	5.23	2.92	8.16
Medical Short Stay (MSS)	96.8%	91.7%	98.0%	109.7%	4.37	2.65	7.02
Nidderdale	95.2%	91.9%	100.0%	135.5%	3.67	2.22	5.89
Oakdale	91.6%	95.2%	100.0%	106.5%	3.49	3.62	7.12
Special Care Baby Unit	86.9%	64.5%	96.8%	-	20.23	3.95	24.18
Trinity	100.6%	112.9%	100.0%	100.0%	3.71	4.48	8.19
Wensleydale	82.1%	104.8%	100.0%	101.6%	3.51	2.56	6.07
Woodlands	74.0%	80.6%	89.2%	67.7%	11.02	2.94	13.96
<b>Trust Total</b>	<b>92.5%</b>	<b>96.5%</b>	<b>100.4%</b>	<b>106.2%</b>	<b>4.90</b>	<b>3.08</b>	<b>7.98</b>

### Further information to support the May data

On the wards: Oakdale, Byland, Jervaulx, MAU, Farndale 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 Granby the increase in RN hours and some care staff hours was to support the opening of additional escalation beds when required and some enhanced care requests.

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

On Lascelles, although the daytime care staff hours were less than planned in May, the occupancy level at times enabled staff to assist in other areas.

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 gaps were due to vacancies and sickness in May and the care staff gaps were due to sickness; 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 May this is reflected on the wards; Byland, Farndale, Granby, Jervaulx, Littondale, MSS, MAU, Nidderdale, Trinity and Oakdale.

For the Special Care Baby Unit (SCBU) although the RN and daytime 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

On Woodlands ward the RN hours were less than planned due to sickness 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.