

REPORTS INTERPRETATION

Ward Total Hours Acuity Variance Report

This report identifies clinical hours required for inpatients care by acuity and clinical hours available in the ward/department over a selected work cycle. It also identifies other clinical staff rostered (costed) to the ward/department who are not available to provide clinical care.

Consider:

- If clinical hours available are inadequate for care there may be an opportunity to utilise clinical staff who have been rostered to work but are undertaking other activities.
- The number of inpatients and number of empty beds (possibility of admissions), and uncategorised patients when looking at variance times.
- The skill mix of the clinical staff rostered prior to adjusting staffing hours.
- The allowance of 12.5% unpredicted work for all patient categories (each nurse working an equivalent of 8 hours has a one hour allowance for unpredicted work).

GLOSSARY OF TERMS

Calendar Day: refers to the day, evening and night shift – cycle commencing on the selected date.

Cycle Day: refers to the evening, night and day shift – cycle commencing on the selected date.

HANDY HINTS

Shift notes: shift notes are now being used extensively by nurse managers to provide a handover for after hours duty managers. By using the Hospital Shift Notes Report, shift notes for all wards can be viewed collectively. Entering Shift notes will assist the manager and team leaders to recall events and incidents that impacted on the ward/department on the shift.

Where in the world is TC?

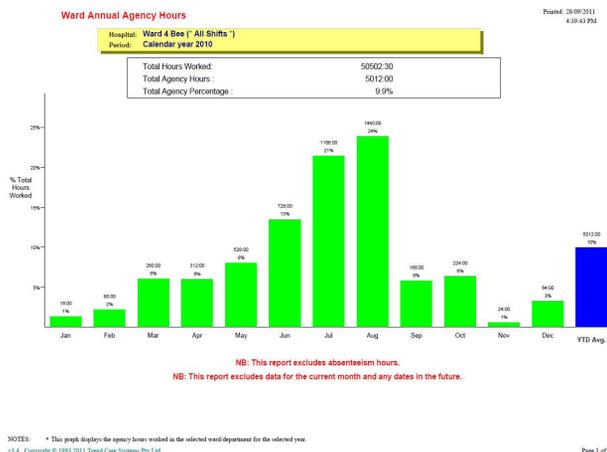


'TC' The TrendCare mascot has travelled extensively! Watch this space to see where TC turns up next... Grab your own 'TC' at our trade booths, see newsletter for dates and venues.

Logan Hospital, Queensland, Australia

USEFUL GRAPHS

Ward Annual Agency Hours



This graph identifies:

- The months of the year.
- The percent agency hours worked in relation to total hours worked (productive and non productive).
- The percent of total agency hours worked year to date.

FREQUENTLY ASKED QUESTIONS

What is the difference between Bed Utilistion and Census HPPD (Hours Per Patient Day)?

The difference between Bed Utilisation and Census HPPD is the method of calculating patient days. Census calculates patient days as the number of patients in a ward / unit at midnight (or other arbitrary time of the day). This method does not capture the total number of patients cared for in the 24 hr period. Bed utilisation counts all patients cared for on each shift and averages these across the 3 shifts.

Bed utilisation highlights wards with a high level of churn.

Bed Census v's Bed Utilisation

	Day	Evening	Night	2400MN
Bed 1	Disch (1) 0900 Adm (1) 1100 Tout -> Ortho	Adm (1) 1400	Dec (1) 2300	0
Bed 2	Disch (1) 1000 Adm (1) 1200	(1)	(1)	1
Bed 3	(1)	Disch (1) 1600 Adm (1) 1800 Tout -> ICU Adm (1) 2200	(1)	1
Bed 4	(1)	Disch (1) 1630	-	0
Bed 5	(1)	(1)	(1)	1
Bed 6	Disch (1) 0900	-	Adm (1) 0200	0
Total Bed Utilisation	8	2	5	3

Bed Utilisation = 6.67 Patients MN Census = 3 Patients

Presenter: Charrie Lewis - charrie@trendcare.com.au