

Our Health Care Report Card

Acute productive hours per patient day

Jan 2019

Are we matching our nursing levels to patient need?

What are we measuring?

We measure the productivity of nursing staff who provide direct patient care, including registered nurses, licensed practical nurses and nursing care aides.

Why?

We are measuring productivity levels to help us do a better job of planning ahead for the number of patients we expect to care for. For example, if we know of a time of day, month or year when we see more patients than usual, we can plan for higher staffing levels. Also, some patients in the hospital, as in the intensive care unit, require 24 hours of nursing care per day. Other patients do not need as many direct nursing hours to receive quality patient care and a full recovery. It's about using our staff resources (labour) in the most efficient and effective way possible.

How do we measure it?

This measure divides the total number of nursing hours paid (labour) by the number of patient days (volume). As per the Ministry of Health definition, this measure includes Medical, Surgical, Medical/Surgical, Intensive Care Unit (ICU), Obstetrics, Pediatrics, Mental Health and Substance Use, Physical Rehab, and Palliative Nursing Units.

How are we doing?

The acute productive hours per patient day for December 2018 year-to-date is at 6.4, which meets the VCH overall target. Performance has not changed over the last 9 months.

What are we doing?

All communities of care and Providence Health Care continue to use the Capacity Planning Tool (CapPlan) to access real-time information and managing paid hours reports for better management decision-making. We are also identifying improvement opportunities. For example, internal benchmarking.

Our performance	Target *
6.4	<= 6.4
hours of direct patient care per day	

Year-to-date Timeline: Apr 2018 - Dec 2018

*Our target is based on our performance of the last year to date.

