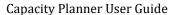


Capacity Planner User Guide Version v8.2 ANZ | May 2021





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Introduction

Introduction

The purpose of this document is to provide detailed information for Capacity Planner (CP) in the following areas:

- · How to access CP
- How CP is configured and what this means (i.e. Planning Groups and specialties)
- What the dashboards display
- Which reports are available on demand and how to read them
- What statistics can be displayed
- Utilising the Help function

This document serves as a training and information document for using CP and is based on standard operating procedures.

Your CP might be configured slightly differently to the screenshots in this document, but the concepts and how to read the dashboards and reports will have the same principles applied.

OVERVIEW OF CP AND HOW IT WORKS

The main CP dashboards and reports provide global visibility of the hospital status which can also be viewed in more detail at Planning Group or ward level.

CP provides information on what happened yesterday, and projects patient activity (Patients In/Out) and occupancy for the next 1-7 days. This information can be used to understand constraints and plan and manage the hospital proactively. It should inform, and support hospital decision making and monitor actual activity against projected activity.

There is no data entry of ADT data required. The data in CP comes directly from the Patient Management System. When a transaction is made in the Patient Management System, the information is reflected in CP. The main dashboard screens are updated regularly with reports scheduled to run daily or as appropriate.

CP does not receive bed information from the Patient Management System. Opening and closing beds is entered manually.

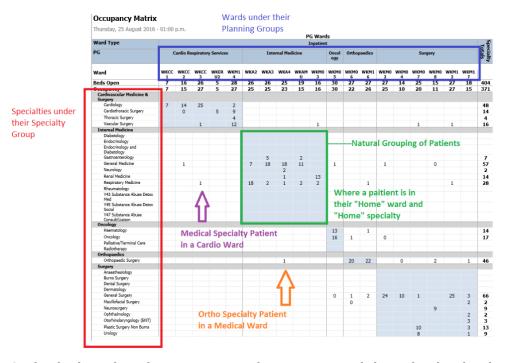
You cannot 'break' CP. There is no data entry, and people with operational user access have no ability to change or delete anything. This means you can navigate around the program and get familiar with the available information without any worry.



CP CONFIGURATION

The dashboards have been structured by allocating specific wards and specialties into Planning Groups. A Planning Group is a logical grouping of the patients within the hospital.

Below is how the Planning Groups (PG) are structured:



CP also displays where there are patients who are not currently located within their home Planning Group - in the above screenshot the following has occurred.

There is a medical patient in a cardio ward.

There is an orthopedic patient in a medical ward.

This therefore identifies outliers within the Planning Groups and allows visibility around exactly where they are and can assist with moving them back to the appropriate ward.



This section explains how each group of users would be expected to use the reports and dashboards in Capacity Planner.

EXECUTIVE MANAGEMENT

CEO, COO, CNO, CMO, CFO

CP helps you to:

- Understand at a glance the hospital status including where the bottlenecks are, what is coming and what changes are required to adjust capacity to meet the demand
- · Develop a staff schedule based on anticipated workload that stays within budget guidelines
- Manage pandemic bed planning and staff allocation needs and adjust resources to accommodate unprecedented increase in volumes and acuity levels

What to look at:

- Use the "Today" dashboards to see the state of the hospital against both long term strategic plans and current beds open. There are views from both ward and specialty perspective allowing you to see not only where issues exist, but which services are triggering them.
- See the response made to variances to plan, where additional beds have been opened or beds have been reduced.
- See the projected occupancy for the next 1-7 days. Projections can provide advanced warning of potential capacity issues allowing early intervention
- Use the "Yesterday" dashboards to review how the hospital got to its current position. Were there opportunities missed to have had a different outcome.
- Long term plans can be made using the Capacity Planner forecasting tools. The "Planner" dashboards provide charts and metrics showing how the hospital is tracking against plans made.
- Emergency Department dashboards show whether patients are moving freely to Inpatient beds and whether Emergency Department wait times KPIs are being met.

Places to look:

- Wards Today dashboards
- Specialties Today dashboards
- ED Today dashboard
- · Yesterday dashboards
- Reporting On demand reports and dashboards
- Statistics



SERVICE MANAGEMENT

Service Directors

CP helps you to:

- Long term plans can be made using the Capacity Planner forecasting tools. Inputs of the number of patients expected and the time they are expected to spend in each specialty allows plans to include changes in expected demand or service changes.
- Communicate with nursing how much capacity you need to meet future demand.
- Service based projections let you see if your service is staying within the planned capacity or whether it may breach capacity over coming days.
- Length of stay by specialty can be monitored.

Places to look:

- Specialties Today dashboards
- Wards Today Dashboards
- ED Today dashboard
- Yesterday Dashboards
- Reporting On Demand reports and dashboards
- Statistics

NURSING MANAGEMENT

CNO, Nursing Director

CP helps you to:

- Easily see the current and projected occupancy and plan for an increase or decrease in staffing.
- Review actual and projected demand for beds in the last 24 hours to work out the cause of any issues.
- Check the average length of patient stay at a glance to see if it meets the accepted key performance indicators (KPIs).
- See how many patients are currently in ED or projected to arrive over the next day or week and plan staffing levels to cope with the number of admissions expected.
- Identify outlying patients so you can implement a push/pull strategy to relocate them if appropriate.
- Understand projected staffing requirements compared to patient demand on day of care and up to 7 days in advance.
- Visualise projected staffing against your roster and projected patient demand.

What to look at:

- See current occupancy and capacity at individual ward and customisable aggregate levels
- The Hospital at a Glance dashboard and Occupancy Matrix report provide views of how many patients are currently in each ward and which specialties they are in providing easy identification of outlying patients.
- Recalculating every day based on the morning's starting occupancy, projections provide a view of where the hospital occupancy will be for the next 1-7 days. Projections calculate using normal behaviour of patients in and out for each day of the week. Projections can provide early warning of capacity issues allowing intervention before issues arise.
- Projections are generated from both a ward perspective and service perspective allowing manages to see where capacity issues may occur, and which services are exceeding capacity.
- PG's Today dashboards show the current and projected demand by Planning Group
- Yesterday dashboards show how the hospital got to its current position by comparing projected levels of activity with what happened over the last 24 hours.
- There are several configurable views available through the Web Portal and Statistics pages

Places to look:

- Wards Today dashboards
- Planning Group's Today dashboards (e.g. surgical today)
- Specialties Today dashboards
- ED Today dashboard
- Yesterday dashboards
- Reporting On Demand reports and dashboards
- Statistics



WARD MANAGEMENT

Charge Nurse, Nurse Manager, Associate Nurse Manager

CP helps you to:

- Easily see current and projected occupancy for the ward and plan for an increase or decrease in demand for staffing and beds.
- Review actual and projected demand for beds in the last 24 hours and work out the cause of any issues.
- View discharge time patterns against KPIs to identify opportunities for improvement.
- View the average length of patient stay to see if it meets the accepted key performance indicators (KPIs)
- See how many patients are currently in ED or projected to arrive over the next day or week and plan staffing levels to cope with the number of admissions expected Understand projected staffing requirements as compared to patient demand on day of care and up to 7 days in advance Identify outlying patients easily using the occupancy matrix report.

What to look at:

- Individual ward metrics are displayed on PG Today dashboards such as occupancy and length of stay.
- The Hospital at a Glance dashboard and Occupancy Matrix report provide quick views of wards within groups, e.g., Surgical wards or at ward type e.g. Inpatient wards
- Standard metric views are set up for all wards showing aggregate data as well as data for individual patients. These views can be customised to show additional metrics for individual wards
- Key KPI's like discharge time of day are available on various dashboards.

Places to look

- Wards Today dashboards
- Yesterday dashboards
- Planning Group's Today dashboards (e.g. surgical today)
- Reporting On demand reports and dashboards
- Statistics



ED MANAGEMENT

Nurse Managers, Service Managers, Emergency Managers, Emergency Directors

CP helps you to:

- Understand and visualise the projected activity in the unit for the next few hours and days, enabling you to adequately plan resources to match demand.
- On day of care, easily identify how many patients are waiting to be seen, their triage level and how long they have been waiting.
- Determine whether planned staffing levels need to be adjusted, based on occupancy projections for the next four to eight hours and 7 days in advance.
- Easily identify where beds are available within the hospital.
- Monitor wait times to make sure patients are being seen within safe time frames and against KPIs.
- View ED Yesterday dashboard to review yesterday's performance.

What to look for:

- ED Today dashboards provide real time metrics on key ED KPI's such as patient wait times and time spent in the Emergency Department dashboards.
- ED Today dashboards show admitting wards how busy the ED is and whether there are patients ready to be moved.
- Wards Today and Specialties Today dashboards give the Emergency Department a view of the rest of the hospital and potential bottlenecks
- The Hospital at a Glance dashboard shows the locations of unoccupied beds
- Use the reporting tab to review previous data over longer periods of time (KPI monitoring).

Places to look

- · ED Today dashboard
- Wards Today Dashboards
- Hospital at a Glance dashboard
- Yesterday dashboards
- Reporting On Demand reports and dashboards
- Statistics



PATIENT FLOW

Patient Flow Coordinator, Clinical Coordinator, Duty Nurse Manager, After Hours Manager,

CP helps you to:

- View hospital capacity at a glance.
- View outlying patients easily via the occupancy matrix.
- Identify current and projected capacity across the hospital so you can proactively plan days in advance.
- Provides visibility of expected patient volumes in advance.
- Provide data and reports for business intelligence and strategic reporting.
- Monitor admissions vs discharges to avoid capacity issues.
- Check whether key performance indicators (KPIs) are being met (e.g., discharge times, average length of stay and ED waiting times).

What to look at:

- The Hospital at a Glance dashboard and Occupancy Matrix report provide quick views of ward occupancy and patient specialties within wards to give a hospital overview quickly.
- Individual ward metrics are displayed on PG Today dashboards such as occupancy and length of stay.
- Standard metric views are set up for all wards showing aggregate data as well as data for individual patients. These views can be customised to show additional metrics for individual wards
- Key KPI's like discharge time of day are available on various dashboards.

Places to look

- ED Today dashboard
- Wards Today dashboards
- Hospital at a Glance dashboard
- · Yesterday dashboards
- Reporting On Demand reports and dashboards
- Statistics

Capacity Planner Viewer

NAVIGATION



HELP

The question mark in the top navigation bar opens a link to Help documentation in another browser window/tab.

TODAY

The Today Dashboards provide views of the current state, along with projections for the next 6 days. The default view when clicking **Today** will be different for each customer. For multi-facility customers, it may reflect a regional view. If a single facility, then the Hospital Today Dashboard is the default view.



TODAY WARD VIEW

Today's view of wards shows current occupancy, projections, beds open, roster bed plan for the next six days.

The Hospital Ward View is an aggregation of the General Inpatient Planning Groups providing a high-level view. The Planning Group Today Ward View dashboards give a status by each Planning Group and the wards within the Planning Group, showing the projected occupancy, patients in and out and capacity, for today and the next few days.

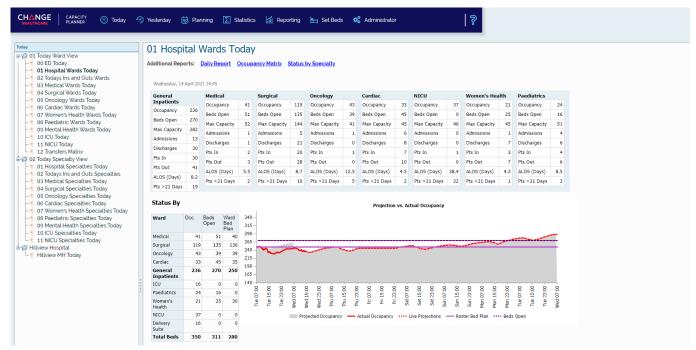


HOSPITAL WARDS TODAY

This dashboard gives global information about the hospital's current status. It provides a summary view of the hospital, and visibility of how individual services are contributing to the overall picture.

This dashboard displays:

- Current occupancy (Combined General Inpatient and by Planning Group) current number of patients in heds
- Live Projections updated projections with every dashboard refresh, re-projecting dependent on movements since 7am
- Roster Bed Plan the number of beds planned at the time the roster was generated
- Beds Open the number of beds in a Planning Group that are staffed and can be used for a patient
- Beds Free How many beds are available (Beds Open less Beds Occupied)
- Pts In (Patients In) This includes admissions and transfers into this Planning Group from another location in the hospital
- Pts Out (Patients Out) This includes discharges and transfer out of this Planning Group
- Does the hospital have too few/adequate/excessive capacity (beds planned/open) based on the expected demand?
 - o The solid purple line on the chart shows the original bed plan
 - o The dotted purple line will show the actual beds open including any changes to the plan



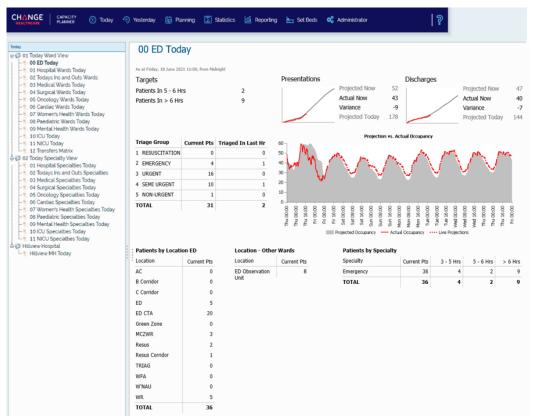


ED TODAY

The ED Today dashboard provides key status information and KPIs for the Emergency Department, as well as projected vs. actual occupancy over the coming days. It allows users to monitor and analyse ED performance and proactively plan for the days ahead.

This dashboard displays:

- Targets Table displays the number of patients in the ED between 3-4 hours and >4.
- Presentations and Discharges projected Patients In and Out of ED for the 24-hour period midnight to midnight.
- Triage Group All patients in ED who have a triage code assigned.
- Projection vs. Actual Occupancy Chart hour by hour projected occupancy for the next six days.
- Patients by Location ED Current ED occupancy by location (locations included in the 4-hour target).
- Location Other Wards Occupancy in ED Short Stay Unit (location not included in the 4-hour target).
- Patients by Specialty current occupancy by specialty and time in the department.





DAILY REPORT

The Daily Report provides more detailed data on patient activity (Patients In vs. Patients Out) and occupancy the hospital is expecting against planned capacity (beds open). The projection is based on 'normal' activity of Patients In and Patients Out by hour for the day.

The Daily Report is accessed from a link on the main Hospital Wards Today Dashboard. This is a key report used as part of the daily meeting process – today/tomorrow planning, providing information on expected occupancy, current open bed plans and expected free beds based on occupancy for the next six days.

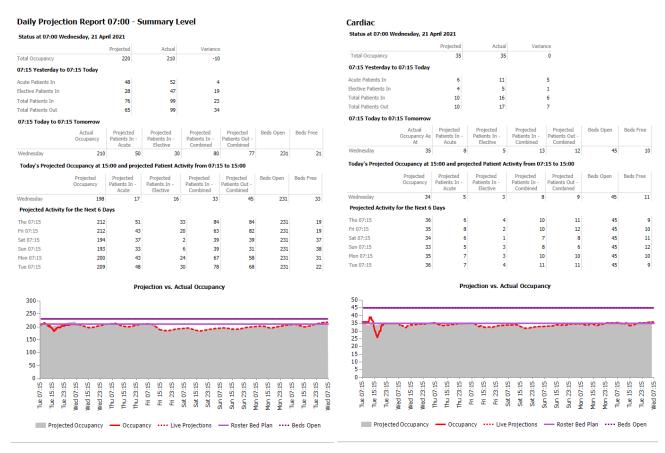
Primarily, this report provides visibility of the expected occupancy, and robust information to assist with identifying and managing capacity breaches in advance or reducing resources (beds or staff) when they exceed what is required to meet expected patient demand. The data is the same as you see on the Today dashboards. These can be viewed at hospital or Planning Group/service level.

- The report runs daily, usually at 7:00am, and provides -Hospital General Inpatient combined (page 1) and Planning Group level report (subsequent pages)
- Occupancy as at 7am vs yesterday 7am projection
- Actual activity (patients in and out) yesterday vs projection
- · Actual occupancy at 7am today
- Projected number of Patients In and Out today by 3pm, and projected occupancy at 3pm
- Projected number of Patients In and Out, and occupancy at 7am for the next five days
- Planned Beds Open as reflected in CP
- Beds free (Beds Open less Occupancy)

Used commonly as the primary source of data at the daily planning meeting to assess the following:

- Based on expected occupancy, are there enough/too many beds open for the next 8/24/48 hours?
- If breaching, by how much? What is the plan?
- Are more beds open than needed at hospital level? If so, how many can be closed and not resource?
- Are there appropriate levels of staff to meet demand, and are they rostered to work in the areas needed?





Using the Report

Use this report to assist with planning for the next 1-7 days.

For the divisional or nurse manager, this report helps prepare for the daily meeting by showing:

- How each area came to be at the current position by comparing actual patients in and out against projected patients in and out for the last 24 hours
- how many patients normally come into your area on the current day of week / the next few days, how many
 patients normally move out of your area on the current day of week / the next few days whether normal
 activity patterns indicate potential capacity issues.

For the patient flow or bed manager, this report provides useful information for discussing with ward managers how to manage the number of beds needed and the number available.

As well as covering individual wards or planning groups, the report gives information for aggregated groups e.g. Inpatient.

Understanding the Report

Last 24 Hours

The first table shows the number of patients in the Planning Group at 7am and what happened in the last 24 hours.

- **Total Occupancy** is the total number of patients in the Planning Group at 7am.
- Variance is the difference between the actual and projected number of patients coming in or moving out of the ward in the last 24 hours.

In the example above, nine patients were projected to come in and nine did come in, so the variance was zero. Need to check numbers (nine) align with screenshots

Five patients were projected to move out but nine actually did, a variance of four. This means four more beds became available than expected. The reason for variances can be discussed in planning meetings.

Next 24 Hours

The second table projects the number of patients coming in or moving out over the next 24 hours:





- **Actual Occupancy** is the total number of patients currently in the planning group.
- Patients In is admissions plus transfers
- Patients Out is discharges plus transfers
- Beds Open is the total number of beds that are staffed and available for patients.
- **Beds Free** is the number of staffed beds minus the number of patients (Beds Open minus Occupancy).

First Eight Hours of the Day

The third table projects the number of beds available at 3pm today and how many patients are likely to come in or move out between 7am and 3pm.

Next Six Days

The fourth table is a day-by-day projection for the next six days.

Planning

The chart gives an overview of the number of patients projected to be in each planning group over the next six days and what happened in the last 24 hours:

- **Projected Occupancy** (grey area) is the projected number of patients in the planning group.
- Occupancy (red line) is the actual number of patients in the planning group.
- This is a static report run at the time the projections initially calculate, the live projection will be the same as the projection.Roster Bed Plan (solid purple line) is the number of beds that were decided to be opened for the roster period.
- Beds Open (dotted purple line) is the number of staffed beds available for use.
- **Staffed Patient Capacity** (dotted grey line), if shown, is the number of patients that can be cared for by the rostered staff available.



OCCUPANCY MATRIX

This report shows current occupancy by ward and specialty.

The Occupancy Matrix is accessed from a link on the Hospital Wards Today dashboard and is a key report popular for review in the Daily Planning meeting and used throughout the day by the Bed/Duty Managers. It provides visibility of:

- The number and specialty of patients by ward Planning Group, to individual ward level
- The number of patients by specialty Planning Group, to specialty level
- Visibility of number and location of 'outlying' patients

Planning Group	T Spe	Other		Medical					rgical			Oncology		diac	ICU	Women's Health	Paed	iatrics	NICU
Ward	Specialty Totals	A1	MAPU	Medical 3	Medical 6	SAPU	Surgical 4	Surgical 6	Surgical 7	Surgical 8	Surgical 9	Oncology	Cardiac 1	Cardiac 2	Intensive Care	Maternity Ward	Paediatric 1	Paediatric 2	Neonata Unit
Beds Open		0	23	12	16	12	14	36	39	24	10	39	37	8	0	25	16	0	0
Occupancy		0	26	0	15	8	14	36	39	24	10	40	34	0	15	33	17	8	38
Medical																			
General Medicine	53		26		14		2	2	3	1	1	1	2		1				
Surgical																			
Ear Nose Throat	5					1			3						1				
General Surgery	31					6			22		3								
Gyn BS Other	10						10												
Gynaecology	1						1												
Neurology	11									10					1				
Neurosurgery	15						1			12					1			1	
Ophthalmology	4								1		3								
Orthopaedics	24							23			1								
Urology	12							11			1								
Vascular Surgery	9								7		1				1				
Oncology											-				_				
Haematology	16								1			13	1		1				
Oncology	17								1	1		15	-		-				
Rad Oncology	7					1			1	-		5							
Renal Medicine	7				1	-			-			6							
Cardiac					-														
Card - PTCA	2												2						
Cardio CABG	2												1		1				
Cardio Mitral Stenos	4												1		3				
Cardiology	14												14						
Cardiothoracic Surgery	9												9						_
Thoracic Surgery	5												4		1				_
ICU	,												7		-				
Spec/Intensive Care	4														4				
Maternity																			
Mat mthr Cmty LMC	15															15			
Mat mthr No Cmty LMC	17															17			
Newborn Cmty LMC	1															1			_
NICU	-															1			
N/Natal Spec Care L3	38																		38
Paediatrics																			30
Paediatric Medicine	16																16		
Spec Paed Surgery	7																1	6	
Spec/Paed Oncology	1			-													1	1	

Using the Report

Use this report to:

- see at a glance where patients are located
- · understand current occupancy and capacity.

Understanding the Report

This report updates regularly. The date and time when the report was last updated is displayed at the top of the screen. It does not update when opened in a new tab.

Rows show the patients in each specialty, columns show where they are located.

Locations are grouped by ward type and planning group.

Beds Open is the number of beds available for use in each ward, **Occupancy** is the number of beds actually in use in each ward at the time of the report.

Blue cells show the home wards for the group of specialties.

Any numbers in white cells are off service patients.

In the example above, there are 11 general medicine patients in surgical wards (seven in Ward 114 and four in Ward 117).

Planning

Bed and duty managers can check this report throughout the day to monitor where patients are located and identify whether moving patients will help manage capacity.



STATUS BY SPECIALTY

Status by Specialty is accessed from a link on the Hospital Wards Today dashboard and provides a Planning Group and specialty view of occupancy, activity trends and LOS/long stay patient trends.

Status By Specialty

Summary Report of Patients Currently in Hospital per Specialty Date: Friday, October 18, 2019, 06:45

Specialty	Occupancy	Current Patients ALOS	Current Patients > 10 Days	Admissions Last 24 Hours	Transfers In Last 24 Hours	Discharges Last 24 Hours	Transfers Out Last 24 Hours	Admissions Last 7 Days	Transfers In Last 7 Days	Discharges Last 7 Days		ALOS Patients Discharged Last 7 Days
Cardiac	37	4.9	5	11	6	5	6	53	25	41	34	3.1
Card - Angiogram	10	2.3	0	4	0	0	0	15	5	13	7	2.8
Card - PTCA	2	1.0	0	0	2	0	0	0	2	1	1	1.3
Cardio Aortic Valve	2	9.8	1	0	0	0	1	2	1	0	2	0.0
Cardio CABG	4	6.2	1	1	2	0	1	3	5	0	7	0.0
Cardio Mitral Stenos	0	0.0	0	0	0	0	0	0	0	0	0	0.0
Cardiology	12	3.4	1	4	3	4	4	27	5	22	10	2.8
Cardiothoracic Surgery	5	12.9	2	1	0	0	1	4	5	1	5	4.2
Thoracic Surgery	2	3.7	0	1	0	1	0	2	3	4	3	6.2
Medical	90	6.1	16	17	5	19	6	133	31	119	49	4.0
Gastroenterology	1	0.6	0	1	1	2	0	3	5	9	2	5.9
General Medicine	80	5.7	15	15	3	16	6	123	21	101	45	3.6
Immunology	0	0.0	0	0	0	0	0	0	0	0	0	0.0
Medical Withdrawal	1	3.6	0	0	0	0	0	1	0	0	1	0.0
Respiratory Medicine	8	11.1	1	1	1	1	0	6	6	9	2	7.2
Surgical	129	4.2	15	38	33	43	23	190	156	256	87	2.5
Ear Nose Throat	3	4.2	0	2	0	2	1	12	9	18	4	1.6
General Surgery	48	3.6	3	14	16	17	11	83	56	89	36	2.1
Gyn BS Other	6	1.4	0	1	6	6	1	4	22	21	3	1.8
Gynaecology	3	1.2	0	2	0	3	1	17	4	17	4	1.2
Neurology	9	3.8	1	2	1	2	1	9	5	8	3	2.9
Neurosurgery	10	8.1	3	2	0	1	0	10	1	9	7	3.3
Ophthalmology	4	2.0	0	1	5	2	2	7	19	17	7	0.7
Orthopaedics	31	4.9	5	8	3	2	6	32	22	36	19	3.8
Urology	5	3.0	1	3	1	4	0	8	11	20	2	2.3
Vascular Surgery	10	5.5	2	3	2	4	1	8	10	21	5	5.9
Total	256	5.0	36	66	44	67	35	376	212	416	170	3.0
Capacity Planner™ Version 7.6.0-00				Rep	ort Generated	: 10/18/2019 0	7:31 AM				1	Page 1 of 2

Occupancy As At 06:45 Last 7 Days

	Sat 12 Oct	Sun 13 Oct	Mon 14 Oct	Tue 15 Oct	Wed 16 Oct	Thu 17 Oct	Fri 18 Oct
Cardiac	37	36	35	37	35	31	37
Card - Angiogram	14	12	6	7	8	6	10
Card - PTCA	0	0	0	0	0	0	2
Cardio Aortic Valve	1	1	2	3	2	3	2
Cardio CABG	3	3	5	4	1	2	4
Cardio Mitral Stenos	0	0	0	0	0	0	0
Cardiology	10	11	12	14	15	13	12
Cardiothoracic Surgery	4	4	5	5	6	5	5
Thoracic Surgery	5	5	5	4	3	2	2
Medical	100	97	100	96	91	93	90
Gastroenterology	3	3	3	3	0	1	1
General Medicine	89	86	88	86	84	84	80
Immunology	0	0	0	0	0	0	0
Medical Withdrawal	1	1	1	1	1	1	1
Respiratory Medicine	7	7	8	6	6	7	8
Surgical	124	110	107	126	126	124	129
Ear Nose Throat	3	3	5	7	9	4	3
General Surgery	32	31	35	39	41	46	48
Gyn BS Other	7	4	2	5	4	6	6
Gynaecology	3	1	2	8	5	5	3
Neurology	7	6	7	7	6	9	9
Neurosurgery	13	11	10	10	8	9	10
Ophthalmology	2	0	1	4	3	2	4
Orthopaedics	33	31	27	27	27	28	31
Urology	6	6	3	6	8	5	5
Vascular Surgery	18	17	15	13	15	10	10
Capacity Planner™ Version 7.6.0-00			Report Gen	erated: 10/18/2019	9 07:31 AM		

Page 2 of 2

Using the Report

Use this report to see patient activity for different specialties on one screen. This report can help to identify trends and manage issues as (or before) they arise.

Understanding the Report

This report is usually scheduled to run at 07:00am to coincide with other bed meeting reports and can also be run on demand.

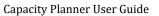
This report shows data for the last 24 hours and the last seven days.

Page One

The first page of the report gives a detailed breakdown of occupancy and related metrics for each specialty.

Page Two

The table on the second page shows the day-by-day change in occupancy over the last seven days for each specialty.





To view this table, use the navigation menu at the top of the report.

Planning

Planners and patient flow analysts can use this report at the daily planning meeting to monitor trends and help identify the cause of any capacity issues.

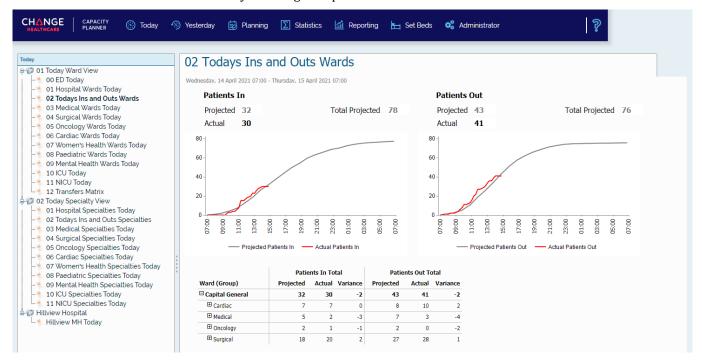


TODAY'S INS AND OUTS WARDS

This dashboard provides a cumulative view of patient activity for the day.

The graphs show combined General Inpatient activity – projected and actual Patients In and Out.

The table shows the same information by Planning Group.





These dashboards provide a more detailed view of the same information but is separated out by Planning Group. It includes more detailed metrics at ward level.

The Nurse Managers and Charge Nurses will find this particularly useful for their area.

The Planning Group Ward dashboards are repeated for each Specialty Group, displaying the same information but from a specialty perspective. This is particularly useful for Service Managers.

The graphs at the top of the dashboard include -

PLANNING GROUP WARDS TODAY

- Patients In includes admissions and transfers into this Planning Group from another location in the hospital
- Pts Out includes discharges and transfers out of this Planning Group to another location in the hospital

The table at the bottom of the dashboard includes -

• Patients In and Patients Out









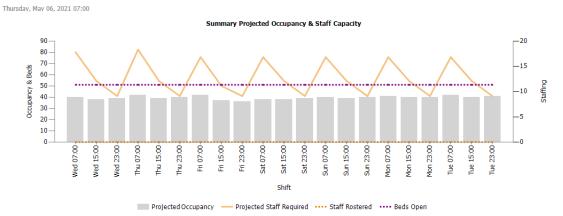
DAILY STAFF PROJECTION REPORT

This report displays the number of rostered staff on shift compared to a projection of the number of staff required, as well as bed capacity compared to projected occupancy.

Using NhPPDs or ratios compares staff required against projected patient demand.

In addition, if a roster feed is available, compares staff rostered against projected staff required against projected demand.

Supports safe staffing.



										Medical					Total		
								Staff R	tegd. (F	TE)	Staff Ros Proj Red	stered vs Id. (FTE)	Staff F	Regd. (I	FTE)	Staff Ros Proj Red	stered vs pd. (FTE)
Projected Oc and Staff Ca		Proj. Pts. In	Proj. Pts. Out	Proj. Occupancy	Beds Open	Beds Var.	Role	Operational Staff Reqd.	Proj. Regd.	Proj. Reqd. FTE Var.	Rostered Staff	Rostered Var.	Operational Staff Reqd.	Proj. Regd.		Rostered Staff	
Wed 5 May	07:00	4	7	40	51	11	Nurse	18.2	17.8	0.4	0.0	-17.8	18.2	17.8	0.4	0.0	-17.8
	15:00	8	7	38	51	13	Nurse	13.4	12.1	1.3	0.0	-12.1	13.4	12.1	1.3	0.0	-12.1
	23:00	3	0	39	51	12	Nurse	9.3	9.1	0.2	0.0	-9.1	9.3	9.1	0.2	0.0	-9.1
Thu 6 May	07:00	6	8	42	51	9	Nurse	18.2	18.3	-0.2	0.0	-18.3	18.2	18.3	-0.2	0.0	-18.3
	15:00	7	7	39	51	12	Nurse	13.4	12.1	1.3	0.0	-12.1	13.4	12.1	1.3	0.0	-12.1
	23:00	2	0	40	51	11	Nurse	9.3	9.1	0.2	0.0	-9.1	9.3	9.1	0.2	0.0	-9.1
Fri 7 May	07:00	3	8	42	51	9	Nurse	18.2	16.8	1.4	0.0	-16.8	18.2	16.8	1.4	0.0	-16.8
	15:00	7	8	37	51	14	Nurse	13.4	11.1	2.3	0.0	-11.1	13.4	11.1	2.3	0.0	-11.1
	23:00	3	1	36	51	15	Nurse	9.3	9.1	0.2	0.0	-9.1	9.3	9.1	0.2	0.0	-9.1
Sat 8 May	07:00	3	4	38	51	13	Nurse	18.2	16.8	1.4	0.0	-16.8	18.2	16.8	1.4	0.0	-16.8
	15:00	4	3	38	51	13	Nurse	13.4	12.1	1.3	0.0	-12.1	13.4	12.1	1.3	0.0	-12.1
	23:00	2	0	39	51	12	Nurse	9.3	9.1	0.2	0.0	-9.1	9.3	9.1	0.2	0.0	-9.1

		Medica	l	Total	
		Staff Reqd. (FTE)	Staff Rostered vs Proj Reqd. (FTE)	Staff Reqd. (FTE)	Staff Rostered vs Proj Reqd. (FTE)
 Proj. Proj.					

This is an example of a Summary View. It can be used by Directors and Service Managers to see how staffing looks across the hospital for the next several days.



178

HCA

This is an example of a Group View. It would be used by Service Managers to be sure the service is staffed appropriately across the hospital.

0.1 0.1

0.0

3.5

10.2

0.4 0.2

0.0 0.0

0.1

3.3

2.4

8.8

16.3

2.8

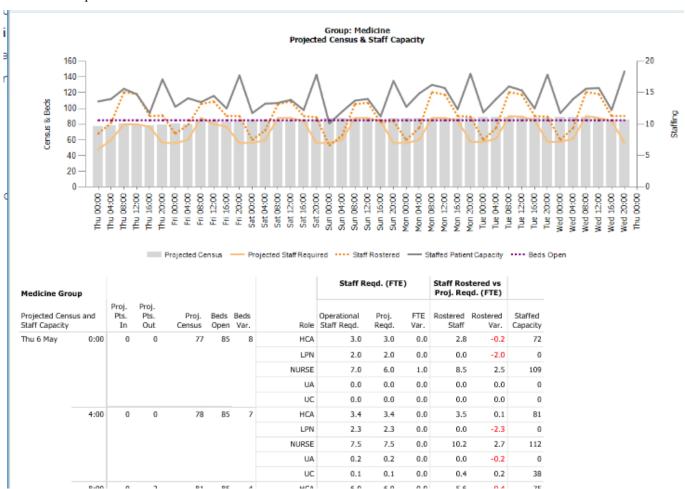
0.2 0.2

0.0 0.0

1.3 0.0 0.5

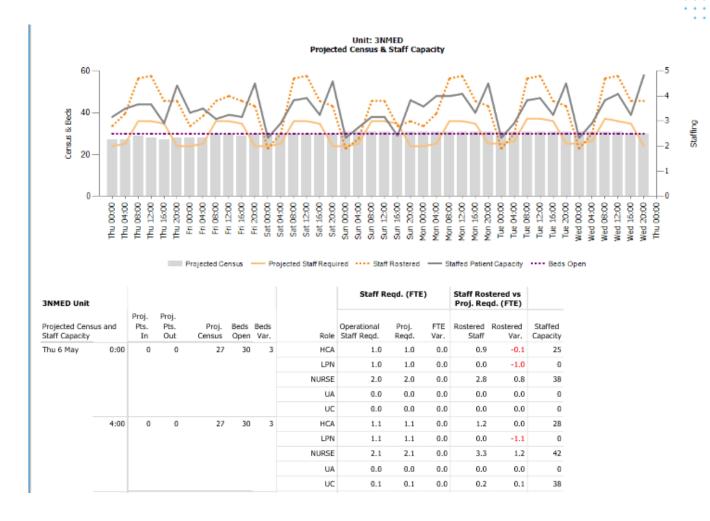
2.1 0.0 2.3 0.2

0.0 0.0 0.2 0.2



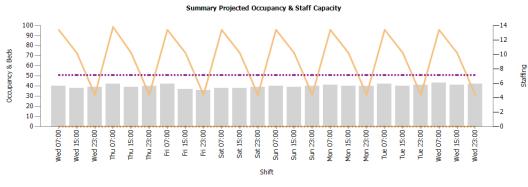
This is an example of a Ward View. It would be used by Ward Managers to check staffing for the ward.







Thursday, 6 May 2021 07:00



Projected Occupancy — Projected Staff Required ···· Staff Rostered ···· Beds Open

										Medical					Total		
								Staff Reqd. (FTE)			Staff Rostered vs Proj Reqd. (FTE)		Staff Reqd. (FTE)			Staff Rostered vs Proj Reqd. (FTE)	
Projected Oc and Staff Cap		Proj. Pts. In	Pts. Pts.	Proj. Occupancy	Beds Open	Beds Var.	Role	Roster Staff Reqd.	Proj. Regd.	FTE Var.	Rostered Staff	Rostered Var.	Roster Staff Reqd.	Proj. Regd. FTE	FTE Var.	Rostered Staff	Rostered Var.
Wed 5 May	07:00	4	7	40	51	11	EN	14.3	13.4	0.8	0.0	-13.4	14.3	13.4	0.8	0.0	-13.4
	15:00	8	7	38	51	13	EN	10.9	10.2	0.6	0.0	-10.2	10.9	10.2	0.6	0.0	-10.2
	23:00	3	0	39	51	12	EN	4.6	4.4	0.3	0.0	-4.4	4.6	4.4	0.3	0.0	-4.4
Thu 6 May	07:00	6	8	42	51	9	EN	14.3	13.8	0.4	0.0	-13.8	14.3	13.8	0.4	0.0	-13.8
	15:00	7	7	39	51	12	EN	10.9	10.2	0.6	0.0	-10.2	10.9	10.2	0.6	0.0	-10.2
	23:00	2	0	40	51	11	EN	4.6	4.4	0.3	0.0	-4.4	4.6	4.4	0.3	0.0	-4.4
Fri 7 May	07:00	3	8	42	51	9	EN	14.3	13.4	0.8	0.0	-13.4	14.3	13.4	0.8	0.0	-13.4
	15:00	7	8	37	51	14	EN	10.9	10.2	0.6	0.0	-10.2	10.9	10.2	0.6	0.0	-10.2
	23:00	3	1	36	51	15	EN	4.6	4.4	0.3	0.0	-4.4	4.6	4.4	0.3	0.0	-4.4
Sat 8 May	07:00	3	4	38	51	13	EN	14.3	13.4	0.8	0.0	-13.4	14.3	13.4	0.8	0.0	-13.4
	15:00	4	3	38	51	13	EN	10.9	10.2	0.6	0.0	-10.2	10.9	10.2	0.6	0.0	-10.2
	23:00	2	0	39	51	12	EN	4.6	4.4	0.3	0.0	-4.4	4.6	4.4	0.3	0.0	-4.4

							Medical				Tota	ı	
						Staff Regd.		Staff Rost Proj Requ					stered vs qd. (FTE)
Projected Occupancy	Proj.	Proj.	Proj	Pode D	ade	Poster Staff Bro	ni.	Postered	Postored	Poster Staff	Proj	Postered	Rostered



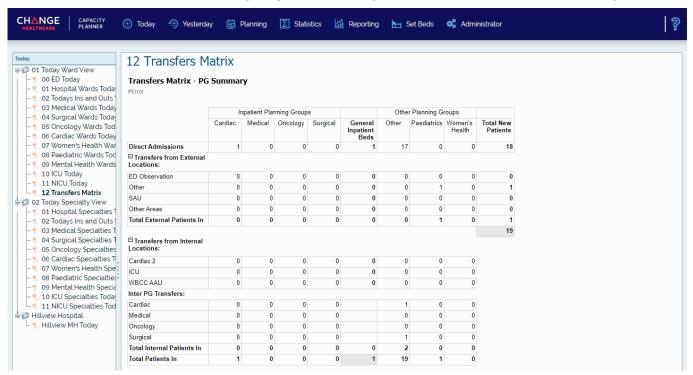


TRANSFERS MATRIX

This dashboard provides information on external and internal transfers within a Healthcare Facility since 7am. It shows where patients have been admitted to and, in the case of internal movements, shows where they have come from and moved to.

This report is useful to view and track patient transfers:

- Direct admissions
- Transfers from Day Stay and transfers from external locations e.g. ED hold areas, Day of Surgery Admissions (DOSA) etc.
- Transfers from internal areas e.g. if a patient was being transferred from a medical ward to a surgical ward.





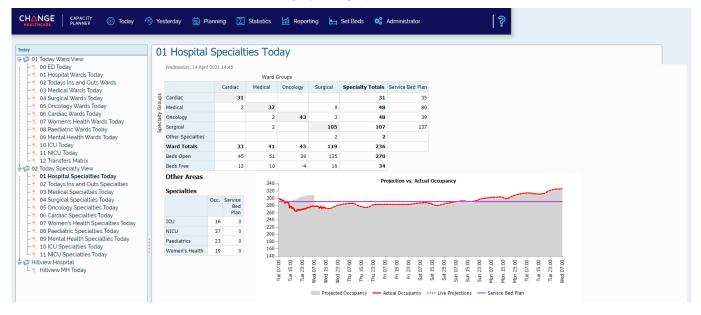
TODAY SPECIALTY VIEW

Today's view of specialties shows current occupancy, projections, beds open and the service bed plan for the next six days. The Planning Group Today Specialty dashboards give the status by each Specialty in the Planning Group, this includes current occupancy and ALOS, projected activity and actual activity for the day, 7am today to 7am tomorrow.

HOSPITAL SPECIALTIES TODAY

This dashboard contains an aggregated occupancy matrix which displays global information about the hospital's occupancy status and bed capacity across Planning Groups. This can be compared from both a ward and specialty perspective. It also shows a Projection vs Actual Chart, comparing current occupancy against today's projection and projected occupancy for the coming six days.

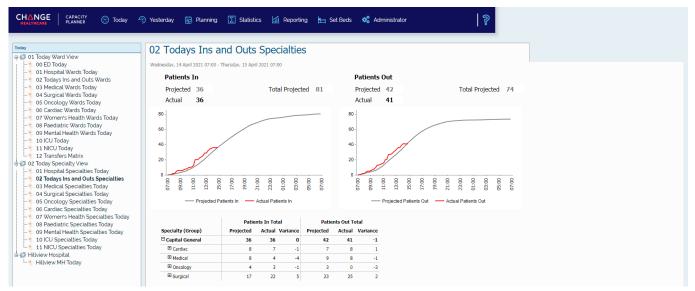
- What you're looking for:
- Current occupancy
- Out of service patients
- Projected occupancy over the next 8/24/48 hours
 - o Grey area on the main chart is projected occupancy for the next six days
- How is the hospital tracking against the projection?
 - o Red line on the chart is the actual occupancy over the past 24 hours
- Bed capacity (beds open and beds free)
- Are Live Projections different from the grey area projections?





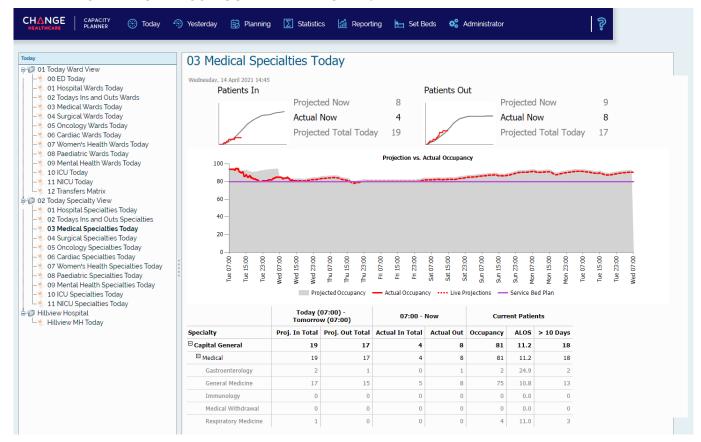
TODAYS INS AND OUTS SPECIALTIES

This dashboard tracks patient movement (Admission, Transfers and Discharges) in and out of planning groups specialty compared to projection and is used to ensure capacity is created according to projections at specialty level.



PLANNING GROUP SPECIALTIES TODAY

This dashboard shows current and projected occupancy for specialties in the planning group, patient movements in or out of the specialty and the number of beds (capacity) allocated to the planning group. It is used to align resources with demand using detailed planning group performance at specialty level.





YESTERDAY



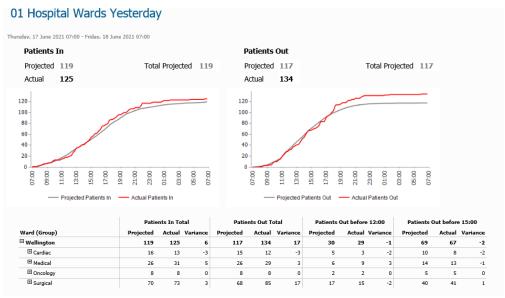
HOSPITAL YESTERDAY

The report provides an hourly view of patient activity at ward level for yesterday.

The projections are based on 'normal' activity (i.e. Admissions and Discharges). If the hospital's occupancy is significantly different from what was projected/expected, this information helps to understand what caused the variation.

What you're looking for:

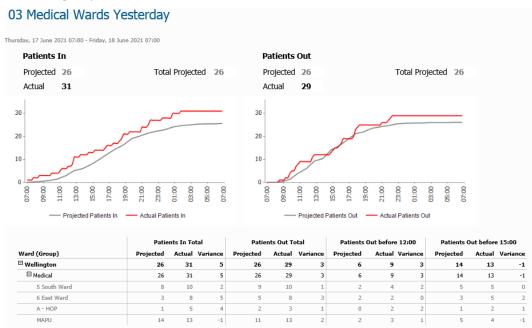
- Is current occupancy where it was projected to be?
 - o If not, what changed?
- · Admissions or Discharges?
 - o What unit(s)had a significant variance?





WARDS YESTERDAY

These dashboards display how wards performed the day before at a General Inpatient level and for each Planning Group. The variance against the projection gives insight into if there needs to be actions made today to keep below current capacity.



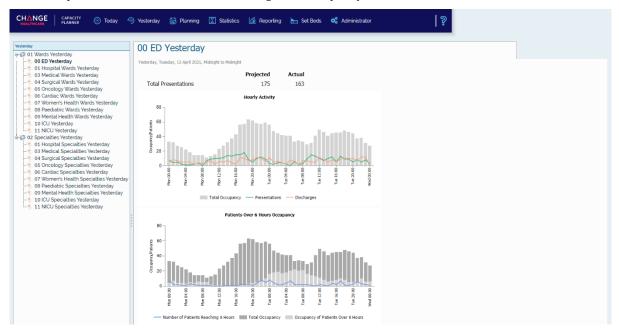


ED YESTERDAY

The ED Yesterday dashboard provides key KPI's for the Emergency Department over the last 24 hours, from midnight to midnight. This report is used to view the number of patients who presented to ED, occupancy and movements over a 48-hour period and the impact on the department of patients with LOS > 4 hours. This report may be used to establish if there is a trend in times when patients aren't being discharged (for example it could be staffing levels need to be reviewed, certain times of the day etc.).

This dashboard displays:

- · Total presentations projected vs actual
- Hourly Activity Chart displays hour by hour occupancy and the impact of presentation and discharge rate on occupancy.
- Patients Over 4 Hours Occupancy Chart displays the same hour by hour occupancy and the impact of patients who breach the 4-hour target on occupancy.





HOSPITAL WARDS YESTERDAY

The report provides an hourly view of patient activity at ward and specialty level yesterday.

Projections reflect normal Patients In / Out behaviour based on the starting occupancy for the day. If the hospital occupancy is significantly different to what was projected/expected this information helps to understand what caused the variation.

What you're looking for:

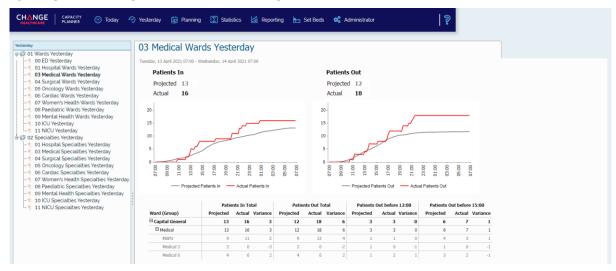
- Is current occupancy where it was projected to be?
- If not, what changed?
- Patients In or Patient Out?
- What ward(s)/specialty(s)?





PLANNING GROUP WARDS YESTERDAY

This dashboard provides information on the patient activity and how the Planning Group and its wards performed against plan over the past 24 hours from the report start time.





SPECIALTIES YESTERDAY

This is where a hospital can see how specialties performed the day before at a high level and at each Planning Group. The variance against the projection gives insight into the need for action to keep below current capacity.

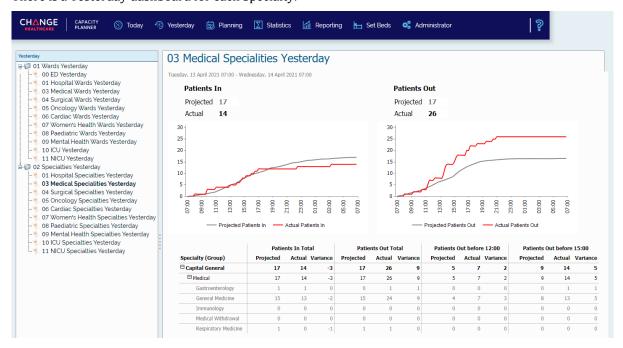
HOSPITAL SPECIALTIES YESTERDAY

This dashboard provides information on the patient activity and how the specialties in the hospital have performed against plan over the past 24 hours (0000 - 0000).



PLANNING GROUP SPECIALTIES YESTERDAY

There is a Yesterday dashboard for each Specialty.





Capacity Planner Viewer

PLANNING

These dashboards provide visibility of the longer term forecast and bed plan and provide visibility of occupancy and activity vs forecast The Weekly Dashboards show how the forecast has tracked in the previous 28 days and how the next 56 days is expected to track. If there has been any unusual activity in the last 28 days there may be a capacity issue flow on effect for the next 56 days the site needs to be aware of.



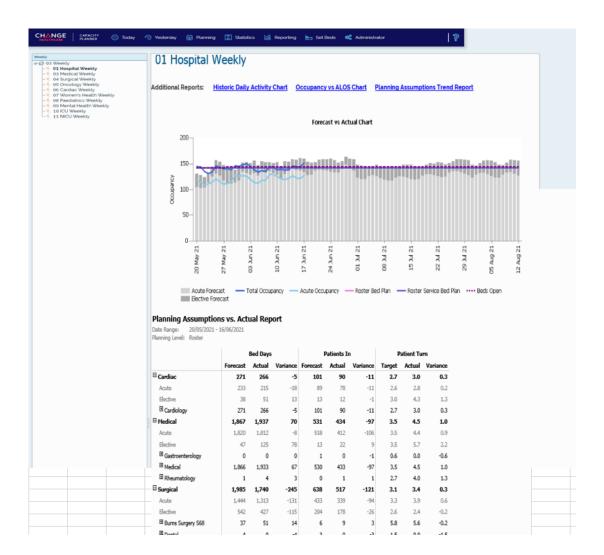
HOSPITAL WEEKLY

Planning - Monitoring Long-Term Forecasts

The Planning dashboards show reports relating to the long-term plans. Planning dashboards will be set up for all forecast Planning Groups and at summary level where there are multiple Planning Groups within a ward type e.g. Inpatient

- Forecast vs. Actual chart shows how the forecast tracking against actual occupancy and how actual occupancy is tracking against Rostered beds.
- Planning Assumptions vs. Actual Report shows how the underlying forecast assumptions of Patients In and Patient Turn, and the resulting bed days, are tracking against what has actually happened. Tracking forecast assumptions can assist in setting assumptions for future forecasts.
- Planning Assumptions Trend Report shows the forecast assumptions and resulting occupancy as a time series.
- Historic Daily Activity Chart shows the same occupancy data as the Forecast vs. Actual chart but includes daily Patients In and Patients Out data.
- Occupancy vs. ALOS Chart shows trends in length of staf of current patients, patients discharged and patients with a length of stay greater than X days.







PLANNING ASSUMPTIONS TREND REPORT

This report gives information about past trends in occupancy and patient activity and compares them to the forecast.

30 Jun 2021 14 Jul 2021 28 Jul 2021 2021

Sg

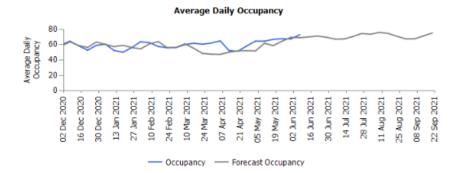
22 Sep

25 Aug 2021

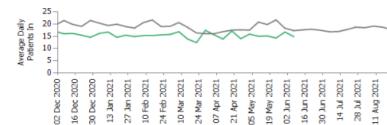
Planning Assumptions Trend Report

2/12/2020 - 22/09/2021 Planning Level: Roster

Specialty: Medical



Planned vs. Actual Patients In



24 Feb 2021

10 Mar 24 Mar 07 Apr 21 Apr

30 Dec

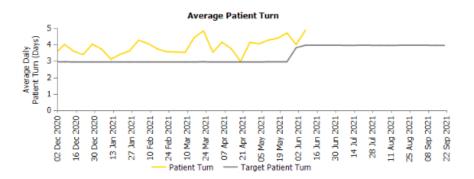
27 Jan 2 10 Feb

> Patients In Forecast Patients In

282 202 202 02 Jun 2021

19 May

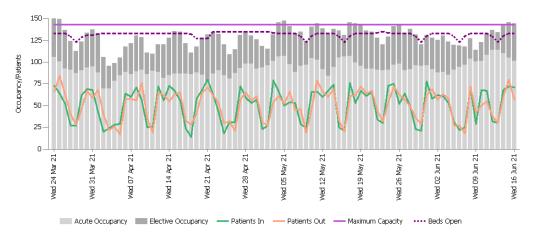
Μay





HISTORIC DAILY ACTIVITY CHART

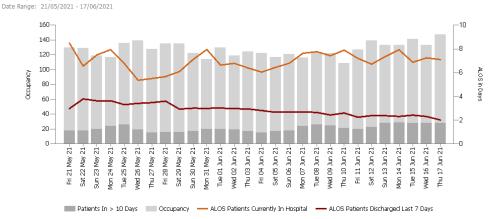
This report gives a summary of average daily occupancy, patients in and patients out for the last 12 weeks.



OCCUPANCY VS ALOS CHART

This report shows occupancy and length of stay for the selected planning group(s).

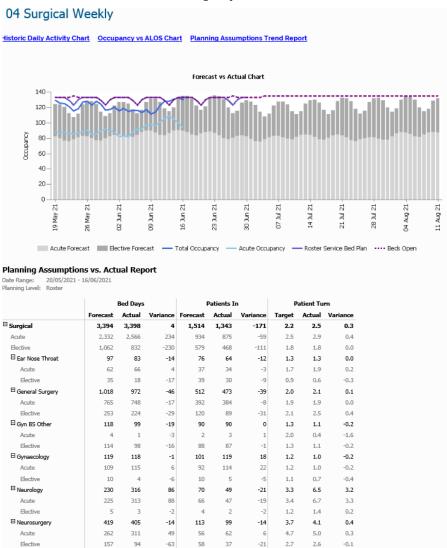
Occupancy vs. ALOS Chart





PLANNING GROUP WEEKLY

These are similar to the Hospital Planning Dashboards, but only reflect a single Planning Group. At this level, it is easier to see if there are variances for the group.



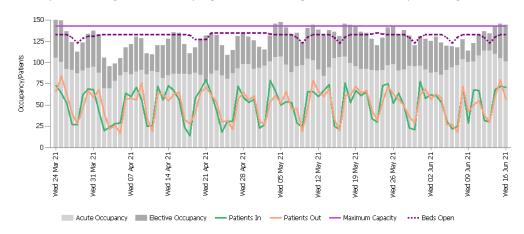


HISTORIC DAILY ACTIVITY CHART

Useful to identify historic trends in patient activity, and to analyse specific time periods or special event activity, and the impacts of movements in and out on occupancy.

Patient occupancy at ward, specialty, planning group or hospital level.

Identify trends in patient activity, specific time or special event activity and impact of movement.



OCCUPANCY VS ALOS CHART (REPEATED, THERE'S AN EXAMPLE ABOVE)

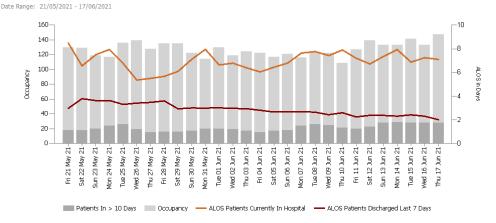
Used for monitoring trends in average length of stay (ALOS) and managing length of stay (LOS).

View length of stay and occupancy at unit, service, planning group or hospital level.

How to Use

Monitor trends in length of stay and occupancy.

Occupancy vs. ALOS Chart





PLANNING ASSUMPTIONS TREND REPORT

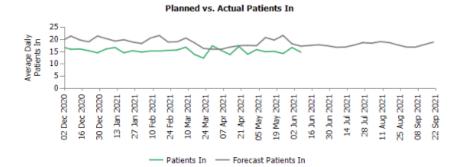
This report gives information about past trends in occupancy, patient activity and patient turn and then compares them to the forecast.

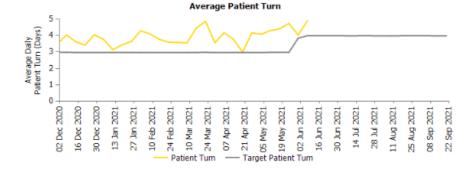
Planning Assumptions Trend Report

2/12/2020 - 22/09/2021 Date Range: Roster

Planning Level: Medical Specialty:









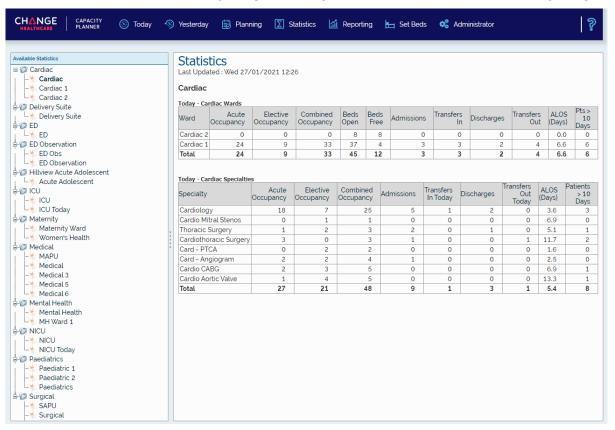
STATISTICS

Statistics are views of summary or encounter-level data that is not available elsewhere. The access to view encounter-level data can be controlled by the security set by the Admins who create them.



PLANNING GROUP VIEW

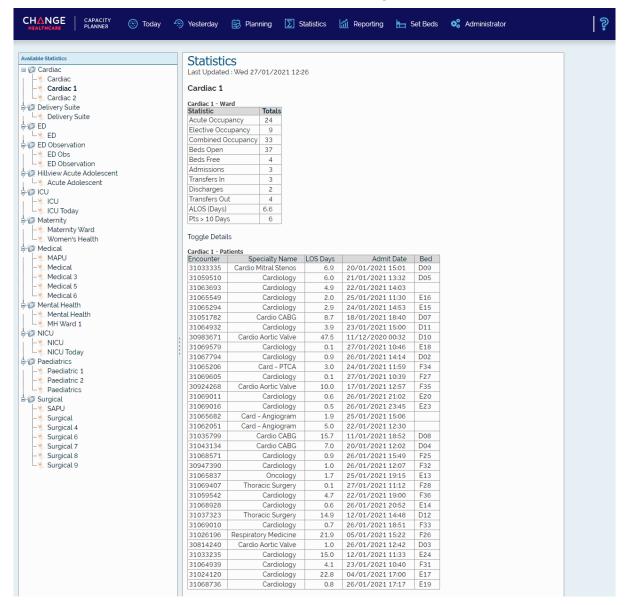
Provides a view of individual Planning Groups and the specialties and wards within the Planning Group





WARD VIEW

Provides a view of individual wards and encounter level data for patients in the ward





REPORTING



REPORT GROUPS

Reports provide information at a point in time or over a specified period. All users can run reports to compare and review performance and to view future plans.

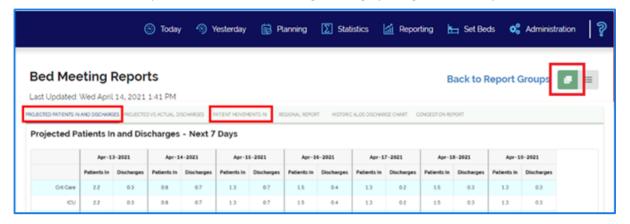
Reports give detailed information for planning groups, wards, and Specialties. They cover what happened yesterday and give accurate projections of patient activity and expected occupancy into the future. Report Groups may be created for all users or individual users may be able to create their own (based on access level).



When you run the reports, you have two views to choose from – "Show in Tabs" or "Show as List". The report content is exactly the same with either choice but is displayed differently. If choosing to use to show as a list instead of the default of tabs, the default changes for that user.

SHOW IN TABS

This button is selected by default to show in tabs. Reports display one per tab, side by side.





SHOW AS LIST

Button to select Show as List shown in top right. Reports display one below the other and navigation is by using the scroll bar on the right.





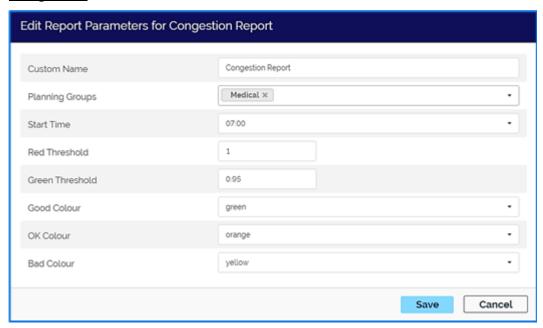
INDIVIDUAL REPORTS

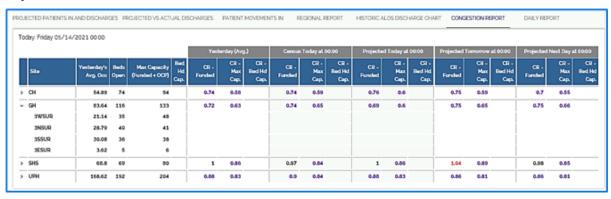
The following reports are available for use in Report Groups . Those with an asterisk (*) are most-commonly used.

CONGESTION REPORT

Provides a view of hospital congestion data across multiple facilities. It may give an insight into how busy healthcare facilities are and if they will be able to manage demand.

Configuration

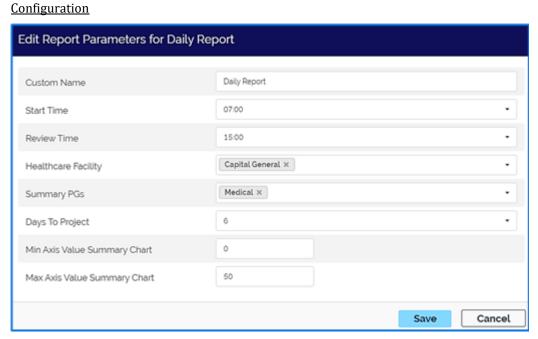


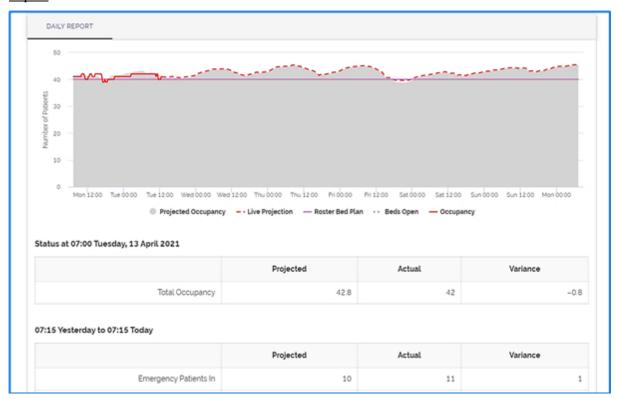




DAILY REPORT

Provides key information for the daily operational meeting and assists with proactive planning for the next 2-4 days.









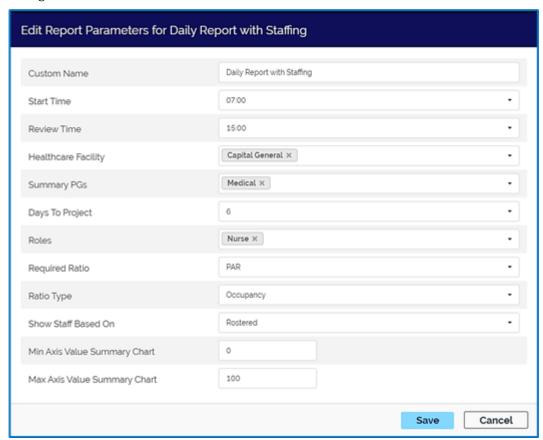


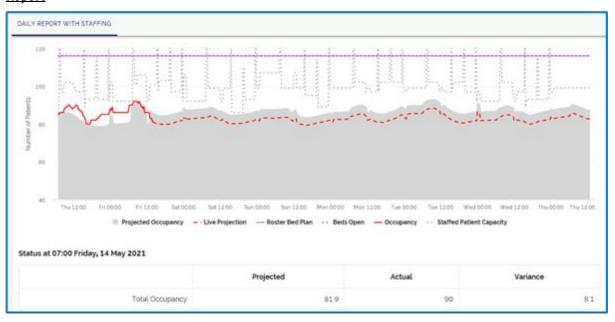
DAILY REPORT WITH STAFFING

Capacity Planner Viewer

Provides key information for the daily operational meeting and assists with proactive planning for the next 2-4 days. This is just like the Daily Report, except it allows displaying a staffing line on the chart.

Configuration









EMERGENCY STATUS

This report shows the status of patients in the Emergency Department (ED) and associated targets.

Configuration

While it can be included in Report Groups, it is generally viewed as a Dashboard report. Refer to the "Dashboards" section for details.



FORECAST STAFF REQUIRED*

Used to compare the staff required, calculated using ratios, against scheduled staff for long-range planning. It automatically defaults to the next full month but can be changed to reflect other date ranges. There are a few cautions with this report, since it is very large.

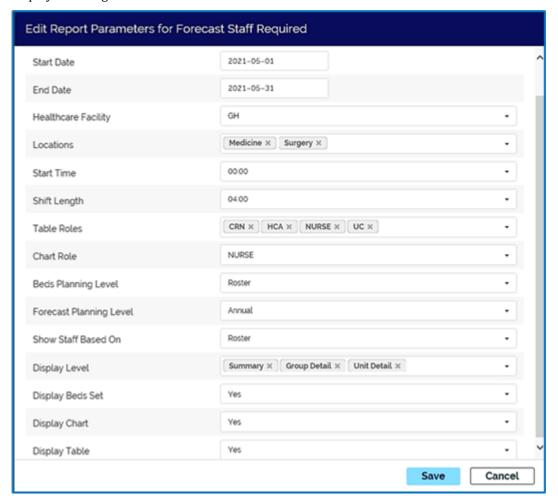
Configuration

Start Date/End Date: Recommend not having date range exceed a total of 30-45 days to prevent timing out

Locations: Best not to include too many locations (1-2 works best)

Table Roles: Can include many roles to display in the table but recommend using RN or NURSE for the Chart role

Display Level: Only choose "Summary" if selecting multiple locations and include just "Ward Detail" if wanting to display for a single ward





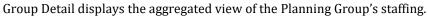
Capacity Planner Viewer

Report

Below are examples of all three display levels (Summary, Group Detail and Ward Detail) in the order they would display when all three are selected.

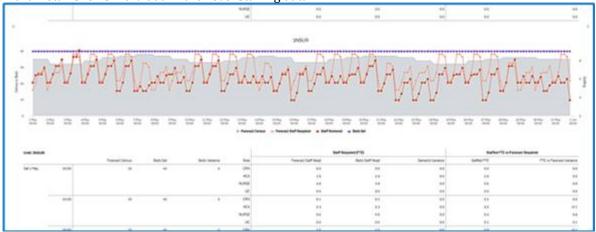
Summary Level allows viewing multiple groups and a total











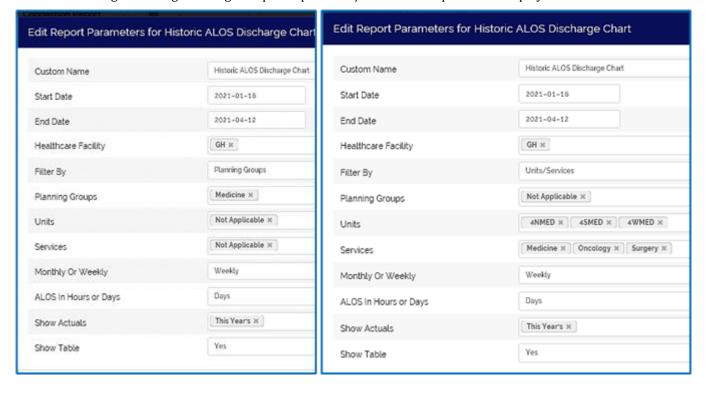


HISTORIC ALOS DISCHARGE CHART*

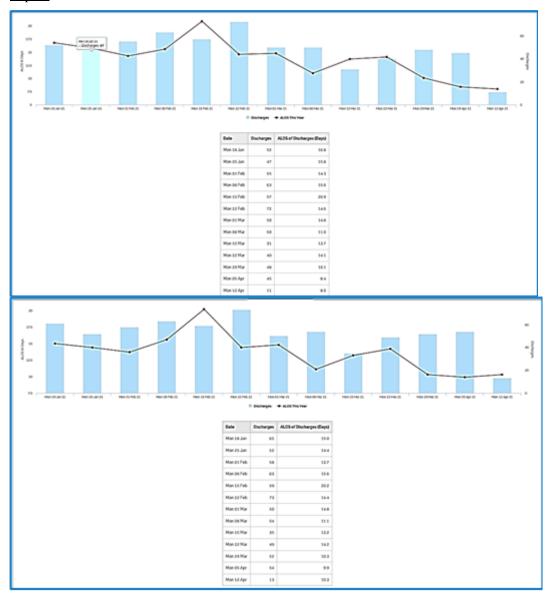
A view of the number of discharges and corresponding ALOS of those discharges over time. This can be used for monitoring if ALOS is changing over time, which may feed into the planning process.

Configuration

This can be configured using Planning Groups or Specialties/Wards. Both options are displayed below.









Capacity Planner Viewer

HOSPITAL STATUS

Displays the current status on a bed-by-bed basis. This report shows current occupancy by ward and planning group as a stacked column bar graph. To view this information in more detail as a table, see the Occupancy Matrix.

Note, While this report can be added to a Report Group, it is generally recommended to display it as a Dashboard report instead. Refer to the "Dashboard" section for details.



HOURS PER PATIENT DAY REPORT*

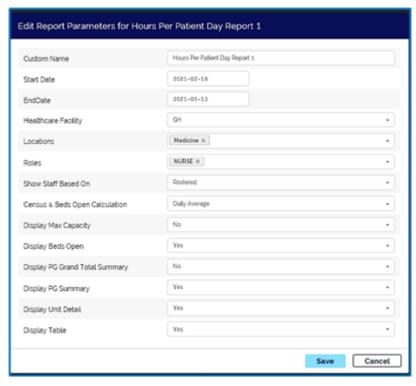
Shows a view of occupancy and budget vs actual and rostered hours per patient day. Provides an at a glance view of HPPD with details available for any particular day.

Configuration

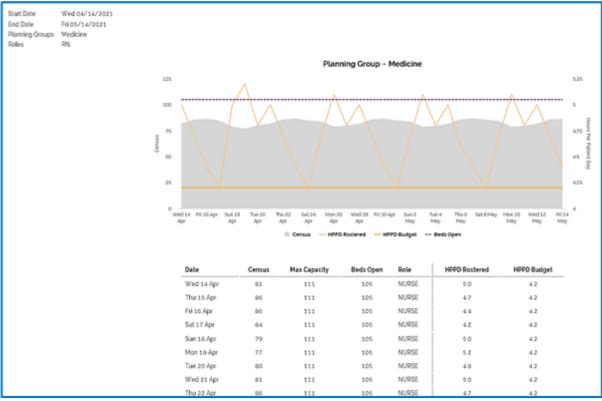
Start Date/End Date: It will default to display the last 12 weeks. If changing it from this default, keep the date range small (e.g. 30-45 days)

Locations: Only choose 1-2 groups or individual wards

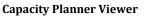
Roles: If selecting more than one, they will be aggregated in the chart.













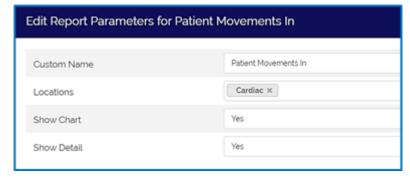
PATIENT MOVEMENTS IN*

Patients In at Planning Group or ward level compared with actuals for Yesterday, Today, and Tomorrow.

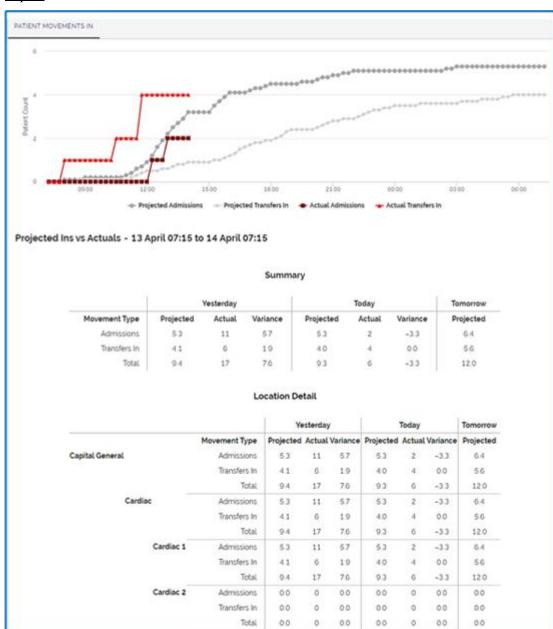
This report shows actual and projected movement of patients, i.e., the numbers admitted, or transferred into a planning group.

Increase understanding of patient movements by separating the Admissions from the Transfers In

Configuration







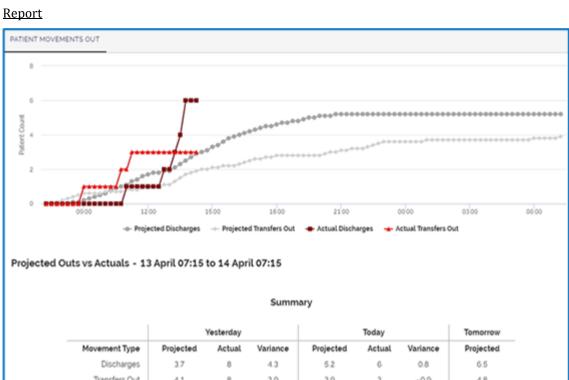


PATIENT MOVEMENTS OUT*

Patients Out of a Planning Group or ward compared with actuals for Yesterday, Today, and Tomorrow.

Configuration





	'	Yesterday			Today		Tomorrow
Movement Type	Projected	Actual	Variance	Projected	Actual	Variance	Projected
Discharges	3.7	8	4.3	5.2	6	0.8	6.5
Transfers Out	4.1	8	3.9	3.9	3	-0.9	4.8
Total	7.8	16	8.2	9.1	9	-0.1	11.3

Location Detail

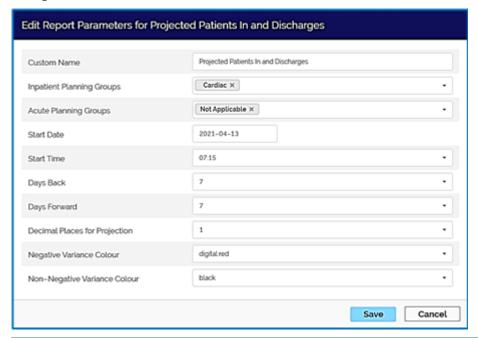
		Ye	esterday	/		Today		Tomorrow	
	Movement Type	Projected	Actual	Variance	Projected	Actual	Variance	Projected	
Capital General	Discharges	3.7	8	4.3	5.2	6	0.8	6.5	
	Transfers Out	4.1	8	3.9	3.9	3	-0.9	4.8	
	Total	7.8	16	8.2	9.1	9	-0.1	11.3	
Cardiac	Discharges	3.7	8	4.3	5.2	6	0.8	6.5	
	Transfers Out	4.1	8	3.9	3.9	3	-0.9	4.8	
	Total	7.8	16	8.2	9.1	9	-0.1	11.3	
Cardiac 1	Discharges	3.7	8	4.3	5.2	6	0.8	6.5	
	Transfers Out	4.1	8	3.9	3.9	3	-0.9	4.8	
	Total	7.8	16	8.2	9.1	9	-0.1	11.3	
Cardiac 2	Discharges	0.0	0	0.0	0.0	0	0.0	0.0	
	Transfers Out	0.0	0	0.0	0.0	0	0.0	0.0	
	Total	0.0	0	0.0	0.0	0	0.0	0.0	



PROJECTED PATIENTS IN AND DISCHARGES*

This report allows users to have a view of expected activity over the next 7 days and will help to gauge if there will be sufficient capacity to accommodate the anticipated patients in each area. It also includes the movements from the last 7 days to help identify trends or issues by displaying the cumulative variances. It can also include Emergency locations.

Configuration







<u>Report</u>

Last Updated Tue April 13, 2021 2 00 PM

PROJECTED PATIENTS IN AND DISCHARGES

Projected Patients In and Discharges - Next 7 Days

	Apr-13-2021		Apr-1	4-2021	Apr-1	5-2021	Apr-1	5-2021	Apr-17-2021		
	Patients In	Discharges	Patients In	Disch							
Cardiac	9.3	5.2	11.9	6.5	10.2	5.4	9.9	7.8	6.8	6	
Cardiac 1	93	5.2	119	6.5	102	5.4	99	7.8	68	6.	
Cardiac 2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	
Total Inpatient	9.3	5.2	11.9	6.5	10.2	5.4	9.9	7.8	6.8	6.	

Projected Patients In and Discharges - Last 7 Days

	Apr-06-2021					Apr-0	7-2021			Apr-0	8-2021		1	Apr-0	9-2021		
	Patients In		Disch	arges	Patie	nts In	Disch	arges	Patie	nts In	Disch	arges	Patie	nts In	Disch	arges	Patie
	Proj.	Act.	Proj.	Act.	Proj.	Act.	Proj.	Act.	Proj.	Act.	Proj.	Act.	Proj.	Act.	Proj.	Act.	Proj.
Cardiac	8.5	11	4.7	5	10.6	19	5.6	9	9.1	13	4.5	9	8.2	20	62	18	5.8
Cardiac 1	8.5	11	4.7	5	10.6	19	5.6	.9	91	13	4.5	9	82	20	6.2	18	5.8
Cardiac 2	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Daily Variance	2	.5	0	.3	8.	4	3	.4	3	.9	4	.5	11	.8	11	1.8	
Cumulative Variance	2	.5	0	.3	10	.9	3	.6	14	8.8	8	.1	26	.6	19	9.9	3
Total Inpatient	8.5	11	4.7	5	10.6	19	5.6	9	9.1	13	4.5	9	8.2	20	6.2	18	5.8
Daily Variance	2	.5	0	.3	8.	4	3	4	3	.9	-4	.5	11	.8	11	1.8	- (
Cumulative Variance	2	.5	0	.3	10	.9	3	.6	14	8.4	8	.1	26	5.6	19	9.9	3

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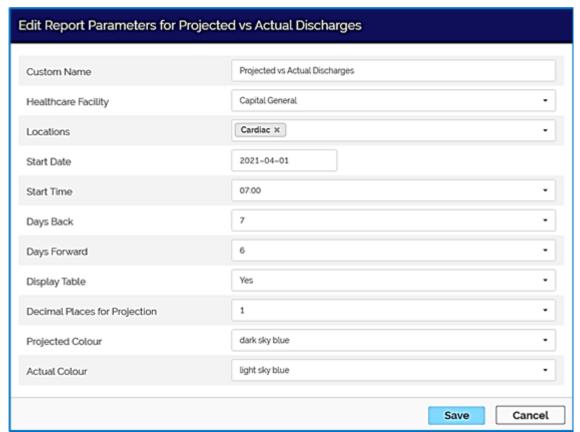


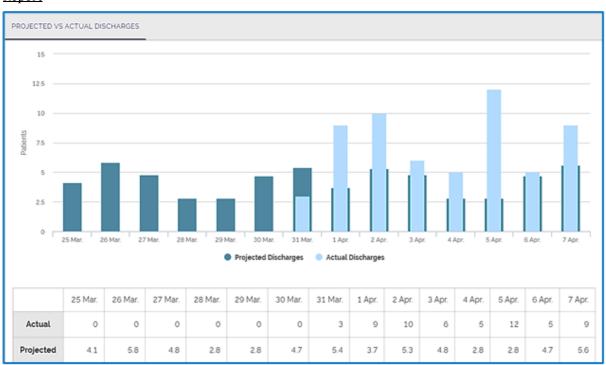
Capacity Planner Viewer

PROJECTED VS ACTUAL DISCHARGES

This report shows the difference between projected and actual discharges over the previous seven days and projected discharges over the next six days.

Configuration



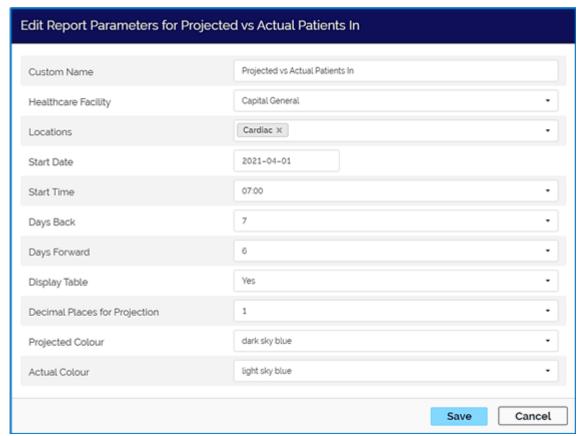


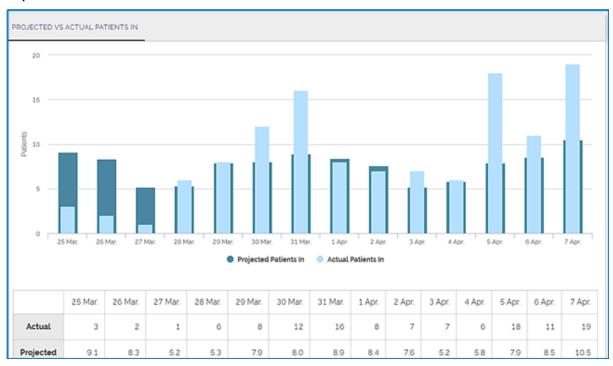


PROJECTED VS ACTUAL PATIENTS IN

This report shows the difference between actual and projected patients in (combination of admissions and transfers in) over the previous seven days and projected patients in over the next six days.

Configuration





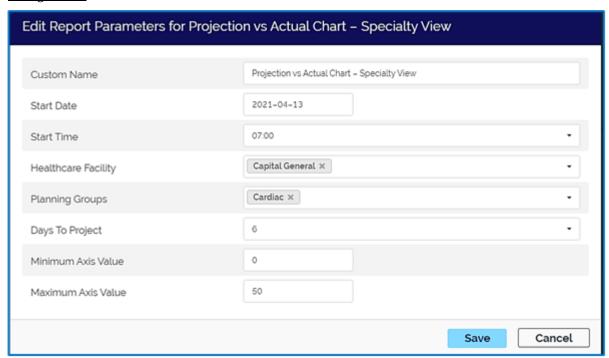


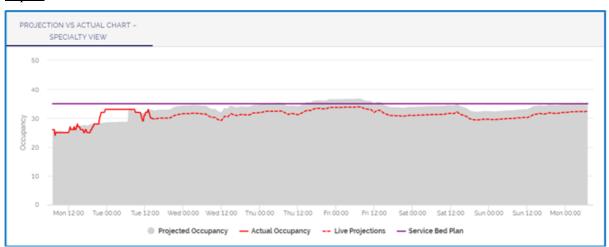
PROJECTION VS ACTUAL CHART - SPECIALTY VIEW

Capacity Planner Viewer

Provides real-time updates to show actual occupancy vs projected occupancy from a Specialty perspective, and guides decisions on the resource plan.

Configuration





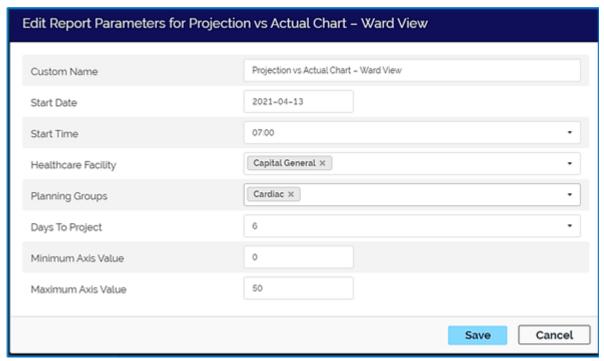


Capacity Planner Viewer

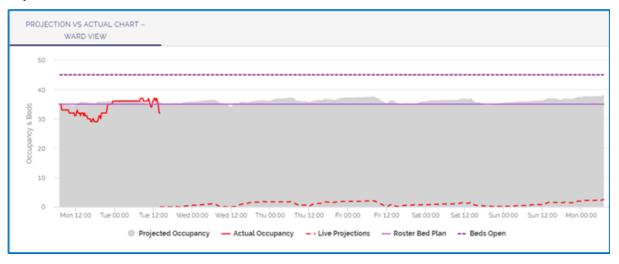
PROJECTION VS ACTUAL CHART - WARD VIEW

Provides real-time updates to show actual occupancy vs projected occupancy from a ward perspective, guides decisions on the resource planning.

Configuration



Report



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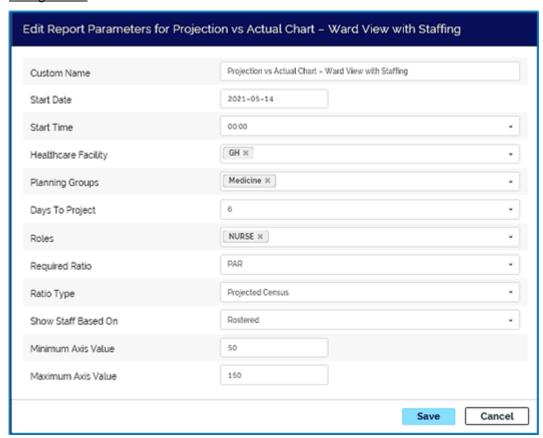
Capacity Planner Viewer

PROJECTION VS ACTUAL CHART - WARD VIEW WITH STAFFING

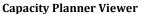
Provides real-time updates to show actual occupancy vs projected occupancy from a ward perspective, guides decisions on the resource plan.

Note: This same view is already part of the PG Today Dashboards as part of the standard dashboard configuration, but the staffing line displays differently in this format.

Configuration





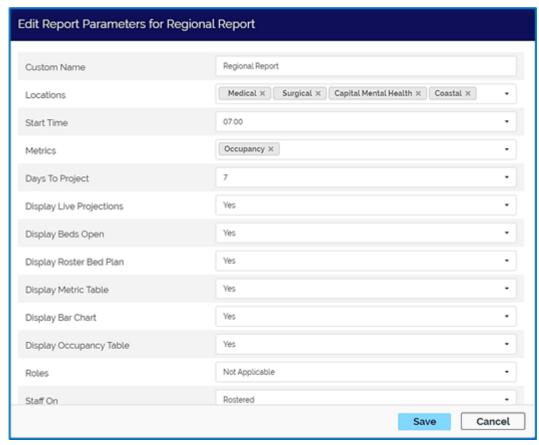




REGIONAL REPORT*

The regional report provides a real-time view of key of planning group metrics across two or more facilities. This enables users to understand demand and capacity issues across a region and aid in the management of any bottlenecks.

Configuration



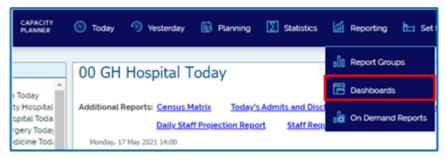


	PATIENTS IN AND CHARGES	REGIONA	AL REPOR	T PR	OJECTED V	S ACTUA	L DISCHARGES	PATIENT MOVEME	NTS IN PATIENT MO	VEMENTS OUT PROJE
		СН	GH	UPH	мнр	SHS	NHS			
Census		88	78	139	111	89	75			
Beds Availabl	e for Regional Transfer	14	27	20	24	9	10			
Projected Pat	ients In	6	8	11	6	11	6			
Projected Pat	ients Out	4	8	10	7	8	4			
Current ALOS	(Days)	16.2	11.2	15.9	28.4	19.2	18.0			
Patients > 10	Days	48	33	57	73	37	45			
Patients > 21	Days	21	7	27	40	24	20			
	Facility	Planning	Group			U	nit		Census	Beds Open
~	СН								88	102
	>	Medicine							88	102
~	GH								78	105
	~	Medicine							78	105
							NMED		31	34
							SMED		27	35
						4	WMED		20	36
~	UPH								139	159
	>	Medicine							139	159
~	MHP								111	135
	>	Medicine							111	135
~	SHS								89	98
	>	Medicine							89	98
~	NHS								75	85
	>	Medicine							75	85
800										
600										
S위 400 원										
200										
Sun 00.0	0 Mon 00:00	Tu	xe 00:00		Wed 00:00		Thu 00:00	Fri 00:00	Sat 00:00	Sun 00:00 Mon 00
	0	Projected	Census	- Act	tual Census		Beds Open	♣ Live Projection	Roster Bed Plan	



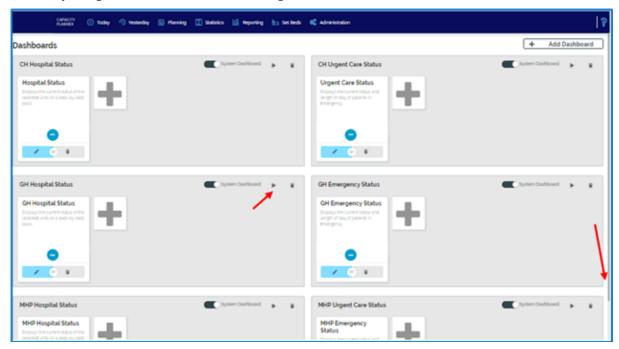
DASHBOARDS

Dashboard reports provide day-to-day information for your hospital or facility.



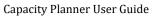
DASHBOARD NAVIGATION

When first selecting Dashboards from the Reporting dropdown, there may be several displayed. Locate the one to be viewed by using the vertical scroll bar on the right and click the arrow to view the dashboard.



To return to the list and choose a different Dashboard, click the Back to Dashboards link on the right.









Capacity Planner Viewer

INDIVIDUAL DASHBOARDS

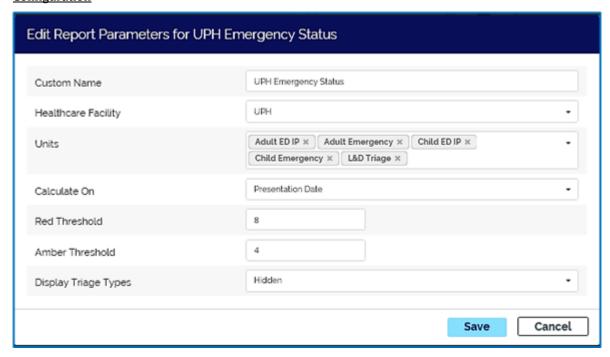
The following dashboard reports are available. Those with an asterisk (*) are most-commonly used.

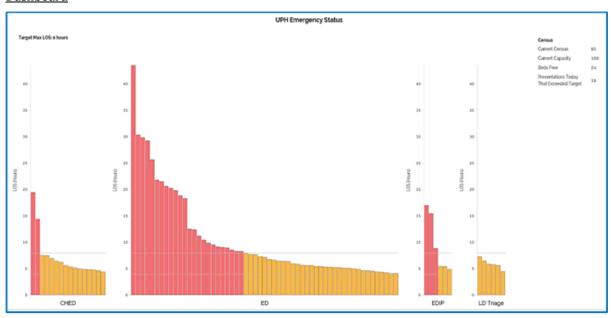


EMERGENCY STATUS*

Displays the status and length of stay of patients in the Emergency Department.

Configuration







HOSPITAL STATUS*

Displays the status of the selected wards on a bed-by-bed basis. It enables users to quickly see any off-service patients by using the color of the PGs' attached Service Types and those of the patients in each bed. The blocks in each column represent a bed in that ward.

Configuration

This report can include all active Locations (including Emergency) or be defined to show a more regional view (e.g. for all Critical Care or Emergency beds across a region).



Dashboard

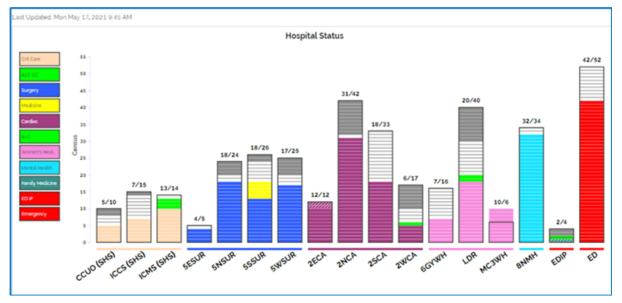
The first number at the top of the column is the number of patients and the second is the number of physical beds in that ward. MC3WH shows the Occupancy exceeds the physical beds. This is usually an indication that patients in the ward have yet to be discharged in the patient management system.

The white boxes are empty beds ready to take patients.

The dark gray boxes are the closed beds.

The other colors reflect the patients' Specialties, and to which group they are associated. This allows spotting any offservice patients more easily.

The colored boxes with diagonal lines represent patients in closed beds.

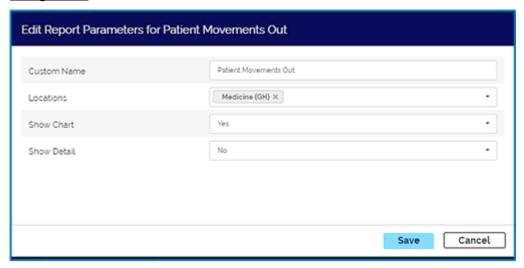


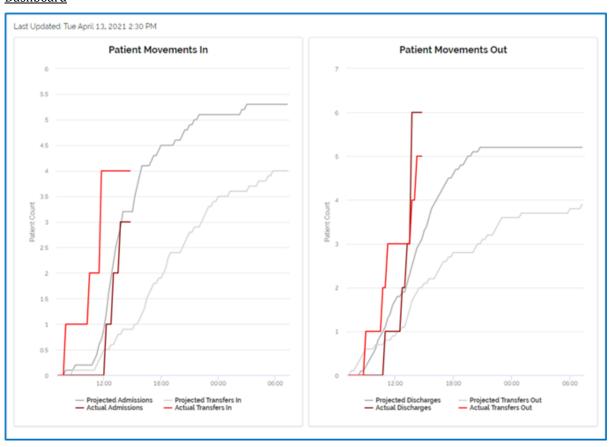


PATIENT MOVEMENTS IN AND PATIENT MOVEMENTS OUT

These reports can be run at either a Planning Group or ward level. Each display actuals for Yesterday, and projections for Today, and Tomorrow. Admissions and Discharges are distinct from Transfers. The difference between this report run in Report Groups vs Dashboards is that it will only display the chart and not show the detail. In Dashboards, you can also display these side-by-side.

Configuration







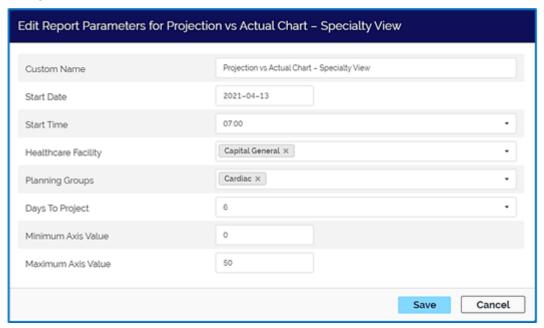
PROJECTION VS ACTUAL CHART - SPECIALTY VIEW

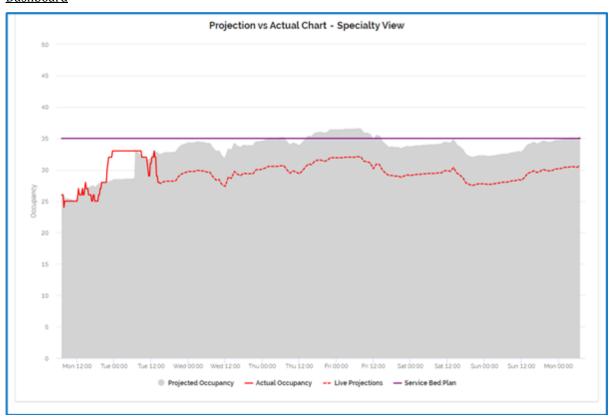
Capacity Planner Viewer

Provides real-time updates to show actual occupancy vs projected occupancy from a service type perspective, and

guides decisions on the resource plan.

Configuration





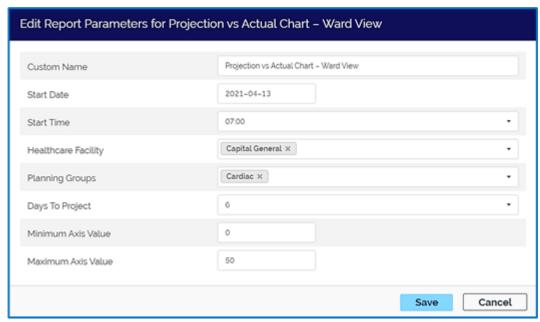


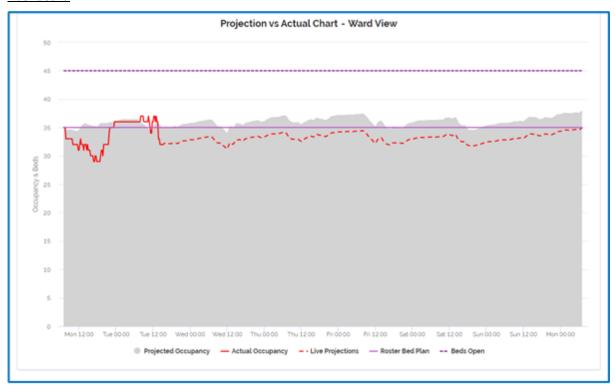
Capacity Planner Viewer

PROJECTION VS ACTUAL CHART - WARD VIEW

Provides real-time updates to show actual occupancy vs projected occupancy from a location perspective, guides decisions on the resource plan.

Configuration





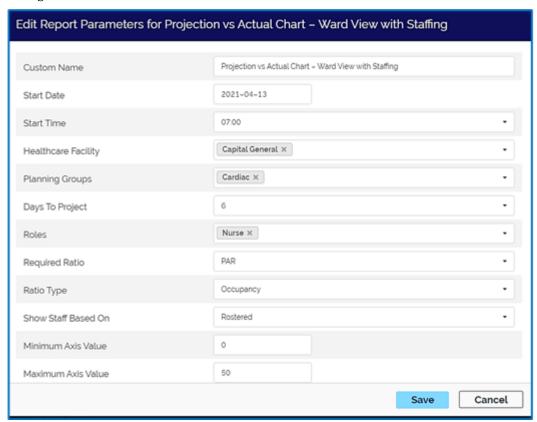


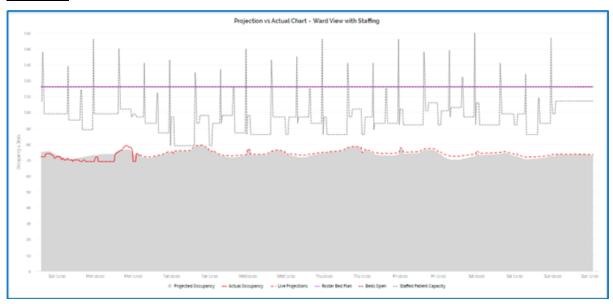
Capacity Planner Viewer

PROJECTION VS ACTUAL CHART - WARD VIEW WITH STAFFING

Provides real-time updates to show actual occupancy vs projected occupancy from a ward perspective, guides decisions on the resource plan.

Configuration

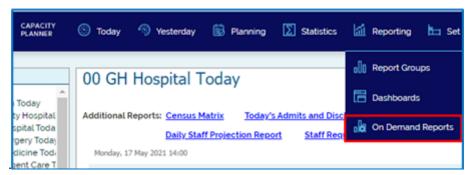






ON DEMAND REPORTS

Reports can be run on demand by selecting On Demand Reports from the Reporting dropdown. They can be defined each time as needed.



SEARCH AND FILTER

Enter key words in Search reports field to quickly locate the desired report. Choose a category from the Filter categories dropdown to view like reports together for ease of selection. This example shows filtering all the reports by just those that reflect "Historic" information. From there, it is further limited by only those referencing a "pattern" and the list got even smaller.





FAVOURITES

After locating a report to be run again in the future, click the star to move the report into the Favorites section. To remove it, just click the gold star and it will be moved back under All Reports.

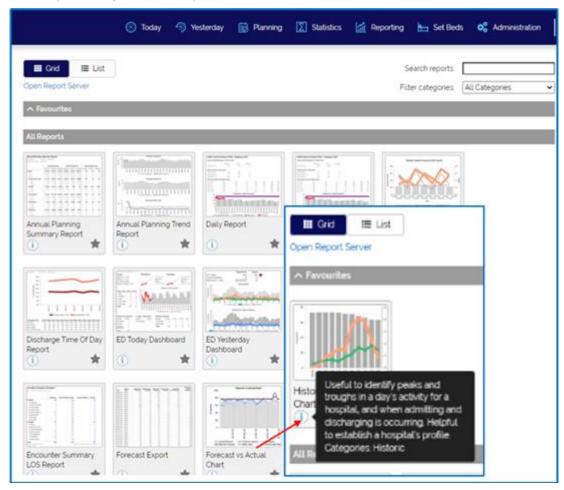




Capacity Planner Viewer

VIEW AS GRID

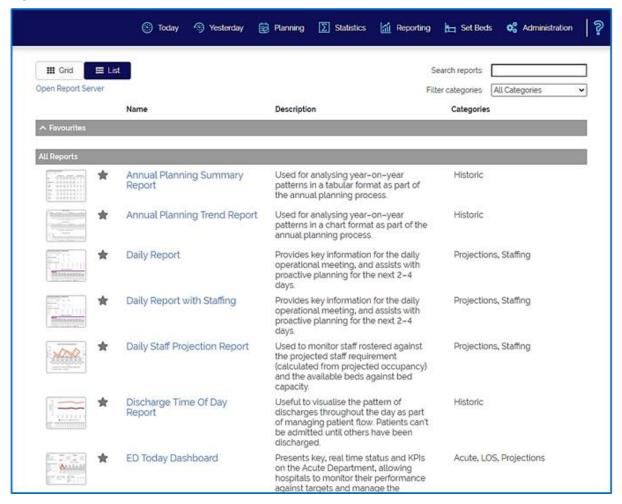
The report listing can be viewed in two ways. By default, it will display as a grid (see below). Report descriptions are visible by hovering over the "i" symbol.





VIEW AS LIST

The alternate view is the List view. This view displays the Description and Categories associated with each of the reports.





INDIVIDUAL REPORTS

The following pages include examples of each of the on-demand reports. Those with an asterisk (*) are most-commonly used.

ANNUAL PLANNING SUMMARY REPORT

Description

Used for analyzing year-over-year patterns in a tabular format as part of the annual planning process.

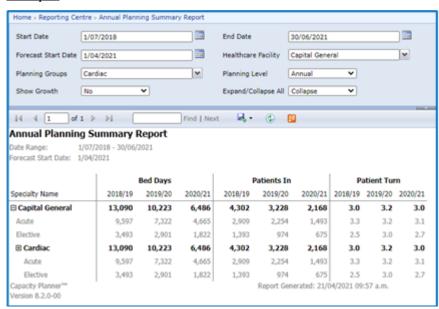
Configuration

Choose one or multiple Planning Groups. Match the Planning Level to that used in Forecasting (generally Annual). Recommending setting Expand/Collapse All to "Collapse".

How to Use

View changes by comparing Bed Days, Patients In or Patient Turn to previous 2 years of historical data.

Example:





ANNUAL PLANNING TREND REPORT

Description

Used for analyzing year-on-year patterns in a chart format as part of the annual planning process.

Configuration

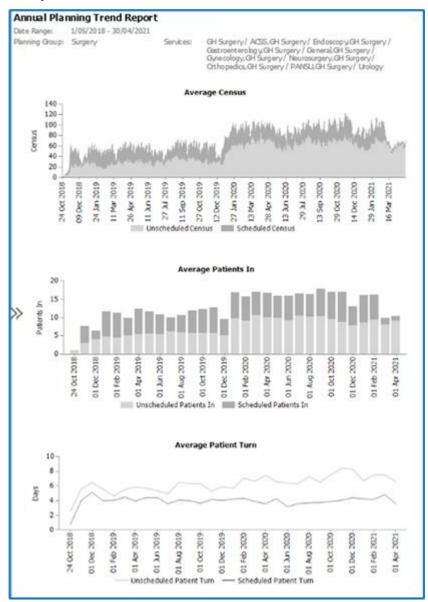
Recommend choosing a single Planning Group.



How to Use

This is like the Annual Planning Summary Report, but in graphical form.

Example





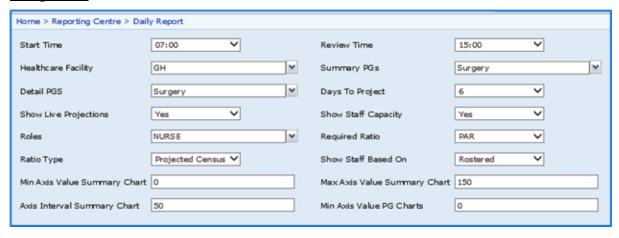


DAILY REPORT AND DAILY REPORT WITH STAFFING

Description

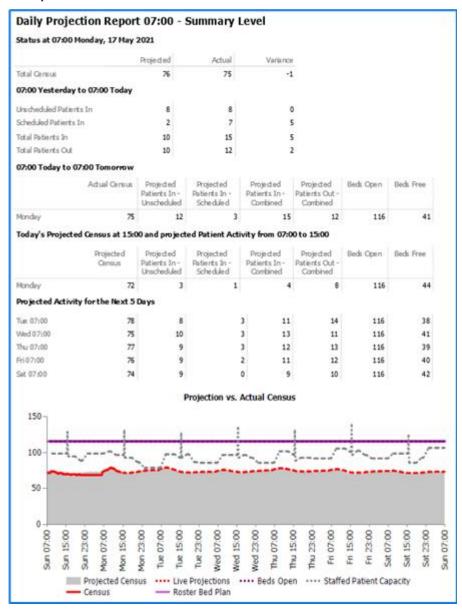
Provides key information for the daily operational meeting and assists with proactive planning for the next 1-7 days. Can be run with or without staffing data.

Configuration





Example





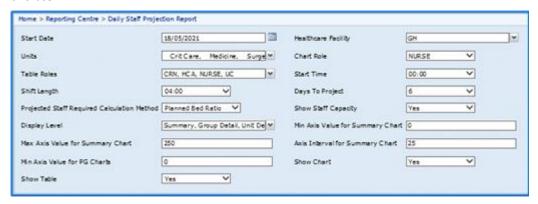
DAILY STAFF PROJECTION REPORT

Description

Used to monitor staff rostered (scheduled) against the projected staff requirement (calculated from projected occupancy) and the available beds against bed capacity to make any staffing adjustments in advance. Note: This report is set as a link on both the Hospital Today (Summary/PG/Ward Levels) and PG Today Dashboards (PG/Ward Levels).

Configuration

To view multiple locations in the hospital, set the Display Level to include "Summary". To view a single Planning Group or Ward, choose those to include those levels. Make sure the Max Axis Value for Summary Chart is set to exceed the maximum number of beds Set the Axis Interval... to a value that matches the Max Axis value. Since only one role can be displayed in the charts, choose the Nurse or RN for the Chart Role. Any other roles can be added to the Table Roles choices.



How to Use

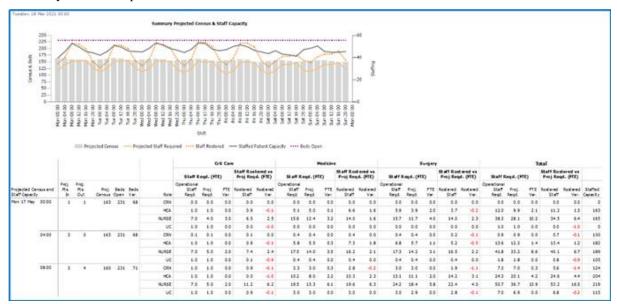
View this report at least at the start and end of the week to make sure there is adequate staffing through the end of the week and then into the start of the following week. View the Summary level to get an overall picture of the hospital's staffing. Use the Planning Group level to make sure there are appropriate staffing levels across the group. Use the Ward level to check individual ward staffing.

Here is a list of the terms and their meanings from this report. Proj. Pts. In and Proj. Pts. Out: The number of patients expected to come into or leave from the location for the timeframe (admits or transfers or discharges)

- Proj. Occupancy: The number of patients projected during that time frame based on the last 12 weeks of
 activity
- Beds Open: The number of beds planned to be staffed (e.g. budgeted or funded beds)
- **Beds Var.**: The difference between Beds Open and the projected Occupancy
- Operational Staff Reqd.: The number of staff required to care for patients if full to budgeted/funded capacity
- **Proj. Reqd.**: The number of staff required to care for the projected number of patients
- FTE Var.: The difference between Operational Staff Reqd. and Projected Reqd.
- **Rostered Staff**: The number of each role scheduled for that time frame (showing 1 decimal point to reflect only productive portion of FTE)
- Staffed Capacity: The number of patients that can be cared for by the number of staff scheduled

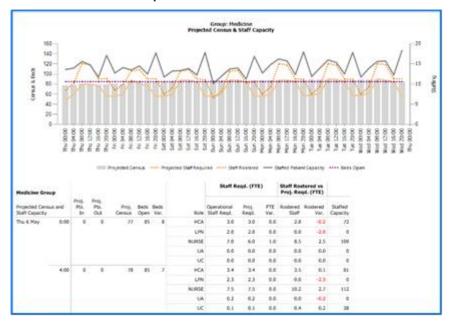


Summary View Example

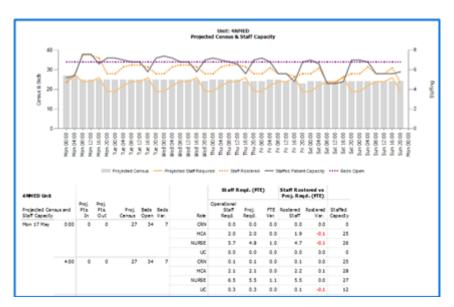


Group View Example

This would be used by Service Managers to be sure the service is staffed appropriately across the hospital. This view is included on both the Hospital and PG level version.







Ward View Example

This would be used by Ward Managers to check staffing for their individual ward.



DISCHARGE TIME OF DAY REPORT*

Description

Useful to visualise the pattern of discharges for the last several weeks and compare the same day to that day last week, last month, last quarter and last year as part of managing patient flow. Patients can't be admitted until others have been discharged, so this identifies either worrisome trends or progress as changes to workflow are made.

It helps identify patterns in discharges across a period and is used to monitor patient flow against targets.

Note: This report is often added to the Yesterday Dashboards for easy reference.

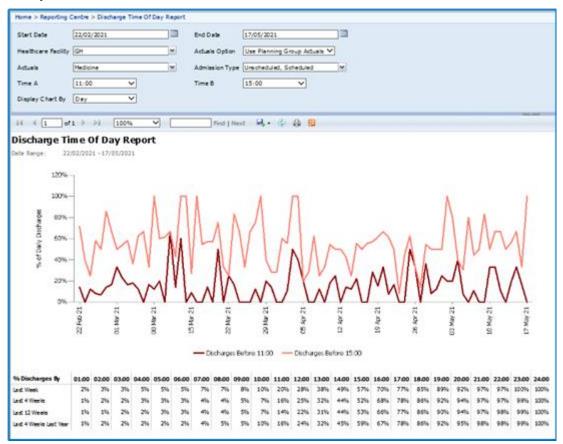
Configuration

There is no breakdown if choosing multiple areas, so select either a single Planning Group or Ward. Select the target discharge times in the Time A and Time B fields.

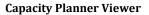
How to Use

Compare % of all discharges by hour of the day to the previous week, month, quarter, and year to monitor improvement. The goal is to move the % earlier in the day to prevent bottlenecks later.

Example



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ED TODAY DASHBOARD

This report is a standard part of the Today Dashboards. See above under "Today" section.

ED YESTERDAY DASHBOARD

This report is a standard part of the Yesterday Dashboards. See above under "Yesterday" section.



ENCOUNTER DETAIL LOS REPORT

Description

Acts as a drill-through report to the Encounter Summary LOS Report, displaying the detail of the patients contributing to the LOS of a ward/specialty. This report is useful to determine which patients may be further managed to resolve LOS issues in a ward/specialty. This report may be limited by user Access Level, since it can display encounter-level information.

Provides details of patients contributing to the LOS of a specialty and helps manage LOS issues in a specialty

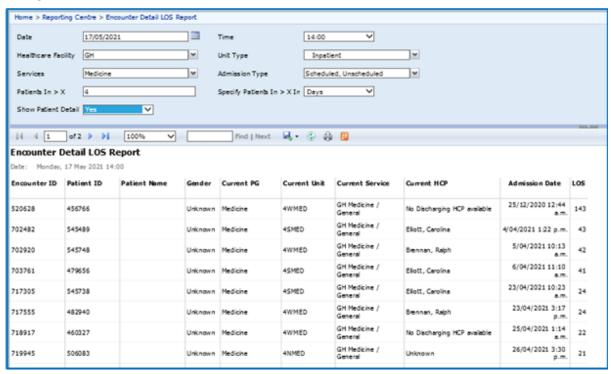
Configuration

Choose the Ward Type (e.g. Critical Care, Inpatient, Emergency) and then the Specialties to filter on the encounters to display. Note that Patient Name and Gender are not generally even sent to Capacity Planner, so they will be blank or show 'Unknown'.

How to Use

Use to troubleshoot issues when LOS appears to be unusually high in an area. It may indicate a patient who was not discharged in the registration system.

Example





ENCOUNTER EXPORT

Description

Gets Patient Encounters dependent on date range chosen.

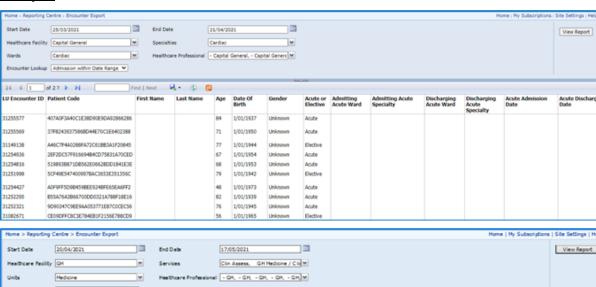
Configuration

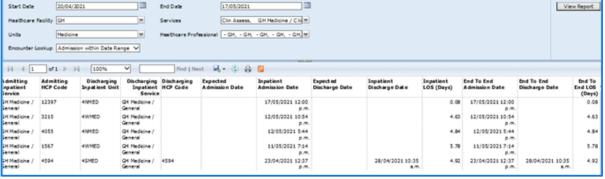
Be sure to select all Specialties to be sure to capture all the encounters needed. Use the Wards field to limit the locations of those encounters. Choose to show those admitted, in hospital or discharged within the date range.

How to Use

In addition to basic Admission and Discharge information, this report also includes the "End to End LOS (Days)". This represents their entire encounter length of stay – from presentation in Emergency until discharge or current date/time.

Examples





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ENCOUNTER SUMMARY LOS REPORT

Description

Displays the Occupancy, ALOS and Current Patients greater than X Days of a selected Specialties. This report is useful to determine if LOS is becoming an issue for a Specialty.

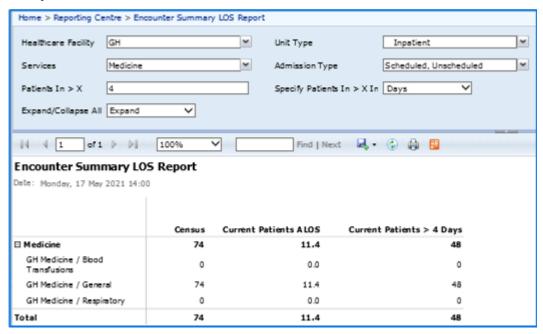
Configuration

Choose the target LOS in the Patients In > X field. If running for Emergency, change the Specify Patients In > X In to "Hours".

How to Use

Use to identify specific Service issues with LOS (e.g. ALC or COVID patients).

Example





FORECAST EXPORT

Description

Gets Forecast Occupancy for a given range by Planning Group. This report is useful after annual planning has been completed.

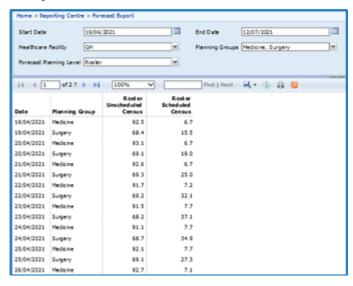
Configuration

Can select multiple Planning Groups and they will display alphabetically for each date.

How to Use

Can show to Program or Service Directors/Managers to make sure they look appropriate – even if just for periods around seasonal or other events.

Example



FORECAST VS ACTUAL CHART

This report is a standard part of the Planning Dashboards. See example above under "Planning" section. The only reason to use in this section is to choose a different date range.



HISTORIC DAILY ACTIVITY CHART

Description

Useful to identify historic trends in patient activity, and to analyse specific time periods or special event activity, and the impacts of movements in and out on occupancy.

Patient occupancy at ward, service, planning group or hospital level.

Identify trends in patient activity, specific time or special event activity and impact of movement.

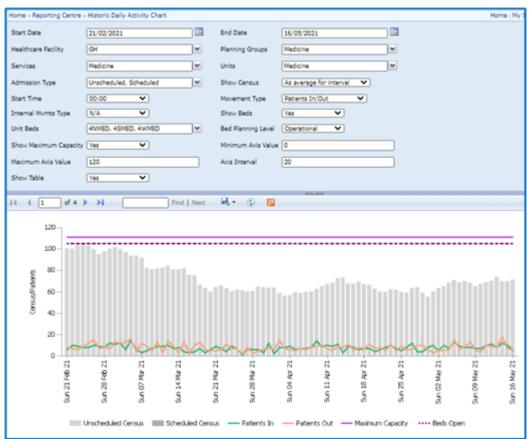
Configuration

Set Show Table to "Yes" to get exportable details. See examples of both first and second pages below.

How to Use

Choose different combinations if needing to see activity for a specific Service and time frame.

Example







Home - Reporting Centre - Historic Daily Activity Chart Home I M													
14 4 2 of 4 > >1 Find Next													
Date	Unscheduled Census	Scheduled Census	Patients In	Patients Out	Beds Open	Maximum Capacity							
Sun 21/02/2021	100	0	6	8	105	111							
Mon 22/02/2021	100	0	10	7	105	111							
Tue 23/02/2021	104	0	9	6	105	111							
Wed 24/02/2021	105	0	8	9	105	111							
Thu 25/02/2021	103	0	8	12	105	111							
Fri 26/02/2021	100	0	10	15	105	111							
Sat 27/02/2021	95	0	9	7	105	111							
Sun 28/02/2021	98	0	8	8	105	111							
Mon 01/03/2021	100	0	12	7	105	111							
Tue 02/03/2021	102	0	11	13	105	111							
Wed 03/03/2021	99	0	12	12	105	111							
Thu 04/03/2021	97	0	6	13	105	111							
Fri 05/03/2021	94	0	15	16	105	111							
Sat 06/03/2021	94	0	6	4	105	111							
Sun 07/03/2021	92	0	3	12	105	111							
Mon 08/03/2021	82	0	5	9	105	111							
Tue 09/03/2021	81	0	7	\$	105	111							



Capacity Planner Viewer

HISTORIC HOURLY PATTERN CHART

Description

Useful to identify peaks and troughs in a day's activity for a hospital, and when admitting and discharging is occurring. Helpful to establish a hospital's profile and staffing needs.

Configuration

This report can be run for a single Ward or an entire Planning Group. The Movement Type choices are Patients In/Out, Admissions/Discharges, External Transfers In/Out or Internal Transfers.

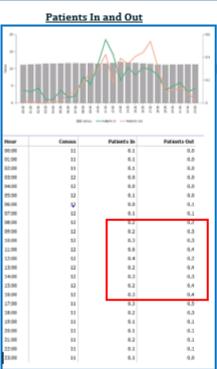
How to Use

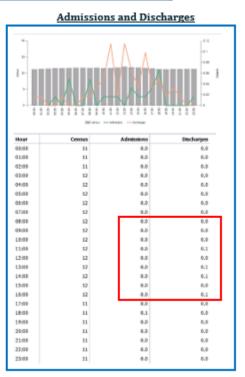
If run separately (as in the examples below), the difference between inner-hospital transfers (Patients In or Out) and direct admits or discharges can be seen. In this example, the Patients In and Patients Out columns displaying larger values than Admissions and Discharges indicates some of the movements were transfers to and from other Planning Groups.



Examples









HISTORIC WEEKDAY PATTERN CHART*

Description

Shows average occupancy as well as the maximum and minimum values and patient movements by day of the week over a specified period. This is useful in identifying any trends in occupancy and patient movements for an average week.

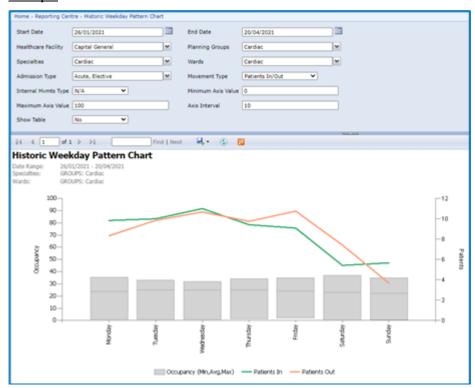
Configuration

Choices are to include Patients In/Out, Admissions/Discharges, External Transfers In/Out or Internal Transfers.

How to Use

Use this report to see if staffing needs can be changed based on variances in patient volumes by day of the week. It can also provide information about patient movements to make sure there are adequate patient transport staff available on days with high patient movement volumes (including transfers).

Example



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HISTORIC XMAS ANALYSIS REPORT

Description

Useful for reviewing the Christmas performance and to analyse variance between the forecast and actual activity of the period, daily occupancy vs previous years actuals and bed day utilization vs previous years. It can also be used to compare other seasons across years to view the activity around other holidays.

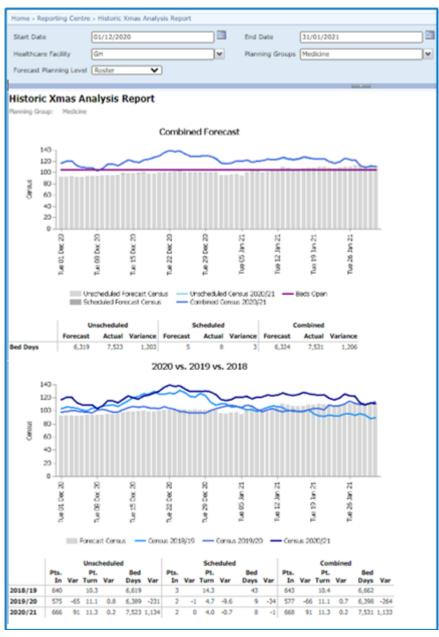
Configuration

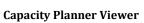
Can choose one Planning Group or all inpatient groups to see how the days around holidays are impacted.

How to Use

View specific dates and their volumes on the 2nd and 3rd pages and use this information to plan for the coming holidays and make sure the Event Calendar is set appropriately.

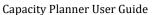
Example







14 4 2 of 3 ▶ № Find Next 🛂 • 🚯												
Date	Unscheduled Forecast Census	Unscheduled Actual Census	Scheduled Forecast Census	Scheduled Actual Census	Combined Forecast Census	Combined Actual Census	Variance	% Forecast Variance				
Tue 01 Dec 2020	92.6	116.3	0.0	0.6	92.6	116.9	24.3	26.2%				
Wed 02 Dec 2020	93.1	120.4	0.0	0.0	93.1	120.4	27.3	29.3%				
Thu 03 Dec 2020	93.5	121.0	0.0	0.0	93.5	121.0	27.5	29.4%				
Fri 04 Dec 2020	92.4	112.5	0.0	0.0	92.4	112.5	20.1	21.8%				
Sat 05 Dec 2020	92.4	109.3	0.0	0.0	92.4	109.3	16.9	18.3%				
Sun 06 Dec 2020	94.0	109.0	0.0	0.0	94.0	109.0	15.0	16.0%				
Mon 07 Dec 2020	94.1	108.9	0.0	0.0	94.1	108.9	14.8	15.8%				
Tue 08 Dec 2020	94.0	103.4	0.0	0.0	94.0	103.4	9.4	10.0%				
Wed 09 Dec 2020	94.4	107.4	0.0	0.0	94.4	107.4	13.1	13.9%				
Thu 10 Dec 2020	95.3	115.1	0.0	0.0	95.3	115.1	19.9	20.8%				
Fri 11 Dec 2020	94.9	115.3	0.0	0.0	94.9	115.3	20.3	21.4%				
Sat 12 Dec 2020	95.4	112.2	0.5	0.0	95.9	112.2	16.4	17.1%				
Sun 13 Dec 2020	97.0	117.6	1.0	0.0	98.0	117.6	19.6	19.9%				
Mon 14 Dec 2020	97.5	122.7	1.0	0.0	98.5	122.7	24.2	24.6%				
Tue 15 Dec 2020	97.8	119.8	1.0	0.0	98.8	119.8	20.9	21.2%				





Capacity Planner Viewer

HOSPITAL DASH INPATIENT REPORT - SPECIALTY VIEW

This report is part of the standard dashboard configuration. Refer to the "Today" section above for more information.

HOSPITAL DASH INPATIENT REPORT - WARD VIEW

This report is part of the standard dashboard configuration. Refer to the "Today" section for more information.



INPATIENT SUMMARY REPORT

Description

Provides key information from demand, supply, and planning perspectives to monitor performance and proactively plan to manage hospitals on a monthly basis.

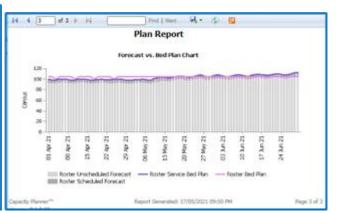
Configuration

Set Forecast Type as "Roster".

Examples









INS AND OUTS - SPECIALTY VIEW

Description

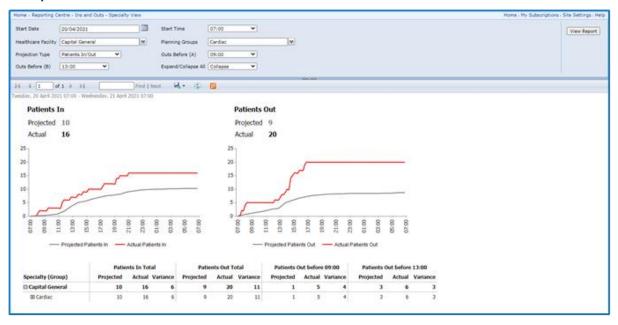
When run as a "Today" view, this report assists to understand hospital activity from a service type perspective against what is expected and to determine the levels of activity that may be expected over the next few hours. The "Yesterday" view assists to identify the causes of variance between actual and projected occupancy yesterday.

Configuration

Can choose to display either Patients In/Out or Admissions/Discharges.

Set the Outs Before (A) and Outs Before (B) to match your discharge target times.

Example



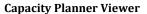
INS AND OUTS - WARD VIEW

This report is part of the standard dashboard configuration. Refer to either "Today" or "Yesterday" sections above for examples and details.

OCCUPANCY MATRIX

This report is part of the standard dashboard configuration. Refer to "Today" section above for example and details (as "Occupancy Matrix").

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OCCUPANCY SUMMARY MATRIX

Description

Key report that provides visibility of patient placements throughout the hospital by ward and service grouping for a defined period of multiple days. Can be used on a weekly basis for patient management.

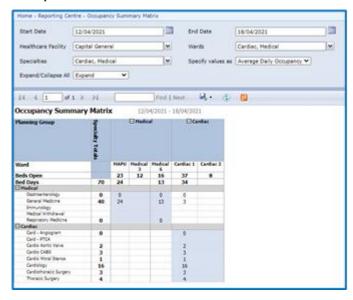
Configuration

Include all Inpatient groups and Specialties. Can set for a date range.

How to Use

Use to monitor patient placement trends. See Average Daily Occupancy, Total Bed Days, Admissions or Discharges.

<u>Example</u>





OCCUPANCY VS ALOS CHART

Description

Used for monitoring trends in average length of stay (ALOS) and managing length of stay (LOS).

View length of stay and occupancy at ward, service, planning group or hospital level.

How to Use

Monitor trends in length of stay and occupancy.

Example



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PG SPECIALTIES TODAY DASHBOARD

Description

Presents a cumulative and progressive view of Patients In and Out activity compared with projected activity for a Planning Group from a service type perspective. Can be used to determine which Specialties may be driving discrepancies between resource and demand.

Example



PG WARDS TODAY DASHBOARD

This report is part of the standard dashboard configuration. Refer to the "Today" section for more information.



PATIENT EXPORT DETAIL

Description

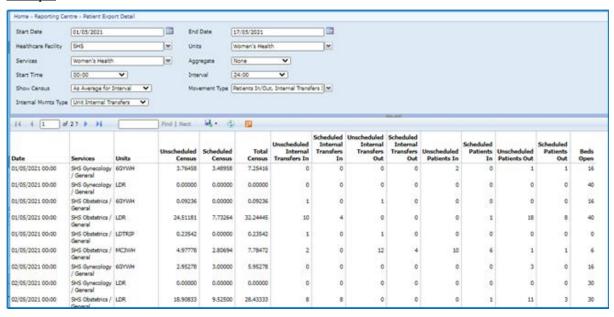
Provides patient data (occupancy/patient movements/beds open) for a given date range and user-defined ward/service grouping. The use of this report may be limited due to patient-level

Configuration

The measures are aggregated at daily or hourly grains and are available as an "as at" value or an "interval average" value. Can also include internal ward transfers.

How to Use

This is especially helpful to see the number of transfers in or out within the same Planning Group (e.g. for Women's Health).





PATIENT EXPORT PG

Description

Provides patient data (occupancy/patient movements/ward or service beds) for a date range and planning group(s).

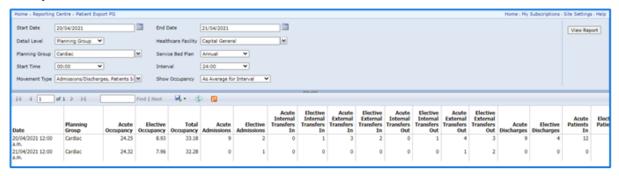
Configuration

There are several choices for the data elements to include (see below). They can all be included or excluded as needed.

How to Use

Use to monitor Internal and/or External Transfers and other patient movements for the Planning Group(s) selected.

Example



PLANNING ASSUMPTIONS TREND REPORT

This report is part of the standard dashboard configuration. Refer to the "Planning" section for more information.



PLANNING ASSUMPTIONS VS. ACTUAL REPORT

Description

Key report used to review and analyse activity and occupancy against forecast assumptions as part of the planning process for the medium term.

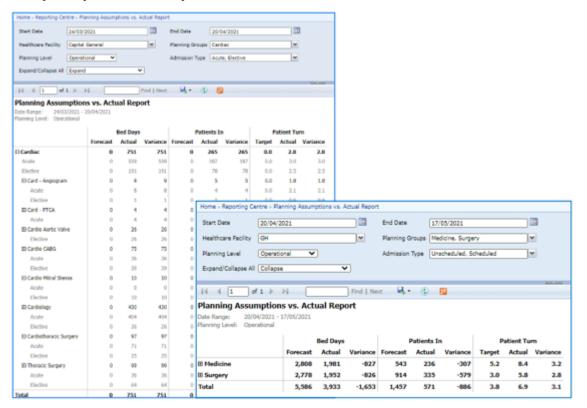
Configuration

Can set to Expand or Collapse All contents (see examples below). If choosing to Collapse, the group(s) can still be expanded.

How to Use

Review as part of the Forecasting process to determine if changes are needed to correct a variance due to unexpected patient activity.

Examples Expanded and Collapsed





PROJECTED DISCHARGES REPORT

Description

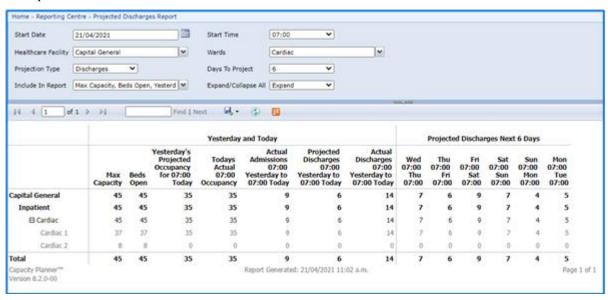
Table showing the actual discharges yesterday compared to the projected today, along with the projected discharges for the rest of the week.

Configuration

Choose to expand or collapse as needed.

How to Use

Weekly patient management





PROJECTED INS AND OUTS

Description

This report is like the Patient Movements In and Patient Movements Out in the Report Groups. It displays Projected Ins or Outs on a Planning Group level compared with actuals for Yesterday, Today, and Tomorrow. Admissions and Discharges are distinct from Transfers.

Configuration

Choose whether to display patients in or patients out - only one choice at a time.

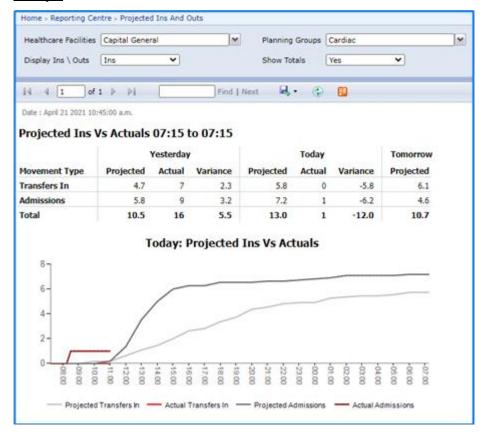
How to Use

Compare actual and projected patient movements in (transfers in and admissions)

Provides information to support adequate capacity creation according to projections

Comparison of actual and projected patient movements out (transfers out and discharges)

Provides information to support adequate capacity creation according to projections





PROJECTION EXPORT

Description

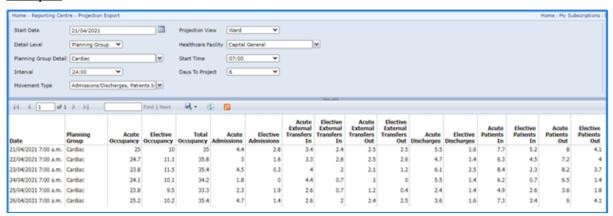
Provides either ward or ward projection data (occupancy/patient movements) for a given date, number of days to project and planning group or ward selection.

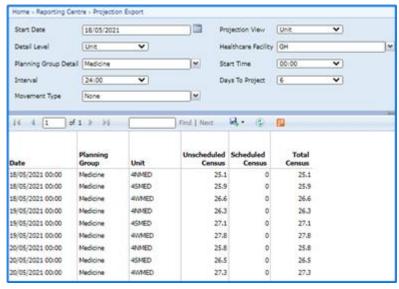
Configuration

Choose to display by Planning Group or Ward in the Detail Level dropdown. If choosing Ward, then each of the wards within the Planning Group will display in a separate row for each date. Can also choose to show no movement types and see only the occupancy.

How to Use

Can be used to get projected Occupancy for each date







PROJECTION VS ACTUAL CHART - SPECIALTY VIEW

Description

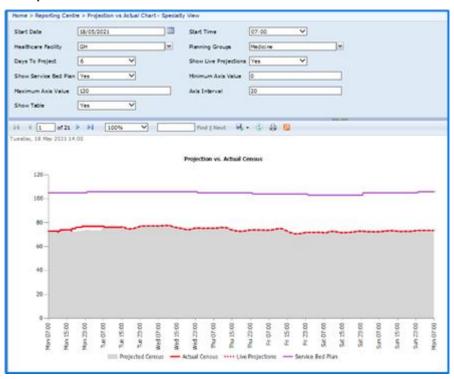
Provides real-time updates to show actual occupancy vs projected occupancy from a service type perspective, and guides decisions on the resource plan.

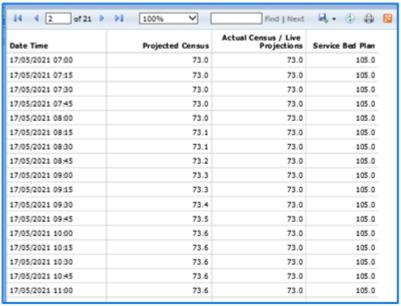
Configuration

Choose to Show Table (on subsequent pages) if wanting to export to Excel.

How to Use

Use if wanting to view projections by service regardless of location.











This report is part of the standard dashboard configuration on the Hospital and PG Today Dashboards. Refer to the "Today" section for more information.

PROJECTION VS ACTUAL CHART - WARD VIEW WITH STAFFING

This report is the same as the previous report.

HealthStream





SPECIAL EVENT ANALYSIS*

Description

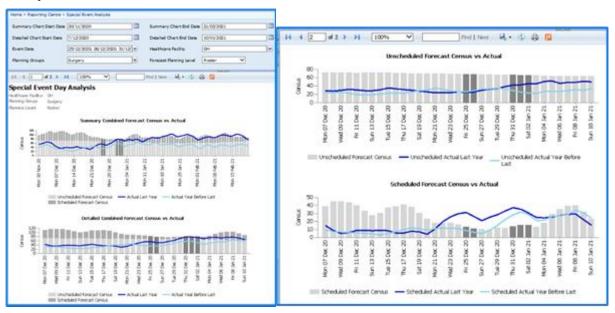
This report is like the Historic Xmas Analysis Report. It is useful for special event planning and to analyse year-by-year variance of occupancy.

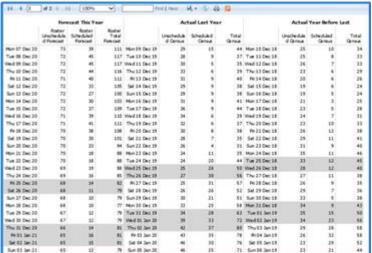
Configuration

The Christmas Eve and Christmas Day, along with New Year's Day and the day after are automatically selected. Choose other dates within the range as needed from the Event Date dropdown. Recommend choosing facility and Planning Group(s) and leave the rest of the defaults as is. To review other holidays, change the Summary Chart Start and End Dates. Any dates selected will display dark gray in the charts.

How to Use

Use this report to compare current year's Forecast and previous years' actuals for the selected date range and event dates. Each page shows different views, the last of which shows side-by-side views to compare current year to the previous two years.







STAFF EXPORT

Description

Provides Actual and Rostered Staff On per hour for a given date range and can display multiple roles for the selected Ward(s).

Configuration

If set to aggregate Wards and Roles (1st example), either display in the report. If set to 'No', both will display, and an entire Planning Group can be selected, while still viewing individual Wards (2nd example).

How to Use

Use to view differences between staff who were scheduled versus actual staffing to identify unplanned or unscheduled staffing.

Examples

Aggregated

Date Time	Actual Staff On	Rostered Staff On
5/1/2018 7:00 AM	10.30	0.88
5/1/2018 11:00 AM	7.67	0.00
5/1/2018 3:00 PM	7.29	0.00
5/1/2018 7:00 PM	6.57	8.00
5/1/2018 11:00 PM	21.17	8.00
5/2/2018 3:00 AM	26.99	8.00
5/2/2018 7:00 AM	11.26	1.00
5/2/2018 11:00 AM	6.02	0.00
5/2/2018 3:00 PM	6.06	0.00
5/2/2018 7:00 PM	4.51	8.00
5/2/2018 11:00 PM	15.73	8.00
5/3/2018 3:00 AM	20.19	8.00
5/3/2018 7:00 AM	10.62	1.00
5/3/2018 11:00 AM	6.71	0.00
5/3/2018 3:00 PM	6.50	0.00
5/3/2018 7:00 PM	6.70	7.00
5/3/2018 11:00 PM	12.71	7.00
5/4/2018 3:00 AM	15.54	7.00
5/4/2018 7:00 AM	8.87	0.88
5/4/2018 11:00 AM	7.91	0.00
5/4/2018 3:00 PM	8.63	0.00
5/4/2018 7:00 PM	8.03	7.00

Not Aggregated

Date Time	Unit	Role	Actual Staff On	Rostered Staff On
5/1/2018 7:00 AM	1S 100	RN	5.79	0.75
	CVICU	RN	10.30	0.88
	MICU	RN	6.05	0.75
	SICU	RN	8.31	0.88
5/1/2018 11:00 AM	1S 1CU	RN	4.79	0.00
	CVICU	RN	7.67	0.00
	MICU	RN	5.76	0.00
	SICU	RN	6.73	0.00
5/1/2018 3:00 PM	1S 1CU	RN	5.07	0.00
	CVICU	RN	7.29	0.00
	MICU	RN	6.13	0.00
	SICU	RN	6.99	0.00
5/1/2018 7:00 PM	1S 1CU	RN	2.22	5.00
	CVICU	RN	6.57	8.00
	MICU	FON	4.36	5.00
	SICU	RN	3.30	7.00
5/1/2018 11:00 PM	15 100	FON	3.32	5.00
	CVICU	RN	21.17	8.00
	MICU	FIN	15.27	6.00
	SICU	RN	23.39	7.00
5/2/2018 3:00 AM	1S 10U	RN	4.21	5.00
	CVICU	RN	26.99	8.00
	MICU	RN	19.17	6.00
	SICU	RN	30.47	7.00



STAFF REQUIRED VS ROSTERED VS ACTUAL*

Description

Used to identify staffing gaps between rostered, actual, and planned staffing requirements for multiple roles. It can also show both Rostered and Actuals if running for date in the past. This example shows both with the PAR Required Ratio and displaying Projected Occupancy. (Note: This report is based on staffing to full capacity.)

Each page will display a different Role for the Planning Group and show all Wards in the Planning Group on the same page. This may be a hyperlink on the Hospital Today Dashboards.

Configuration

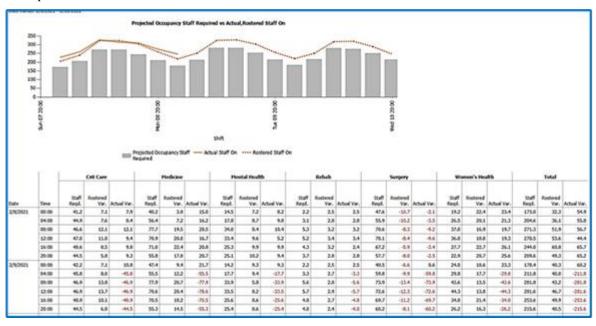
By default, it can include all Inpatient Wards and Roles and is set to display the Projection and Actual Variances. These represent the difference between the staff required and those scheduled.

The way the report is defined, the date range can easily be changed (to display further in the past or a few more days in the future). The start time and shift length can also be changed, along with the selections of Planning Group and Roles.

How to Use

View each different role by ward to assure there are no staffing shortages or overages.

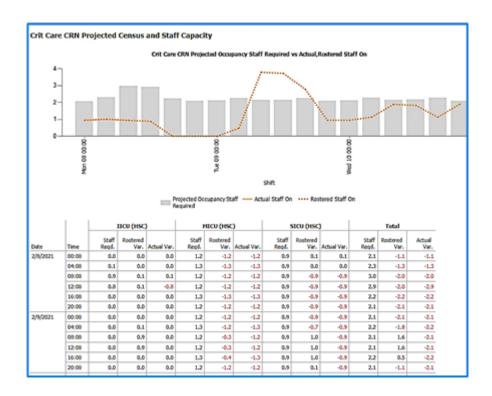
Examples



HealthStream Inc 120









STATUS BY SPECIALTY

This report is part of the standard dashboard configuration. Refer to the "Today" section for more information (shown as "Status by Service").

STATUS BY WARD

Description

A detailed view of ward information over the last 24 hours and the last 7 days to review activity trends, LOS, and long-stay patients. It can be reviewed by Ward Managers daily to monitor trends and identify potential risks.

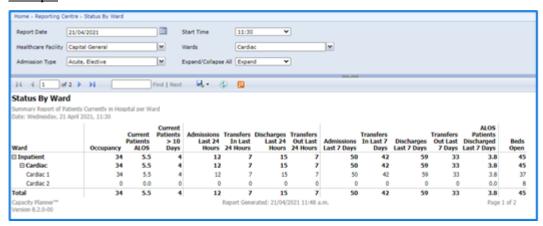
Configuration

Recommend expanding to view the details

How to Use

Use to track trends and volumes over the last 7 days.

Example



Planning Group Name	Wed 10 Mar	Thu 11 Mar	Fri 12 Mar	Sat 13 Mar	Sun 14 Mar	Mon 15 Mar	Tue 16 Ma
☐ Inpatient	67	75	69	67	71	73	89
⊟ Surgery	67	75	69	67	71	73	89
3ESUR	2	4	3	0	0	6	4
3NSUR	27	32	26	28	31	31	37
3SSUR	28	30	28	28	31	28	33
3WSUR	10	9	12	11	9	8	15



TRANSFERS MATRIX - PG DETAIL

Description

Provides a detailed view of transfers, external and internal, within wards in a planning group for a specific day.

Configuration

This is a very complicated report and can be configured multiple ways. Here are some tips.

Date: Choose the previous date to see yesterday's transfers.

Planning Groups: Include all inpatient PGs.

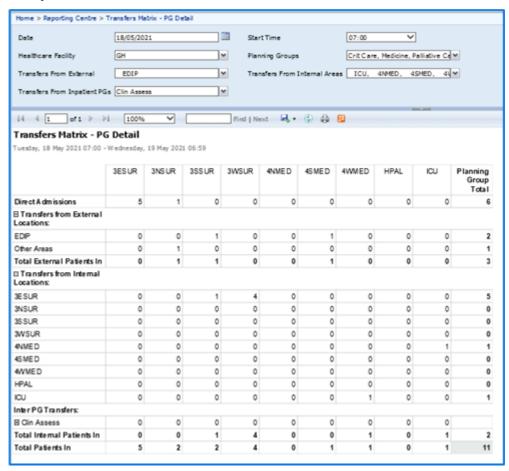
Transfers from External: Include any non-inpatient wards (like ED inpatient or Day Stay).

Transfers From Internal Areas: Choose individual inpatient Wards to display without having to expand manually.

Transfer From Inpatient PGs: Include any assessment PGs.

How to Use

View where patients who transferred into each ward originated.





TRANSFERS MATRIX - PG SUMMARY

Description

Provides a detailed view of transfers, external and internal, within planning groups for a specific day.

Breaks down external and internal transfers, admissions, and discharges within a planning group for a specific day.

Analyse patient movement trends.

Configuration

The report can be created using any Healthcare Facility (HCF), and user specified location entities. It can also be run for a user specified date and time. Transfers are read from left to right – rows indicate the transfer's origin columns indicate the transfer's destination. The report can be run on demand and can also be published in any format e.g. PDF, Excel, or Word.

How to Use

This report is useful to view and track patient transfers. It includes direct admissions, transfers from Day Stay and transfers from external locations (e.g. ED hold areas, Day of Surgery, etc.). This report also displays transfers from internal areas (e.g. a patient being transferred from a medical ward to a surgical ward).

	Inpatient Planning Groups			Other Planning Groups							
	AT&R	Medical	Surgical	General Inpatient Beds	Assessme nt Unit	ICU / HDU	Maternity	Paediatric	Peri- Operative	SCBU	Total New Patients
Direct Admissions	2	16	9	27	12	1	10	9	37	0	96
☐ Transfers from External Locations:											
Assessment Unit	0	2	0	2	0	0	0	0	0	0	- 2
Other Areas	0	3	0	3	0	0	0	0	0	1	4
Total External Patients In	0	5	0	5	0	0	0	0	0	1	(
											102
☐ Transfers from Internal Locations:											
ICU / HDU	0	0	2	2	0	0	0	0	0	0	
Maternity	0	0	0	0	0	0	0	0	0	0	
Paediatric	0	0	0	0	0	0	0	0	0	0	
Peri-Operative	0	0	13	13	0	0	0	0	0	0	
SCBU	0	0	0	0	0	0	0	0	0	0	
Inter PG Transfers:											
AT&R	0	0	0		0	0	0	0	0	0	
Medical	0	0	0		0	0	0	0	0	0	
Surgical	0	0	0		0	0	0	0	0	0	
Total Internal Patients In	0	0	15	15	0	0	0	0	0	0	
Total Patients In	2	21	24	47	12	1	10	9	37	4	



FAQ's

This section includes the questions for all users and IT administrators.

HOW DO I LOG ONTO CP?

This will be outlined at the beginning of the Activation and provided in the training documentation. It will vary between clients.

After the Activation stage, contact your helpdesk for log on and access information specific to you.

HOW DO I CHANGE MY PASSWORD IF I CAN'T REMEMBER IT?

Passwords are not controlled within CP.

Contact your helpdesk and request your password to be reset.

HOW DO I SET UP A NEW USER IN CP?

This will need to be managed via your internal helpdesk as a new user request must be authorized by the appropriate team.

HOW DO I CHANGE SOMEONE'S ACCESS IN CP?

This will need to be managed via your internal helpdesk as a change of access request must be authorized by the appropriate team.

HOW DO I KNOW IF THE DATA FEEDS ARE NOT GOING THROUGH TO CP?

An email trigger has been set up in CP which will send emails to the relevant people on both the client site and the vendor helpdesk to advise that a feed has been missed and at what time the last one came through.

You will also see that the red actuals line on the Projected vs Actual Occupancy dashboard has flat lined.

The team who receives these emails has been determined by your project team as part of the implementation of CP.

HOW DO I READ THE TODAY DASHBOARDS?

This will be the first dashboard which will appear when you log onto CP. It gives information about the hospital's status. It provides a summary view of the hospital, and visibility of how individual Specialties are contributing to the overall picture.

WHY DO MY DASHBOARDS KEEP FLASHING OFF AND ON WHEN THE SCREEN IS LEFT OPEN?

Your dashboards refresh every 3 minutes to ensure that the information that is displayed is accurate to current time as possible.

Messages are being sent through to CP from the registration system that provide the information on the dashboards.

WHY DOES MY ROSTER BED PLAN NOT MATCH HOW MANY BEDS I HAVE IN MY WARD?

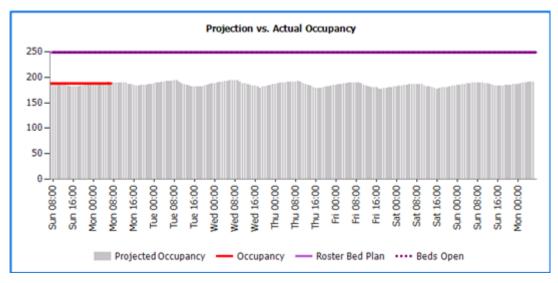
The Roster Bed Plan is the bed plan decided during Annual Planning and will closely align to the budget for each service, not necessarily matching the number of beds in an individual ward.

Other ways to record bed numbers in CP are maximum capacity for each ward (total number of physical beds) and the number of beds that are 'open' (staffed and can take a patient).

WHAT HAPPENS WHEN THE WORM (ACTUAL OCCUPANCY) HAS FLAT-LINED?

When the 'worm' (red occupancy or Actual Occupancy line) has gone completely flat, this means that there is an issue with CP.





This is most likely because there has been no new data to update the data warehouse and can be caused by one of the following:

- The HL7 feed has stopped (HL7 integration)
- There was a data error during the importing process
- Discuss with your helpdesk (as this may have already been logged or they will already be aware of the situation).

Helpdesk will email once internal processes have been checked, the Helpdesk will contact and provide detailed information to the HealthStream team to get this resolved as quickly as possible.

HOW DOES CP CALCULATE THE PROJECTIONS IN THE DASHBOARDS?

CP has been loaded with up to 4 years' worth of historical data from your Registration or ADT System which (using analytics in the background) can determine trends for day of the week, time of the year, and public holidays etc.

The previous 12 weeks of activity (admission, transfers, and discharges) are used to calculate the projections for the next 7 days.

WHY DOES MY PROJECTIONS VS ACTUALS CHART ON TODAY DASHBOARDS HAVE A HUGE INCREASE OR DECREASE IN PROJECTIONS AT 7AM SOME DAYS?

This is due to the re-projection for the day. At 7.00am (or another time if configured differently), the projections recalibrate to match actual occupancy. If the actual occupancy on the previous day did not follow the projections for the day (i.e. more admissions, not enough discharges, etc.) the projections readjust to account for this as it will impact the next 7 days occupancy.

This will be evident in the yesterday's dashboards and will display where the differences were in projected information vs actual information for the day.

WHY DO MY ADMISSIONS NOT MATCH THE ADMISSIONS I HAVE FROM MY PATIENT MANAGEMENT OR ADT SYSTEM FOR TODAY?

This can vary between hospitals and it does depend on how admissions are entered.

A common reason for this could be transfers to IP wards from Emergency are shown as a transfer to the IP ward, not an admission; however, all occupancy is shown on the dashboards.

WHAT IS THE DIFFERENCE BETWEEN AN ADMISSION AND A PATIENT IN?

Each patient journey has only one admission, the first inpatient bed the patient is allocated to (e.g. ICU or medical ward).

"Patients In" is a combination of admissions and transfers around the hospital (e.g. ICU to Inpatient or a medical ward to a surgical ward, etc.)

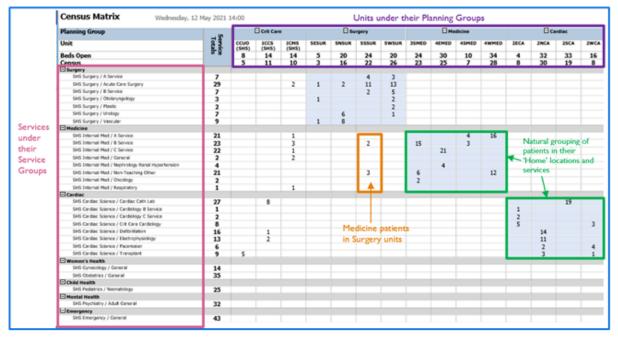


WHAT IS A PLANNING GROUP?

A Planning Group is a logical grouping of wards and Specialties (e.g., Oncology and General Medicine in medical wards) that may share patients and/or staff.

To illustrate this, the Occupancy Matrix below shows the Planning Groups and their wards outlined in purple across the top. The appropriate Service Types for each of these groupings are also grouped and then attached to the Planning Groups. These are outlined in pink on the left.

Below is an example of how the Planning Groups (PG) are structured:



CP displays patients who are not currently located on a ward within their Planning Group (as outlined in orange in the screenshot above).

This identifies outliers and allows visibility around exactly where patients are. This assists with identifying patients that would benefit from moving them back to their home ward, thus increasing staff efficiency and patient safety.

Planning Groups have been set up as determined by your project team with executive input.

WHAT DO I DO IF CP AND THE REGISTRATION SYSTEM INFORMATION DON'T MATCH?

CP is driven from the patient data which has been entered into the Patient Management System. Sometimes mismatches can occur due to time lapses, and this will correct itself once the data has refreshed in the next cycle.

If the mismatches are occurring persistently and don't appear to be related to a time lapse issue, contact your helpdesk. If this needs to be escalated further, then the helpdesk will need to contact HealthStream with as much information as possible to help identify the cause of the problem.

HOW DO I FIND OUT WHICH PATIENTS THE DASHBOARD OCCUPANCY NUMBERS ARE REFERRING TO?

The Statistics tab will provide a breakdown of the patients by ward. The encounter number and patient ID are on this tab and you can then use this to look up the patient in your Patient Management or ADT System.

CAN'T FIND YOUR ANSWER?

For all further queries, contact your Application Administrators or your Helpdesk.

Standard Data Definitions

Standard Data Definitions

ADMISSIONS

Number of patients admitted during the specified time frame. This does not include ED presentations but does include patients admitted from Emergency.

The first inpatient location of a journey is the admission, a journey can only have one admission. If patients are in Emergency at the time of their admission, the admission will be attributed to Emergency.

Also see Patients In. The true number of patient movements into a Planning Group is represented by:

Patients In = Admissions + External Transfers In (not those between wards in the same Planning Group)

ADMISSION TYPES

An Admission Type defines the kind of admission applicable for a patient when arriving at a hospital.

These could include:

- Elective
- Acute Admission
- Emergency visit
- Trauma

Capacity Planner aggregates these types into Acute (those unplanned patients coming through Emergency) or Elective admissions (including scheduled surgery patients and direct admits) only. Since CP only includes inpatient and Emergency areas, Admission Types for Outpatients and Observation Patients are excluded.

ANNUAL FORECAST

This is typically set once a year to work out the budget requirements - the annual settings will then fall through as default settings for the roster bed plan.

AVERAGE LENGTH OF STAY (ALOS)

Total length of stay from admission (date/time) to current date/time divided by the number of patients in the selected group.

ALOS is usually measured in days.

The ALOS can vary hugely when long-stay patients are discharged in the specific time frame (e.g. a 300-day patient was discharged last week - this will increase the ALOS for that week significantly).

When managing the hospital in the short term, ALOS reporting could lead to flawed decisions, e.g. when hospital is in gridlock it would be better to discharge 4 short-stay patients than 1 long-stay patient; the latter would bring the current ALOS down significantly but only free up 1 bed.

BEDS OPEN

The number of beds available and staffed to take a patient.

Nursing managers or directors will have the best coordinated view of:

- Phased closure of beds per ward, in line with the ward schedules e.g. for a specific ward closing 4 beds at a time (= 1 nurse)
- Specialties the individual ward can provide
- Opportunity to staff of closed wards to work for other PG wards.

Per ward, the staffing application will have a standard staffing ratio per number of beds open (e.g. for the AM shift, a nurse can look after 4 patients; so, if there are 28 beds open, 7 nurses for the AM shift are needed).



Standard Data Definitions

BEDS SET

Beds Set defines the beds planned to be open for the selected wards. These plans can be set at Annual, Roster and/or Operational level. Operational beds are those beds managed in the 'Beds Open' section of the application.

DASHBOARDS

Dashboards provide a snapshot of the current hospital status.

DASHBOARD EDITOR

The Dashboard Editor is a graphical editor where you design your dashboard. The design surface allows you to drag and drop, resize, and reposition your dashboard items depending on your audience.

You must have the appropriate access levels to open the Dashboard Editor.

DISCHARGES

Number of patients discharged from the hospital during the specified time frame. This includes discharges to another healthcare facility in the same region.

EXTERNAL TRANSFERS IN/OUT

The number of patients who have moved in to/out of a Planning Group to/from another Planning Group during the period.

FORECAST

Forecasts are long-range planning and include a combination of the acute demand, plus the anticipated future elective volume. The acute forecasts use algorithms which are based on historic patterns, growth values, and changes in Length of Stay.

Elective volumes can be derived from a mix of budget, expected changes to scheduled surgical volumes and/or last year's actual Occupancy.

FORECAST TYPES

There are 3 forecast types used in CP which are:

- 1. Annual this is where forecasts are created based on the set budget or funded beds for a defined period
- 2. Roster this is where a forecast is created based on the required staffing needs for a defined period
- 3. Operational this is where a forecast is created based on the day-to-day running of the hospital

HEALTHCARE FACILITY

A healthcare facility is a hospital. Hospital types may vary but they are all defined as a healthcare facility.

HEALTHCARE PROFESSIONALS

These are those who would be listed as "Attending" [physician] for any patient encounters in the healthcare facility. Other clinicians need not be included.

INTERNAL TRANSFERS IN/OUT

The number of patients who have moved between wards in the same Planning Group during the period.

LENGTH OF STAY (LOS)

This is defined as Discharge time & date minus admission time & date.

It is measured in days.

LENGTH OF STAY OF PATIENTS IN

This is defined as the length of stay of patients currently in the hospital.



MAXIMUM CAPACITY

The physical bed capacity of a ward.

OCCUPANCY [OCCUPANCY]

Occupancy is determined by the number of patients currently admitted to the hospital.

For Forecasting, Occupancy = Patients In * Patient Turn.

OUTLIER [OFF SERVICE]

Outliers (also known as Overflow or Off Service Patients) are classified as patients who are in a Planning Group ward that is of the same Ward Type but not of their own Planning Group. Patients are in other (outlier) wards can often lead to an increase in their Length of Stay.

PATIENT ACTIVITY

Patient events which trigger workload. This can include admissions, transfers, changes to attending physician or service type, and discharges or deaths.

PATIENT TURN

Patient Turn is calculated by taking the Occupancy over a specific period and dividing it by the number of Patients In over the same period.

Patient Turn provides the average time that it takes a patient to pass through a service or group of wards.

Occupancy = 50 patients

Patients In = 10 patients

Patient Turn: 50 / 10 = 5 days

PATIENTS IN

Patients In = Admissions + External Transfers In

For Forecasting, this represents the true patient demand for a Service.

PATIENTS OUT

Patients Out = Discharges + External Transfers Out.

PLANNED BEDS

This is the number of beds allocated to the Planning Group in the bed plan. This value can exceed the ward capacity of the PG (displayed in the column header), since it is purely a service-based plan and some of the patients may be placed outside of the wards in the Planning Group. If the Planned Beds exceed the PG's capacity, then other PGs' wards must be opened (using the "Set Beds by Ward" screen) to accommodate the excess.

PLANNING

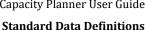
This consists of four key planning levels:

STRATEGIC PLANNING

- Projects focused on long-term scenario planning (e.g. determining bed requirements and considering growth impacts of demographics, primary care initiatives, technical enhancements, etc.)
- One-off projects, looking 3-5 years forward

ANNUAL PLANNING

- Annual planning process, commencing 3-8 months before the new budget year
- Agree on total budget, assumptions around ALOS and growth figures, and determine base resources funded per ward or service





OPERATIONAL PLANNING - ONGOING

- Refine Annual forecast with trends (growth/ALOS), staff planning, refine special event planning (including public holidays and community support, etc.), high-level elective planning, and finalizing annual leave plans
- Looking 3-8 weeks forward

REAL-TIME MANAGEMENT

- Daily (2-3 times daily) review of current state and projections, combining current status and projections for the next few shifts
- Allocation of float pool staff, agency staff, granting spot leaves, finalizing elective plans, etc.

PLANNING GROUP

A Planning Group is a logical grouping of wards and Specialties that may share patients and/or staffing. They are used to project workload and plan resources.

RESOURCE PLANNING LEVEL

This defines the level at which the resources are required:

ANNUAL PLAN

Typically set once a year to work out the budget requirements - the budget settings will then fall through as default settings for the roster plan.

ROSTER PLAN

Updates staffing requirements in line with the staff scheduling cycle (e.g. 4 weekly - 8 weeks in advance). If the actual Occupancy is diverging from the Annual forecast, analyse what is driving this (number of patients or ALOS and for which Specialties?) and subsequently understand if this trend is expected to continue or will it be curbed with clinical management. If the forecast is adjusted, this will flow through on the bed requirements, bed plans are updated accordingly for the staff scheduling [roster] period.

OPERATIONAL PLAN

We recommend reviewing the forecast for the next 1-4 weeks on a weekly basis. Based on the latest trends, if the actual Occupancy is likely to deviate from the roster forecast, you can adjust the resource requirements accordingly and run a gap analysis between staff required and staff scheduled. Even though schedules will already have been set, this will allow the nursing managers to review their options (e.g. swap study leave, allocate additional leave, book casual staff, cancel electives, etc.).

The default operational forecast and resource plans will fall through from the roster plans (so you can adjust from here if required).

PROJECTIONS

Predicted hourly occupancy for the next 1 – 6 days derived from the previous 12 weeks of activity for that day of the week.

SERVICES OR SPECIALTIES

Services or Specialties refer to the particular areas of hospital care.

These can include:

- Neurology
- Mental Health
- Oncology
- Emergency
- Surgery



Standard Data Definitions

SERVICE OR SPECIALTY GROUPS

Service groups provide CP with the ability to group Specialties together and mirror their organizational structure. Service Groups allow users to select multiple Specialties (of the group) at one time when generating reports.

For example, a Service Group maybe Medicine, and within that group will sit various Specialties such as:

- Internal Medicine
- Oncology
- Respiratory Medicine

STAFFED PATIENT CAPACITY

This variable is ward related – describing how many patients a ward can accommodate at a specific time. Medium to long-term, this is driven by the forecast. Short-term, this can be adjusted to reflect the current patient or staff mix.

ROLE TYPES

The roles within CP define the roles of the individuals within the healthcare facility.

These can include:

- Nurses
- Doctors
- Technicians
- Clerks
- Administrators

WARD TYPE

A Ward Type is a way of grouping different types of wards and Planning Groups within a healthcare facility. This makes it easier to identify the off-service patients on some of the reports (like the Hospital Status Report). It will also help with Forecasting, since by separating out Critical Care wards, the Medicine patients within Critical Care will be planned for separately from those in general Medicine wards. Here are some example Ward Types:

- Inpatient
- Emergency
- Critical Care

WARDS

All locations within the hospital are listed under 'Wards', including the Inpatient or Emergency Department wards. Generally, outpatient and procedural areas are not included within Capacity Planner.