

Report to:	Trust Board	Agenda item:	10
Date of Meeting:	26 November 2014		

Title of Report:	Safer Staffing Monthly Report
Status:	To note
Board Sponsor:	Helen Blanchard, Director of Nursing & Midwifery
Author:	Jan Lynn, Lead Nurse, Workforce Development and Education
Appendices	Appendix 1: Safer Staffing October 2014

1. Executive Summary of the Report
<p>The purpose of this report is to update the Board on the nurse and midwifery staffing levels for all inpatient wards as outlined in the Chief Nurse Staffing Guide 'How to ensure the right people, with the right skills are in the right place at the right time' published by the National quality Board and NHS Commissioning Board.</p> <p>The Report provides an overview of the nurse, midwifery and care staff hours fill rate 'planned versus actual'. It informs the Board of reasons why there are variances in the fill rates and what actions are being taken to mitigate to reduce the risks around insufficient staffing levels.</p> <p>The report also appraises the Board of any areas of risk.</p>

2. Recommendations (Note, Approve, Discuss)
<p>To note the contents of this report in relation to monthly nurse and midwifery staffing levels and the actions being undertaken to address any shortfall and mitigate against any risks.</p>

3. Legal / Regulatory Implications
<p>National Quality Board Requirements (Nov 2013) NICE guidance (July 2014) CQC Outcome 4 Reg. 9 CQC Outcome 12 Reg. 21 CQC Outcome 13 Reg. 22 CQC Outcome 14 Reg. 23</p>

4. Risk (Threats or opportunities, link to a risk on the Risk Register, Board Assurance Framework etc)
<p>Risk to CQC registration if Quality standards are not met Non compliance with National Quality Board and NICE requirements</p>

5. Resources Implications (Financial / staffing)
<p>Nursing investment has been identified by Trust Board to support nurse staffing on the inpatient wards. No further financial implications identified at this stage.</p>

6.	Equality and Diversity
Compliance with the Equality and Diversity Policy	
7.	References to previous reports
<ul style="list-style-type: none"> • Investment in Nursing 2014/15: Safer Staffing. Public Trust Board. March 2014. • Six Monthly Safe Staffing Reports to Trust Board – October 2014. • Monthly Quality Reports to Trust Board. • Monthly Safe Staffing Reports to Trust Board 	
8.	Freedom of Information
Public	

Safer Staffing – Nursing and Midwifery Workforce Information October 2014 Report

1. Purpose:

The purpose of this report is to provide the Trust Board with an update on the status of nursing and midwifery staffing levels at the Royal United Hospital Trust for the month of October 2014.

The report forms one of the compliance requirements, against the National Quality Board's standards which are highlighted in 'How to ensure the right people, with the right skills, are in the right place at the right time (National Quality Board, November 2013).

The following report provides an overview of the nurse, midwifery and care staff hours fill rate 'planned' versus 'actual'. It aims to provide the Board with assurance around nurse staffing by detailing the reasons why inpatient areas are either under or over their planned staffing hours and what actions are in place to address any gaps or over establishment.

2. Scope of the Review

This report is focused on all in-patient adult wards including critical care and all in-patient maternity wards on the acute site as well as the inpatient community birthing centres. Day Case areas and the Emergency Department are excluded.

This monthly report is submitted as part of the National Quality Board requirements which includes publishing nurse staffing data both on the Trust website and NHS Choices website. The Trust is required to report on the actual staffing numbers (in hours) against planned staffing levels for each month.

Since May 2014 the trust website safer staffing page (URL: www.ruh.nhs.uk/saferstaffing) is available to sign post the public to the monthly staffing information to ensure transparency and compliance with national requirements.

3. Safer Staffing – Trust overview

The Trust's overall average staffing hours fill rate, planned versus actual for Registered Nurses (RN) and Health Care Assistants (HCA) for the day and night shift for October was:

RUH	Day shift		Night shift	
	Ave fill rate RN	Ave fill rate HCA	Ave fill rate RN	Ave fill rate HCA
October 2014	96.1%	106.9%	94.0%	112.8%

The overall gap in fill rates for RNs both day and night shifts reflects the number of vacancies and sickness and inability to fully cover the shortfall..

The additional fill rates for HCA care staff both day and night reflect the additional HCA deployed to cover RN vacancies and patients who require 'Specialising'.

3.1 Reporting by Exception – Ward level data

The current method of collecting ‘actual’ staffing data against ‘planned’ establishment is undertaken through ward staff inputting their rotas into the Roster Pro database. Trust wide this is overseen by the Staffing Solutions Manager and also includes the inputting of temporary staffing either Bank or Agency. The planned staffing levels are those that have been approved at budget setting and the Director of Nursing and Midwifery against evidence based skill mix reviews and benchmarking and are the funded establishments.

The full overview and summary of the average percentage fill rates based on staffing levels planned and actual (calculated in hours) of the registered nurse/midwife and non-registered nurse/midwife (called in the national template – Health care assistants) for all inpatient wards for the month of October is provided in Table1.

Table 1 (overleaf) highlights areas where the average actual staffing hours fall below 90 per cent fill rate (Red) or are above 120 per cent fill rate (Blue). Where there are fill rates either side of these ratios explanations are provided and where necessary any actions that are being taken to address any shortfall or over establishments. These data form part of the data collection that is published via UNIFY and uploaded on NHS Choices web pages.

Authors: Jan Lynn , Lead Nurse Workforce Development and Education	Date: 17 November 2014
Document Approved by: Mary Lewis, Deputy Director of Nursing and Midwifery	Version: 1
Agenda Item: 10	Page 2 of 7

Safer Staffing Report - October 2014

Table 1

Ward Name	Day		Night		Explanation and Actions taken where fill rate <90% or >120%
	Average fill rate RN/RM (%)	Average fill rate CA (%)	Average fill rate RN/RM (%)	Average fill rate - CA (%)	
ACE	86.9%	94.8%	77.3%	117.6%	There are RN vacancies which are presently being recruited. Additional Health Care Assistants were deployed to cover the RN gap at night.
Acute Stroke Unit	91.9%	80.4%	96.8%	110.8%	Shortfall of HCAs day hours due to long term sickness. Sickness is being managed within the Trust's Sickness Policy.
Cardiac Ward	84.0%	90.8%	99.3%	119.4%	RN day hours shortfall due to sickness, vacancies and deployment to other wards. RN Vacancies being recruited.
Charlotte Ward	97.1%	135.4%	94.8%	93.4%	Additional HCA hours were due to Bank HCA staff being allocated for training purposes.
Cheselden Ward	125.1%	101.5%	109.1%	190.9%	RN day and HCA night hours additional due to patients requiring 'Specialising'. Matron is closely reviewing and approving skill mix and hours required each day.
Children's Ward	84.1%	115.7%	92.3%	116.1%	RN day shortfall due to RN vacancies and sickness. RN interviews in November. Additional HCA's deployed to cover the shortfall.
Combe Ward	113.7%	127.2%	84.9%	164.7%	Actual CA hours (Day and Night) additional to cover patients who require 'Specialising' and to cover RN gap at night.
Coronary Care Unit	89.4%	94.7%	98.3%	100.2%	RN Day shortfall due to sickness. Sickness being managed via Sickness Policy. Staffing levels met the needs of the patient acuity/dependency.
Forrester Brown Ward	100.9%	105.9%	95.5%	125.5%	Additional night HCA hours were to support those patients requiring 'Specialising'.
Haygarth Ward	112.6%	113.1%	93.1%	94.7%	

Ward Name	Day		Night		Explanation and Actions taken where fill rate <90% or >120%
	Average fill rate RN/RM (%)	Average fill rate CA (%)	Average fill rate RN/RM (%)	Average fill rate - CA (%)	
Helena Ward	109.8%	139.5%	95.3%	123.0%	Additional day and night HCA hours were to support those patients requiring 'Specialising'.
Intensive Therapy Unit	88.3%	174.1%	83.0%	119.4%	The variance in skill mix is due to the number of overseas nurses who are still awaiting NMC Registration and therefore work as HCA. Registrations are actively being chased.
Medical Assessment Unit	88.4%	126.3%	82.9%	111.5%	RN day and night shortfall due to vacancies and sickness. Vacancies are being recruited to and sickness is being managed within the Trust sickness Policy.
Medical Short Stay	86.4%	97.2%	118.6%	118.3%	RN day shortfall was due to sickness. This is being managed via the Trust's sickness Policy.
Midford Ward	111.0%	128.0%	81.8%	136.0%	RN night shortfall was due to sickness and additional CAs supported the shortfall as well as supporting patients who required 'Specialising'.
Neonatal Intensive Care Unit	98.3%	81.2%	96.8%	70.8%	Shortfall with Nursery Nurses due to sickness and vacancies. Sickness being managed through the Trust's Sickness Policy.
Parry Ward	122.6%	89.1%	127.4%	101.1%	The over establishment of RN is due to a patient who required a Registered Mental Health Nurse to 'special'.
Phillip Yeoman Ward	85.2%	113.0%	90.7%	88.6%	This variance is due to the fact that the ward deploys staff for the planned elective surgical activity it receives.
Pulteney Ward	129.4%	106.6%	95.2%	160.0%	This ward required additional HCA staff at night for specialising. These figures are against pre-investment skill mix which is why the staffing hours appear high. This increased skill mix will be demonstrated for next month's figures.
Respiratory Ward	66.7%	122.6%	89.9%	137.9%	There are RN vacancies which is why there is a shortfall both day and night. These are being proactively recruited to. HCA

Ward Name	Day		Night		Explanation and Actions taken where fill rate <90% or >120%
	Average fill rate RN/RM (%)	Average fill rate CA (%)	Average fill rate RN/RM (%)	Average fill rate - CA (%)	
					hours are additional to cover the RN gap.
Robin Smith Ward	96.9%	96.9%	104.7%	127.3%	The additional HCA hours at night were due to patients who required 'Specialising'.
Surgical Admissions Unit	96.2%	115.8%	113.6%	96.4%	
Surgical Short Stay Unit	91.6%	132.2%	91.0%	146.6%	Additional HCA hours are deployed for additional beds as they are opened in escalation.
Waterhouse Ward	90.4%	111.1%	101.3%	100.7%	
William Budd Ward	100.0%	98.8%	98.6%	100.4%	
Mary Ward	102.7%	69.7%	95.5%	80.3%	Shortfall in Midwife Assistants covered by flexible working from Delivery Suite.
Paulton Birthing Centre	100.0%	100.0%	100.0%	100.0%	
Chippenham Birthing Centre	100.0%	100.0%	100.0%	100.0%	

3.1 Areas of Focus

Respiratory ward was an area requiring specific attention in October 2014.

This ward currently has 5.0 wte Registered Nurses shortfall either as vacancies or long term sickness. The long term sickness is being closely managed and vacancies are being proactively recruited, however these vacancies has led to a skills and experience gap from individual RNs who are off sick.

To mitigate against the lack of experienced RNs additional experienced HCA's have been allocated which have taken the overall HCA staffing levels above 100 per cent on both day and night shifts in order to maintain safe staffing levels and patient care delivery.

It is noted that within the Trust Board Quality Report, Triangulation report (Appendix 1) this month the quality metrics for Respiratory Ward highlight the increase in sickness: RN 9.1% HCA 11.5%. Other metrics of note are:

- FFT score 71
- C.Diff x1
- Number of falls x 8 (7 negligible, 1 minor)
- Pressure Ulcer x 1 Grade 2

The Head of Nursing and Matron is proactively monitoring and supporting this ward on a daily basis and the Matron is a visible presence each day to support the nursing team. Active recruitment is underway to fill the vacancies as quickly as possible and Pool nurses are being allocated to provide more experienced nurses until nurses are recruited or returned from sick leave.

4.0 Daily staffing

Staffing levels each shift are managed via the Escalation Policy within the Divisions and with close support from Staffing Solutions who assist with the priority of allocating temporary staffing each shift. This is supported by the Matron or Head of Nursing who, using professional judgement, determine the level of staffing required according to the patient's needs.

A RAG (Red, Amber, Green) rating system has been developed within Staffing Solutions which gives a shift by shift Trust wide overview of all the wards to support this decision making and prioritisation.

5.0 Nursing Recruitment

There has been significant activity in relation to the Trust's nursing vacancy rate. This month there were successful interviews in Portugal where 15 Registered Nurses were offered jobs to work in Medicine, a number of whom have NMC Registration currently. The nurses recruited will join the Trust in the next few months.

The Nursing and Midwifery Recruitment and Retention Action Plan is in place and is progressed by the Nursing and Midwifery Recruitment Sub-group. This is monitored and reported to the

Nursing and Midwifery Workforce Planning Group which meets monthly and is chaired by the Director of Nursing and Midwifery.

6. Summary of exception report

Safe staffing levels are managed on a daily basis and a robust escalation process is in place. Ward Sisters and Matrons review inpatient ward areas on a shift by shift basis taking any required actions and escalating issues to the Heads of Nursing and Senior Nurse Team to ensure safe staffing is in place to meet patient's needs.

The focus on nurse recruitment continues to be a high priority in view of the registered nurse vacancies across the Trust.

7. Conclusion

This report provides an overview in relation to safer staffing requirements and delivery in the Trust. Divisions have been monitoring, reporting and taking action in relation to safer staffing on a shift by shift basis. Safer staffing is viewed alongside a wide range of other indicators in relation to patient safety and outcomes. This information will continue to be published on a monthly basis on the Trust intranet and via NHS Choices.

8. Recommendation

The Board is asked to note the contents of this report and the mitigating actions being taken to address any gaps in the nursing workforce at ward level.

**Appendix A: October 2014
Publication of Safer Staffing Data**

Fill rate indicator return Staffing: Nursing, midwifery and care staff

Org: RD1 Royal United Hospital Bath NHS Trust

Period: October_2014-15

Appendix A: October 2014 Publication of Safer Staffing Data

Please provide the URL to the page on your trust website where your staffing information is available

(Please can you ensure that the URL you attach to the spreadsheet is correct and links to the correct web page and include 'http://' in your URL)

<http://www.ruh.nhs.uk/saferstaffing>

Only complete sites your organisation is accountable for

Validation alerts (see control panel)

Hospital Site Details		Ward name	Main 2 Specialities on each ward		Day				Night				Day		Night	
					Registered midwives/nurses		Care Staff		Registered midwives/nurses		Care Staff		Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)
Site code *The Site code is automatically populated when a Site name is selected	Hospital Site name		Speciality 1	Speciality 2	Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours				
RD130	ROYAL UNITED HOSPITAL - RD130	ACE	430 - GERIATRIC MEDICINE	300 - GENERAL MEDICINE	2318.25	2014	1886	1599	1488	1150	1116	1312.5	86.9%	94.8%	77.3%	117.6%
RD130	ROYAL UNITED HOSPITAL - RD130	Acute Stroke Unit	430 - GERIATRIC MEDICINE	300 - GENERAL MEDICINE	1887.75	1734	2097.5	1686.5	1069.5	1035.25	1069.5	1078	91.9%	80.4%	96.8%	100.8%
RD130	ROYAL UNITED HOSPITAL - RD130	Cardiac Ward	320 - CARDIOLOGY	300 - GENERAL MEDICINE	2310	1940.25	1260	1144	1488	1477	744	888.5	84.0%	90.8%	99.3%	119.4%
RD130	ROYAL UNITED HOSPITAL - RD130	Charlotte Ward	502 - GYNAECOLOGY	100 - GENERAL SURGERY	1305	1267.25	870	1178.25	744	705.25	744	695	97.1%	135.4%	94.8%	93.4%
RD130	ROYAL UNITED HOSPITAL - RD130	Cheselden Ward	101 - UROLOGY	100 - GENERAL SURGERY	1027.5	1285.5	822	834	744	811.5	372	710	125.1%	101.5%	109.1%	190.9%
RD130	ROYAL UNITED HOSPITAL - RD130	Childrens Ward	420 - PAEDIATRICS	110 - TRAUMA & ORTHOPAEDICS	3344.15	2813.25	432.45	500.5	1782.5	1644.5	356.5	414	84.1%	115.7%	92.3%	116.1%
RD130	ROYAL UNITED HOSPITAL - RD130	Combe Ward	430 - GERIATRIC MEDICINE	300 - GENERAL MEDICINE	1627.5	1851	1627.5	2070.5	930	789.5	620	1021	113.7%	127.2%	84.9%	164.7%
RD130	ROYAL UNITED HOSPITAL - RD130	Coronary Care Unit	320 - CARDIOLOGY	300 - GENERAL MEDICINE	1359	1214.5	226.5	214.5	620	609.5	310	310.5	89.4%	94.7%	98.3%	100.2%
RD130	ROYAL UNITED HOSPITAL - RD130	Forrester Brown Ward	110 - TRAUMA & ORTHOPAEDICS	300 - GENERAL MEDICINE	4018.5	4055.25	3172.5	3358.25	2232	2131.5	1860	2335	100.9%	105.9%	95.5%	125.5%
RD130	ROYAL UNITED HOSPITAL - RD130	Haygarth Ward	300 - GENERAL MEDICINE	301 - GASTROENTEROLOGY	1656	1864	1035	1170.5	1116	1038.5	1116	1057	112.6%	113.1%	93.1%	94.7%
RD130	ROYAL UNITED HOSPITAL - RD130	Helena Ward	400 - NEUROLOGY	430 - GERIATRIC MEDICINE	1215	1333.5	1012.5	1412.5	1116	1063.5	744	915	109.8%	139.5%	95.3%	123.0%
RD130	ROYAL UNITED HOSPITAL - RD130	Intensive Therapy Unit	300 - GENERAL MEDICINE	100 - GENERAL SURGERY	4020	3549.5	402	699.75	3720	3088	372	444	88.3%	174.1%	83.0%	119.4%
RD130	ROYAL UNITED HOSPITAL - RD130	Medical Assessment Unit	300 - GENERAL MEDICINE		3616.8	3198	1356.3	1713	2976	2466.75	1116	1244.5	88.4%	126.3%	82.9%	111.5%
RD130	ROYAL UNITED HOSPITAL - RD130	Medical Short Stay	300 - GENERAL MEDICINE		1345.5	1163	897	871.5	620	735.5	310	366.75	86.4%	97.2%	118.6%	118.3%
RD130	ROYAL UNITED HOSPITAL - RD130	Midford Ward	430 - GERIATRIC MEDICINE	300 - GENERAL MEDICINE	1501.5	1666.25	1501.5	1922.5	1116	912.5	744	1011.5	111.0%	128.0%	81.8%	136.0%
RD130	ROYAL UNITED HOSPITAL - RD130	Neonatal Intensive Care Unit	420 - PAEDIATRICS		2114.75	2078.75	769	624.75	1782.5	1726	713	505	98.3%	81.2%	96.8%	70.8%
RD130	ROYAL UNITED HOSPITAL - RD130	Parry Ward	100 - GENERAL SURGERY	300 - GENERAL MEDICINE	1548	1898.5	1548	1379	744	947.5	1116	1128	122.6%	89.1%	127.4%	101.1%
RD130	ROYAL UNITED HOSPITAL - RD130	Phillip Yeoman Ward	110 - TRAUMA & ORTHOPAEDICS	100 - GENERAL SURGERY	1607.25	1368.75	906	1023.5	651	590.75	651	577	85.2%	113.0%	90.7%	88.6%
RD130	ROYAL UNITED HOSPITAL - RD130	Pulteney Ward	430 - GERIATRIC MEDICINE	300 - GENERAL MEDICINE	1596	2064.5	1596	1701.5	930	885.5	620	992	129.4%	106.6%	95.2%	160.0%
RD130	ROYAL UNITED HOSPITAL - RD130	Respiratory Ward	300 - GENERAL MEDICINE	340 - RESPIRATORY MEDICINE	2508	1674	1368	1677	1488	1337	744	1026	66.7%	122.6%	89.9%	137.9%
RD130	ROYAL UNITED HOSPITAL - RD130	Robin Smith Ward	100 - GENERAL SURGERY	120 - ENT	1883.25	1824	1464.75	1419.5	1116	1169	744	947.25	96.9%	96.9%	104.7%	127.3%
RD130	ROYAL UNITED HOSPITAL - RD130	Surgical Admissions Unit	100 - GENERAL SURGERY		2092.5	2012.5	1255	1452.75	1116	1268	1116	1075.5	96.2%	115.8%	113.6%	96.4%
RD130	ROYAL UNITED HOSPITAL - RD130	Surgical Short Stay Unit	100 - GENERAL SURGERY	110 - TRAUMA & ORTHOPAEDICS	1544	1414.5	864	1142.5	620	564.25	310	454.5	91.6%	132.2%	91.0%	146.6%
RD130	ROYAL UNITED HOSPITAL - RD130	Waterhouse Ward	100 - GENERAL SURGERY	300 - GENERAL MEDICINE	1883.25	1702.5	1464.75	1626.75	1116	1131	1116	1123.75	90.4%	111.1%	101.3%	100.7%
RD130	ROYAL UNITED HOSPITAL - RD130	William Budd Ward	370 - MEDICAL ONCOLOGY	303 - CLINICAL HAEMATOLOGY	1624.87	1625.5	928.5	917.5	620	611.25	620	622.5	100.0%	98.8%	98.6%	100.4%
RD130	ROYAL UNITED HOSPITAL - RD130	Mary Ward	501 - OBSTETRICS		4752	4879.25	1612	1123	4278	4084.5	1069.5	859	102.7%	69.7%	95.5%	80.3%
RD130	ROYAL UNITED HOSPITAL - RD130	Paulton Birthing Centre	501 - OBSTETRICS		465	465	465	465	325.5	325.5	325.5	325.5	100.0%	100.0%	100.0%	100.0%
RD130	ROYAL UNITED HOSPITAL - RD130	Chippenham Birthing Centre	501 - OBSTETRICS		930	930	465	465	651	651	325.5	325.5	100.0%	100.0%	100.0%	100.0%