

TRUST BOARD – June 2017
SAFER STAFFING – APRIL 2017 MONTHLY REVIEW

1. Introduction/ Background

This report provides a high level summary of staffing levels on all inpatient wards across the Trust. It presents a high level exception report in relation to the actual fill rate for registered and unregistered staff during the day and night and highlights where this falls below a 80% threshold.

Actual staff numbers compared to planned staffing numbers are collated for each inpatient area in line with the requirements of the Department of Health (DoH) Unify reporting process and the data extract is attached (Appendix 1). The LPT monthly safer staffing reports are publically available via the NHS Choices website and our Trust internet page.

Each directorate has in place a standard operating procedure for the escalation of safer staffing risks and any significant issues are notified to the Chief Nurse on a weekly basis.

This report presents additional indicators against each inpatient ward area to further inform and provide assurance in terms of adequate staffing levels and harm free care. Lead nurses are responsible for ensuring local oversight and triangulation of the nurse sensitive indicators in their area to ensure safer staffing is monitored and the associated risks managed at ward level.

2. Aim

The aim of this report is to provide the Trust Board with an analysis of April 2017 staffing data. Every six months, the Trust Board receives an 'Inpatient Staffing Establishment Review' report which provides an overview of the work being undertaken to maintain safer staffing standards across all our inpatient wards.

3. Recommendations

The Trust Board is recommended to receive assurance that processes are in place to monitor and ensure the inpatient safer staffing levels are maintained.

DISCUSSION

4. Trust Safer Staffing hotspots

The overall trust wide summary of planned versus actual hours by ward for Registered Nurses (RN) and Healthcare Support Workers (HCSW) in April 2017 is detailed below:

Trust wide average	DAY		NIGHT		Temp Workers%
	% of actual vs total planned shifts RN	% of actual vs total planned shifts care HCSW	% of actual vs total planned shifts RN	% of actual vs total planned shifts care HCSW	
<i>Feb17</i>	<i>100.3%</i>	<i>198.8%</i>	<i>102.5%</i>	<i>190.5%</i>	<i>32.6%</i>
<i>Mar17</i>	<i>99.7%</i>	<i>199.2%</i>	<i>102.5%</i>	<i>189.0%</i>	<i>34.8%</i>
April	103.8%	190.5%	102.6%	177.4%	28.0%

Temporary staffing usage reduced slightly in April, but remains above 20% across the majority of areas. Utilisation of HCSWs' remains high to support and cover vacancies, sickness and increased patient acuity.

The table below provides an overarching summary of the Trust 'hot spots' with regard to maintaining safer staffing over the last three months.

Summary of RN Trust Hotspots

	Ward	February 2017	March 2017	April 2017
	Bennion Centre - Kirby and Welford	X	X Kirby ward	
	St Luke's Hospital - Ward 1	X	X	X
	Hinckley & Bosworth East Ward	X		
	Coalville- Snibston Ward 1(nights)	X	X	X
AMH/LD	Agnes Unit(nights)	X	X	
	Mill Lodge – New Site	X	X	
	Bradgate Unit		X Beaumont ward	
	Stewart House Skye Wing			
	Short Breaks - The Gillivers	X	X	X
	Short Breaks - The Grange		X	X

4.1 Revised reporting arrangements

Planned versus actual staffing by ward for RN's and HCSW's across all directorates is presented in the tables below, these show additional information to reflect elements of patient care that could be directly affected by nursing levels.

Nursing Sensitive Indicators are those indicators that capture care or its outcomes most affected by nursing care. These indicators have been defined due to the desire for data to show linkages between nursing interventions, staffing levels, and positive patient outcomes. Detailed scrutiny and qualitative review of the indicators is undertaken at service level as part of staffing reviews and risk escalation and management.

This monthly report indicates if there has been an increase or decrease in the indicator position against the previous month.

A detailed review of the indicators is undertaken by Lead Nurses in directorates through their operational management and governance arrangements.

**Please note that a falls rates may indicate inadequate staffing however, it may also reflect a culture in which patients are being encouraged to mobilise and allowed to take reasonable risks.*

5. COMMUNITY HEALTH SERVICES (CHS)

5.1 Community Hospitals

Ward	Occupied beds	DAY		NIGHT		Temp Workers%	Falls	Avoidable PU	Medication errors	Complaints	FFT Result %
		% of actual vs total planned shifts RN	% of actual vs total planned shifts care HCSW	% of actual vs total planned shifts RN	% of actual vs total planned shifts care HCSW						
FP General	7	138.1%	81.5%	113.7%	-	17.2%	0↓	0	1↓	1↑	100%
MM Dalgleish	14	99.2%	135.5%	101.7%	150.0%	25.0%	9↑	0	0	0↓	100%
Rutland	13	97.5%	129.2%	98.3%	110.0%	17.6%	1↓	0	0↓	0	n/a
SL Ward 1	16	77.2%	180.2%	101.7%	100%	22.8%	3↓	0	0	0	83%↓
SL Ward 3	13	100%	102.5%	200.0%	103.3%	32.6%	1↓	0	1	0	83%↓
CV Ellistown 2	22	115.8%	161.7%	206.7%	96.7%	2.6%	8↑	0	1	0	n/a
CV Snibston 1	18	76.6%	167.9%	66.7%	133.3%	7.5%	10↑	0	2↑	0	n/a
HB East Ward	16	96.0%	190.0%	103.3%	98.3%	12.8%	8↑	0	2↑	2↑	92%↓
HB North Wd	15	100%	167.7%	100%	98.3%	11.6%	6↑	0	0	1↑	100%
LH Swithland	22	100%	198.3%	98.3%	200%	15.3%	5↓	0	0	0	100%
CB Beechwood	15	102.7%	202.4%	100%	100%	14.6%	4↑	0	1↓	0↓	100%
CB Clarendon	18	107.6%	206.6%	105.0%	110.0%	22.5%	3↓	0	1↑	0	100%
TOTALS	189						58↑	0	9↓	4↑	

The current 'hot spot' areas for Inpatient Community Hospitals are:

- St Lukes Ward 1 where the fill rate of 80% for RNs was not met due to the number of vacancies and sickness. The use of temporary staff continues to cover vacancies and sickness absence.
- Coalville- Snibston Ward 1 did not achieve the RN fill rate of 80%; the fill rate is reduced because of the uplift for RNs on night shift. On days the planned RN night cover position reflects the vacant posts following the changes to staffing, thus operationally the ward is classed as a hot spot.
- FP ward is covered by two RNs at night, thus there is no HCSW on shift, and there is a risk assessment in place to underpin this working arrangement.

Staff are moved between sites to balance need and manage risks; this ensures safer staffing levels are maintained by ensuring there is a minimum of two RNs per shift. Recruitment continues to vacant posts. Compared to last month the number of reported medication errors decreased by six.

The number of falls incidents reported has increased by three (55 in March 2017), this increase relates to individual patient factors for a number of high risk patients on Snibston ward and has not been identified as related to safer staffing. Complaints increased by two, however no specific themes have been identified.

5.2 Mental Health Services for Older People (MHSOP)

Ward	Occupied beds	DAY	DAY	NIGHT	NIGHT	Temp Workers%	Falls	Avoidable PU	Medication errors	Complaints	FFT Result %
		% of actual vs total planned shifts RN	% of actual vs total planned shifts care HCSW	% of actual vs total planned shifts RN	% of actual vs total planned shifts care HCSW						
BC Kirby	17	82.0%	218.0%	95.0%	106.7%	25.4%	3↓	0	1	0	n/a
BC Welford	18	96.4%	193.3%	100%	110.0%	19.0%	12↑	0	1↑	0	n/a
EC Coleman	16	119.2%	336.7%	86.7%	343.3%	43.1%	23↑	0	0	0	100%
EC Wakerley	14	103.3%	262.7%	93.3%	286.7%	42.5%	7↓	0	0↓	0	n/a
TOTALS	65						45↑	0	2	0	

Mental Health Services for Older People (MHSOP) did not have any hotspots in April 2017. MHSOP wards continue to utilise a higher than average percentage of temporary workers to meet patient needs. The increased usage of HCSW's supports increased dependency needs. Temporary worker utilisation has reduced in April although it remains above 30% on Coleman and Wakerley ward due to the level one observations during April 2017.

FFT results for Kirby ward last month identified some data mis-coding for Kirby issues, this inaccuracy has now been rectified. The service is currently exploring a multitude of methods of engagement with Service Users and Carers due to the challenge of getting FFT returns.

There has been an increase of in the number of reported falls incidents from 40 in March to 45 in April 2017. The increase has not been identified as being related to safer staffing levels and reflects the acuity and dependency of two individual patients on Coleman ward and Wakerley ward.

6. ADULT MENTAL HEALTH AND LEARNING DISABILITIES SERVICES (AMH/LD)

6.1 Acute Inpatient Wards

Ward	Occupied beds	DAY	DAY	NIGHT	NIGHT	Temp Workers%	Falls	Medication errors	Complaints	FFT Result %
		% of actual vs total planned shifts RN	% of actual vs total planned shifts care HCSW	% of actual vs total planned shifts RN	% of actual vs total planned shifts care HCSW					
Ashby	20	85.0%	170.0%	103.3%	246.7%	50.1%	0↓	1↓	0	n/a
Aston	17	93.8%	134.5%	100%	236.7%	35.4%	2	1↑	1	n/a
Beaumont	16	87.8%	170.8%	106.8%	280.0%	52.5%	1↑	0	1↑	n/a
Belvoir Unit	9	108.0%	238.1%	103.3%	237.5%	23.2%	0	0	0	100%
Bosworth	13	96.6%	138.7%	103.3%	200.0%	27.9%	2↑	1	0	n/a
Heather	17	104.2%	135.0%	100%	193.3%	35.7%	0↓	2↑	0	100%
Thornton	22	95.6%	130.0%	108.3%	260.0%	25.5%	1↓	2↑	0	n/a
Watermead	19	95.6%	204.2%	105.1%	296.7%	48.4%	1↓	1↑	0	100%
TOTALS	133						7↓	7↓	2	

The Bradgate Unit did not have any hot spots during April 2017. Sickness rates did decrease during April and some recruitment has taken place. Several of the new recruits are student nurses awaiting course end dates so will not be able to commence until the autumn.

The unit overall has above 25% utilisation of bank and agency staff which varies from ward to ward and enables safer staffing levels to be maintained. The high rates of HCSW's reflect the increased acuity needs of the patients. The unit is currently implementing an agreed remodelling of vacant nursing posts into other roles that support patient care and treatment or releases registered nurse time. Nurse sensitive indicators have highlighted a decrease in reported medication errors (from 13 to

seven) and falls incidents (11 to seven). The decrease in falls incidents reflects a change in the number patients with specific physical health needs.

6.2 Learning Disability Services

Ward	Occupied beds	DAY	DAY	NIGHT	NIGHT	Temp Workers%	Falls	Medication errors	Complaints	FFT Result %
		% of actual vs total planned shifts RN	% of actual vs total planned shifts care HCSW	% of actual vs total planned shifts RN	% of actual vs total planned shifts care HCSW					
3 Rubicon Cl.	4	121.7%	161.7%	43.3%	160.0%	10.4%	0↓	0	0	n/a
Agnes Unit	11	120.5%	392.4%	51.7%	353.3%	21.9%	0	0	0	n/a
Gillivers	2	71.7%	159.7%	36.7%	186.7%	24.4%	0	1↓	0	n/a
The Grange	4	-	195.1%	-	196.7%	22.0%	0↓	1↑	0	n/a
TOTALS	21						0↓	2↓	0	

Short Break Homes – The Gillivers did not achieve the fill rate of 80% for RNs and the Grange did not achieve the fill rate of 80% for RNs on night duty because RN bank shifts are only booked if the patients require a RN to be in the building at the same time as the patient. Patients’ needs are reviewed across the two bungalows and often RNs will be sourced from either bungalow to cover and meet patient needs instead of booking bank. HCSWs’ in short breaks are trained to administer medication and delegated health care tasks. In the Agnes Unit, the care is now consolidated on three pods due to Commissioning changes.

6.3 Low Secure Services – Herschel Prins

Ward	Occupied beds	DAY	DAY	NIGHT	NIGHT	Temp Workers%	Falls	Medication errors	Complaints	FFT Result %
		% of actual vs total planned shifts RN	% of actual vs total planned shifts care HCSW	% of actual vs total planned shifts RN	% of actual vs total planned shifts care HCSW					
HP Phoenix	11	107.5%	240.3%	133.3%	193.3%	35.5%	0	0	0	n/a

Phoenix Ward achieved the thresholds for safer staffing. Temporary workers have been used to cover vacancies, sickness and level one observations. The RN staffing was greater than 100% as there were extra staff available to support complex patient care. There were no patients who were discharged during April 2017, therefore no FFT returns were completed.

6.4 Rehabilitation Services

Ward	Occupied beds	DAY	DAY	NIGHT	NIGHT	Temp Workers%	Falls	Medication errors	Complaints	FFT Result %
		% of actual vs total planned shifts RN	% of actual vs total planned shifts care HCSW	% of actual vs total planned shifts RN	% of actual vs total planned shifts care HCSW					
SH Skye Wing	25	141.5%	123.4%	196.7%	110.0%	28.4%	2↓	1↓	0	100%
The Willows	35	143.3%	221.0%	124.2%	206.7%	26.1%	9↑	0	0	75%
Mill Lodge	12	81.7%	184.2%	56.7%	141.7%	32.9%	4↓	1↑	0	n/a
TOTALS	79						15↑	2↓	0	

Rehabilitation services achieved the thresholds for safer staffing. There remains an increased RN presence at The Willows and Stewart House (Skye Wing) as this includes a Band 6 RN who is currently undertaking extra clinical shifts across the wards and the data is capturing staff who are not routinely rostered for direct clinical care.

Temporary worker utilisation remains above 20% across the rehabilitation services and the HCSW's cover increased acuity and patient observation needs.

The increase in falls incidents from 11 in March 2017 to 15 in April 2017 has not been identified as being related to staffing issues.

7. FAMILIES, YOUNG PEOPLE AND CHILDREN'S SERVICES (FYPC)

Ward	Occupied beds	DAY		NIGHT		Temp Workers%	Falls	Medication errors	Complaints	FFT Result %
		% of actual vs total planned shifts RN	% of actual vs total planned shifts care HCSW	% of actual vs total planned shifts RN	% of actual vs total planned shifts care HCSW					
Langley	13	112.8%	223.5%	110.0%	156.7%	49.3%	1↑	2↑	0	100%↑
Ward 3	8	145.8%	244.0%	145.2%	202.4%	32.4%	2↑	1	0	50%↓
TOTALS	21						3↑	3↑	0	

There are no currently no 'hot spot' areas for inpatient services within Families, Young People and Children's Services. Ward 3. Both wards utilise an increased number of temporary workers to offset the current vacancy rate and increase in patient acuity.

Increased RN rates on Ward 3 reflect a patient requiring additional RN expertise in an acute setting. For Ward 3 there were only two FFT responses, one return had a detractor of 'neither would recommend or not recommend the service'. A local risk assessment around the use of the iPad to undertake FFT identified it would be best for the iPad to be secured in a mount. This has been ordered and instalment is planned. It is anticipated that FFT returns will increase when this piece of work has been completed.

The increases in reported incidents have not been identified as being related to safer staffing levels, two falls incidents on Ward 3 were staff trips. Medication errors increases related to storage, stock control and a near miss prescribing error, all resulted in no harm.

8. Recruitment

The current Trust wide position for inpatient wards as reported real time by the lead Nurses is detailed below. Trust wide there are approximately 74 RN and 40 HCSW vacancies across the inpatient wards.

Area	Vacant posts		Starters/Pipeline	
	RN	HCSW	RN	HCSW
FYPC	0	5	4	1
CHS	31.2	10.6	18.2	7
AMH/LD	42.5	24.6	8	12.8
Trust Total April 2017	73.7	40.2	30.2	20.8
<i>Trust Total March 2017</i>	<i>101.5</i>	<i>42.7</i>	<i>15.6</i>	<i>4</i>

Longer term plans to eradicate the risks and address staffing issues include:

- Rolling recruitment including open days and monthly interviews;
- Robust sickness management processes are in place;
- Plans to consider recruitment /retention premium schemes

- Continuous review of workforce including new roles to enhance skill mix and increase patient facing time.(Trainee assistant practitioners, nursing associates, activity coordinators)

9. **Conclusion**

The Trust continues to demonstrate compliance with the NQB expectations and associated deadlines. The safer staffing data is being regularly monitored and scrutinised for completeness and performance by the Chief Nurse and reported to NHS England via mandatory Unify2 national returns on a site-by-site basis.

Where there are variances in safer staffing standards, the lead nurses have oversight of the plans in place to mitigate risks for each ward to ensure safe care standards are maintained. Nurse sensitive indicators are reviewed through local management and governance reviews.

Annex 1 – Definition of Safer Staffing Measures

1. Temporary Workers

These workers are non-substantive and hold either a bank contract with the Trust or are resourced via a 3rd party recruitment agency.

2. Safer Staffing Levels

The Trust has uses the methodology below for measuring safer staffing level performance across our inpatient units. This is in line with the national UNIFY reporting

Methodology	Measure	Measure Source
Fill Rate Analysis (National Unify2 Return)	Actual hours worked divided by Planned hours (split by RN/ HCSW)	NHS TDA (Trust Development Authority)

Fill Rate Analysis (National Unify2 Return)

The Trust is required by the TDA to publish our inpatient staffing levels on the NHS Choices website via a national Unify2 return. This return requires us to identify the number of hours we plan to utilise with nursing staff and the number of hours actually worked during each month. This information allows us to calculate a 'fill rate' which can be benchmarked nationally against other trusts with inpatient provisions.

This methodology takes into account skill mix and bed occupancy which allow us to amend our 'Planned Staff Hours' based on the needs of the ward and is the most reflective measure of staffing on our inpatient wards.

'Planned Staff Hours' are calculated using the RCN guidance of 1:8 RN to patient ratio. 1 RN is equal to 7.5 hours of planned work.

The 'Fill Rate' is calculated by dividing the 'Planned Staff Hours' by the 'Actual Worked Staff Hours'. The fill rate will show in excess of 100% where shifts have utilised more staff than planned or where patient acuity was high and necessitated additional staff.

Staffing*position from Lead Nurses	Vacant posts		Vacant posts		Starters/Waiting to start WTE		Starters/Waiting to start WTE	
	March 2017		April 2017		March 2017		April 2017	
	RN	HCSW	RN	HCSW	RN	HCSW		
Community Hospitals	33.5	12.7	22	8	1	1	8	7
MHSOP	21	2.6	9.2	2.6	8.6	0	10.2	0
yn FYPC	1	5	0	5	6	3	4	1
o AMH/LD	46	22.4	42.5	24.6	0	0	8*	4.8
t Trust Total	101.5	42.7	73.7	40.2	15.6	4	30.2	12.8

include 6 students who will qualify in September

April 2017

Fill Rate Analysis (National Unify2 Return)				Skill Mix Met	Funded Staffing Levels Met by Shift	% Temporary Workers
Actual Hours Worked divided by Planned Hours						
Day (Early & Late Shift)		Night				
Average % fill rate registered nurses	Average % fill rate care staff	Average % fill rate registered nurses	Average % fill rate care staff	(based on 1:8 plus 60:40 split)	Based on full bed occupancy	

Ward Group	Ward name	Average no. of Beds on Ward	Average no. of Occupied Beds	>= 80%	>= 80%	>= 80%	>= 80%	>= 80%	>= 80%	<20%
AMH Bradgate	Ashby	21	20	85.0%	170.0%	103.3%	246.7%	65.56%	96.7%	50.1%
AMH Bradgate	Aston	19	17	93.8%	134.5%	100%	236.7%	85.56%	95.6%	35.4%
AMH Bradgate	Beaumont	18	16	87.8%	170.8%	106.8%	280.0%	70.00%	98.9%	52.5%
AMH Bradgate	Belvoir Unit	10	9	108.0%	238.1%	103.3%	237.5%	95.56%	98.9%	23.2%
AMH Bradgate	Bosworth	13	13	96.6%	138.7%	103.3%	200.0%	86.67%	98.9%	27.9%
AMH Bradgate	Heather	18	17	104.2%	135.0%	100%	193.3%	86.67%	96.7%	35.7%
AMH Bradgate	Thornton	22	22	95.6%	130.0%	108.3%	260.0%	87.78%	93.3%	25.5%
AMH Bradgate	Watermead	20	19	95.6%	204.2%	105.1%	296.7%	90.00%	98.9%	48.4%
AMH Other	HP Griffin			-		-	-	-	-	-
AMH Other	HP Phoenix	11	11	107.5%	240.3%	133.3%	193.3%	94.44%	100%	35.5%
AMH Other	SH Skye Wing	30	25	141.5%	123.4%	196.7%	110.0%	88.89%	87.8%	28.4%
AMH Other	Willows Unit	37	35	143.3%	221.0%	124.2%	206.7%	98.89%	100%	26.1%
AMH Other	Mill Lodge (New Site)	14	12	81.7%	184.2%	56.7%	141.7%	43.33%	54.4%	32.9%
CHS City	BC Kirby	22	17	82.0%	218.0%	95.0%	106.7%	64.44%	97.8%	25.4%
CHS City	BC Welford	24	18	96.4%	193.3%	100%	110.0%	84.44%	93.3%	19.0%
CHS City	CB Beechwood	16	15	102.7%	202.4%	100%	100%	86.67%	91.1%	14.6%
CHS City	CB Clarendon	20	18	107.6%	206.6%	105.0%	110.0%	91.11%	93.3%	22.5%
CHS City	EC Coleman	18	16	119.2%	336.7%	86.7%	343.3%	85.56%	97.8%	43.1%
CHS City	EC Wakerley	16	14	103.3%	262.7%	93.3%	286.7%	92.22%	98.9%	42.5%
CHS East	FP General	8	7	138.1%	81.5%	113.7%	-	70.00%	92.2%	17.2%
CHS East	MM Dalgleish	16	14	99.2%	135.5%	101.7%	150.0%	97.78%	98.9%	25.0%
CHS East	Rutland	16	13	97.5%	129.2%	98.3%	110.0%	96.67%	43.3%	17.6%
CHS East	SL Ward 1 Stroke	17	16	77.2%	180.2%	101.7%	100%	56.67%	32.2%	22.8%
CHS East	SL Ward 3	14	13	100%	102.5%	200.0%	103.3%	100%	100%	32.6%
CHS West	CV Ellistown 2	24	22	115.8%	161.7%	206.7%	96.7%	97.78%	77.8%	2.6%
CHS West	CV Snibston 1	19	18	76.6%	167.9%	66.7%	133.3%	21.11%	24.4%	7.5%
CHS West	HB East Ward	18	16	96.0%	190.0%	103.3%	98.3%	80.00%	75.6%	12.8%
CHS West	HB North Ward	17	15	100%	167.7%	100%	98.3%	98.89%	96.7%	11.6%
CHS West	Lough Swithland	24	22	100%	198.3%	98.3%	200%	97.78%	100%	15.3%
FYPC	Langley	14	13	112.8%	223.5%	110.0%	156.7%	91.11%	100%	49.3%
FYPC	CV Ward 3 (CAMHS)	10	8	145.8%	244.0%	145.2%	202.4%	93.33%	92.2%	32.4%
LD	3 Rubicon Close	4	4	121.7%	161.7%	43.3%	160.0%	80.00%	87.8%	10.4%
LD	Agnes Unit	12	11	120.5%	392.4%	51.7%	353.3%	65.56%	93.3%	21.9%
LD	The Gillivers	5	2	71.7%	159.7%	36.7%	186.7%	56.67%	57.8%	24.4%
LD	The Grange	5	4	-	195.1%	-	196.7%	100%	100%	22.0%
Trust Total				103.8%	190.5%	102.6%	177.4%	82.39%	87.2%	28.0%