

TRUST BOARD REPORT – September 2017

SAFER STAFFING – August 2017 MONTHLY REVIEW

1. Introduction/ Background

This report provides a 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 August 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 August 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	
June 17		99.3%	187.8%	101.3%	172.9%	29.9%
July 17		99.6%	190.7%	101.0%	177.5%	30.7%
Aug 17		99.6%	186.7%	101.2%	173.0%	31.9%

Temporary staffing usage 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	June 2017	July 2017	August 2017
	St Luke's Hospital - Ward 1	X	X	
	Hinckley & Bosworth East Ward	X	X	
	Coalville- Snibston Ward 1(nights)	X	X	
	Short Breaks - The Gillivers(days and nights)	X	X	X
	Short Breaks – Rubicon Close(nights)		X	X
	Agnes Unit(nights)		X	X
	Mill Lodge(day and nights)		X	X
	Ashby(Bradgate)			X
	Beaumont(Bradgate)			X
	Welford(MHSOP)			X

Planned versus actual staffing by ward for RN's and HCSW's across all directorates is presented in the tables below, these show additional Nursing Sensitive Indicators (NSI's) that capture care or its outcomes most affected by nursing care.

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.

5. COMMUNITY HEALTH SERVICES (CHS)

5.1 Community Hospitals

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						
FP General	8	143.5%	72.7%	113.2%	-	22.3%	2↓	0	0	0	100%
MM Dalgleish	14	99.2%	118.7%	100.0%	109.7%	11.0%	4	0	0	0	100%
Rutland	12	98.4%	106.7%	100.0%	109.7%	8.9%	7↑	0	0	0	100%
SL Ward 1	16	86.8%	178.0%	95.2%	88.7%	25.4%	4	0	1	0	100%
SL Ward 3	11	100.8%	100.8%	200.0%	96.8%	28.7%	2↓	0	0	0	92%
CV Ellistown 2	22	112.9%	156.5%	200.0%	93.5%	7.7%	4	0	0	0	100%
CV Snibston 1	18	103.5%	123.7%	66.7%	103.2%	3.7%	15↑	0	1	0	100%
HB East Ward	17	81.3%	183.1%	100.0%	130.6%	16.2%	7↓	0	2↑	0	100%
HB North Wd	17	100.0%	166.7%	96.8%	93.5%	16.2%	6	0	0	0	100%
LH Swithland	19	100.0%	189.5%	101.6%	193.5%	14.3%	5↓	0	0↓	0	100%
CB Beechwood	16	90.9%	209.9%	100.0%	137.1%	41.3%	3↓	0	1↑	0	100%
CB Clarendon	17	95.1%	212.9%	98.4%	100.0%	30.5%	1↓	0	0	0	100%
TOTALS							60↓	0	5↓	0↑	

There have been no staffing hotspots identified in community hospitals during August 2017. St Lukes, Hinckley & Bosworth East ward and Coalville Snibston ward 1 have met safer staffing thresholds of above 80%.

The number of falls incidents reported has decreased from 77 in July 2017 to 60 in August 2017. The highest decrease has been on HB east where there has been a reduction from 13 falls last month to seven in August 2017; this reflects changes to individual patient factors. Medication errors have also decreased from by one this month.

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. Since the Sustainability and Transformation plan engagement (STP) events earlier this year, no job applications have been received for the vacancies on FP ward. The ward is facing specific challenges with recruitment of staff and permanent RN cover with a predicted 53% of staff being available for work in September 2017 due to further vacancies.

Since June, there has been a profile of increasing vacancies and decreasing recruitment, and the directorate is reviewing its recruitment plan to consider any additional actions to address this pattern. Safer staffing is maintained through cross site cover and significant use of bank and agency. RN vacancies, maternity leave, sickness and other factors have resulted in increased numbers of the substantive RN workforce being unavailable across the community hospitals.

Year to date spend on bank and agency staff shows a significant variance from plan and there are increasing concerns in relation to financially sustaining this position and the potential impact on staff morale and maintenance of consistent services across Community Hospitals. The executive team and Strategic Workforce Group are considering a range of options to reduce the use of agency across the Trust and directorate.

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	18	92.9%	205.0%	95.2%	129.0%	25.9%	9↑	0	0	0	n/a
BC Welford	18	73.5%	222.8%	95.2%	116.1%	29.6%	12↑	0	0	0	100%
EC Coleman	18	99.2%	255.3%	95.2%	164.5%	29.1%	21↓	0	0	0	100%
EC Wakerley	14	91.9%	278.3%	82.3%	311.3%	56.1%	8↓	0	0	0	n/a
TOTALS							50	0	0	0↓	

Mental Health Services for Older People (MHSOP) had one hotspot in this month on Welford ward this has been as a result of increased RN sickness including long term sickness of one band 6 member of staff.

Wakerley Ward have used a higher level of temporary staff as a result of having and increased number of Level 1 observations (On average 4 patients across the month).

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.

Reported falls incidents have not increased this month and reported medication errors have decreased from four in July 2017 to zero this month. There has also been a reduction in complaints from three in July 2017 to zero in August. Review has not identified any themes or trends that relate to staffing levels.

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	75.8%	170.2%	98.4%	254.8%	48.6%	4↑	0↓	0	100%
Aston	23	88.2%	170.2%	101.6%	300.0%	41.2%	0↓	0↓	1	n/a
Beaumont	19	78.5%	151.6%	98.4%	196.8%	52.0%	1	0↓	2↑	100%
Belvoir Unit	10	97.6%	235.7%	167.7%	246.8%	35.8%	0	0↑	0	100%
Bosworth	20	100.0%	205.7%	90.3%	322.6%	38.3%	0	0	0	71%
Heather	18	85.2%	138.2%	98.4%	122.6%	42.5%	0↓	3↑	1↓	n/a
Thornton	24	95.7%	159.7%	101.6%	280.6%	38.9%	3↓	2	2↑	n/a
Watermead	20	95.7%	190.3%	90.3%	306.5%	43.2%	4↑	1↑	0	100%
TOTALS							12↓	6↓	6	

The Bradgate Unit had two hotspot areas in August 2017. Ashby and Beaumont ward did not meet the 80% cover. On Beaumont Ward this was due to sickness and leave and ensuring adequate cover at night. Agency and Bank RN support was instigated as required.

Ashby Ward are piloting having the third RN on the early shift working across a 9 to 5 time span to take a lead in the patient daily reviews/ ward rounds and follow up actions; this has had an impact on availability of a third nurse on late shifts.

The unit overall has a high use of bank staff to support vacancy cover and patient acuity which varies from ward to ward and enables safer staffing levels to be maintained. Temporary worker utilisation is above 35% across all of the wards

There has been one avoidable category 3 pressure ulcer reported on Bosworth Ward at the Bradgate Unit and review identified issues related to assessment gaps and ensuring equipment access. Training sessions have been organised for staff to be updated on standards and expectations of senior staff in relation to care monitoring.

Reported medication errors decreased from eight to six and reported falls decreased from 18 to 12. There has been an increase in complaints from three in July 2017 to six in August 2017, no specific themes have been identified and there is no correlation with safer staffing levels.

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	100.0%	185.5%	71.0%	138.7%	25.6%	1	0	0	n/a
Agnes Unit	12	129.9%	381.7%	72.6%	391.9%	38.8%	1↓	1	1↑	100%
Gillivers	2	79.0%	150.0%	38.7%	171.0%	12.6%	0↓	1↑	0	n/a
The Grange	4	-	179.4%	-	193.9%	29.1%	0↓	2↑	0	n/a
TOTALS	22						2↓	4↑	1	

Short Break Homes use a high proportion of HCSWs' who are trained to administer medication and carryout delegated health care tasks, this means the homes do not require a RN at all times and this is reflected in the % fill for day shifts at The Gillivers and night shifts across all homes. The Gillivers also provides RN cover for The Grange as the homes are situated next to each other.

There has been a reduction if falls from six in July 2017 to two in August 2017. Reported medication errors have increased by one in August 2017 and this was related to systems and process issues. Review has not identified any correlation with safer staffing levels

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	105.6%	270.5%	100.0%	204.8%	47.5%	1↑	1	0	n/a

Phoenix Ward achieved the thresholds for safer staffing. During August there remained high levels of temporary workers to cover vacancies, sickness and a high number of level one and 2 to 1 patient observations. The RN staffing remains greater than 100% due to the requirement for extra staff to support complex patient care.

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	28	130.6%	123.9%	200.0%	106.5%	26.8%	6↑	1	0	n/a
The Willows	36	131.5%	219.4%	125.0%	202.4%	28.6%	3↓	1	1↑	100%
Mill Lodge	12	70.2%	172.6%	50.0%	153.2%	30.7%	3↓	0	0	n/a
TOTALS	76						12↓	2	1↑	

Mill lodge temporary staffing levels remain high due to sickness, vacancies and leave. Where a second RN cannot be sourced for day or night shifts' using bank or agency, the unit adopts a revised staffing model which includes sharing of the second registered nurse at Stewart House between Mill Lodge and Stewart House. Where this occurs additional HCSW's are also used.

Rehabilitation services achieved the thresholds for safer staffing. The Willows information includes an additional Band 6 RN and the data is capturing staff who are not routinely rostered for direct clinical care.

Temporary worker utilisation remains above 25% across the rehabilitation services and the HCSW's cover increased acuity and patient observation needs.

There has been a decrease in reported falls from 14 in July 2017 to 12 this month. Reported medication error numbers have not changed.

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

Ward	Occupied beds	% 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	Temp Workers %	Falls	Medication errors	Complaints	FFT Result %
Langley	14	112.1%	170.2%	109.7%	109.7%	47.1%	0	2	0	100%
Ward 3	9	117.0%	211.2%	120.0%	184.0%	34.7%	0	0	0	71%
TOTALS	21						0	2	0	

There are no currently no 'hot spot' areas for inpatient services within Families, Young People and Children's Services. FFT results on Ward 3 reflect the responses from seven returns out of which one response was unlikely to recommend.

Both wards continue to utilise an increased number of temporary workers to offset the current vacancy and sickness rates as well as the increase in patient acuity.

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 112 RN vacancies and 50 HCSW vacancies across the inpatient wards. RN vacancies have increased in August 2017 and recruitment of registered staff continues to be a challenge.

Area	Vacant posts		Starters/Pipeline	
	RN	HCSW	RN	HCSW
FYPC	3	5	5	6
CHS	45.4	21.5	12	3
AMH/LD	62	23.7	5	3
Trust Total August 2017	112	50	22	12
Trust Total July 2017	97.7	51	34	13.8

Longer term plans to eradicate the risks and address staffing issues remain in place, these include, rolling recruitment and retention plans, absence management and continuous review of workforce including new roles to enhance skill mix and increase patient facing time.

The Trust is participating in three NHS Improvement development programmes to support safer staffing sustainability:

- i. Care Contact Hours Per Day (CPPHD) pilot information collection to enable more effective benchmarking and review.
- ii. The E-rostering 90 day Rapid Improvement Programme, which will provide a structure for learning and action in how we use our e-rostering system to improve care delivery with a better use of existing resources.
- iii. The Mental Health Observations and Engagement improvement programme to deliver an improved experience for the most vulnerable hospital in-patients

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.

August 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						
Ward Group	Ward name	Average no. of Beds on Ward	Average no. of Occupied Beds	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	
				>= 80%	>= 80%	>= 80%	>= 80%	>= 80%	>= 80%	<20%
AMH Bradgate	Ashby	21	20	75.8%	170.2%	98.4%	254.8%	52.69%	96.8%	48.6%
AMH Bradgate	Aston	23	23	88.2%	170.2%	101.6%	300.0%	74.19%	95.7%	41.2%
AMH Bradgate	Beaumont	19	19	78.5%	151.6%	98.4%	196.8%	58.06%	94.6%	52.0%
AMH Bradgate	Belvoir Unit	10	10	97.6%	235.7%	167.7%	246.8%	95.70%	100.0%	35.8%
AMH Bradgate	Bosworth	20	20	100.0%	205.7%	90.3%	322.6%	77.42%	100.0%	38.3%
AMH Bradgate	Heather	18	18	85.2%	138.2%	98.4%	122.6%	67.74%	94.6%	42.5%
AMH Bradgate	Thornton	24	24	95.7%	159.7%	101.6%	280.6%	77.42%	95.7%	38.9%
AMH Bradgate	Watermead	20	20	95.7%	190.3%	90.3%	306.5%	78.49%	98.9%	43.2%
AMH Other	HP Griffin	-	-	-	-	-	-	-	-	
AMH Other	HP Phoenix	11	11	105.6%	270.5%	100.0%	204.8%	97.85%	100.0%	47.5%
AMH Other	SH Skye Wing	30	28	130.6%	123.9%	200.0%	106.5%	89.25%	88.2%	26.8%
AMH Other	Willows Unit	38	36	131.5%	219.4%	125.0%	202.4%	100%	100.0%	28.6%
AMH Other	Mill Lodge (New Site)	14	12	70.2%	172.6%	50.0%	153.2%	30.11%	39.8%	30.7%
CHS City	BC Kirby	19	18	92.9%	205.0%	95.2%	129.0%	61.29%	95.7%	25.9%
CHS City	BC Welford	19	18	73.5%	222.8%	95.2%	116.1%	58.06%	96.8%	29.6%
CHS City	CB Beechwood	17	16	90.9%	209.9%	100.0%	137.1%	73.12%	88.2%	41.3%
CHS City	CB Clarendon	20	17	95.1%	212.9%	98.4%	100.0%	81.72%	84.9%	30.5%
CHS City	EC Coleman	19	18	99.2%	255.3%	95.2%	164.5%	92.47%	98.9%	29.1%
CHS City	EC Wakerley	15	14	91.9%	278.3%	82.3%	311.3%	78.49%	97.8%	56.1%
CHS East	FP General	9	8	143.5%	72.7%	113.2%	-	59.14%	81.7%	22.3%
CHS East	MM Dalglish	16	14	99.2%	118.7%	100.0%	109.7%	92.47%	90.3%	11.0%
CHS East	Rutland	14	12	98.4%	106.7%	100.0%	109.7%	87.10%	38.7%	8.9%
CHS East	SL Ward 1 Stroke	18	16	86.8%	178.0%	95.2%	88.7%	69.89%	26.9%	25.4%
CHS East	SL Ward 3	14	11	100.8%	100.8%	200.0%	96.8%	96.77%	97.8%	28.7%
CHS West	CV Ellistown 2	24	22	112.9%	156.5%	200.0%	93.5%	95.70%	73.1%	7.7%
CHS West	CV Snibston 1	19	18	103.5%	123.7%	66.7%	103.2%	47.31%	7.5%	3.7%
CHS West	HB East Ward	18	17	81.3%	183.1%	100.0%	130.6%	61.29%	48.4%	16.2%
CHS West	HB North Ward	18	17	100.0%	166.7%	96.8%	93.5%	95.70%	91.4%	16.2%
CHS West	Lough Swithland	21	19	100.0%	189.5%	101.6%	193.5%	100%	100.0%	14.3%
FYPC	Langley	15	14	112.1%	170.2%	109.7%	109.7%	97.85%	96.8%	47.1%
FYPC	CV Ward 3 (CAMHS)	10	9	117.0%	211.2%	120.0%	184.0%	96.77%	93.5%	34.7%
LD	3 Rubicon Close	4	4	100.0%	185.5%	71.0%	138.7%	87.10%	90.3%	25.6%
LD	Agnes Unit	12	12	129.9%	381.7%	72.6%	391.9%	79.57%	82.8%	38.8%
LD	The Gillivers	5	2	79.0%	150.0%	38.7%	171.0%	65.59%	51.6%	12.6%
LD	The Grange	5	4	-	179.4%	-	193.9%	95.70%	100.0%	29.1%
Trust Total				99.6%	186.7%	101.2%	173.0%	78.59%	83.5%	31.9%