TRUST BOARD REPORT – January 25th 2017
SAFER STAFFING – December 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 an 80% threshold.

Actual staff numbers compared to planned staff 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 (NSI's) 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 December 2017 staffing data. The Trust Board receives a six monthly '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 December 2017 is detailed below:

Trust wide average		DAY		NIGHT		
		% 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%
Oct 17		93.9%	196.9%	99.4%	182.2%	30.2%
Nov 17		98.1%	199.3%	100.2%	191.0%	30.7%
Dec 17		**98.9%**	**196.1%**	**99.1%**	**185.0%**	**30.2%**

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 planned safer staffing over the last three months.

Summary of RN Trust Hotspots

Planned staffing across ward areas	October 2017	November 2017	December 2017
Hinckley & Bosworth East Ward			
Coalville- Snibston Ward 1(nights)	X	X	X
Short Breaks - The Gillivers(nights)	X	X	X
Short Breaks – Rubicon Close(nights)		X	X
Mill Lodge (nights)		X	X
Ashby (Bradgate)	X		
Beaumont (Bradgate)			X
EC Welford(MHSOP)	X	X	X
EC Coleman (MHSOP	X	X	X
EC Wakerley (MHSOP	X	X	X
BC Kirby(MHSOP)	X	X	X

Feilding Palmer, Clarendon, Beechwood and St Luke's wards remain hotspots for vacancies and recruitment, with above 20% utilisation of temporary staff to maintain and support safer staffing.

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)

Challenges with recruitment of staff and permanent RN cover remain. RN vacancies, maternity leave and sickness continue to impact on the availability of the substantive RN workforce across the directorate.

The directorate regularly reviews its recruitment plan and continues to look at a range of options to reduce the use of agency across the Trust and directorate including implementation of recruitment and retention premiums for the hot spot sites/wards.

Substantive staff are moved daily across all wards as required to maintain safer staffing. Temporary worker ratios are above 25 % on Clarendon, Beechwood, SL Ward 3 and FP ward which correlates with the higher vacancies.

5.1 Community Hospitals

Ward	Occupied beds	DAY % of actual vs total planned shifts RN	DAY % of actual vs total planned shifts care HCSW	NIGHT % of actual vs total planned shifts RN	NIGHT % of actual vs total planned shifts care HCSW	Temp Workers%	Medication errors	Falls	Avoidable PU	Complaints	FFT Result %
FP General	9	141.4%	95.5%	101.7%	-	23.5%	2↑	2↑	0	1↑	n\a
MM Dalgleish	16	97.6%	117.7%	93.5%	96.8%	16.6%	0↓	1↓	0	0	n\a
Rutland	13	98.4%	133.1%	100%	100%	6.8%	0	3↓	0	0	n\a
SL Ward 1	15	90.9%	187.3%	100%	100%	11.8%	0↓	2↑	0	0	n\a
SL Ward 3	12	97.6%	98.4%	196.8%	100%	32.5%	1↑	8↑	0	0	100%
CV Ellistown 2	21	111.4%	165.9%	193.5%	95.2%	8.3%	1↓	5↓	0	0	n\a
CV Snibston 1	22	95.2%	202.4%	66.7%	111.3%	5.7%	1↑	7↑	0	0	n\a
HB East Ward	16	84.0%	170.2%	100%	103.2%	6.2%	0↓	4↑	0	0	100%
HB North Ward	17	106.5%	171.8%	100%	98.4%	8.1%	0	5↑	0	0	100%
Lbro Swithland	19	100.8%	196.8%	100%	196.8%	12.0%	0↓	8	0	0	100%
CB Beechwood	17	102.8%	207.3%	98.4%	95.2%	28.7%	1	2↓	0	0	100%
CB Clarendon	17	91.2%	217.7%	100%	100%	23.9%	0↓	0↓	0	0	n\a
TOTALS							6↓	47↑	0	1↑	

Coalville Snibston ward, met the planned RN level at night 66.7% of the time (see table 5.1), the ward planned staffing is to have 3 registered nurses at night, however due to sickness, vacancies and cover across wards, at times the ward runs with two RNs which meets safer staffing parameters.

Medication errors have decreased this month from 18 in November 2017 to six in December 2017. The number of falls incidents reported has increased by one since November 2017. The number of falls reflects individual patient factors and falls risk assessments and care plans are routinely in place. These include interventions to try to reduce the risk of falls and the risk of harm from falls.

There has been one complaint during December 2017, compared with zero in November 2017.

5.2 Mental Health Services for Older People (MHSOP)

All wards in Mental Health Services for Older People (MHSOP) were hotspots in December 2017 and did not achieve the planned registered levels on days.

Ward	Occupied beds	DAY % of actual vs total planned shifts RN	DAY % of actual vs total planned shifts care HCSW	NIGHT % of actual vs total planned shifts RN	NIGHT % of actual vs total planned shifts care HCSW	Temp Workers%	Medication errors	Falls	Avoidable PU	Complaints	FFT Result %
BC Kirby	23	68.3%	227.9%	88.7%	122.6%	34.6%	0↓	4↑	0	0	n\a
BC Welford	21	72.1%	248.4%	90.3%	140.3%	21.6%	1↑	10↓	0	0	n\a
*EC Coleman	20	62.0%	334.7%	80.6%	280.6%	41.6%	0	7↓	0	0	100%
Gwendolen	20	94.2%	340.4%	76.9%	319.2%	43.5%					
EC Wakerley	20	60.2%	344.8%	80.6%	317.7%	45.8%	0↓	7	0	0	n\a
TOTALS							1↓	21↓	0	0	

*Coleman Ward patients and staff moved to Gwendolen Ward on the 19th December. Gwendolen Ward has been refurbished. This accounts for the two areas showing staffing information during December.

Mental Health Services for Older People (MHSOP) wards temporary staffing utilisation ranges from 21% to 45%.

The increase in long term sickness has resulted in the need to ensure cover across all wards with the appropriate skill mix and expertise. Whilst the planned levels were not achieved, wards had a minimum of two registered nurses on each shift and were working within the parameters of safer staffing.

The increased usage of HCSW's supports increased dependency needs and high number of patients requiring level one observation. This is specifically focussed on the wards at the Evington centre for patients with severe impairment where falls and violence and aggression are the predominant risk. Further analysis of acuity is to review the current staffing profile / skill mix against acuity is underway.

Reported falls incidents have decreased from 31 in November 2017 to 21 in December 2017 this reflects changes to individual patient factors .Reported medication errors have decreased by two to one in December 2017. There have been no complaints during, December 2017 compared with one in November 2017.

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

6.1   Acute Inpatient Wards

Ward	Occupied beds	DAY % of actual vs total planned shifts RN	DAY % of actual vs total planned shifts care HCSW	NIGHT % of actual vs total planned shifts RN	NIGHT % of actual vs total planned shifts care HCSW	Temp Workers%	Medication errors	Falls	Complaints	FFT Result %
Ashby	19	85.8%	144.4%	79.0%	193.5%	46.0%	0	1↓	0	n/a
Aston	19	85.5%	133.9%	80.6%	264.5%	36.8%	1	1	0	n/a
Beaumont	20	79.6%	196.0%	88.7%	354.8%	56.7%	2↓	0	0↓	100%
Belvoir Unit	10	112.9%	252.6%	145.2%	367.7%	39.4%	1↑	0	0↓	n/a
Bosworth	18	99.5%	166.1%	108.1%	335.5%	31.9%	0	0↓	0	n/a
Heather	18	83.9%	133.9%	91.9%	174.2%	44.4%	1	0↓	1↑	n/a
Thornton	21	98.4%	191.1%	95.2%	271.0%	33.7%	1↑	3↑	0	n/a
Watermead	19	93.5%	183.1%	79.0%	319.4%	44.4%	0↓	0	0	n/a
Griffin F PICU	6	141.5%	217.6%	135.0%	209.7%	47.7%	0	0	0	n/a
TOTALS							**6↓**	**5↓**	**1↓**	

The Bradgate unit overall has a high use of regular bank staff to support vacancy cover and patient acuity which varies from ward to ward. Temporary worker utilisation is above 30% across all wards.

Block booking of bank and agency RN's is undertaken to manage the impact of the increase in RN vacancies across the acute inpatient wards. This enables safer staffing levels to be maintained or risk assessed within a safe parameter and improves consistency of patient care.

The Bradgate Unit had one hotspot in December 2017 on Beaumont Ward .Temporary worker utilisation remains above 50% on Beaumont due to an increase in vacancies and sickness in RN's.

Reported medication errors decreased from five in November 2017 to six in December 2017 and reported falls decreased by one to five. No specific themes have been identified during the monthly review and there is no correlation of incidents with safer staffing levels.

There has been a decrease in complaints from two in November 2017 to one in December 2017.

6.2 Learning Disability Services

Ward	Occupied beds	DAY % of actual vs total planned shifts RN	DAY % of actual vs total planned shifts care HCSW	NIGHT % of actual vs total planned shifts RN	NIGHT % of actual vs total planned shifts care HCSW	Temp Workers%	Medication errors	Falls	Complaints	FFT Result %
3 Rubicon Close	3	106.5%	148.4%	58.1%	148.4%	15.8%	0	0	0	n/a
Agnes Unit	10	117.2%	331.1%	75.8%	362.5%	29.9%	0	0	0	n/a
The Gillivers	3	83.9%	145.2%	45.2%	135.5%	11.6%	0	1↑	0	n/a
The Grange	4	-	160.0%	-	210.7%	12.3%	1↑	2↑	0	n/a
TOTALS							1	3↑	0	

Short Break Homes use a high proportion of HCSWs' who are trained to administer medication and carry out delegated health care tasks, this means the homes do not require a RN at all times. The Gillivers and The Grange support each other with RN cover as the homes are situated next to each other. Reported numbers of medication errors have not changed. Reported numbers of falls have increased by two in December 2017 and this related to patient acuity. No specific themes have been identified during the monthly review and there is no correlation of incidents with safer staffing levels.

6.3 Low Secure Services – Herschel Prins

Ward	Occupied beds	DAY % of actual vs total planned shifts RN	DAY % of actual vs total planned shifts care HCSW	NIGHT % of actual vs total planned shifts RN	NIGHT % of actual vs total planned shifts care HCSW	Temp Workers%	Falls	Medication errors	Complaints	FFT Result %
HP Phoenix	11	89.5%	296.0%	112.9%	246.8%	57.8%	0	0	0	n/a

Phoenix Ward achieved the thresholds for safer staffing during December 2017, high levels of temporary workers continue to be utilised to cover vacancies, sickness and a high number of level one and two patient observations.

6.4 Rehabilitation Services

Ward	Occupied beds	DAY % of actual vs total planned shifts RN	DAY % of actual vs total planned shifts care HCSW	NIGHT % of actual vs total planned shifts RN	NIGHT % of actual vs total planned shifts care HCSW	Temp Workers%	Medication errors	Falls	Complaints	FFT Result %
SH Skye Wing	24	109.7%	130.4%	190.3%	100%	34.0%	0↓	3	0	100%
Willows Unit	34	123.4%	218.8%	125.8%	225.4%	32.5%	0	1↑	0	100%
Mill Lodge	13	96.0%	252.4%	50.0%	148.4%	37.5%	1	3↓	0	100%
TOTALS							1↓	7↓	0	

Temporary worker utilisation is above 25% across the rehabilitation services.

Mill lodge temporary staffing levels are influenced by sickness, vacancies and leave. The service adopts a staffing model based on a risk assessment of patient need and staff skills and competencies. If a second RN cannot be sourced for day or night shifts' using bank or agency ,Stewart House and Mill Lodge shared a RN between them and in these instances additional HCSW's are also used and this is reflected in higher figures for day and night cover.

Reported medication error numbers have decreased by one in December 2017 and there has been a decrease in reported falls from 14 in November 2017 to seven in December 2017. The decrease in falls at Mill Lodge relates to patient acuity changes.

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 %	Medication errors	Falls	Complaints	FFT Result %
Langley	14	154.8%	107.3%	100%	108.1%	21.6%	0↓	2	0	100%
CV Ward 3 (CAMHS)	8	155.6%	214.3%	173.7%	152.6%	15.6%	0	0	1	n/a
TOTALS							0↓	2	1	

There are no currently no 'hot spot' areas for inpatient services within Families, Young People and Children's Services.

Reported medication errors decreased by one in December 2017. There has been no change in the number of reported falls on Langley ward. Both wards continue to utilise an increased number of temporary workers to manage increases in patient acuity.

8. Recruitment

The table below shows the updated data for CHS (Community Hospitals) November 2017 because October data had not been verified for the December 2017 Trust Board reporting deadline.

Area	Vacant posts		Starters/Pipeline	
	RN	HCSW	RN	HCSW
FYPC	4	0	0	6
CHS(Community Hospitals)	**28**	**14**	**12**	**0**
CHS(MHSOP)	6	6	4	4
AMH/LD	61	29	8	7
Trust Total November 2017	99	40	24	17

The current Trust wide position for inpatient wards as reported real time by the lead Nurses is detailed below.

Area	Vacant posts		Starters/Pipeline	
	RN	HCSW	RN	HCSW
FYPC	3	5	0	3
CHS(Community Hospitals)	42	17	14	1
CHS(MHSOP)	10	10	6	6
AMH/LD	67	18	10	0
Trust Total December 2017	122	50	30	10

Trust wide there are approximately 122 RN vacancies and 50 HCSW vacancies across the inpatient wards.

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 a number of NHS Improvement development programmes to support safer staffing sustainability, these cover, Care Contact Hours Per Day (CPPHD), E-rostering 90 day Rapid Improvement Programme ,The Mental Health Observations and Engagement improvement programme and Demand and Capacity management.

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.

				Fill Rate Analysis (National Unify2 Return)				Skill Mix Met	% Temporary Workers
December 2017				**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)	
Ward Group	**Ward name**	**Average no. of Beds on Ward**	**Average no. of Occupied Beds**	**>= 80%**	**>= 80%**	**>= 80%**	**>= 80%**	**>= 80%**	**<20%**
AMH Bradgate	Ashby	21	19	85.8%	144.4%	79.0%	193.5%	53.8%	46.0%
	Aston	19	19	85.5%	133.9%	80.6%	264.5%	57.0%	36.8%
	Beaumont	20	20	79.6%	196.0%	88.7%	354.8%	57.0%	56.7%
	Belvoir Unit	10	10	112.9%	252.6%	145.2%	367.7%	97.8%	39.4%
	Bosworth	19	18	99.5%	166.1%	108.1%	335.5%	69.9%	31.9%
	Heather	18	18	83.9%	133.9%	91.9%	174.2%	59.1%	44.4%
	Thornton	22	21	98.4%	191.1%	95.2%	271.0%	77.4%	33.7%
	Watermead	20	19	93.5%	183.1%	79.0%	319.4%	67.7%	44.4%
	Griffin Female PICU	6	6	141.5%	217.6%	135.0%	209.7%	91.4%	47.7%
AMH Other	HP Phoenix	12	11	89.5%	296.0%	112.9%	246.8%	84.9%	57.8%
	SH Skye Wing	30	24	109.7%	130.4%	190.3%	100%	90.3%	34.0%
	Willows Unit	38	34	123.4%	218.8%	125.8%	225.4%	97.8%	32.5%
	ML Mill Lodge (New Site)	14	13	96.0%	252.4%	50.0%	148.4%	55.9%	37.5%
CHS City	BC Kirby	24	23	68.3%	227.9%	88.7%	122.6%	34.4%	34.6%
	BC Welford	24	21	72.1%	248.4%	90.3%	140.3%	34.4%	21.6%
	CB Beechwood	20	17	102.8%	207.3%	98.4%	95.2%	84.9%	28.7%
	CB Clarendon	20	17	91.2%	217.7%	100%	100%	80.6%	23.9%
	EC Coleman	21	20	62.0%	334.7%	80.6%	280.6%	25.9%	41.6%
	EC Gwendolen	20	20	94.2%	340.4%	76.9%	319.2%	69.2%	43.5%
	EC Wakerley	21	20	60.2%	344.8%	80.6%	317.7%	26.9%	45.8%
CHS East	FP General	10	9	141.4%	95.5%	101.7%	-	71.0%	23.5%
	MM Dalgleish	17	16	97.6%	117.7%	93.5%	96.8%	93.5%	16.6%
	Rutland	16	13	98.4%	133.1%	100%	100%	96.8%	6.8%
	SL Ward 1 Stroke	18	15	90.9%	187.3%	100%	100%	83.9%	11.8%
	SL Ward 3	14	12	97.6%	98.4%	196.8%	100%	92.5%	32.5%
CHS West	CV Ellistown 2	24	21	111.4%	165.9%	193.5%	95.2%	94.6%	8.3%
	CV Snibston 1	24	22	95.2%	202.4%	66.7%	111.3%	43.0%	5.7%
	HB East Ward	18	16	84.0%	170.2%	100%	103.2%	65.6%	6.2%
	HB North Ward	18	17	106.5%	171.8%	100%	98.4%	98.9%	8.1%
	Lough Swithland	21	19	100.8%	196.8%	100%	196.8%	98.9%	12.0%
	Langley	15	14	154.8%	107.3%	100%	108.1%	81.7%	21.6%
FYPC	CV Ward 3	10	8	155.6%	214.3%	173.7%	152.6%	95.7%	15.6%
	3 Rubicon Close	4	3	106.5%	148.4%	58.1%	148.4%	78.5%	15.8%
LD	Agnes Unit	12	10	117.2%	331.1%	75.8%	362.5%	79.6%	29.9%
	The Gillivers	5	3	83.9%	145.2%	45.2%	135.5%	61.3%	11.6%
	The Grange	5	4	-	160.0%	-	210.7%	98.8%	12.3%
Trust Total				**98.9%**	**196.1%**	**99.1%**	**185.0%**	**74.2%**	**30.2%**