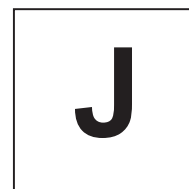


TRUST BOARD REPORT- 26 April 2018

SAFER STAFFING – March 2018 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.

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. . A detailed review of NSI's is undertaken by Lead Nurses in directorates through their operational management and governance arrangements.

2. Aim

The aim of this report is to provide the Trust Board with an analysis of March 2018 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 March 2018 is detailed below:

		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	
Trust wide average						
Jan 18		97.0%	193.7%	100%	190.5%	30.6%
Feb 18		97.7%	188.6%	103.3%	183.5%	32.2%
Mar 18		98.8%	202.4%	105.0%	186.9%	33.2%

During March 2018 the total temporary worker rate was 33.2%. Out of these temporary staff 29.5% were bank staff and 3.7% were agency staff.

Temporary staffing utilisation remains above 30% 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	January 2018	February 2018	March 2018
Hinckley & Bosworth East Ward	X	X	X
SL Ward 1	X	X	
Coalville- Snibston Ward 1(nights)	X	X	X
Short Breaks - The Gillivers(nights)	X	X	X
Short Breaks – Rubicon Close(nights)	X		
Mill Lodge	X	X	X
Ashby (Bradgate)	X		X
Beaumont (Bradgate)	X		
EC Welford(MHSOP)	X	X	X
EC Wakerley (MHSOP)	X	X	X
BC Kirby(MHSOP)	X	X	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.

5. COMMUNITY HEALTH SERVICES (CHS)

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. RN vacancies, maternity leave and sickness continue to impact on the availability of the substantive RN workforce across the directorate.

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 % (arrears)
FP General	10	129.8%	82.8%	103.3%	-	23.4%	0↓	4↑	0	0	100%
MM Dagleish	15	100.0%	121.7%	97.6%	95.2%	24.1%	2↑	3↓	0	0	100%
Rutland	14	113.7%	124.2%	90.3%	90.3%	9.0%	0	2↓	0	0	100%
SL Ward 1	16	88.5%	187.1%	91.9%	91.9%	20.9%	0	1	0	0	100%
SL Ward 3	12	99.2%	102.4%	193.5%	103.2%	31.9%	1	7	0	0	100%
CV Ellistown 2	21	122.9%	154.2%	200.0%	100.0%	7.2%	0↓	5↑	0	0	n\
CV Snibston 1	23	87.9%	188.3%	66.7%	128.0%	7.8%	1↑	4↓	0	0	n\
HB East Ward	18	74.4%	173.8%	100.0%	101.6%	9.5%	1↑	11↑	0	0	n\
HB North Ward	18	100.0%	168.8%	100.0%	108.8%	18.8%	0	11↑	0	0	n\
Lbro Swithland	22	99.2%	196.0%	101.6%	200.0%	17.9%	1↑	7↓	0	0	100%
CB Beechwood	21	90.2%	200.8%	100.0%	100.0%	32.9%	0	3↓	0	0	n\

CB Clarendon	20	82.6%	199.2%	100.0%	100.0%	21.8%	1	5↓	0	1	n\ a
TOTALS							7↓	63 ↓	0	1↑	

In March 2018 Coalville Snibston ward, met the planned RN level at night 66.7% of the time (see table 5.1). The 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.

HB East Ward did not meet the planned RN level on days (see table 5.1); this was due to sickness and vacancies.

Substantive staff are moved daily across all wards as required to maintain safer staffing. Temporary worker ratios have reduced slightly in March 2018, however ratios remain above 20 % on Clarendon, Beechwood, SL Wards, FP ward and Dalglish ward.

Recruitment is underway to recruit two RN night sisters to be based at Dalglish and St Lukes commencing to help maintain safer staffing and provide clinical support as part of a continuity plan.

Medication errors have decreased this month from 10 in February 2018 to seven in March 2018. The number of reported falls incidents reported has decreased by five since February 2018.

Avoidable pressure ulcer numbers for March 2018 are currently under review and will be reported next month

5.2 Mental Health Services for Older People (MHSOP)

Mental Health Services for Older People (MHSOP) wards temporary staffing utilisation ranges from 13% to 50%.

Three wards in Mental Health Services for Older People (MHSOP) were hotspots in March 2018 and did not achieve the planned RN 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 % (arrear)
BC Kirby	22	79.2%	207.4%	96.8%	140.3%	29.9%	0↓	8	0	0	66.7%
BC Welford	21	63.4%	212.9%	90.3%	111.3%	13.4%	3↑	5↑	0	0	n\ a
Gwendolen	17	90.9%	265.5%	93.5%	201.6%	39.8%	0	16↑	0	0	n\ a
EC Wakerley	18	74.1%	327.5%	87.0%	264.8%	50.2%	0↓	2↓	0	0	100%
TOTALS							3↑	31↓	0	0	

Long term sickness continues to impact on the need to ensure cover across all wards with the appropriate skill mix and expertise. Where 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.

MHSOP are currently reviewing the acuity of the wards and enhancing the staffing to support this. This review has resulted in increased support to the Evington Centre for patients with severe impairment where falls and violence and aggression are the predominant risk.

In March 2018, reported medication errors increased by one and reported falls incidents have decreased by one. No specific themes have been identified during the monthly review and there is no correlation of incidents and complaints with safer staffing levels.

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

6.1 Acute Inpatient Wards

		DAY	DAY	NIGHT	NIGHT					
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 % (arrears)
Ashby	21	79.8%	165.6%	100.0%	290.3%	45.7%	1↑	0↓	2	100%
Aston	19	91.4%	153.4%	101.8%	253.6%	42.7%	0	0↓	0	n/a
Beaumont	21	82.3%	231.9%	100.0%	490.0%	66.9%	1↓	0↓	0	n/a
Belvoir Unit	10	96.8%	289.5%	167.7%	283.9%	39.9%	0	0	0	n/a
Bosworth	20	91.0%	176.9%	101.7%	272.4%	41.4%	0	0	1	n/a
Heather	18	85.5%	212.7%	95.0%	340.0%	48.6%	2↑	4↑	0↓	n/a
Thornton	21	92.7%	188.2%	98.4%	358.1%	41.2%	2↑	1	0	n/a
Watermead	20	94.9%	138.5%	98.1%	157.7%	46.0%	0↓	1	0↓	100%
Griffin F. PICU	5	192.5%	315.1%	200.0%	181.0%	40.9%	0	0	0↓	n/a
TOTALS							6↑	6↓	3↑	

The Bradgate Unit had no hotspots in March 2018 however the 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 has been above 40% across all wards due to RN vacancies and sickness levels and increased levels of patient acuity requiring observation support.

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.

Reported falls errors decreased from seven in February 2018 to six in March 2018. Reported medication errors increased by one in March 2018. Complaint numbers also increased by one. No specific themes relating to safer staffing levels have been identified during the monthly review and there was no correlation of reported incidents and complaints with safer staffing levels.

6.2 Learning Disability Services

		DAY	DAY	NIGHT	NIGHT					
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 % (arrears)
3 Rubicon Close	3	90.3%	212.9%	83.9%	148.4%	14.2%	0	0↓	0	n/a
Agnes Unit	8	216.5%	600.0%	125.0%	722.2%	42.7%	0	0↓	0	n/a
The Gillivers	3	82.3%	179.0%	54.8%	148.4%	10.2%	1↑	0	0	n/a
The Grange	3	-	182.8%	-	158.1%	22.0%	0	2↑	0	n/a
TOTALS							1↑	2	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 and night cover is

shared across the site as the homes are situated next to each other. The RN night cover at The Gillivers was not required for all shifts in March 2018.

Reported numbers of falls remains the same as March 2018 and reported numbers of medication errors increased by one. 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	DAY	NIGHT	NIGHT	Temp Workers%	Falls	Medication errors	Complaints	FFT Result % (arrears)
		% 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	107.0%	180.7%	100.0%	151.6%	33.1%	0	0	0↓	n/a

Phoenix Ward achieved the thresholds for safer staffing and 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	DAY	NIGHT	NIGHT	Temp Workers%	Medication errors	Falls	Complaints	FFT Result % (arrears)
		% 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	26	118.4%	132.4%	189.3%	128.6%	42.5%	0↓	5↑	0	N\A
Willows Unit	35	138.9%	267.5%	125.0%	250.9%	32.2%	1↑	4↑	0	100%
Mill Lodge	13	68.5%	231.5%	50.0%	171.0%	43.4%	0↓	15↑	0	N\A
TOTALS							1↓	24↑	1	

Temporary worker utilisation remains above 30% 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 share 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 for Stewart House.

There has been an increase in reported falls from seven in February 2018 to 24 in March 2018 and this related to patient acuity and mobility need. Reported medication error numbers have decreased by one in March 2018.

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 % (arrears)
Langley	15	133.3%	154.4%	100.0%	126.7%	41.7%	0↓	0	1↑	n/a
CV Ward 3 (CAMHS)	8	160.0%	220.0%	139.5%	195.3%	31.0%	0	0	0	n/a
TOTALS							0	0	1↓	

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

Both wards continue to utilise an increased number of temporary workers to manage increases in patient acuity. No specific themes have been identified during the monthly review and there is no correlation of complaints with safer staffing levels.

8. Recruitment

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	1	2	1	0
CHS(Community Hospitals)	36	21	8	11
CHS(MHSOP)	8	8	3	2
AMH/LD	61	27	5	3
Trust Total March 2018	106	58	17	16
Trust Total February 2018	117	53	26	16

Trust wide there are approximately 106 RN vacancies and 58 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.

In order to provide to provide a consistent way of recording and reporting deployment of staff providing care in inpatients, the Care Hours Per Patient Day (CHPPD) metric has now been tested and adapted for use in mental health and community inpatient wards. From April 2018 all trusts (acute, acute specialist, community and mental health) are required to collect CHPPD monthly for all of their inpatient wards. This means that the May 2018 safer staffing report will be based on the new methodology.

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. Learning from participation in a number of NHS Improvement development programmes is ongoing.

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. Directorate lead nurses have oversight of the plans in place to mitigate risks for each ward to ensure safe care standards are maintained.

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 NHSi 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.

Appendix 1 data extract

March 2018		Fill Rate Analysis (National Unify2 Return)						Skill Mix Met (based on 1:8 plus 60:40 split)	% Temporary Workers	CHPPD
		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	>= 80%	>= 80%			
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	21	79.8%	165.6%	100.0%	290.3%	59.8%	45.7%	5.9
	Aston	19	19	91.4%	153.4%	101.8%	253.6%	74.7%	42.7%	6.7
	Beaumont	22	21	82.3%	231.9%	100.0%	490.0%	58.2%	66.9%	8.7
	Belvoir Unit	10	10	96.8%	289.5%	167.7%	283.9%	92.5%	39.9%	17.2
	Bosworth	20	20	91.0%	176.9%	101.7%	272.4%	69.1%	41.4%	6.1
	Heather	18	18	85.5%	212.7%	95.0%	340.0%	70.6%	48.6%	7.5
	Thornton	21	21	92.7%	188.2%	98.4%	358.1%	79.1%	41.2%	6.0
	Watermead	20	20	94.9%	138.5%	98.1%	157.7%	83.3%	46.0%	5.6
	Griffin Female PICU	6	5	192.5%	315.1%	200.0%	181.0%	98.6%	40.9%	23.8
AMH Other	HP Phoenix	12	11	107.0%	180.7%	100.0%	151.6%	100.0%	33.1%	9.8
	SH Skye Wing	30	26	118.4%	132.4%	189.3%	128.6%	87.0%	42.5%	4.4
	Willows Unit	38	35	138.9%	267.5%	125.0%	250.9%	100.0%	32.2%	9.5
		ML Mill Lodge (New Site)	14	13	68.5%	231.5%	50.0%	171.0%	24.7%	43.4%
CHS City	BC Kirby	24	22	79.2%	207.4%	96.8%	140.3%	53.3%	29.9%	6.1
	BC Welford	24	21	63.4%	212.9%	90.3%	111.3%	28.0%	13.4%	5.9
	CB Beechwood	24	21	90.2%	200.8%	100.0%	100.0%	76.3%	32.9%	5.9
	CB Clarendon	23	20	82.6%	199.2%	100.0%	100.0%	67.4%	21.8%	6.0
	EC Gwendolen	20	17	90.9%	265.5%	93.5%	201.6%	76.7%	39.8%	8.4
	EC Wakerley	21	18	74.1%	327.5%	87.0%	264.8%	44.8%	50.2%	11.1
CHS East	FP General	10	10	129.8%	82.8%	103.3%	-	76.1%	23.4%	7.0
	MM Dalgleish	17	15	100.0%	121.7%	97.6%	95.2%	95.5%	24.1%	6.1
	Rutland	16	14	113.7%	124.2%	90.3%	90.3%	94.6%	9.0%	6.8
	SL Ward 1 Stroke	18	16	88.5%	187.1%	91.9%	91.9%	76.3%	20.9%	7.2
	SL Ward 3	14	12	99.2%	102.4%	193.5%	103.2%	98.9%	31.9%	7.0
CHS West	CV Ellistown 2	24	21	122.9%	154.2%	200.0%	100.0%	98.9%	7.2%	5.2
	CV Snibston 1	24	23	87.9%	188.3%	66.7%	128.0%	37.5%	7.8%	5.3
	HB East Ward	20	18	74.4%	173.8%	100.0%	101.6%	51.1%	9.5%	6.1
	HB North Ward	19	18	100.0%	168.8%	100.0%	108.8%	100.0%	18.8%	6.0
	Lough Swithland	24	22	99.2%	196.0%	101.6%	200.0%	98.9%	17.9%	5.3
FYPC	Langley	15	15	133.3%	154.4%	100.0%	126.7%	98.9%	41.7%	7.6
	CV Ward 3	10	8	160.0%	220.0%	139.5%	195.3%	94.6%	31.0%	11.2
LD	3 Rubicon Close	4	3	90.3%	212.9%	83.9%	148.4%	88.2%	14.2%	19.1
	Agnes Unit	12	8	216.5%	600.0%	125.0%	722.2%	95.7%	42.7%	28.5
	The Gillivers	5	3	82.3%	179.0%	54.8%	148.4%	68.8%	10.2%	21.1
	The Grange	5	3	-	182.8%	-	158.1%	98.9%	22.0%	17.9
Trust Total				98.8%	202.4%	105.0%	186.9%	77.2%	33.2%	