

Meeting Name and date	Trust Board – 1 November 2019
Paper number	

Name of Report - <b>SAFE STAFFING - SEPTEMBER 2019 REVIEW</b>
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For approval		For assurance	<input checked="" type="checkbox"/>	For information	
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Alignment to CQC domains:		Alignment to the LPT strategic objectives:		Alignment to LPT priorities for 2019/20 (STEP up to GREAT):	
Safe	<input checked="" type="checkbox"/>	Safe	<input checked="" type="checkbox"/>	S – High Standards	<input checked="" type="checkbox"/>
Effective		Staff		T - Transformation	
Caring		Partnerships		E – Environments	
Responsive		Sustainability		P – Patient Involvement	
Well-Led				G – Well-Governed	<input checked="" type="checkbox"/>
				R – Single Patient Record	
				E – Equality, Leadership, Culture	
				A – Access to Services	
				T – Trustwide Quality improvement	
Any equality impact (Y/N)	N				

Report previously reviewed by		
Committee / Group	Date	Assurance obtained (Significant/Limited/None)
Direct report to Trust Board		

Assurance: What level of assurance does this report provide in respect of the Board Assurance Framework Risks? (Significant / Limited / No Assurance)	Links to ORR risk numbers
Significant Processes are in place to monitor and ensure staffing levels are safe and that patient safety and care quality is maintained.	4,26

Recommendations of the report
The Trust Board is recommended to receive assurance that processes are in place to monitor and ensure the inpatient and community staffing levels are safe and that patient safety and care quality are maintained.

## TRUST BOARD – 1 NOVEMBER 2019

### SAFE STAFFING – SEPTEMBER 2019 REVIEW

#### Introduction/Background

- 1 This report will provide an overview of the nursing safe staffing during the month of September 2019, triangulating productivity, workforce metrics, quality and outcomes linked to Nurse Sensitive Indicators (NSIs) and patient experience feedback.
- 2 Part one refers to inpatient areas and part two relates to community teams.
- 3 Actual staff numbers compared to planned staff numbers are collated for each inpatient area. A summary is available in Appendix 1.
- 4 The Quality Schedule methods of measurement are;
  - A – Each shift achieves the safe staffing level 100%
  - B – Less than 6% of clinical posts to be filled by agency staffCompliance for the above indicators is RAG rated in Appendix 1.

#### Aim

- 5 The aim of this report is to provide the Trust Board with assurance that arrangements are in place to safely staff our services with the right number of staff, with the right skills at the right time. Including an overview of staffing hot spots, potential risks and actions to mitigate the risks, to ensure that safety and care quality are maintained.

#### Recommendations

- 6 The Trust Board is recommended to receive assurance that processes are in place to monitor and ensure the inpatient and community staffing levels are safe and that patient safety and care quality are maintained.

#### Trust level highlights for September 2019

#### Right Staff

- Overall the planned staffing levels were achieved across the Trust.
- Temporary worker utilisation rate decreased overall this month by 2.2%; reported at 31.9%. This is partially attributed to Dalgleish Ward temporary closure for refurbishment and substantive staff redeployment, resulting in a reduction in community hospital temporary worker utilisation. There were also a number of Wards that requested significantly less shifts this month due to reduced acuity and improved sickness rates.

- Trust wide agency usage decreased this month by 0.6% to 4.2% overall. The following wards utilised above 6% agency staff; Belvoir, Griffin, Heather, Beechwood, Feilding Palmer, Dalgleish, St Lukes Ward 3, North and East.
- The total number of Trust wide Registered Nurse (RN) vacancies reported this month is 196.24 w.t.e posts (118.9 inpatients and 77.34 community). This is a decreased position this month by 2.15 w.t.e RN posts.
- The total number of Trust wide Health Care Support Worker (HCSW) vacancies reported this month is 91.65 w.t.e. posts (72.59 in-patients and 19.06 community). This is a increased position this month by 4.24 w.t.e posts.
- As of 1 October 2019 there are 70.6 w.t.e candidates in the recruitment pipeline, expected to join the Trust over the next few months.
- There are eleven hotspot inpatient areas, hotspots have been identified either by; exception to planned fill rates, high percentage of temporary worker utilisation or by the Lead Nurse due to concerns relating to increased acuity, high risk patients, staff sickness, ability to fill additional shifts and the impact to safe and effective care.
- There are nine community team hot spots areas. Where community teams are considered a hot spot, staffing and case-loads are reviewed and risk assessed across teams using patient prioritisation models to ensure appropriate action is taken.
- A review of the Trust's NSIs and patient feedback has not identified any correlation between staffing and impact to quality and safety of patient care/outcomes.

### **Right Skills**

- In consideration of ensuring staff have the 'right skills', a high level overview of clinical training, appraisal and supervision for triangulation is presented. As of 1 October 2019 Trust wide;
  - Appraisal sustained GREEN at 93.1%
  - Clinical supervision AMBER increased from 80.0% to 84.5%
  - Of the now 30 core and clinical mandatory compliance subjects with the addition of falls training; all are GREEN with the exception of eight topics; one new topic RED; falls and seven at AMBER.
  - Compliance with mandatory training for bank staff remains lower than that of substantive staff. Following targeted action there is continued improvement in bank staff compliance all GREEN with the exception of seven topics; two at RED and one at AMBER with improving compliance.

### **Right Place**

- The fill rates for the percentage of actual HCSWs over 100% reflects the high utilisation and deployment of additional temporary staff in response to patient acuity and increased levels of therapeutic observation in order to maintain safety of all patients.
- The total Trust CHPPD average (including ward based AHPs) is reported at 10.93 CHPPD in September 2019, with a range between 4.5 (Skye Wing) and 37.2 (Agnes Unit) CHPPD. The variation in range reflects the diversity of services, complex and specialist care provided across the Trust.
- Analysis of the CHPPD has not identified any significant variation at service level, indicating that staff are being deployed productively across services.

## Part One – In-patient Staffing

- 1 The overall trust wide summary of planned versus actual hours by ward for registered nurses (RN) and health care support workers (HCSW) in September 2019 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	
July 19	104.2%	205.9%	109.3%	187.9%	33.9%
Aug 19	103.0%	200.2%	110.3%	193.8%	34.1%
<b>Sept 19</b>	<b>100.2%</b>	<b>201.9%</b>	<b>107.0%</b>	<b>179.6%</b>	<b>31.9%</b>

Table 1 - Trust level safer staffing

- 2 Overall the planned staffing levels were achieved across the Trust. The increased fill rates for the percentage of actual HCSWs reflects the high utilisation and deployment of additional temporary staff in response to patient acuity and increased levels of therapeutic observation in order to maintain safety of all patients.
- 3 Temporary worker utilisation rate decreased overall this month by 2.2%; reported at 31.9%. This is partially attributed to Dalgleish Ward temporary closure for refurbishment and substantive staff redeployment, there were also a number of Wards that requested significantly less shifts this month;
- Belvoir – requested 114 fewer shifts than previous month – due to reduced acuity
  - Griffin – requested 102 fewer shifts than previous month – due to reduced acuity
  - Gwendolen – requested 203 fewer shifts than previous month – due to reduced acuity
  - City Planned Care West – requested 192 fewer shifts than previous month – long term sick returners
- Collectively this has resulted in a reduction in community temporary worker utilisation
- 4 Trust wide agency usage decreased this month by 0.6% to 4.2% overall. The following wards utilised above 6% agency staff; Belvoir, Griffin, Heather, Beechwood, Feilding Palmer, Dalgleish, St Lukes Ward 3, North and East.

### Summary of staffing hotspots – Inpatients

Hot spot wards	July 2019	Aug 2019	Sept 2019
Hinckley and Bosworth - East Ward	X	X	X
Beechwood		X	X
Feilding Palmer	X	X	X
St Lukes Ward 3	X	X	X
Short Breaks - The Gillivers	X	X	X
Short Breaks – Rubicon Close			
Mill Lodge	X	X	
Kirby			
Coleman	X	X	X
Gwendolen	X	X	
Belvoir	X	X	X
Heather			X

Griffin	X	X	X
Watermead		X	X
Agnes Unit			
Langley		X	X
Ward 3 Coalville (CAMHS)			

**Table 2 – In-patient staffing hotspots**

- 5 Beechwood, Coleman, East, Feilding Palmer and Gillivers, Short Breaks are hot spot areas as they did not meet the threshold for planned staffing across all shifts, on these occasions staffing was reported to be within safe parameters for all areas.
- 6 Langley, Belvoir and Heather Wards are hot spots due to utilising over 50% temporary staff. The high utilisation is associated with sickness cover and increased patient acuity to maintain safe staffing.
- 7 Griffin ward is still considered a hotspot due to patient acuity and risk, staff sickness and vacancies and high use of bank and agency staff.
- 8 St Lukes Ward 3, East and Feilding Palmer remain hot spots due to concerns relating to vacancies, staff sickness, maternity leave and the ability to fill additional shifts.
- 9 Number of occupied beds, planned staffing levels versus actual staffing levels and percentage of temporary staff utilised is presented in the tables below per in-patient area by service and directorate. For analysis and review the Trust thresholds are indicated below;
  - Planned levels is >80% Green
  - Temporary worker utilisation (bank and agency); green indicates threshold achieved, amber is above 20% utilisation and red above 50% utilisation.
- 10 The NSIs that capture outcomes most affected by nurse staffing levels are presented in conjunction with patient experience feedback. This report indicates if there has been an increase or decrease in the indicator against the previous month.

## **Adult Mental Health and Learning Disabilities Services (AMH/LD)**

### **Acute Inpatient Wards**

Ward	Occupied beds	DAY	DAY	NIGHT	NIGHT	Temp Workers%	CHPP D	Vacancy Factor	Medication errors	Falls	Complaints	FFT Promoter % (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		Care Hours Per Patient Day					
Ashby	20	93.9%	123.3%	93.3%	126.7%	19.5%	5.2	14.4%	0↓	2↑	1↑	83.30%
Aston	18	81.1%	185.8%	86.7%	266.7%	43.5%	6.8	13.6%↓	2↑	1	0↓	100%
Beaumont	21	89.9%	155.0%	96.7%	340.0%	42.2%	5.9	15.8%	0↓	1	0	nil
Belvoir Unit	10	95.8%	340.8%	130.0%	338.3%	61.6%	19.7	42.4%↓	1↑	0	0	nil
Bosworth	19	81.7%	171.7%	98.3%	163.3%	33.8%	5.9	20.3%↑	0	0	1	100%
Heather	17	95.8%	218.3%	93.3%	396.7%	53.9%	8.7	13.7%↑	2↑	1	2↑	nil
Thornton	18	94.1%	208.3%	96.7%	138.3%	47.4%	7.6	24.8%	3↑	4↑	0	nil
Watermead	19	88.9%	210.8%	89.8%	366.7%	42.0%	7.7	9.5%	5↑	2	1↓	nil
Griffin F PICU	5	208.3%	320.0%	187.1%	156.7%	32.2%	18.3	22.7%↓	3↑	2↑	1↑	nil
<b>TOTALS</b>									<b>16↑</b>	<b>13↑</b>	<b>6↑</b>	

Table 3 - Acute inpatient ward safe staffing

- 11 All wards met the thresholds for RN and HCSW planned staffing in September 2019.
- 12 Temporary worker utilisation is Red for Belvoir and Heather Wards 61.6% and 53.9% respectively. The high utilisation is associated with both vacancies and increased patient acuity and higher levels of staffing required to meet enhanced levels of observation.
- 13 To mitigate the risks associated with utilising higher numbers of temporary staff and the impact on quality and patient experience, the service block book regular bank and agency RNs and HCSWs across the acute inpatient wards, substantive staff are also moved across areas dependant on the skill mix and patient need, reviewed at the twice weekly staffing meeting and daily safety huddle.
- 14 A review of the NSIs and patient feedback has identified an increase in medication errors, falls and complaints across the wards in September 2019. Analysis is currently taking place to consider any staffing impact on the quality and safety of patient care/outcomes for all wards.

### Learning Disabilities (LD) Services

Ward	Occupied beds	DAY	DAY	NIGHT	NIGHT	Temp Workers %	CHPP D	Vacancy Factor	Medication errors	Falls	Complaints	FFT Promoter % (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		Care Hours Per Patient Day					
3 Rubicon Close	3	115.0%	167.2%	73.3%	166.7%	35.1%	18.4	5.1%↓	0	1	0	100%
Agnes Unit	7	259.4%	724.3%	216.7%	766.7%	46.5%	37.2	16.2%↓	0	1↑	0	100%
The Gillivers	2	96.7%	138.3%	46.7%	160.0%	14.3%	26.3	13.7%↑	0	0	0	100%
The Grange	2	-	184.4%	#DIV/0!	216.7%	30.2%	21.6	35.4%	0	1↓	0	100%
<b>TOTALS</b>									<b>0</b>	<b>3↓</b>	<b>0</b>	

Table 4 - Learning disabilities safe staffing

- 15 Short breaks met the planned staffing levels with the exception of Gillivers that only met the planned RN level on nights 46.7% of the time. Patients do not always require RN support and skill mix is adjusted according to patient needs utilising HCSWs who are trained to administer medication and carry out delegated health care tasks. Night RN cover can be shared across the site as the homes are situated next to each other.
- 16 A review of the NSIs and patient feedback has not identified any staffing impact on the quality and safety of patient care/outcomes.

### Low Secure Services – Herschel Prins

Ward	Occupied beds	DAY	DAY	NIGHT	NIGHT	Temp Workers%	CHPPD	Vacancy Factor	Medication errors	Falls	Complaints	FFT Promoter % (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		Care Hours Per Patient Day					
HP Phoenix	10	109.2%	127.3%	96.7%	148.3%	12.9%	9.1	4.1%↓	0	0	0	20%

Table 5- Low secure safe staffing

17 Phoenix Ward achieved the planned staffing thresholds for all shifts.

18 A review of the NSIs and patient feedback has not identified any staffing impact on the quality and safety of patient care/outcomes.

### Rehabilitation Services

Ward	Occupied beds	DAY	DAY	NIGHT	NIGHT	Temp Workers%	CHPPD	Vacancy Factor	Medication errors	Falls	Complaints	FFT Promoter % (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		Care Hours Per Patient Day					
Skye Wing	29	115.8%	146.7%	200.0%	111.7%	41.1%	4.5	-1.6%	1↑	4↑	0	nil
Willows Unit	29	102.1%	154.0%	113.3%	225.6%	22.6%	7.8	3.4%↑	0	1↑	0	85.7%
Mill Lodge	13	98.3%	244.2%	91.7%	158.3%	36.4%	10.6	8.6%	0	3	0	nil
<b>TOTALS</b>									<b>1↑</b>	<b>8↑</b>	<b>0</b>	

Table 6 - Rehabilitation service safe staffing

19 All ward/units met the planned staffing thresholds for all shifts including Mill Lodge meeting planned RN levels on nights.

20 There has been an increase in falls on Skye Wing this month analysis has shown these involved five different patients. Most of the falls were as a result of patients placing themselves on the floor with two related to trips. The falls pathway was followed when required and medication reviewed.

21 A review of the NSIs and patient feedback has not identified any staffing impact on the quality and safety of patient care/outcomes.

### Community Health Services (CHS)

#### Community Hospitals

Ward	Occupied beds	DAY	DAY	NIGHT	NIGHT	Temp Workers%	CHPPD	Vacancy Factor	Medication errors	Falls	Complaints	FFT Promoter % (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		Care Hours Per Patient Day					
FP General	7	117.8%	67.2%	89.8%	-	31.7%	6.9	40.1%	2↑	2	0	nil
MM Dalgliesh	-	-	-	-	-	-	-	-	-	-	-	-
Rutland	12	105.8%	120.9%	100.0%	136.7%	10.4%	7.3	16.5%↓	0	2↑	0	96%
SL Ward 1	13	105.9%	196.6%	100.0%	101.7%	21.3%	11.5	20.5%↓	1↓	1↓	0	83.3%
SL Ward 3	10	100.8%	125.8%	196.7%	100.0%	36.0%	8.8	35.8%	0	4↑	0	100%
CV Ellistown 2	16	105.0%	179.2%	203.3%	98.3%	7.4%	8.9	4.4%↓	1↑	5	0	92.9%
CV Snibston 1	14	120.8%	180.0%	103.3%	143.3%	13.0%	11.2	32.4%	0	2	0	100%
HB East Ward	18	76.6%	206.7%	100.0%	105.0%	25.5%	8.3	8.2%↓	3↑	3↓	0	95.8%
HB North Ward	17	119.2%	173.3%	100.0%	101.7%	22.2%	7.2	20.5%↑	0	6↑	0	100%
Swithland	22	100.0%	194.2%	100.0%	200.0%	10.6%	7.0	25.8%↓	0↓	4↓	0	95.8%
CB Beechwood	21	78.0%	260.8%	100.0%	100.0%	27.8%	8.9	24.1%	0↓	7↑	0	88.5%
CB Clarendon	21	84.7%	232.5%	100.0%	150.0%	14.6%	6.6	16%↓	4↑	8↑	1	75%
<b>TOTALS</b>									<b>11↑</b>	<b>44↑</b>	<b>1</b>	

Table 7 - Community hospital safe staffing

- 22 East and Beechwood wards are hot spots as they only met the planned RN level during the day 76.6 and 78% of the time. The ward runs with two RNs on occasion, which meets safer staffing parameters. Feilding Palmer did not meet the planned levels for HCSWs on days. The HCSW staffing levels were adjusted according to the bed occupancy.
- 23 Dalgleish Ward temporarily closed all beds on 12 August 2019 through to September 2019 as such there is no data this month.
- 24 A review of the NSIs for the community hospital wards has identified that there was an increase in falls incidents on St Lukes Ward 3, North, Beechwood and Clarendon Wards and an increase in medication errors on Feilding Palmer, East and Clarendon Wards. Review of the increased incidences has not identified any direct correlation between staffing and the impact to quality and safety of patient care/outcomes.
- 25 Feilding Palmer and Beechwood Ward are hot spots associated with increased temporary workforce usage due to vacancies, maternity leave and sickness.
- 26 Ward 3 St Luke's remains a hotspot due to vacancies and sickness that includes clinical leadership roles. Additional support is provided from an experienced Ward Sister and Matron.

**Mental Health Services for Older People (MHSOP)**

Ward	Occupied beds	DAY	DAY	NIGHT	NIGHT	Temp Worker s%	CHP PD	Vacancy Factor	Medication errors	Falls	Complaints	FFT Promoter % (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		Care Hours Per Patient Day					
BC Kirby	19	89.0%	221.7%	98.3%	121.7%	32.2%	6.8	23.9%↑	1↑	4↓	0	nil
BC Welford	21	82.0%	214.2%	93.3%	105.0%	24.8%	5.9	19.2%↑	2↑	0↓	0	nil
Coleman	21	78.0%	260.8%	100.0%	100.0%	35.3%	7.4	11.5%↓	0↓	7↑	0	nil
Gwendolen	21	84.7%	232.5%	100.0%	150.0%	22.2%	9.4	23.2%	0	5↑	0	100%
<b>TOTALS</b>									<b>3↑</b>	<b>16↓</b>	<b>0</b>	

Table 8 - Mental Health Services for Older People (MHSOP) safe staffing

- 27 Coleman is a hotspot as they only met the threshold for planned staffing on days 78% of the time. Analysis has shown there were seven shifts with only one RN, on these occasions the ward were supported by the Charge nurse, Medication Administration Technician (MAT) and qualified staff from Gwendolen ward to support safe staffing
- 28 Increased utilisation of temporary staff to meet planned staffing levels where there are vacancies and sickness and also due to increased patient acuity and level 1 observation.
- 29 A review of the NSIs and patient feedback has not identified any staffing impact to the quality and safety of patient care/outcomes.



## Families, Young People and Children's Services (FYPC)

Ward	Occupied beds	DAY	DAY	NIGHT	NIGHT	Temp Workers%	CHP PD	Vacancy Factor	Medication errors	Falls	Complaints	FFT Promoter % (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		Care Hours Per Patient Day					
Langley	11	87.2%	245.8%	96.7%	188.3%	53.0%	12.1	-8.1%	1↑	0↓	0	100%
CV Ward 3 - CAMHS	8	153.2%	278.5%	152.5%	250.0%	30.7%	16.2	13.6%↑	1↑	0	0	nil
<b>TOTALS</b>									<b>2↑</b>	<b>0↓</b>	<b>0</b>	

Table 9 - Families, children and young people's services safe staffing

30 Both wards continue to utilise an increased number of temporary workers to manage increases in patient acuity and maintain patient safety.

31 A review of the NSIs and patient feedback has not identified any staffing impact on the quality and safety of patient care/outcomes.

### Recruitment, Retention and Workforce planning

#### Recruitment

32 The current Trust wide nurse vacancy position for inpatient wards as reported real time by the lead nurses is detailed below. Staff identified as starters/pipeline, are staff that have been interviewed and in the recruitment process of which may or may not have a start date.

Area	Vacant Posts		Potential Leavers		Starters/Pipeline	
	RN	HCSW	RN	HCSW	RN	HCSW
FYPC	1.0	7.9	1.0	0	1.0	0
CHS (Community Hospitals)	50.0	13.5	4.0	0	4.0	13.0
MHSOP	19.3	8.6	1.0	0	2.0	7.6
AMH/LD	48.6	42.59	7.0	2.0	4.0	3.0
<b>Trust Total September 2019</b>	<b>118.9</b>	<b>72.59</b>	<b>13.0</b>	<b>2.0</b>	<b>11.0</b>	<b>23.6</b>
Trust Total August 2019	123.57	64.59	12.0	2.0	22.0	24.6

Table 10 - Recruitment summary in-patients

33 Rolling adverts for all RN posts including implementation of Trust incentivised schemes for hard to recruit areas. Accessing recruitment fairs at local universities, schools and colleges.

34 Rotational posts across Trust services and graduate frail older people's rotation programme in partnership with UHL

35 Increased work experience placements and increased recruitment of clinical apprentices

36 Recruitment for the next three cohorts of trainee nursing associates has commenced. LLR wide there are 133 places for 2019/20 with the next cohort due to commence in December 2019. To date 27 trainees have passed the recruitment stage from LPT.

## **Part Two**

### **Trust level summary community teams**

37 The current Trust wide position for community hot spots as reported by the lead nurses is detailed in the table below;

Community team hot spots	July 2019	August 2019	Sept 2019
City East Hub- Community Nursing	X	X	X
City West Hub- Community Nursing	X	X	X
East Central Hub – Community Nursing	X	X	X
Hinckley and Bosworth – Community Nursing	X	X	X
Healthy Together – City (School Nursing)	X	X	X
Healthy Together – East	X	X	X
Health Together - West	X	X	X
Looked After Children team	X	X	
CAMHS City - FYPC			
CAMHS County - FYPC	X	X	X
CAMHS Crisis - FYPC	X	X	X
City West CMHT - MHSOP	X	X	

**Table 11 – Community Hot Spot areas**

38 There are 29 community nursing teams that work together in zones called ‘hubs’. There are 8 hubs in total. There remains a number of vacancies across the community planned care nursing hubs with City East and West and East Central carrying the largest number. Hinckley and Bosworth Hub is also a hotspot as they have four registered nurses on maternity leave.

39 City West CMHT (MHSOP) remains a hot spot due to increased registered nurse sickness and lack of bank or agency to backfill. Internal moves have been secured to support the clinical risk and activity. The service continues to pilot an additional team lead in the city community teams and have recruited to the Band 7 post.

40 Healthy Together City (School Nursing only), East and West Healthy Together, County Outpatient and CRISIS teams are hot spot areas within FYPC Community; they are rated to be at Amber escalation level due to only 70% of the established team being available to work. Mitigation plans are in place within the service for moving staff internally where possible, overtime offered and vacant posts are being proactively advertised. Locum support recruited to and additional hours in place for existing substantive staff where possible to increase capacity. Risks continue to be monitored internally on a weekly basis.

41 There are no hot spots in September 2019 for AMH/LD Community. The crisis team has had a big recruitment drive to prepare for a planned service expansion, and the recruitment has been successful and is on track.

## Recruitment

42 The current Trust wide nurse vacancy position for community teams as reported real time by the lead nurses is detailed below. Staff identified as starters/pipeline, are staff that have been interviewed and in the recruitment process of which may or may not have a start date;

Area	Vacant Posts		Potential Leavers		Starters/Pipeline	
	RN	HCSW	RN	HCSW	RN	HCSW
CHS – Community Nursing Hubs	24.0	6.79	6.6	1.0	9.9	0
CHS - ICS	9.22	4.57	1.0	0	0	0
MHSOP	3.0	0	0	0	0	0
AMH/LD	15.57	5.9	0	0	7.5	0
FYPC	25.55	1.8	2.0	1.0	2.0	0
<b>Trust Total September 2019</b>	<b>77.34</b>	<b>19.06</b>	<b>9.6</b>	<b>2.0</b>	<b>19.4</b>	<b>0</b>
Trust Total August 2019	74.82	22.82	12.0	0	24.0	0

Table 13 - Recruitment summary community

## Retention

43 There is a Trust wide Retention group with a number of initiatives linked to health and well-being programmes, learning and development, a Trust wide Preceptorship programme for all newly registered staff, leadership and professional development programmes, time out days and career development opportunities.

## Conclusion

44 The Trust continues to demonstrate compliance with the National Quality Board (NQB) expectations to publish safer staffing information each month. The safer staffing data is being regularly monitored and scrutinised for completeness and performance and reported to NHS England (NHSE) via mandatory national returns on a site-by-site basis.

45 Each directorate has a standard operating procedure for the escalation of safer staffing risks and any significant issues are notified to the Director of Nursing, AHPs and Quality on a weekly basis.

46 In light of the triangulated review of fill rates, nurse sensitive indicators and patient feedback, the Director of Nursing, AHPs and Quality is assured that there is sufficient resilience across the Trust notwithstanding some hot spot areas, to ensure that every ward and community team is safely staffed.

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\*Disclaimer: This report is submitted to the Trust Board for amendment or approval as appropriate. It should not be regarded or published as Trust Policy until it is formally agreed at the Board meeting, which the press and public are entitled to attend.

## Appendix

Appendix 1 – In-patient Safer staffing supporting information - scorecard

Ward Group	Ward name	Average no. of Beds on Ward	Average no. of Occupied Beds	Fill Rate Analysis (National Return)						Skill Mix Met (NURSING ONLY)	% Temporary Workers (NURSING ONLY)			Overall CHPPD (Nursing and AHP)
				Actual Hours Worked divided by Planned Hours							(based on 1:8 plus 60:40 split)	Total	Bank	
				Nurse Day (Early & Late Shift)		Nurse Night		AHP Day						
				Average % fill rate registered nurses	Average % fill rate care staff	Average % fill rate registered nurses	Average % fill rate care staff	Average % fill rate registered AHP	Average % fill rate non-registered AHP					
>= 80%	>= 80%	>= 80%	>= 80%	-	-	>= 80%	<20%	-	-					
AMH Bradgate	Ashby	21	20	93.9%	123.3%	93.3%	126.7%			80.0%	19.5%	18.0%	1.5%	5.2
	Aston	19	18	81.1%	185.8%	86.7%	266.7%			47.8%	43.5%	42.1%	1.4%	6.8
	Beaumont	21	21	89.9%	155.0%	96.7%	340.0%			75.6%	42.2%	38.7%	3.6%	5.9
	Belvoir Unit	10	10	95.8%	340.8%	130.0%	338.3%			88.9%	61.6%	44.6%	17.0%	19.7
	Bosworth	20	19	81.7%	171.7%	98.3%	163.3%			56.7%	33.8%	32.1%	1.7%	5.9
	Heather	18	17	95.8%	218.3%	93.3%	396.7%			72.2%	53.9%	44.0%	9.9%	8.7
	Thornton	20	18	94.1%	208.3%	96.7%	138.3%			77.8%	47.4%	46.1%	1.3%	7.6
	Watermead	20	19	88.9%	210.8%	89.8%	366.7%			70.0%	42.0%	40.3%	1.7%	7.7
Griffin Female PICU	6	5	208.3%	320.0%	187.1%	156.7%			97.8%	32.2%	17.8%	14.5%	18.3	
AMH Other	HP Phoenix	10	10	109.2%	127.3%	96.7%	148.3%			97.8%	12.9%	11.8%	1.2%	9.1
	SH Skye Wing	30	29	115.8%	146.7%	200.0%	111.7%			100.0%	41.1%	40.8%	0.4%	4.5
	Willows Unit	31	29	102.1%	154.0%	113.3%	225.6%			77.8%	22.6%	22.1%	0.5%	7.8
	ML Mill Lodge (New Site)	14	13	98.3%	244.2%	91.7%	158.3%			85.6%	36.4%	31.7%	4.6%	10.6
CHS City	BC Kirby	24	19	89.0%	221.7%	98.3%	121.7%			72.2%	32.2%	28.6%	3.6%	6.8
	BC Welford	24	21	82.0%	214.2%	93.3%	105.0%			60.0%	24.8%	22.2%	2.6%	5.9
	CB Beechwood	24	21	78.0%	260.8%	100.0%	100.0%	100.0%	95.7%	66.7%	27.8%	19.8%	8.0%	8.9
	CB Clarendon	23	21	84.7%	232.5%	100.0%	150.0%			70.0%	14.6%	11.0%	3.6%	6.6
	EC Coleman	21	19	64.4%	256.7%	93.3%	125.0%			28.9%	35.3%	35.1%	0.2%	7.4
	EC Gwendolen	20	14	95.0%	229.5%	86.7%	155.0%			77.8%	22.2%	21.5%	0.7%	9.4
CHS East	FP General	7	7	117.8%	67.2%	89.8%	-	100.0%	100.0%	57.8%	31.7%	17.9%	13.8%	6.9
	MM Dalglish	-	-	-	-	-	-	-	-	-	-	-	-	-
	Rutland	15	12	105.8%	120.9%	100.0%	136.7%			92.2%	10.4%	6.8%	3.6%	7.3
	SL Ward 1 Stroke	16	13	105.9%	196.6%	100.0%	101.7%	92.4%	96.6%	98.9%	21.3%	18.4%	2.9%	11.5
	SL Ward 3	11	10	100.8%	125.8%	196.7%	100.0%	100.3%	101.2%	88.9%	36.0%	27.1%	8.9%	8.8
CHS West	CV Ellistown 2	20	16	105.0%	179.2%	203.3%	98.3%	101.4%	100.0%	97.8%	7.4%	5.2%	2.2%	8.9
	CV Snibston 1	15	14	120.8%	180.0%	103.3%	143.3%	92.8%	96.3%	97.8%	13.0%	10.2%	2.8%	11.2
	HB East Ward	20	18	76.6%	206.7%	100.0%	105.0%	99.8%	100.0%	53.3%	25.5%	16.7%	8.8%	8.3
	HB North Ward	19	17	119.2%	173.3%	100.0%	101.7%			96.7%	22.2%	13.3%	8.9%	7.2
	Lough Swithland	24	22	100.0%	194.2%	100.0%	200.0%	99.1%	100.1%	100.0%	10.6%	7.8%	2.7%	7.0
FYPC	Langley	13	11	87.2%	245.8%	96.7%	188.3%	100.2%	-	74.4%	53.0%	51.0%	2.0%	12.1
	CV Ward 3	10	8	153.2%	278.5%	152.5%	250.0%			100.0%	30.7%	24.9%	5.8%	16.2
LD	3 Rubicon Close	4	3	115.0%	167.2%	73.3%	166.7%			85.6%	35.1%	35.1%	0.0%	18.4
	Agnes Unit	12	7	259.4%	724.3%	216.7%	766.7%			97.8%	46.5%	44.6%	1.9%	37.2
	The Gillivers	5	2	96.7%	138.3%	46.7%	160.0%			71.1%	14.3%	14.3%	0.0%	26.3
	The Grange	5	2	-	184.4%	#DIV/0!	216.7%			95.6%	30.2%	30.2%	0.0%	21.6
<b>Trust Total</b>				<b>100.2%</b>	<b>201.9%</b>	<b>107.0%</b>	<b>179.6%</b>			<b>79.7%</b>	<b>31.9%</b>	<b>27.7%</b>	<b>4.2%</b>	