

Meeting Name and date	Trust Board – 3 March 2020
Paper number	

Name of Report - <b>SAFE STAFFING - JANUARY 2020 REVIEW</b>
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For approval		For assurance	<input checked="" type="checkbox"/>	For information	
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Presented by	Anne Scott	Author (s)	Emma Wallis
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Alignment to CQC domains:		Alignment to LPT priorities for 2019/20 (STEP up to GREAT):	
Safe	<input checked="" type="checkbox"/>	S – High Standards	<input checked="" type="checkbox"/>
Effective		T - Transformation	
Caring		E – Environments	
Responsive		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 – Trust wide Quality improvement	
Any equality impact (Y/N)	N		

Report previously reviewed by	
Committee / Group	Date

Assurance: What level of assurance does this report provide in respect of the Organisational Risk Registers?	Links to ORR risk numbers
Significant Assurance 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 – 3 MARCH 2020**

### **SAFE STAFFING – JANUARY 2020 REVIEW**

#### **Introduction/Background**

- 1 This report provides an overview of nursing safe staffing during the month of January 2020, triangulating workforce metrics, quality and outcomes linked to Nurse Sensitive Indicators (NSIs) and patient experience feedback.
- 2 Actual staff numbers compared to planned staff numbers are collated for each inpatient area, CHPPD and temporary worker utilisation. A summary is available in Annex 1.
- 3 Quality Schedule methods of measurement are RAG rated in Annex 1;
  - A – Each shift achieves the safe staffing level 100%
  - B – Less than 6% of clinical posts to be filled by agency staff

#### **Aim**

- 4 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 areas to note, potential risks and actions to mitigate the risks, to ensure that safety and care quality are maintained.

#### **Recommendations**

- 5 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.

#### **Discussion**

#### **Trust level highlights for January 2020**

#### **Right Staff**

- Overall the planned staffing levels were achieved across the Trust.
- Temporary worker utilisation rate decreased overall this month 0.3%; reported at 30.2% and Trust wide agency usage decreased this month by 1.1% to 3.8%.
- There are eleven inpatient 'areas to note' identified either by; exception to planned fill rates, high percentage of temporary worker/agency 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. To note five of the eleven are due to agency utilisation above 6%.

- There are eleven community team 'areas to note' with three new areas identified in January 2020; East Leicester CMHT, Charnwood CNLD and Outreach LD. Staffing and case-loads are reviewed and risk assessed across service teams using patient prioritisation models to ensure appropriate action is taken to maintain patient safety.
- 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 February 2020 Trust wide;
  - Appraisal improved at 93.8% GREEN
  - Clinical supervision increased 1.3% to 83.0% AMBER
  - There are 11 core and clinical mandatory topics for substantive and bank staff.
  - Some training topics are made up of more than one course e.g. safeguarding, and these are reported separately.
  - Substantive staff; most are GREEN with the exception of five courses that are AMBER all with improved compliance in January 2020
  - Bank staff; most courses are GREEN with the exception of eight courses; two at RED (change from last month ALS and safeguarding children training moved from RED to AMBER) and six at AMBER.

## Right Place

- Fill rates for actual HCSWs over 100% reflects the high utilisation and deployment of additional temporary staff due to increased levels of therapeutic observation to maintain safety of all patients. High utilisation will be considered in the establishment reviews.
- The total Trust CHPPD average (including ward based AHPs) is reported at 11.2 CHPPD in January 2020, with a range between 4.8 (Skye Wing) and 36.5 (Agnes Unit) CHPPD. Variation reflects the diversity of services, complex and specialist care provided across the Trust.
- Analysis of CHPPD has not identified significant variation at service level; indicating that staff are being deployed productively across services.

## In-patient Staffing

- 6 The overall trust wide summary of planned versus actual hours by ward for registered nurses (RN) and health care support workers (HCSW) in January 2020 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	
Nov 19	104.2%	201.7%	108.7%	187.9%	30.5%
Dec 19	<b>103.0%</b>	<b>204.1%</b>	<b>111.9%</b>	<b>186.2%</b>	<b>30.2%</b>
Jan 20	<b>102.8%</b>	<b>207.8%</b>	<b>111.2%</b>	<b>189.5%</b>	<b>30.0%</b>

Table 1 - Trust level safer staffing

- 7 Temporary worker utilisation rate decreased overall this month 0.3%; reported at 30.2% and Trust wide agency usage increased this month by 0.9% to 4.9%.

- 8 The following wards utilised above 6% agency staff; Belvoir, Griffin, Beechwood, Feilding Palmer and Coalville Ward 3 (CAMHS) Wards. These are the wards with high vacancy factors, increased acuity and dependency and or hard to fill bank shift areas.

### Summary of inpatient staffing areas to note

Wards	Nov 2019	Dec 2019	Jan 2020
Hinckley and Bosworth - East Ward	X	X	
Hinckley and Bosworth – North Ward	X	X	X
Beechwood	X	X	
Clarendon	X	X	
Feilding Palmer	X	X	X
St Lukes Ward 1			X
St Lukes Ward 3	X	X	X
Coalville Ward 1	X		
Coalville Ward 2		X	
Short Breaks - The Gillivers	X	X	X
Short Breaks – The Grange		X	X
Coleman	X	X	X
Gwendolen		X	
Belvoir	X	X	X
Heather	X		
Griffin	X	X	X
Watermead	X		
Agnes Unit	X	X	
Langley			X
Ward 3 Coalville (CAMHS)	X	X	X

Table 2 – In-patient staffing areas to note

- 9 Coleman, Langley, Feilding Palmer, the Grange and Gillivers did not meet the threshold for planned staffing across all shifts; on these occasions staffing was reported to be within safe parameters.
- 10 Feilding Palmer, St Lukes Ward 1 and Ward 3 and North Ward are 'areas to note' associated with increased temporary workforce usage due to vacancies, maternity leave and sickness.
- 11 Number of occupied beds, vacancy factor, planned staffing levels versus actual staffing levels and percentage of temporary staff utilised is presented in the tables per in-patient area by service and directorate in Annex 2, triangulated with the NSIs that capture outcomes most affected by nurse staffing levels.

### Community Teams

- 12 The current Trust wide position for community 'areas to note' as reported by the lead nurses is detailed in the table below;

Community team	Nov 2019	Dec 2019	Jan 2020
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	
Healthy Together – City (School Nursing only)	X	X	X
Healthy Together – East	X		
Health Together - West	X	X	X
CAMHS County - FYPC	X	X	X
Diana service		X	X
City West CMHT - MHSOP	X	X	X
East Leicester CMHT			X
Charnwood CNLD			X
Outreach LD			X

**Table 11 – Community areas to note**

14 There remain a number of vacancies across community planned care nursing hubs with City East, West and East Central carrying the largest number. Where there is a cross border area, hubs have ‘taken’ care homes from the teams under pressure to support management of the risk, patient care and staffing. Hinckley and Bosworth hub staffing has improved with staff returned from maternity leave and improved availability of bank staff fill rates.

There are three Band 5 rolling adverts; one aimed at newly qualified nurses, one for City hubs with a recruitment and retention premia, and one for the County hubs to support the ageing well agenda. Interviews scheduled for early March 2020 to date there are four RN candidates.

15 Healthy Together City (School Nursing only), West Healthy Together, County Outpatient and Diana teams are rated to be at Amber escalation level due to only 70% of the established team being available to work. A number of strategies are being used to mitigate staffing gaps including paid overtime, ongoing advert for vacant posts. Locum support recruited to and additional hours in place for existing substantive staff where possible to increase capacity. Risks continue to be monitored within the Directorate on a weekly basis.

16 City west, CMHT, MHSOP remains a hot spot due to sickness, the team is currently supported by a regular agency nurse and a new starter commences in February 2020. The team have operated on the minimum local agreed staffing levels and there is an established process of reviewing the waiting list and any risks acted upon accordingly.

17 East Leicester CMHT, Charnwood CNLD and Outreach LD are rated to be at Red escalation level with Charnwood CMHT, City LD, East LD, Hinckley & NW LD, Autism rated at Amber escalation level. Teams have been rated reviewing staff available to work, vacancies, sickness and case load complexity. A number of strategies are in place to support areas of note, risks and impact to patient care and waiting lists continue to be monitored within the services and Directorate.

### **Recruitment and Retention**

18 Rolling adverts for all RN posts including implementation of Trust incentivised schemes for hard to recruit areas.

19 Accessing recruitment fairs at local universities, schools and colleges including the recent partnership (UHL and LPT) careers event for DMU pre-registration nursing students in February 2020 aimed at recruiting and retaining nursing students in their final year.

- 20 Increased work experience placements and increased recruitment of clinical apprentices.
- 21 Cohort 4 of trainee Nursing Associates commenced in December 2019 with a fifth cohort commencing in March 2020 (a total of 20 trainee Nursing Associates in cohorts 4 & 5). Nine trainees (Cohort 2) finish their academic programme in January 2020 due to register with the NMC in March/April 2020.
- 22 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**

- 23 The Trust continues to demonstrate compliance with the National Quality Board (NQB) expectations to publish safe staffing information monthly. The safe staffing data is reported to NHS England (NHSE) via mandatory national returns on a site-by-site basis.
- 24 In light of the triangulated review of fill rates, nurse sensitive indicators and patient feedback, the Acting 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.

Presenting Director: Anne Scott – Acting Director of Nursing, AHPs and Quality

Author: Emma Wallis – Associate Director of Nursing and Professional Practice

January 2020

				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		Agency
Ward Group	Ward name	Average no. of Beds on Ward	Average no. of Occupied Beds	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	93.5%	124.2%	96.8%	167.7%			86.0%	25.5%	23.9%	1.6%	5.2	
	Aston	19	19	84.9%	152.4%	100.0%	167.7%			69.9%	27.3%	25.6%	1.7%	5.9	
	Beaumont	22	22	89.8%	121.0%	101.6%	235.5%			80.6%	18.8%	18.3%	0.4%	5.0	
	Belvoir Unit	10	10	121.0%	353.9%	171.0%	418.0%			97.8%	58.9%	45.8%	13.2%	22.2	
	Bosworth	20	19	89.1%	179.0%	98.4%	254.8%			71.0%	30.4%	29.7%	0.8%	6.6	
	Heather	18	18	89.8%	151.6%	98.4%	283.9%			76.3%	36.3%	31.9%	4.4%	6.8	
	Thornton	20	18	99.4%	159.7%	100.0%	111.3%			88.2%	34.9%	34.5%	0.4%	6.7	
	Watermead	20	20	86.0%	208.9%	93.5%	338.7%			65.6%	49.0%	43.8%	5.2%	7.1	
Griffin Female PICU	6	6	197.0%	302.9%	193.5%	171.0%			97.8%	43.1%	25.9%	17.3%	18.4		
AMH Other	HP Phoenix	12	11	108.1%	139.4%	100.0%	146.8%			95.7%	10.6%	9.7%	0.9%	9.0	
	SH Skye Wing	29	27	116.9%	143.3%	200.0%	127.4%			97.8%	35.9%	35.4%	0.5%	4.8	
	Willows Unit	36	35	148.0%	195.9%	125.0%	209.7%			100.0%	16.3%	16.3%	0.0%	8.5	
	ML Mill Lodge (New Site)	13	11	103.2%	221.3%	90.3%	162.9%			83.9%	38.9%	38.7%	0.2%	12.5	
CHS City	BC Kirby	24	23	80.6%	225.0%	95.2%	121.0%			62.4%	30.5%	29.2%	1.3%	5.7	
	BC Welford	24	21	80.6%	208.1%	98.4%	111.3%	100%	100%	62.4%	15.8%	15.0%	0.8%	6.0	
	CB Beechwood	21	20	87.7%	204.9%	98.4%	100.0%			72.0%	15.8%	9.3%	6.5%	7.1	
	CB Clarendon	23	21	92.3%	235.2%	100.0%	119.4%			77.4%	15.0%	9.1%	5.9%	6.8	
	EC Coleman	20	19	65.6%	317.7%	95.2%	230.6%			33.3%	34.1%	32.3%	1.8%	9.1	
	EC Gwendolen	20	12	88.6%	362.6%	98.4%	290.3%			81.7%	41.6%	37.3%	4.3%	15.7	
CHS East	FP General	9	9	143.5%	78.7%	109.1%	-	100%	100%	72.0%	38.7%	31.0%	7.7%	7.9	
	MM Dagleish	16	15	100.8%	131.5%	93.5%	200.0%	100%	100%	95.7%	17.4%	12.0%	5.4%	8.4	
	Rutland	15	14	98.4%	120.8%	96.8%	116.1%			95.7%	17.9%	14.1%	3.7%	6.1	
	SL Ward 1 Stroke	18	15	100.7%	208.1%	98.4%	112.9%	100%	100%	84.9%	20.7%	17.7%	3.0%	9.9	
	SL Ward 3	12	11	94.4%	168.5%	196.8%	119.4%	100%	100%	89.2%	33.5%	28.8%	4.7%	9.2	
CHS West	CV Elistown 2	18	16	100.0%	193.5%	200.0%	100.0%	100%	100%	100.0%	16.8%	11.5%	5.3%	8.9	
	CV Snibston 1	16	14	101.4%	157.1%	92.1%	112.9%	100%	100%	86.0%	9.2%	8.8%	0.4%	10.3	
	HB East Ward	22	21	84.4%	207.3%	100.0%	103.2%		100%	68.8%	8.9%	6.1%	2.8%	6.5	
	HB North Ward	19	18	108.9%	184.7%	101.6%	127.4%			100.0%	33.2%	28.3%	4.9%	6.9	
	Lough Swithland	24	23	100.0%	221.8%	100.0%	200.0%	100%	100%	100.0%	12.2%	9.4%	2.9%	6.1	
		Langley	11	11	74.0%	171.8%	132.3%	127.4%	100%		69.9%	37.9%	37.2%	0.7%	8.1
FYPC	CV Ward 3	10	9	135.1%	355.3%	143.5%	356.5%			97.8%	50.7%	36.9%	13.7%	19.6	
LD	3 Rubicon Close	4	2	130.0%	160.0%	120.0%	80.0%			66.7%	12.8%	12.8%	0.0%	29.3	
	Agnes Unit	12	8	211.5%	790.8%	144.2%	739.5%			100.0%	47.9%	45.3%	2.6%	36.5	
	The Gillivers	4	2	108.1%	165.7%	77.4%	158.1%			74.2%	19.9%	19.9%	0.0%	28.2	
	The Grange	5	2	-	156.7%	-	171.4%			95.7%	21.9%	21.5%	0.4%	33.1	
<b>Trust Total</b>				<b>102.8%</b>	<b>207.8%</b>	<b>111.2%</b>	<b>189.5%</b>			<b>81.2%</b>	<b>30.0%</b>	<b>26.2%</b>	<b>3.8%</b>		

## Annexe 2: Inpatient Ward triangulation staffing, CHPPD, vacancy factor and NSIs.

Trust thresholds are indicated below;

- Planned levels is >80% Green
- Temporary worker utilisation (bank and agency);
  - green indicates threshold achieved less than 20%
  - amber is above 20% utilisation
  - red above 50% utilisation.

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

#### Acute Inpatient Wards

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					
Ashby	20	93.5%	124.2%	96.8%	167.7%	25.5%	5.2	11.5%↓	3↑	2↑	1↑	100%
Aston	19	84.9%	152.4%	100.0%	167.7%	27.3%	5.9	10.4%	1↑	2↑	1↑	nil
Beaumont	22	89.8%	121.0%	101.6%	235.5%	18.8%	5.0	4.4%	1↓	0	1↑	nil
Belvoir Unit	10	121.0%	353.9%	171.0%	418.0%	58.9%	22.2	36.2%↓	1↑	1↑	0↓	nil
Bosworth	19	89.1%	179.0%	98.4%	254.8%	30.4%	6.6	20.3%↑	1↓	2↓	0	nil
Heather	18	89.8%	151.6%	98.4%	283.9%	36.3%	6.8	17.7%	1↑	3↑	0	nil
Thornton	18	99.4%	159.7%	100.0%	111.3%	34.9%	6.7	4.9%↓	1	2↑	0	nil
Watermead	20	86.0%	208.9%	93.5%	338.7%	49.0%	7.1	25.6%↑	2	11	0	nil
Griffin F PICU	6	197.0%	302.9%	193.5%	171.0%	43.1%	18.4	32.5%↑	0↓	0	0↓	nil
<b>TOTALS</b>									<b>11↑</b>	<b>23↑</b>	<b>3↓</b>	

Table 3 - Acute inpatient ward safe staffing

All wards met the thresholds for RN and HCSW planned staffing in January 2020.

Temporary worker utilisation is Red for Belvoir Units at 58.9%. The high utilisation is associated with both vacancies and increased patient acuity related to risk and higher levels of staffing required to meet enhanced levels of observation. The Unit has recently successfully recruited to both RN and HCSW vacancies; this is reflected in the reduced vacancy factor this month.

Watermead and Griffin continue to utilise additional staff required to meet enhanced levels of observation, this is reflected in the higher fill rates and temporary worker utilisation.

The increased falls on Watermead ward relate to one patient who has mobility issues and epilepsy both affected by the persons mental health. The ward team fully review physical health and behaviour to try to reduce the falls/ seizures.

Analysis of the NSIs has not identified any correlation between staffing and impact to quality and safety of patient care/outcomes.



## Learning Disabilities (LD) 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					
3 Rubicon Close	2	130.0%	160.0%	120.0%	80.0%	12.8%	29.3	82.9%↑	0	1↑	0	nil
Agnes Unit	8	211.5%	790.8%	144.2%	739.5%	47.9%	36.5	12.8%↑	0	12↑	0	88.9%
The Gillivers	2	108.1%	165.7%	77.4%	158.1%	19.9%	28.2	3.4%↓	0	1↑	0	nil
The Grange	2	-	156.7%	-	171.4%	21.9%	33.1	1.5%	0	0	0	nil
<b>TOTALS</b>									<b>0</b>	<b>14↑</b>	<b>0</b>	

Table 4 - Learning disabilities safe staffing

Short Breaks and the Agnes Unit met the thresholds for RN and HCSW planned staffing in January 2020. To note Rubicon Close, closed on 5 January 2020. The majority of staff from Rubicon Close were redeployed to the Gillivers or the Grange; this is reflected in the reduced vacancy factor and temporary worker utilisation for short breaks.

Gillivers did not meet the planned RN level on nights and the Grange did not meet the planned levels on days or nights. The skill mix of staff is adjusted according to patient needs utilising HCSWs who are trained to administer medication and carry out delegated health care tasks. Where RN night cover is required it can also be shared across the Grange and Gillivers site as the homes are situated next to each other.

Analysis of the NSIs has not identified any correlation between staffing and impact to quality and safety of patient care/outcomes.

Increased falls on the Agnes Unit are all attributed to one patient; there is a known risk related to behaviour – placing self on floor. The patient has a falls assessment and care plan in place and a helmet to reduce potential head injury as a result of falls, the patient will not always wear the helmet.

## Low Secure Services – Herschel Prins

Ward	Occupied beds	DAY	DAY	NIGHT	NIGHT	Temp Worker s%	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	11	108.1%	139.4%	100.0%	146.8%	10.6%	9.0	8.3%	0	0	0	66.7%

Table 5- Low secure safe staffing

Phoenix Ward achieved the planned staffing thresholds for all shifts. 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	27	116.9%	143.3%	200.0%	127.4%	35.9%	4.8	2.8%↑	0↓	1↓	0	100%
Willows Unit	35	148.0%	195.9%	125.0%	209.7%	16.3%	8.5	7.7%↓	3↑	3↑	0	62.5%
Mill Lodge	11	103.2%	221.3%	90.3%	162.9%	38.9%	12.5	10.9%↓	0	2↑	0	nil
<b>TOTALS</b>									<b>3↑</b>	<b>6↑</b>	<b>0</b>	

Table 6 - Rehabilitation service safe staffing

All ward/units met the planned staffing thresholds for all shifts in January 2020; the higher utilisation of temporary workers was related to vacancy cover or patient acuity.

A review of the NSIs and patient feedback has not identified any staffing impact on the quality and safety of patient care/outcomes. The medication errors on the Willows Unit were self-administration errors not nursing errors. Falls linked to a patient; post illegal substance misuse whilst AWOL.

## 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	9	143.5%	78.7%	109.1%	-	38.7%	7.9	37.4%↑	2↑	3↓	1↑	100%
MM Dalgliesh	15	100.8%	131.5%	93.5%	200.0%	17.4%	8.4	-0.3%	0	4↓	0	nil
Rutland	14	98.4%	120.8%	96.8%	116.1%	17.9%	6.1	28.9%↑	1	4	2↑	100%
SL Ward 1	15	100.7%	208.1%	98.4%	112.9%	20.7%	9.9	15.2%	3↑	3	0	100%
SL Ward 3	11	94.4%	168.5%	196.8%	119.4%	33.5%	9.2	26.7%	3↑	2↓	0	100%
CV Ellistown 2	16	100.0%	193.5%	200.0%	100.0%	16.8%	8.9	6.6%	2↑	7↑	0	96%
CV Snibston 1	14	101.4%	157.1%	92.1%	112.9%	9.2%	10.3	14.7%↓	3↑	3	0	100%
HB East Ward	21	84.4%	207.3%	100.0%	103.2%	8.9%	6.5	4.8%↑	2↑	6↑	0	100%
HB North Ward	18	108.9%	184.7%	101.6%	127.4%	33.2%	6.9	29.7%↑	0	6↑	1↑	100%
Swithland	23	100.0%	221.8%	100.0%	200.0%	12.2%	6.1	19.1%↓	0	4	0	100%
CB Beechwood	20	87.7%	204.9%	98.4%	100.0%	15.8%	7.1	18%↑	1	2↓	0	nil
CB Clarendon	21	92.3%	235.2%	100.0%	119.4%	15.0%	6.8	11.1%↑	4↑	3↓	1↑	100%
<b>TOTALS</b>									<b>21↑</b>	<b>47↓</b>	<b>5↑</b>	

Table 7 - Community hospital safe staffing

All wards met the thresholds for RN and HCSW planned staffing in January 2020 with the exception of Feilding Palmer on days. Feilding Palmer HCSW staffing was adjusted in line with bed occupancy and patient need.

Feilding Palmer, St Lukes Ward 1 and Ward 3 and North Ward are 'areas to note' associated with increased temporary workforce usage due to vacancies, maternity leave and sickness.

A review of the NSIs have identified a reduction in the number of falls for January 2020, however Ward 2 CCH, North and Swithland wards had a number of repeat patient fallers relating to their acuity.

There has been an increase across the wards of medication related errors; analysis has shown that 8 of the errors recorded were near misses. A review of the errors has identified prescribing and procedural related medication errors. Review of the increased incidences has not identified any direct correlation between staffing and the impact to quality and safety of patient care.

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

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					
BC Kirby	23	80.6%	225.0%	95.2%	121.0%	30.5%	5.7	28.1%↑	0	5↓	0	100%
BC Welford	21	80.6%	208.1%	98.4%	111.3%	15.8%	6.0	22.3%↑	0	4↑	1↑	nil
Coleman	19	65.6%	317.7%	95.2%	230.6%	34.1%	9.1	10.3%↓	1↓	8↑	0	nil
Gwendolen	12	88.6%	362.6%	98.4%	290.3%	41.6%	15.7	13.7%↓	1↑	15	1↑	nil
<b>TOTALS</b>									2↓	32↓	2↑	

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

Coleman only met the threshold for RN planned staffing on days 65.6% of the time. Analysis has shown that Coleman ward had one registered nurse on five shifts; four night and one day shift. At these times Coleman ward was supported by Gwendolen ward registered staff and staffing was within safe parameters.

Analysis has shown that the increase in falls on both Welford and Coleman Wards is related to patient factors and has not identified any direct correlation between staffing and the impact to 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	74.0%	171.8%	132.3%	127.4%	37.9%	8.1	-12.7%	2↑	0↓	0↓	nil
CV Ward 3 - CAMHS	9	135.1%	355.3%	143.5%	356.5%	50.7%	19.6	16.9%↓	2↑	0↓	0	nil
<b>TOTALS</b>									4↑	0↓	0↓	

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

Both wards met the thresholds for RN and HCSW planned staffing in January 2020, the wards continue to utilise an increased number of temporary workers to manage increased patient acuity and maintain patient safety.

There was an increase in drug errors on both wards in January 2020; analysis has not identified any correlation between staffing and impact to quality and safety of patient care/outcomes.