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| Meeting Name and date | Trust Board – 7 April 2020 |
| Paper number          |                            |

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| Name of Report - <b>SAFE STAFFING - FEBRUARY 2020 REVIEW</b> |
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|              |  |               |                                     |                 |  |
|--------------|--|---------------|-------------------------------------|-----------------|--|
| For approval |  | For assurance | <input checked="" type="checkbox"/> | For information |  |
|--------------|--|---------------|-------------------------------------|-----------------|--|

|              |            |            |             |
|--------------|------------|------------|-------------|
| Presented by | Anne Scott | Author (s) | Emma Wallis |
|--------------|------------|------------|-------------|

| 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<br>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 – 7 APRIL 2020

### SAFE STAFFING – FEBRUARY 2020 REVIEW

#### Introduction/Background

- 1 This report provides an overview of nursing safe staffing during the month of February 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 February 2020

#### Right Staff

- Overall the planned staffing levels were achieved across the Trust in February 2020.
- Temporary worker utilisation rate increased overall this month 4.0%; reported at 34.0% and Trust wide agency usage increased this month by 0.5% to 5.4%. The increased bank and agency utilisation in February 2020 is largely associated with an increase in patient acuity on CAMHS Ward 3 and the Agnes Unit.
- Both areas have required additional staff for increased levels of safe and therapeutic observations. CAMHS ward 3 required unprecedented levels of staffing to maintain patient and staff safety both on the ward and for patients in care at the LRI, due to increased patient needs and challenging behaviours for a number of patients waiting transfer to a CAMHS PICU.

- The following wards utilised above 6% agency staff; Belvoir, Griffin, Watermead, Beechwood, Feilding Palmer, Rutland, St Lukes Wards 1 and 3, East, North and Coalville Wards 2 and 3 (CAMHS). These wards have a combination of factors that have resulted in higher use of agency staff; high vacancy factors, higher sickness levels, increased patient acuity and dependency and/ or hard to fill bank shift areas.
- There are fourteen 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 twelve of the fourteen are due to agency utilisation above 6%.
- There are ten community team 'areas to note' with one new areas identified in February 2020; Charnwood CMHT. 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.

### 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 at 93.5% GREEN
  - Clinical supervision at 83.9% AMBER
  - There are 7 AMBER rated compliance clinical and core mandatory training subjects, all with an increased compliance from the previous month

### 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.
- The total Trust CHPPD average (including ward based AHPs) is reported at 12.04 CHPPD in February 2020, with a range between 5.0 (Skye Wing) and 50.2 (CAMHS Ward 3) CHPPD. Variation reflects the diversity of services, complex and specialist care provided across the Trust. The increase in CAMHS reflects the additional staff required to provide safe patient care due to acuity this month
- 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 February 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 |               |
| Dec 19        | 103.0%                                 | 204.1%  | 111.9%                                 | 186.2%  | 30.2%         |
| Jan 20        | 102.8%                                 | 207.8%  | 111.2%                                 | 189.5%  | 30.0%         |
| <b>Feb 20</b> | <b>103.6%</b>                          | <b>221.6%</b>                                 | <b>113.2%</b>                          | <b>207.8%</b>                                 | <b>34.0%</b>  |

Table 1 - Trust level safer staffing

- 7 Temporary worker utilisation rate increased overall this month 4.0%; reported at 34.0% and Trust wide agency usage increased this month by 0.5% to 5.4%. The increased bank and agency utilisation in February 2020 is largely associated with an increase in patient acuity on CAMHS Ward 3 and the Agnes Unit.

Both areas have required additional staff for increased levels of safe and therapeutic observations. CAMHS ward 3 required unprecedented levels of staffing to maintain patient and staff safety both on the ward and for patients in care at the LRI, due to increased patient needs and challenging behaviours for a number of patients waiting transfer to a CAMHS PICU.

- 8 The following wards utilised above 6% agency staff; Belvoir, Griffin, Watermead, Beechwood, Feilding Palmer, Rutland, St Lukes Wards 1 and 3, East, North and Coalville Wards 2 and 3 (CAMHS). These wards have a combination of factors that have resulted in higher use of agency staff; high vacancy factors, higher sickness levels, increased patient acuity and dependency and/ or hard to fill bank shift areas.

### Summary of inpatient staffing areas to note

| Wards                              | Dec 2019 | Jan 2020 | Feb 2020 |
|------------------------------------|----------|----------|----------|
| Hinckley and Bosworth - East Ward  | X        |          | X        |
| Hinckley and Bosworth – North Ward | X        | X        | X        |
| Beechwood                          | X        |          | X        |
| Clarendon                          | X        |          |          |
| Feilding Palmer                    | X        | X        | X        |
| St Lukes Ward 1                    |          | X        | X        |
| St Lukes Ward 3                    | X        | X        | X        |
| Coalville Ward 2                   | X        |          | X        |
| Short Breaks - The Gillivers       | X        | X        |          |
| Short Breaks – The Grange          | X        | X        |          |
| Coleman                            | X        | X        | X        |
| Gwendolen                          | X        |          |          |
| Welford                            |          |          | X        |
| Belvoir                            | X        | X        | 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, Welford and Feilding Palmer Wards did not meet the threshold for planned staffing across all shifts; on these occasions staffing was reported to be within safe parameters. Skill mix was adjusted due to patient needs and safe staffing supporting with the addition of roles such as the Medicines Administration Technician, Nursing Associate or Meaningful Activity co-ordinator that are not captured in the nurse staffing return.
- 10 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, together with the NSIs that capture outcomes most affected by nurse staffing levels.

## **Community Teams**

11 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 | Feb 2020 |
|---|----------|----------|----------|----------|
| City East Hub- Community Nursing              | X        | X        | X        | X        |
| City West Hub- Community Nursing              | X        | X        | X        | X        |
| East Central Hub – Community Nursing          | X        | X        | X        | X        |
| Hinckley and Bosworth – Community Nursing     | X        | X        |          |          |
| Healthy Together – City (School Nursing only) | X        | X        | X        | X        |
| Healthy Together – East                       | X        |          |          | X        |
| Health Together - West                        | X        | X        | X        | X        |
| CAMHS County - FYPC                           | X        | X        | X        | X        |
| Diana service                                 |          | X        | X        | X        |
| Charnwood CMHT                                |          |          |          | X        |
| City West CMHT - MHSOP                        | X        | X        | X        | X        |
| East Leicester CMHT                           |          |          | X        |          |
| Charnwood CNLD                                |          |          | X        |          |
| Outreach LD                                   |          |          | X        |          |

Table 11 – Community areas to note

12 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.

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.

13 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.

14 City west, CMHT, MHSOP remains an 'area to note' 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.

15 AMH/LD have reported one 'area to note' this month; Charnwood CMHT the team has recruited to a band 3 and band 7 vacancy due to start early March 2020.

## **Conclusion**

- 16 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.
- 17 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 not withstanding 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

February 2020

|                    |                          |                             |                              | Fill Rate Analysis (National Return)         |                                |                                       |                                |                                    |  | Skill Mix Met<br>(NURSING ONLY) | % Temporary Workers<br>(NURSING ONLY) |              |             | Overall CHPPD<br>(Nursing and AHP) |
|--------------------|--------------------------|-----------------------------|------------------------------|--|--------------------------------|---------------------------------------|--------------------------------|------------------------------------|--|---------------------------------|---------------------------------------|--------------|-------------|------------------------------------|
|                    |                          |                             |                              | Actual Hours Worked divided by Planned Hours |                                |                                       |                                |                                    |  |                                 | Total                                 | Bank         | Agency      |                                    |
| Ward Group         | Ward name                | Average no. of Beds on Ward | Average no. of Occupied Beds | Nurse Day<br>(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                           | 87.9%  | 138.8%                         | 98.3%                                 | 155.2%                         |                                    |  | 75.9%                           | 30.0%                                 | 27.2%        | 2.9%        | 5.4                                |
|                    | Aston                    | 19                          | 19                           | 87.9%  | 220.7%                         | 105.2%                                | 362.1%                         |                                    |  | 72.4%                           | 41.4%                                 | 39.1%        | 2.3%        | 7.9                                |
|                    | Beaumont                 | 21                          | 21                           | 95.3%  | 141.4%                         | 105.2%                                | 203.4%                         |                                    |  | 88.5%                           | 18.8%                                 | 18.3%        | 0.4%        | 5.4                                |
|                    | Belvoir Unit             | 9                           | 9                            | 133.0%                                       | 350.0%                         | 189.7%                                | 521.4%                         |                                    |  | 98.9%                           | 57.0%                                 | 45.1%        | 11.9%       | 24.6                               |
|                    | Bosworth                 | 20                          | 19                           | 87.9%  | 144.0%                         | 100.0%                                | 155.2%                         |                                    |  | 73.6%                           | 26.0%                                 | 25.8%        | 0.2%        | 5.7                                |
|                    | Heather                  | 17                          | 17                           | 85.5%  | 172.4%                         | 98.3%                                 | 237.9%                         |                                    |  | 63.2%                           | 38.8%                                 | 34.8%        | 4.0%        | 6.8                                |
|                    | Thornton                 | 20                          | 18                           | 84.9%  | 181.9%                         | 98.3%                                 | 101.7%                         |                                    |  | 69.0%                           | 39.5%                                 | 38.9%        | 0.6%        | 6.6                                |
|                    | Watermead                | 20                          | 19                           | 86.8%  | 177.6%                         | 100.0%                                | 275.9%                         |                                    |  | 75.9%                           | 41.0%                                 | 34.5%        | 6.5%        | 6.6                                |
|                    | Griffin Female PICU      | 5                           | 5                            | 176.5%                                       | 242.3%                         | 200.0%                                | 158.6%                         |                                    |  | 96.6%                           | 46.2%                                 | 26.9%        | 19.4%       | 17.8                               |
| AMH Other          | HP Phoenix               | 12                          | 11                           | 97.4%  | 151.7%                         | 100.0%                                | 150.0%                         |                                    |  | 96.6%                           | 12.5%                                 | 12.0%        | 0.5%        | 9.8                                |
|                    | SH Skye Wing             | 30                          | 27                           | 111.2%                                       | 160.6%                         | 193.1%                                | 117.2%                         |                                    |  | 96.6%                           | 34.4%                                 | 34.0%        | 0.4%        | 5.0                                |
|                    | Willows Unit             | 33                          | 33                           | 138.8%                                       | 205.4%                         | 116.4%                                | 231.0%                         |                                    |  | 98.9%                           | 21.6%                                 | 21.3%        | 0.3%        | 8.9                                |
|                    | ML Mill Lodge (New Site) | 13                          | 11                           | 101.7%                                       | 217.2%                         | 94.8%                                 | 160.3%                         |                                    |  | 90.8%                           | 35.8%                                 | 35.3%        | 0.6%        | 11.7                               |
| CHS City           | BC Kirby                 | 24                          | 18                           | 85.8%  | 231.9%                         | 94.8%                                 | 127.6%                         |                                    |  | 66.7%                           | 29.5%                                 | 27.6%        | 1.9%        | 7.3                                |
|                    | BC Welford               | 23                          | 22                           | 79.3%  | 211.9%                         | 94.8%                                 | 112.1%                         |                                    |  | 57.5%                           | 19.4%                                 | 18.8%        | 0.6%        | 5.6                                |
|                    | CB Beechwood             | 23                          | 21                           | 85.5%  | 234.4%                         | 100.0%                                | 101.7%                         | 100%                               | 100%                                   | 72.4%                           | 19.5%                                 | 12.5%        | 7.0%        | 8.1                                |
|                    | CB Clarendon             | 23                          | 21                           | 90.3%  | 241.4%                         | 98.3%                                 | 100.0%                         |                                    |  | 73.6%                           | 12.0%                                 | 6.7%         | 5.3%        | 6.5                                |
|                    | EC Coleman               | 20                          | 19                           | 61.5%  | 382.8%                         | 94.8%                                 | 265.5%                         |                                    |  | 28.7%                           | 42.5%                                 | 42.4%        | 0.1%        | 10.2                               |
|                    | EC Gwendolen             | 20                          | 15                           | 87.1%  | 358.6%                         | 94.8%                                 | 315.5%                         |                                    |  | 72.4%                           | 42.4%                                 | 41.2%        | 1.2%        | 13.3                               |
| CHS East           | FP General               | 9                           | 8                            | 162.2%                                       | 89.9%                          | 126.8%                                | -                              | 100%                               | 100%                                   | 74.7%                           | 41.1%                                 | 27.1%        | 14.0%       | 8.1                                |
|                    | MM Dalgleish             | 17                          | 14                           | 99.1%  | 128.4%                         | 112.1%                                | 179.3%                         | 100%                               | 100%                                   | 94.3%                           | 14.4%                                 | 11.0%        | 3.4%        | 8.1                                |
|                    | Rutland                  | 14                          | 11                           | 100.0%                                       | 102.3%                         | 96.6%                                 | 96.6%                          |                                    |  | 81.6%                           | 22.2%                                 | 10.8%        | 11.4%       | 6.6                                |
|                    | SL Ward 1 Stroke         | 17                          | 15                           | 84.9%  | 199.2%                         | 100.0%                                | 148.3%                         | 100%                               | 100%                                   | 71.3%                           | 31.9%                                 | 24.9%        | 7.0%        | 10.1                               |
|                    | SL Ward 3                | 12                          | 11                           | 100.0%                                       | 135.3%                         | 200.0%                                | 103.4%                         | 100%                               | 100%                                   | 94.3%                           | 34.6%                                 | 23.0%        | 11.6%       | 8.8                                |
| CHS West           | CV Ellistown 2           | 18                          | 15                           | 100.9%                                       | 187.9%                         | 200.0%                                | 103.4%                         | 100%                               | 100%                                   | 97.7%                           | 17.4%                                 | 11.3%        | 6.2%        | 9.4                                |
|                    | CV Snibston 1            | 14                          | 12                           | 114.8%                                       | 157.2%                         | 93.7%                                 | 146.6%                         | 100%                               | 100%                                   | 79.3%                           | 12.8%                                 | 10.4%        | 2.4%        | 11.5                               |
|                    | HB East Ward             | 22                          | 19                           | 83.2%  | 203.4%                         | 101.7%                                | 100.0%                         | 100%                               | 100%                                   | 65.5%                           | 14.0%                                 | 7.1%         | 6.9%        | 7.4                                |
|                    | HB North Ward            | 19                          | 17                           | 124.1%                                       | 175.0%                         | 101.7%                                | 119.0%                         |                                    |  | 96.6%                           | 31.6%                                 | 22.9%        | 8.6%        | 7.4                                |
|                    | Lough Swithland          | 24                          | 22                           | 99.1%  | 238.8%                         | 100.0%                                | 200.0%                         |                                    |  | 98.9%                           | 13.4%                                 | 11.0%        | 2.4%        | 6.1                                |
|                    | FYPC                     | Langley                     | 11                           | 10   | 100.7%                         | 323.7%                                | 100.0%                         | 181.0%                             | 100%                                   |                                 | 78.2%                                 | 58.4%        | 55.5%       | 3.0%                               |
|                    | CV Ward 3                | 7                           | 4                            | 179.0%                                       | 532.7%                         | 203.4%                                | 893.1%                         |                                    |  | 98.9%                           | 73.1%                                 | 44.3%        | 28.7%       | 50.2                               |
| LD                 | Agnes Unit               | 12                          | 7                            | 279.3%                                       | 1003.4%                        | 200.0%                                | 979.3%                         |                                    |  | 100.0%                          | 49.5%                                 | 47.2%        | 2.3%        | 40.1                               |
|                    | The Gillivers            | 5                           | 3                            | 110.3%                                       | 195.2%                         | 89.7%                                 | 148.3%                         |                                    |  | 94.3%                           | 13.0%                                 | 13.0%        | 0.0%        | 20.9                               |
|                    | The Grange               | 5                           | 2                            | -  | 135.5%                         | -                                     | 200.0%                         |                                    |  | 94.3%                           | 15.6%                                 | 15.6%        | 0.0%        | 29.6                               |
| <b>Trust Total</b> |                          |                             |                              | <b>103.6%</b>                                | <b>221.6%</b>                  | <b>113.2%</b>                         | <b>207.8%</b>                  |                                    |  | <b>74.5%</b>                    | <b>34.0%</b>                          | <b>28.6%</b> | <b>5.4%</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            | 87.9%                                  | 138.8%  | 98.3%                                  | 155.2%  | 30.0%         | 5.4                        | 15.5%↑         | 1↓                | 2          | 1          | 100%                     |
| Aston          | 19            | 87.9%                                  | 220.7%  | 105.2%                                 | 362.1%  | 41.4%         | 7.9                        | 10.4%          | 1                 | 2          | 1          | 80.0%                    |
| Beaumont       | 21            | 95.3%                                  | 141.4%  | 105.2%                                 | 203.4%  | 18.8%         | 5.4                        | 4.4%           | 4↑                | 7↑         | 1          | nil                      |
| Belvoir Unit   | 9             | 133.0%                                 | 350.0%  | 189.7%                                 | 521.4%  | 57.0%         | 24.6                       | 25.0%↓         | 1                 | 0↓         | 1↑         | nil                      |
| Bosworth       | 19            | 87.9%                                  | 144.0%  | 100.0%                                 | 155.2%  | 26.0%         | 5.7                        | 27.4%↑         | 0↓                | 0↓         | 0          | nil                      |
| Heather        | 17            | 85.5%                                  | 172.4%  | 98.3%                                  | 237.9%  | 38.8%         | 6.8                        | 17.7%          | 4↑                | 1↓         | 2↑         | nil                      |
| Thornton       | 18            | 84.9%                                  | 181.9%  | 98.3%                                  | 101.7%  | 39.5%         | 6.6                        | 4.9%           | 1                 | 0↓         | 1↑         | 100%                     |
| Watermead      | 19            | 86.8%                                  | 177.6%  | 100.0%                                 | 275.9%  | 41.0%         | 6.6                        | 30.4%↑         | 1↓                | 3↓         | 1↑         | nil                      |
| Griffin F PICU | 5             | 176.5%                                 | 242.3%  | 200.0%                                 | 158.6%  | 46.2%         | 17.8                       | 32.5%↑         | 0                 | 0          | 0          | nil                      |
| <b>TOTALS</b>  |               |  |   |  |   |               |                            |                | <b>13↑</b>        | <b>15↓</b> | <b>8↑</b>  |                          |

Table 3 - Acute inpatient ward safe staffing

#### 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 |                |                   |            |            |                          |
| Agnes Unit    | 7             | 279.3%                                 | 1003.4%                                       | 200.0%                                 | 979.3%  | 47.2%          | 40.1                       | 16.2%↑         | 2↑                | 7↓         | 0          | nil                      |
| The Gillivers | 3             | 110.3%                                 | 195.2%  | 89.7%                                  | 148.3%  | 13.0%          | 20.9                       | 4.7%↑          | 0                 | 0↓         | 0          | 90.0%                    |
| The Grange    | 2             | -                                      | 135.5%  | -                                      | 200.0%  | 15.6%          | 29.6                       | -9.3%↓         | 0                 | 3↑         | 0          | 100%                     |
| <b>TOTALS</b> |               |  |   |  |   |                |                            |                | <b>2↑</b>         | <b>10↓</b> | <b>0</b>   |                          |

Table 4 - Learning disabilities safe staffing



## 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            | 97.4%                                  | 151.7%  | 100.0%                                 | 150.0%  | 12.5%          | 9.8                        | 4.1%↓          | 0                 | 0     | 0          | nil                      |

Table 5- Low secure safe staffing

## Rehabilitation Services

| 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 |                |                   |           |            |                          |
| Skye Wing     | 27            | 111.2%                                 | 160.6%  | 193.1%                                 | 117.2%  | 34.4%          | 5.0                        | -10.1%         | 2↑                | 1         | 0          | nil                      |
| Willows Unit  | 33            | 138.8%                                 | 205.4%  | 116.4%                                 | 231.0%  | 21.6%          | 8.9                        | 7.7%           | 0↓                | 1↓        | 0          | nil                      |
| Mill Lodge    | 11            | 101.7%                                 | 217.2%  | 94.8%                                  | 160.3%  | 35.8%          | 11.7                       | 7.6%↓          | 0                 | 3↑        | 0          | nil                      |
| <b>TOTALS</b> |               |  |   |  |   |                |                            |                | <b>2↓</b>         | <b>5↓</b> | <b>0</b>   |                          |

Table 6 - Rehabilitation service safe staffing

## 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     | 8             | 162.2%                                 | 89.9%   | 126.8%                                 | -   | 41.1%         | 8.1                        | 30.3%          | 3↑                | 2↓         | 0↓         | 100%                     |
| MM Dalgliesh   | 14            | 99.1%                                  | 128.4%  | 112.1%                                 | 179.3%  | 14.4%         | 8.1                        | 3.4%↑          | 0                 | 5↑         | 0          | nil                      |
| Rutland        | 11            | 100.0%                                 | 102.3%  | 96.6%                                  | 96.6%   | 22.2%         | 6.6                        | 28.9%          | 0                 | 1↓         | 0↓         | 100%                     |
| SL Ward 1      | 15            | 84.9%                                  | 199.2%  | 100.0%                                 | 148.3%  | 31.9%         | 10.1                       | 12.0%↑         | 1↓                | 3          | 2↑         | 100%                     |
| SL Ward 3      | 11            | 100.0%                                 | 135.3%  | 200.0%                                 | 103.4%  | 34.6%         | 8.8                        | 27.6%          | 1↓                | 2          | 0          | 93.3%                    |
| CV Ellistown 2 | 15            | 100.9%                                 | 187.9%  | 200.0%                                 | 103.4%  | 17.4%         | 9.4                        | 7.3%↑          | 0↓                | 2↓         | 1↑         | 100%                     |
| CV Snibston 1  | 12            | 114.8%                                 | 157.2%  | 93.7%                                  | 146.6%  | 12.8%         | 11.5                       | 14.7%          | 1↓                | 2↓         | 0          | 100%                     |
| HB East Ward   | 19            | 83.2%                                  | 203.4%  | 101.7%                                 | 100.0%  | 14.0%         | 7.4                        | 2.3%↓          | 1↓                | 3↓         | 0          | 100%                     |
| HB North Ward  | 17            | 124.1%                                 | 175.0%  | 101.7%                                 | 119.0%  | 31.6%         | 7.4                        | 24.7%↓         | 0                 | 0          | 1          | 100%                     |
| Swithland      | 22            | 99.1%                                  | 238.8%  | 100.0%                                 | 200.0%  | 13.4%         | 6.1                        | 19.1%          | 0                 | 4          | 0          | nil                      |
| CB Beechwood   | 21            | 85.5%                                  | 234.4%  | 100.0%                                 | 101.7%  | 19.5%         | 8.1                        | 20.7%↑         | 0↓                | 1↓         | 1↑         | 100%                     |
| CB Clarendon   | 21            | 90.3%                                  | 241.4%  | 98.3%                                  | 100.0%  | 12.0%         | 6.5                        | 14.1%          | 0↓                | 5↑         | 1          | 100%                     |
| <b>TOTALS</b>  |               |  |   |  |   |               |                            |                | <b>7↓</b>         | <b>30↓</b> | <b>6↑</b>  |                          |

Table 7 - Community hospital safe staffing

## 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      | 18            | 85.8%                                  | 231.9%  | 94.8%                                  | 127.6%  | 29.5%         | 7.3                        | 28.1%          | 1↑                | 13↑        | 0          | nil                      |
| BC Welford    | 22            | 79.3%                                  | 211.9%  | 94.8%                                  | 112.1%  | 19.4%         | 5.6                        | 19.8%↓         | 0                 | 5↑         | 0          | nil                      |
| Coleman       | 19            | 61.5%                                  | 382.8%  | 94.8%                                  | 265.5%  | 42.5%         | 10.2                       | 10.3%          | 1                 | 4↓         | 0          | nil                      |
| Gwendolen     | 15            | 87.1%                                  | 358.6%  | 94.8%                                  | 315.5%  | 42.4%         | 13.3                       | 15.4%↑         | 1                 | 14↓        | 0↓         | 85.7%                    |
| <b>TOTALS</b> |               |  |   |  |   |               |                            |                | <b>3↑</b>         | <b>36↑</b> | <b>0↓</b>  |                          |

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

## 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           | 10            | 100.7%                                 | 323.7%  | 100.0%                                 | 181.0%  | 58.4%         | 12.1                       | 20.1%↑         | 2                 | 0        | 0          | nil                      |
| CV Ward 3 - CAMHS | 4             | 179.0%                                 | 532.7%  | 203.4%                                 | 893.1%  | 73.1%         | 50.2                       | -24.1%         | 2                 | 0        | 1↑         | nil                      |
| <b>TOTALS</b>     |               |  |   |  |   |               |                            |                | <b>4</b>          | <b>0</b> | <b>1↑</b>  |                          |

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