NHS
Leicestershire Partnership
NHS Trust

Meeting Name and date	Trust Board – 27 May 2020
Paper number	

Name of Report - **SAFE STAFFING - MARCH 2020 REVIEW**

For approval		For assurance	☑	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	☑	S – High Standards	☑
Effective		T - Transformation	
Caring		E – Environments	
Responsive		P – Patient Involvement	
Well-Led		G – Well-Governed	☑
		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
Partial; Established processes are in place to monitor and ensure staffing levels are safe and that patient safety and care quality is maintained. Due to Covid-19 national and Trust data collection for safe staffing paused, no fill rates against planned staffing or CHPPD.	1,4,26
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 – 27 MAY 2020

SAFE STAFFING – MARCH 2020 REVIEW

Introduction/Background

1   This report provides an overview of nurse safe staffing during the month of March 2020, including an overview of staffing areas to note, updates in response to the COVID-19 pandemic, potential risks and actions to mitigate the risks to ensure that safety and care quality are maintained.

2   The report triangulates workforce metrics, quality and outcomes linked to Nurse Sensitive Indicators (NSIs) and patient experience feedback. A summary is available in Annex 1.

Recommendations

3   For the Trust Board 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 March 2020

Right staff

- NHS digital paused submission of monthly UNIFY returns; fill rates against planned RN & HCSW staffing and CHPPD which formulates the Trust safe staffing scorecard and analysis/reporting for 'right staff and right place'.

- In response and preparedness for COVID-19, services, wards and teams have changed. As a result we have adapted and flexed our planned staffing numbers to reflect bed occupancy and patient acuity and dependency. For these reasons we are unable to report against the usual planned staffing for each in-patient area, and as a consequence actual staffing against planned staffing will not be accurate or real time in future weeks and months.

- Temporary worker utilisation rate decreased significantly this month 10.31%; reported at 23.69% and Trust wide agency usage decreased this month by 1.38% to 4.02%. The decreased bank and agency utilisation in March 2020 reflects the reduced bed occupancy and flexed staffing levels to meet patient needs.

- The following wards utilised above 6% agency staff; Belvoir, Griffin, Clarendon, Beechwood, Feilding Palmer, Rutland, St Lukes Wards 3 and Langley. These wards have a combination of factors that have resulted in higher use of agency staff; high

vacancy factors, increased patient acuity and dependency and hard to fill bank shift areas.

- There are thirteen inpatient 'areas to note' identified by; high percentage of temporary worker/agency utilisation or by the Head/Deputy Head of Nursing 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 eight of the thirteen areas are due to agency utilisation above 6% and three are due to being COVID-19 designated wards.

- There are eight community team 'areas to note' with no new areas identified in March 2020. 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

- On 24 March 2020, the Trust made the decision to cancel all face to face courses until 30 June 2020. As a result the high level overview of clinical training, appraisal and supervision for triangulation is not presented this month.

- The only exception is redeployed staff or new starters whom have attended a one stop face to face educational programme delivered by the Learning & Development team.

- In response to the COVID-19 pandemic, a programme of face to face training commenced delivered by the Infection Prevention & Control team supported by others, including; Donning and Doffing of Personal Protective Equipment (PPE) and FFP3 Mask Fit Test training. Training is supported with posters and action cards on staff net and videos on uLearn.

Right Place

- The Trust identified three 'COVID-19' wards; Beaumont, Gwendolen and East Ward to maintain separation between possible and confirmed COVID-19 patients and support patient and staff cohorting.

- On 31 March 2020 CAMHS Ward 3 Coalville closed and patients were moved to Bosworth Ward in order to support the Trust surge and capacity plans.

- Short breaks closed to respite care from Monday 30 March 2020.

- The Trust developed a surge capacity plan for medical step down requirements to increase capacity 63% by 140 beds, recommissioning and commissioning ward space including;
    - Charnwood Ward 18 beds
    - Grace Dieu Ward 18 beds
    - Ward 4 Coalville 17 beds
    - Existing community hospital bed base additional space
    - Partnership with the Independent Sector

- FYPC community health services prioritised service provision as per the national guidance released on 19th March 2020 in order to release staff members to support high

priority areas in LPT Adult Community Health Services. In addition six staff members have been redeployed to support a variety of acute areas across UHL.

- In total 80 staff members across FYPC were redeployed to CHS with the first cohort commencing 6th April 2020.

- The services postponed include;
  - National Child Measurement Programme
  - Audiology (with the exception of urgent assessments)
  - Healthy Child Clinics- face to face appointments: advice, assessment and support
  - Universal 3-4month assessments, 1 year and 2 year assessments (home and clinic based)
  - School Nursing service provision (except safeguarding, phone and textual support)
  - Therapy interventions: medium and low priority work for Speech and Language Therapy, Physio, Occupational Therapy
  - Looked after Children-(except safeguarding, initial reviews and assessments)
  - Nursing and Therapy teams support for long term conditions: medium and lower priority work
  - School aged immunisation service

Staff leave data

- The table below shows leave captured by the HR isolation sheet as of 31 March 2020 to include staff working from home and those shielding, absence due to sickness or special leave;

Number	Type of leave	AMH	MHSOP	CHS	FYPC	LD	Enabling	Hosted	Bank
215	Working from home	30	26	48	81	5	18	7	0
89	Sick Leave	12	27	23	10	2	3	0	12
209	Special Leave	47	17	64	54	16	11	0	0
22	Undefined and seeking clarification	2	0	18	0	1	1	0	0
535 (bank = 523)	Totals	91	70	153	145	24	33	7	12
Headcount 5378	**4 % WFH 6 % Absent (Total 10 %) Other absences 284 – 5.3% Overall total 15.3%**								
41	**Shielding (included in the figures above)**	9	3	14	7	6	2	0	0

Table 1 – Staff sickness, special leave, absence and shielding

From April 2020 the data will include;
- Covid-19 related absence/ general absence
- Numbers of staff self-isolating
- Numbers of staff acutely unwell
- Confirmed staff Covid-19 cases

In-patient Staffing

4   Summary of inpatient staffing areas to note;

Wards	Jan 2020	Feb 2020	March 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	X
St Lukes Ward 3	X	X	X
Coalville Ward 2		X	
Short Breaks - The Gillivers	X		
Short Breaks – The Grange	X		
Coleman	X	X	
Gwendolen			X
Welford		X	
Beaumont			X
Belvoir	X	X	X
Griffin	X	X	X
Watermead		X	
Agnes Unit		X	
Langley	X		X
Ward 3 Coalville (CAMHS)	X	X	X

Table 1 – In-patient staffing areas to note

5   Areas to note are identified either by the Head/Deputy Head of Nursing due to; high percentage of temporary worker/agency utilisation, or concerns relating to; increased acuity, high risk patients, staff sickness, ability to fill additional shifts and the impact to safe and effective care.Covid-19 wards are also identified as areas to note; East Ward Hinckley, Beaumont and Gwendolen Wards.

6   The following wards utilised above 6% agency staff; Belvoir, Griffin, Clarendon, Beechwood, Feilding Palmer, Rutland, St Lukes Wards 3 and Langley. 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.

7   Number of occupied beds, temporary workforce percentage together with the NSIs that capture outcomes most affected by nurse staffing levels is presented in the tables per in-patient area by service and directorate in Annex 2.

Community Teams

8   Summary of community 'areas to note';

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

Table 11 – Community areas to note

9   Community areas to note are identified either by the Head/Deputy Head of Nursing due to; high percentage of temporary worker/agency utilisation, or concerns relating to; increased case load, high risk patients, staff sickness, ability to fill additional shifts and the impact to safe and effective care.

10   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. In line with Covid-19 preparedness all teams have reviewed and identified business critical patient visits.

11   It is predicted that by July 2020 Healthy Together Leicester City will require 6.0 WTE Health Visitors, 1.3 WTE School Nurse (Band 6) and 1.0 WTE School Nurse (Band 5) to meet the year 3/ 4 model. This is due to unfilled vacancies, staff retirement and staff who have retired and returned on reduced hours. Up until the Covid-19 National prioritisation model, Healthy Together – Leicester City offered the entire Healthy Child Programme. It is envisaged that safeguarding numbers will increase in the coming months as face to face contacts increase in line with Covid-19 safeguarding guidance.

12   Both East & West Healthy Together teams remain in AMBER prioritisation despite recruitment to Health Visitor posts due to leavers, school nursing continue to have difficult recruiting to Band 6 SCPHN roles.

13   The Diana service is currently staffed at 80% and at an amber prioritisation implemented prior to the Covid-19 pandemic and continues at amber.

14   Continuing care team recruitment delayed due to Covid-19, due to recommence mid-May 2020.

15   Whilst there are no 'areas to note' in AMH/LD in March 2020, Covid-19 pandemic and emergency planning for surge has impacted on community teams. Non-essential community services have temporarily closed, and staff from the Mett Centre and Recovery College have been redeployed to inpatient areas. Within other community services, face-to-face contacts have been suspended wherever possible, and telephone appointments are now offered.

<u>Conclusion</u>

11   In light of the triangulated review of workforce metrics, 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 areas to note, to ensure that every ward and community team is safely staffed.

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

Annexe 1: Inpatient Ward triangulation staffing and NSIs.

Trust thresholds are indicated below;
- Temporary worker utilisation (bank and agency);
    - o green indicates threshold achieved less than 20%
    - o amber is above 20% utilisation
    - o red above 50% utilisation

- Quality Schedule methods of measurement are RAG rating;
    - o B – Less than 6% of clinical posts to be filled by agency staff
    - o Red above 6% agency usage

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

Acute Inpatient Wards

Ward	Occupied beds	Temp Workers%	Agency %	Bank %	Medication errors	Falls	Complaints
Ashby	87.4%	32%	4%	28%	1	3↑	0
Aston	94.2%	14%	2%	12%	1	0↓	0
Beaumont	55.6%	12%	1%	11%	1↓	5↓	0
Belvoir Unit	96.1%	45%	16%	29%	2↑	0	0
Bosworth	94.2%	26%	2%	24%	3↑	0	0
Heather	94.1%	28%	5%	23%	2↓	6↑	1↓
Thornton	93.2%	32%	2%	30%	1	0	1↑
Watermead	96.8%	28%	4%	24%	0	5↑	0
Griffin F PICU	69.4%	43%	12%	31%	0	0	0
TOTALS					11↓	19↑	2↓

Table 2 - Acute inpatient ward safe staffing

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

Learning Disabilities (LD) Services

Ward	Occupied beds	Temp Workers%	Agency %	Bank %	Medication errors	Falls	Complaints
Agnes Unit	63.4%	34%	4%	30%	1↓	6↓	0
The Gillivers	60.3%	12%	0%	12%	0	0	0
The Grange	34.5%	5%	0%	5%	3↑	2↓	0
TOTALS					4↑	8↓	0

Table 3 - Learning disabilities safe staffing

Analysis of the falls incidences in LD has identified the following themes linked to patient factors:
- Falls experience as a result of Epileptic seizures and unsteady gait
- Compromised spacial awareness

Low Secure Services – Herschel Prins

Ward	Occupied beds	Temp Workers%	Agency %	Bank %	Medication errors	Falls	Complaints
HP Phoenix	95.7%	13%	1%	12%	1↑	0	0

Table 4- Low secure safe staffing

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

Rehabilitation Services

Ward	Occupied beds	Temp Workers%	Agency %	Bank %	Medication errors	Falls	Complaints
Skye Wing	89.9%	18%	1%	17%	0↓	7↑	0
Willows Unit	94.1%	21%	0%	21%	4↑	1	0
Mill Lodge	84.6%	24%	1%	23%	1↑	5↑	0
TOTALS					5↑	13↑	0

Table 5 - Rehabilitation service safe staffing

The increase in number of reported incidents regarding medication errors is due to increased reporting of e-CD system and recording issues and also self medication (as part of patient rehabilitation pathway) incidents. None of the reported incidents had a link to staffing levels or skill mix.

Falls incidences have been reviewed, there is no indication that any fall was linked to staffing levels or skill mix. Analysis has identified the following themes and patient factors;
- Effects of influence of illegal substances
- Walking aids
- Effects of PRN medication
- Effects of physical health
- Communication method (HD) or ways of responding to distress, anxiety moving away from bed

Community Health Services (CHS)

Community Hospitals

Ward	Occupied beds	Temp Workers%	Agency %	Bank %	Medication errors	Falls	Complaints
FP General	83.9%	18%	7%	14%	1↓	5↑	0
MM Dalgliesh	85.3%	9%	2%	7%	1↑	2↓	0
Rutland	80.5%	25%	9%	16%	2↑	1	0
SL Ward 1	88.8%	14%	2%	12%	2↑	6↑	0↓

SL Ward 3	84.5%	25%	11%	14%	2↑	1↓	0
CV Ellistown 2	84.6%	11%	3%	8%	0	7↑	0↓
CV Snibston 1	90.0%	4%	1%	3%	0↓	6↑	0
HB East Ward	65.5%	15%	4%	11%	1	4↑	0
HB North Ward	87.4%	32%	7%	25%	0	5↑	0↓
Swithland	88.0%	12%	1%	11%	0	3↓	0
CB Beechwood	90.2%	18%	7%	11%	0	1	0↓
CB Clarendon	76.0%	12%	7%	5%	4↑	7↑	0↓
TOTALS					**13↑**	**48↑**	**0↓**

Table 6 - Community hospital safe staffing

A review of the NSIs for the community hospital wards has identified that there was an increase in falls incidents from February 2020 to March2020 on Ellistown, Snibston 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.

Mental Health Services for Older People (MHSOP)

Ward	Occupied beds	Temp Workers%	Agency %	Bank %	Medication errors	Falls	Complaints
BC Kirby	82.3%	27%	4%	23%	2↑	17↑	0
BC Welford	76.2%	18%	4%	14%	0	9↑	0
Coleman	89.7%	31%	1%	30%	0↓	8↑	0
Gwendolen	72.7%	32%	5%	27%	1	10↓	1↑
TOTALS					**3**	**44↑**	**1↑**

Table 7 - Mental Health Services for Older People (MHSOP) safe staffing

A review of the NSIs and patient feedback has not identified any staffing impact on the quality and safety of patient care/outcomes. The increased falls on Kirby were attributed to organic patients with a history of falls, all falls were assessed and patients cared for in line with the Trust policy for falls.

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

Ward	Occupied beds	Temp Workers%	Agency %	Bank %	Medication errors	Falls	Complaints
Langley	84.5%	43%	12%	31%	1↓	0	1↑
CV Ward 3 - CAMHS	62.5%	49%	4%	45%	0	0	0
TOTALS					**1**	**0**	**1↑**

Table 8 - Families, children and young people's services safe staffing

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