

Public Trust Board – 21st December 2021

Safe Staffing November 2021 Interim highlight report

Purpose of the report

This report provides an interim overview of safe staffing, key areas to note, during the month of November 2021, staffing challenges with moderate/high risk of potential impact to quality, safety, and experience. This is an interim report format as the Trust staffing scorecard data including workforce metrics; fill rates, Care Hours Per Patient Day (CHPPD) and Nurse Sensitive Indicators (NSIs) is not available for analysis and review to meet the Trust board deadline in December 2021, as it is an earlier Trust board meeting this month.

The interim report is based on the weekly safe staffing situational and forecast meeting reviews. The full triangulated monthly safe staffing review for November 2021 will be submitted to Trust board in January 2022.

Background

A safe staffing organisational risk deep dive was presented to the Quality Forum in October 2021, situation report and discussion held at Strategic Executive Board on the 5 November 2021 with a further presentation at the Trust Board development session on the 26 November 2021.

Self-assessment against; Key actions Winter 2021 preparedness: Nursing and midwifery safer staffing (NHS, November 2021) assurance framework is submitted separately to the Trust Board, including a summary report, GAP analysis and actions to enhance assurance against Key Lines of Enquiry (KLOE).

Analysis of the issue

Areas to note throughout November 2021 as identified/discussed by exception at the weekly safe staffing meetings, reported using the NHSI Developing Workforce Safeguards risk ratings:

- Low risk (green) staffing is safe. Ward/community teams are managing their workload
- Moderate risk (amber) – caution: staffing is at 50% trust RN and 50% bank/agency
- High Risk (red) – depleted: trust considers area to be high risk, actions may include part or full closure of a service or reduced provision, for example, wards, beds, teams, realignment, or change to skill mix

The table below outlines the moderate and high-risk key areas to note for both community

and inpatients.

Area	Situation	Actions /mitigations	Rag /Assurance
Beacon Unit (CAMHS)	Increased acuity and dependency with significant vacancies and reduced substantive staff members, ongoing impact	<p>Bed capacity reduced to 7, until December 2021. High utilisation of bank and agency staff to meet planned safe staffing with enhanced staffing model. Unit continues to progress with Quality Improvement plan (with QAC oversight). Block booking of bank and agency. Successful recruitment to band 7 /6/5 in progress. Evidence based establishment review completed and presented to DMT.</p> <p>All staff in non-patient facing roles with a clinical qualification working within the staffing establishment to support continuity of care.</p>	
Agnes unit	Increased acuity and dependency, with increased new admissions, significant vacancies	<p>High utilisation of bank and agency and increased enhanced staffing model to meet increased patient acuity. Block booking of bank and agency staff. Recruitment progressing to RN's and HCSW vacancies. Establishment review in progress.</p> <p>All staff in non-patient facing roles with a clinical qualification working within the staffing establishment to support continuity of care.</p>	
CHS in patients	Increased patient acuity and dependency requiring	Daily safe staffing review and substantive staff movement	

	<p>enhanced observations and high vacancies, sickness, maternity leave.</p> <p>All in patient wards operating at amber due to staffing at 50% trust RN and 50% bank/agency.</p> <p>Key areas to note; North and East ward, Beechwood, Clarendon, Rutland and Dagleish (North ward also Covid 19 risk managed).</p>	<p>across the service to ensure substantive RN cover. Block booking of temporary workers.</p> <p>Planned additional flexible workers at night to cover last minute cancellations/shortfalls.</p> <p>Establishment reviews in progress.</p> <p>Recruitment ongoing with 16 international nurses recruited to a number of Wards.</p>	
DMH in patients	<p>Increased vacancies, sickness, and absence (Covid and non-Covid related) increased acuity and complexity.</p> <p>Increased internal movement and promotions to urgent care pathway roles and step up to great mental health transformation.</p> <p>Key areas to note; Mill Lodge, Griffin, Beaumont, and Belvoir Unit.</p>	<p>Mill lodge – partial closure to admissions due to staffing with daily directorate review, high utilisation of bank and agency to meet planned staffing, establishment review in progress, recruitment ongoing to include international nurse’s and HCSW’s.</p> <p>High utilisation of bank and agency to meet planned safe staffing levels. Block booking where possible. Movement across service to support substantive cover.</p> <p>Flexible worker to cover last minute cancellations/shortfalls.</p> <p>Establishment reviews in progress.</p>	
CHS Community Teams	<p>Increased patient acuity across all teams with increased caseload, high vacancies absence and sickness.</p> <p>Operating at OPEL 3, with higher risk in the city community nursing hub.</p>	<p>Business continuity plans in place including caseload review, urgent and essential visits, reprioritisation of patient assessments/clinics/wound and holistic assessments.</p>	

	<p>Key areas to note; City East, City West and East Central.</p>	<p>Support from Tissue Viability and Podiatry, close monitoring of all data and clinical activity. Quality Summit held in November 2021 in response to potential pressure ulcer harm. Targeted bespoke community nursing recruitment continues.</p>	
<p>FYPC/LD community Teams</p>	<p>High vacancies, increased number of staff retirements, staff absence due to sickness (covid and non-covid).</p> <p>Key areas to note; Healthy Together City and County teams notably Blaby. Looked After Children and Diana team.</p>	<p>Healthy Together city/county reduced service offer, caseload review, movement of staff, utilisation of temporary workforce, managers/team leaders working clinically, all incidents, concerns and staff feedback monitored closely. Quality Impact assessment in place.</p> <p>Looked After Children; reduced service offer, close weekly monitoring within directorate.</p> <p>Diana team; reduced respite service offer, unable to use temporary workforce due to specialist skills /competencies.</p>	
<p>MH Community</p>	<p>High vacancies across all teams, higher demand of routines referrals, internal staff movement/promotion as part of transformation work (destabilising other parts of the service)</p> <p>Key areas to note; Crisis Resolution & Home Treatment team, Central Access Point (CAP), South Leicestershire/Charnwood, Assertive Outreach. ADHD and</p>	<p>Crisis Resolution and Home treatment team experiencing high vacancies 40% of substantive staff, unable to use temporary workforce due to specialist skills/competencies.</p> <p>Central Access Point, CMHTs, memory service all with control measures in place to try to mitigate risks to quality, safety & experience. (Moderate risk)</p>	

	memory service.		
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Proposal

Considering the highlighted key areas to note in November 2021 it is proposed that staffing challenges continue and there is emerging evidence that current controls and implementing business continuity plans are not always mitigating the impact to the quality and safety of patient care across all services.

Decision required

The board is asked to confirm a level of assurance that processes are in place to monitor inpatient and community staffing levels and that actions are in place to try to mitigate the risks to patient safety and care quality.

Governance table

For Board and Board Committees:	
Paper sponsored by:	Anne Scott, Executive Director of Nursing, AHPs and Quality
Paper authored by:	Emma Wallis, Interim Deputy Director of Nursing &

	Quality, Elaine Curtin Workforce and Safe Staffing matron	
Date submitted:	21.12.2021	
State which Board Committee or other forum within the Trust's governance structure, if any, have previously considered the report/this issue and the date of the relevant meeting(s):		
If considered elsewhere, state the level of assurance gained by the Board Committee or other forum i.e. assured/ partially assured / not assured:		
State whether this is a 'one off' report or, if not, when an update report will be provided for the purposes of corporate Agenda planning	Interim monthly report. Full report to be provided to January 2022 Trust Board	
STEP up to GREAT strategic alignment*:	High Standards	✓
	Transformation	
	Environments	
	Patient Involvement	
	Well Governed	✓
	Single Patient Record	
	Equality, Leadership, Culture	
	Access to Services	
	Trust wide Quality Improvement	
Organisational Risk Register considerations:	List risk number and title of risk	1: Deliver Harm Free Care 4: Services unable to meet safe staffing requirements
Is the decision required consistent with LPT's risk appetite:	Yes	
False and misleading information (FOMI) considerations:	None	
Positive confirmation that the content does not risk the safety of patients or the public	Yes	
Equality considerations:		