

Board of Directors' Meeting Report – 5 December 2017

Agenda item 91/17

Title	Safe staffing report for August, September & October 2017
Sponsoring Director	Diane Sarkar, Chief Nurse
Authors	Denise Townsend, Site Director of Nursing Kathy Maloney – Safe Staffing Facilitator
Purpose	To report the Nursing & Midwifery staffing levels submitted to NHS England via Unify for the months of August, September & October 2017, reporting the percentage fill rate for each ward area and the impact on capacity and capability to deliver safe care.
Previously considered at	Heads of Nursing 24 th November 2017
Executive Summary	
August	
<p>The registered nurse (RN) fill rate for days for August 2017 is 94.03% and night fill rate for August is 92.8%.</p> <p>Critical care had an overall RN fill rate below 80%, however as demonstrated in the paper the bed occupancy in the unit was significantly reduced and staffing was flexed to the appropriate and safe levels for the patients being cared for, if the occupancy was reduced then the staffing would not have red flagged on the majority of shifts.</p> <p>2 hospital acquired avoidable pressure ulcers were reported- 1 grade 3 on Princess Anne ward and 1 grade 2 on Castlepoint Ward, both wards had overall staffing over 85% and the RCAs did not highlight staffing as a contributing factor.</p> <p>3 moderate falls were reported, 1 on Windsor ward, 2 on Balmoral ward and 1 extreme fall on Eleanor Hobbs, although the overall fill for Windsor ward on days was 78.8% none of the RCAs for these falls has correlated that staffing levels were a factor in the fall.</p>	
September.	
<p>The RN fill rate for days for September is 89.1% and night fill rate for September 92.3% .</p> <p>There were 3 Hospital acquired grade 2 pressure ulcers on Castlepoint, Blenheim and CCU/Gordon Hopkins, of these Blenheim ward fill rates were below 85% for days only; the RCAs into these cases had no direct correlation to staffing levels.</p> <p>There were 2 high severity falls on Paglesham and Windsor wards with Moderate falls on Benfleet, Castlepoint and Windsor, the RCAs for these cases does not show a direct</p>	

correlation with staffing levels.

October

The RN fill rate for days is 91.5% and night fill rate is 94.4%.

There was 1 high severity fall on Elizabeth Loury ward during this period, the staffing levels were consistently over 90% and the RCA did not show that staffing had a direct impact on the fall.

Overview

Staffing ratios continue to be monitored daily by Senior Nurses within the trust. Bank and agency staff have been utilised to maintain patient safety where vacancy rates remain high to achieve fill rates.

The Trust vacancy position for Registered Nurses has increased by 13.07 WTE over the 3 months from 730.78 WTE in post to 743.85.

Related Trust Objective	Excellent Patient Outcomes Excellent Patient Experience Engaged and Valued Staff
Related Risk	Risk 1 - Failure to provide adequate patient safety , quality of care and patient experience due to capacity, demand and external agency stakeholder engagement Risk 4 - Inability to recruit and retain staff
Essex Success Regime	This report does not have any impact on other Trusts in the Essex Success Regime at the current time
Legal implications / regulatory requirements	NHS England and our regulators expect organisations to ensure that staffing capacity and capability are appropriately funded, maintained and monitored. The CQC will monitor how well staffing requirements are met as part of their inspection programme
Quality impact assessment	Staffing levels need to be at an adequate level to provide safe nursing care. The impact on quality will be dependent upon the registered nurse to patient ratio, acuity and dependency of patients and the skills and capability of the staff.
Equality impact assessment	Monitoring the outcomes will enable us to understand the impact of any staffing deficits on care, including patients with protected characteristics of 'age' and 'disability'.

Recommendations: The Board is asked to note this report and receive assurance

Safer Staffing Nursing and Midwifery August, September & October 2017

1.0 PURPOSE

This paper outlines the Nursing and Midwifery safer staffing for August, September & October 2017

2.0 BACKGROUND

The Trust is required to submit data monthly to Unify, detailing ward nursing and midwifery staffing fill rates and bed days; reporting the impact on capacity and capability to deliver safe care. Monthly Unify data is also displayed on the Trust website.

The staffing level fill rates are RAG rated as Green above 90%, Amber 80-89% and Red below 79%.

The numbers of falls with serious harms and hospital acquired pressure ulcers are also correlated with safer staffing levels.

RED FLAGS

Staffing is monitored centrally for the Trust by a Senior Nurse, in liaison with Matrons and Head Nurses. It is assessed against agreed staffing levels for each ward and department based upon NICE guidance of an RN ratio of 1:8 with professional judgement. Red flags are highlighted and recorded centrally where RN staffing levels have fallen below the agreed levels resulting in a reduction of 25% of RN time per shift. Following assessment of staffing levels by Senior Nurses mitigation is put in place to maintain safe staff/patient ratios as appropriate or a review of the acuity and dependency of the patients and a suitable mix of Trust staff with bank/agency nurses. Risk assessments are completed daily for areas where concerns are Red flags are unable to be mitigated and escalation beds are used.

3.0 STAFFING LEVELS – August

Staffing Measures	Previous month (1) July	August (2)	Change Month 1-2	↑ ↓
Nursing establishment wte RN	867.85	865.85	2.0	↓
Nursing establishment wte in post RN	730.78	722.19	8.59	↓
Vacancy wte RN wte	137.07	143.66	6.59	↑
Vacancy % RN	15.79%	16.59%	0.8%	↑
Number of red flags raised- nerve centre & ward reported	268	361	93	↑
Nurse agency % of pay bill RN	7%	7%		↔
RN Planned v actual hours used %	84.8%	97.66%	12.86%	↓
Care hours per patient day Actual – RN	5.4	5.0	0.4	↑

Nursing establishment reduction by 2.0 wte is due to a change in the budgeted wte for the emergency department, however in establishment summaries for Sept & Oct this reverts to previous levels and is not a permanent change and did not affect daily staffing numbers.

Red flags reported by Nerve centre and e-roster have increased by 93. This is due to the difficulty of filling bank/agency shifts during the summer holiday period. The area reporting the highest number of red flags was the Emergency Dept. who had 49 red flags out of 361 (13.5%), this is due to vacancies of 11.44 wte RN's, 4 of these posts were planned for newly qualified nurses (NQN) in September. The stroke unit also had a high number of red flags – 39 of 361 (10.8%), this is also due to a high vacancy rate of 31.20%, 3 newly qualified RN's are also planned to commence in September.

September

Staffing Measures	Previous month (1) August	September (2)	Change Month 1-2	↑ ↓
Nursing establishment wte RN	865.85	872.99	6.54	↑
Nursing establishment wte in post RN	722.19	729.58	7.39	↑
Vacancy wte RN wte	143.66	142.81	0.85	↓
Vacancy % RN	16.59%	16.37%	0.22%	↓
Number of red flags raised- nerve centre & ward reported	361	384	23	↑
Nurse agency % of pay bill RN	7%	7%	0	↔
RN Planned v actual hours used %	97.66%	90.53%	7.13%	↓
Care hours per patient day Actual – RN	5.0	4.8	0.2	↑

The increase in nursing establishment is due to 2.0wte change in the budget in Accident & Emergency in September where the budget returned to previous level. The remaining change of 4.54 was due to changes in budgets in Midwifery where some posts were moved between community and hospital services.

As the operational demands of the Trust increased in September there was also an increase in Red flags reported in Nerve centre and e-roster. During this time escalation beds increased from 6 in August to a maximum of 28 in September. The highest report of red flags was in the Emergency Department with 44 red flags of 384. The stroke unit also had a high number of red flags – 39 of 384, at this time they also had a vacancy rate of 33.72 WTE.

October

Staffing Measures	Previous month (1) September	October (2)	Change Month 1-2	↑ ↓
Nursing establishment wte RN	872.99	872.19	0.8	↓
Nursing establishment wte in post RN	729.58	743.85	14.27	↑
Vacancy wte RN wte	142.81	128.34	14.47	↓
Vacancy % RN	16.37%	14.71	1.66	↓
Number of red flags raised- nurse centre & ward reported	384	344	40	↓
Nurse agency % of pay bill RN	7%	7%	0	↔
RN Planned v actual hours used %	90.53%	92.85	2.32	↑
Care hours per patient day Actual – RN	4.8	4.7	0.1	↓

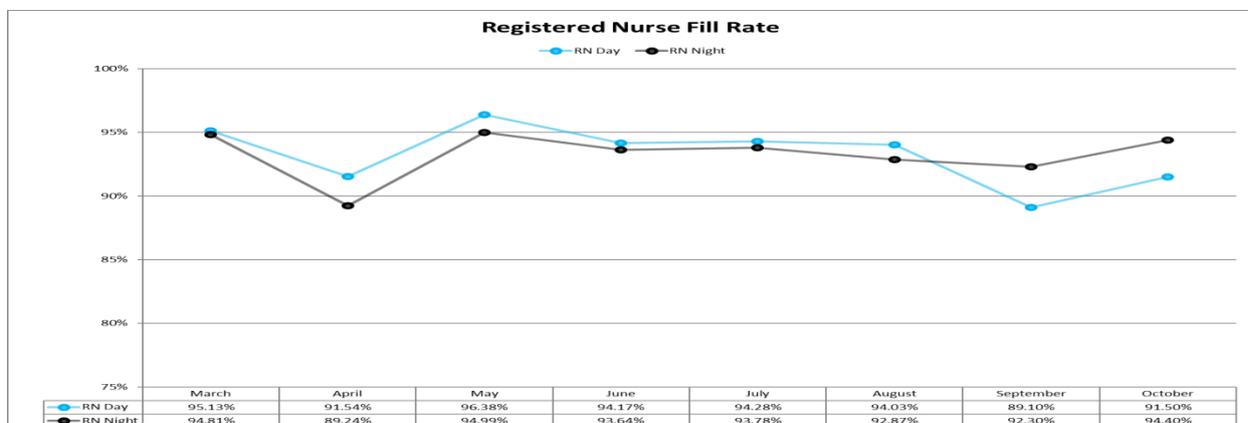
Nursing RN in post has increased due to newly qualified staff commencing in the Trust this has led to a decrease in red flags reported.

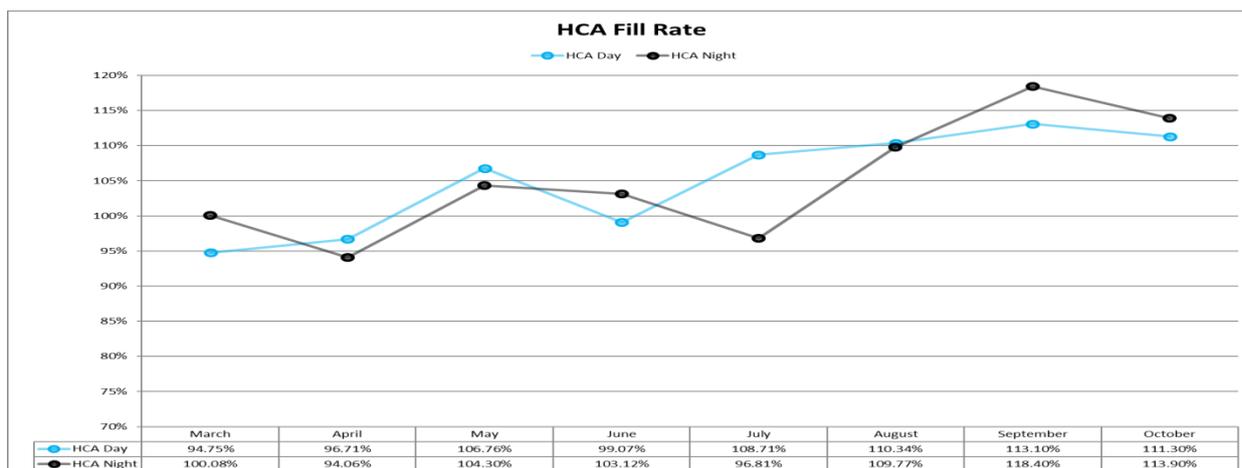
4.0 Trust wide Quality & Safety Indicators

4.1 RN/HCA fill rates for days and nights – Overall Trust position

Month	RN day	RN night	HCA day	HCA night
August	94.03%	92.8%	110.34	109.77%
September	89.10%	92.30%	113.10%	118.40%
October	91.50%	94.40%	111.30%	113.90%

4.2 Fill rates trend



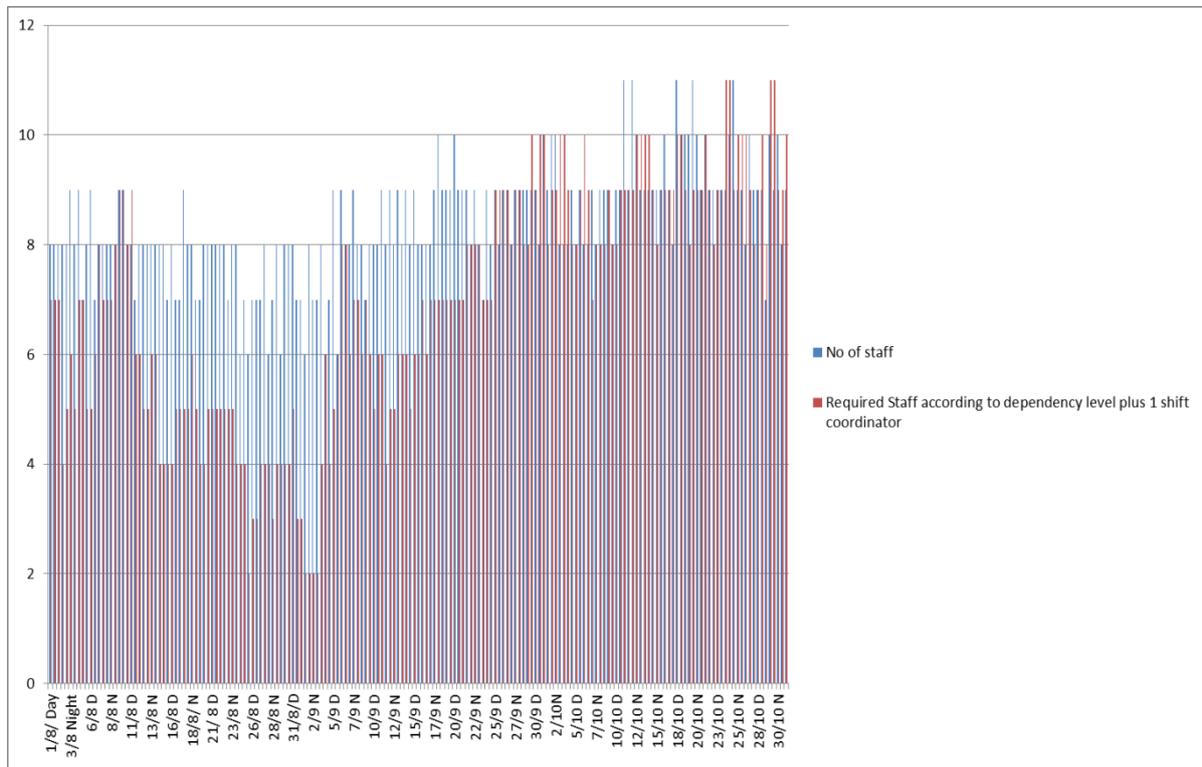


4.3 Overall fill rate RAG rating for the divisions / directorates for August, September & October.

Division	RN fill rate %		HCA Fill rate %	
	Day	Night	Day	Night
August				
Surgery	95.50%	100.42%	108.12%	107.38%
Medicine	88.22%	83.46%	114.59%	113.10%
Diagnostic & Therapeutic	84.15%	85.60%	93.35%	116.15%
MSK	96.80%	91.25%	116.00%	133.45%
Theatre & Critical Care	77.10%	67.43%		
Women & Children	105.23%	104.18%	93.35%	97.95%
September				
Surgery	96.04%	100.94%	98.02%	123.06%
Medicine	86.27%	97.82%	128.22%	120.02%
Diagnostic & Therapeutic	86.60%	94.45%	96.00%	148.45%
MSK	89.60%	99.50%	120.15%	146.70%
Theatre & Critical Care	85.10%	76.70%		
Women & Children	87.84%	87.56%	92.88%	108.18%
October				
Surgery	99.14%	119.44%	105.96%	121.14%
Medicine	89.49%	96.50%	115.04%	116.58%
Diagnostic & Therapeutic	85.95%	94.65%	93.50%	122.10%
MSK	87.25%	98.80%	119.75%	141.75%
Theatre & Critical Care	92.30%	86.10%		
Women & Children	90.26%	90.94%	86.53%	76.85%

4.4 Exceptions

The following chart shows the number of staff in critical care against the number of staff required according to dependency:



Exceptions	
August	<ul style="list-style-type: none"> Red rating on Theatres & Critical Care are due to low fill rate in critical care however this was mitigated by reduced bed utilisation during August please see graph above that shows that the number of patients during the period was low and staffing was adjusted to reflect this. Amber rating on Diagnostic & Therapeutic were due to a high vacancy rate on Bedwell ward (26.86%). 1 Newly Qualified RN's will be started in Oncology in September. Amber rating in medicine is due to vacancy rates and difficulty filling bank and agency shift during this period. These were managed daily and mitigated by the Matrons assessing acuity and dependency on the wards and reallocating staff accordingly.
September	<ul style="list-style-type: none"> Amber and Red rating on Theatres & critical care was mitigated in the early part of September by reduced bed utilisation (please see above) During the latter part of the month bed usage was higher and staffing was supported by Senior Nurses from the directorate following daily acuity and dependency assessments. Amber rating on Diagnostic & Therapeutic continued through September as above. Amber rating in Women & Children is due to lower fill rate in Neonatal Unit; there was a low level of bed utilisation during this period and therefore mitigated. Amber rating in Musculoskeletal Unit was mitigated by reducing bed

	<p>utilisation in the elective ward during weekend periods and staffing the remaining day accordingly</p>
October	<ul style="list-style-type: none"> • Amber rating on Diagnostic & Therapeutic continued as above although new staff are in post staff have a period of supernumerary status and are not counted in the fill rates. • The day RN staffing in Musculoskeletal unit has led to an Amber rating. Vacancies in Sept and October have remained the same and overseas Nurses are due to commence in this area in January 2018 but will have a period of supernumerary status. The Musculoskeletal wards are supported daily by the trauma & orthopaedic nurse Specialists following an assessment of the acuity and dependency on the wards. • Theatre & Critical care have reduced RN cover at night which has been mitigated where necessary by Senior staff following acuity & dependency assessments • Red rating on Women & Children is due to reduced fill rate for Care staff at night due to low bed occupancy.

4.5 Staffing v's Quality impact

Month	Staffing v's Impact
August	<p>Pressure Ulcers</p> <p>3 hospital acquired avoidable pressure ulcers were reported.</p> <ul style="list-style-type: none"> • 3 grade 3 on Princess Anne, Castlepoint & Southbourne • 2 grade 2 Shopland and Rochford <p>Falls</p> <ul style="list-style-type: none"> • 3 moderate falls, 1 on Windsor and 2 on Balmoral • 1 high extreme fall on Eleanor Hobbs <p>All the RCAs for these has been completed and no direct correlation to staffing levels and the incident have been found.</p>
September	<p>Pressure Ulcers</p> <p>3 grade 2 hospital acquired avoidable pressure ulcers</p> <ul style="list-style-type: none"> • 1 grade 2 on Castlepoint Ward • 1 grade 2 on Blenheim ward • 1 grade 2 on CCU/Gordon Hopkins <p>Falls</p> <p>4 Moderate falls, 2 high severity falls.</p> <ul style="list-style-type: none"> • 2 moderate falls on Benfleet Ward • 1 moderate fall on Castlepoint ward • 1 Moderate fall on Windsor • 1 high severity fall on Windsor • 1 high severity fall on Paglesham <p>All the RCAs for these have been completed and no direct correlation to staffing levels and the incident have been found.</p>

October	<p>Pressure Ulcers</p> <p>No validated data at time of report</p> <p>Falls</p> <p>1 high severity fall</p> <ul style="list-style-type: none"> • 1 high severity fall Elizabeth Loury Ward <p>The RCA for this has been completed and no direct correlation to staffing levels and the incident has been found.</p>
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4.6 Recruitment Update

37 newly qualified nurses commenced in the trust during September and October.

The first candidate from the Finland recruitment campaign started in November. It is disappointing that a further 5 who were expected to commence in November have either withdrawn or deferred to January. Interviews with Registered Nurses from overseas continue via Skype.

The third group of Philippine Nurses commenced in the Trust in September and started their induction and preparation for their OSCEs (Objective Structured Clinical Examination). Since July, a total of 9 Philippine Nurses have commenced in the Trust.

Assessment of healthcare assistants working within the trust who were previously registered nurses overseas has continued with language testing to assess suitability for IELTS (International English Language Testing System) training with Anglia Ruskin University along with language training. The Nursing and Midwifery Council announced during this period that there is an alternative language test that candidates can sit called Occupational English Testing (OET) it is hoped this will prove more achievable for candidates currently living and working in the UK.

A Recruitment Open Day took place in October; this was attended by a number of student nurses and physiotherapy students who are expected to qualify in March 2018. These staff were provided with information for the Trust Newly Qualified Nurse recruitment process as they were not training in Universities in the local area.

5.0 Conclusion and further actions required

- There has been an increase of 13.07 WTE over the 3 months from 730.78 WTE in post to 743.85.
- Recruitment and retention remains a high priority and risk with the current vacancies, however the recruitment campaigns are in place and in addition to this we are participating in an NHI initiative across the 3 sites where the focus is particularly around retention. An action plan for this is currently in development.
- Daily monitoring continues for all staffing measures and quality indicators.
- It is noted that there is an increase in the number of falls in the stroke unit and although no direct correlation to staffing is evident to date this continues to be monitored.