

Board of Directors' Meeting Report – 4 December 2018

Agenda item 75/18

Title	Safe staffing report for July, August & September 2018
Sponsoring Director	Diane Sarkar – Chief Nursing Officer
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 July, August & September 2018 reporting the percentage fill rate for each ward area and the impact on capacity and capability to deliver safe care.
Previously considered at	Site leadership team 22/11/2018 Heads of Nursing 23/11/2018

Executive Summary

July 2018

The registered nurse (RN) fill rate for days for July was 95% and night fill rate was 89.9%.

There were 5 confirmed hospital acquired avoidable pressure ulcers, these were classified as 2 x grade 3 and 3 x grade 2.

The areas reporting pressure ulcers were:

Blenheim Ward x2grade 2, RN fill rate 82.9% days, 100.8% on nights

Castlepoint Ward x1 grade 2, RN fill rate 85.7% on days, 103.2% on nights

Shopland ward x1 grade 3, RN fill rate 86.8% on days, 96.5% on nights

Paglesham Ward x1 grade 3 RN fill rate 84.1% on days, 89.8% on nights, up to 9 escalation beds were in use on the Stroke unit.

2 moderate severity falls were reported in July, 1 on CCU/Hopkins and 1 on the Respiratory Unit (Rochford ward).

August 2018

The RN fill rate for days for August was 87.3% and night fill rate for was 88.395%.

There were 7 hospital acquired avoidable, grade 2 pressure ulcers, the areas reporting these were:

Stambridge Ward x1 grade 2, RN fill rates 88.8% on days, 85.9% on nights

Windsor Ward/AMU x1 PU Unstageable, RN fill (Windsor) rates 69.2% days, 88.5% nights (AMU) 85.2% on days, 89% on nights

Castlepoint Ward x1 grade 2, RN fill rates 79.7% on days, 94.2% on nights

Blenheim Ward x1 grade 2, RN fill rates 84.4% on days, 99.9% on nights

Benfleet Ward x1 grade 2, RN fill rates 85.8% on days, 82% on nights

Respiratory Unit x1 unstageable, x1 grade 2, RN fill rates 91.6% on days, 79.6% on nights

2 moderate severity falls, 1 on Bedwell ward and 1 on the Acute Medical Unit.

The RCAs for these cases have been completed and reviewed by the Patient Safety Review Panel and relevant action plans are in place. In relation to these staffing was not identified as a contributory factor.

September 2018

The RN fill rate for days for September was 87.4% and night fill rate was 85.9%.

There were 2 preventable hospital acquired avoidable grade 2 pressure ulcers. .
 The areas reporting these were:
 Stambridge Ward x1 grade 2, RN fill rates 88.9% on days, 85.9% on nights.
 Hockley Ward x1 grade 2, RN fill rates 96.8% on days, 92.9% on nights.

1 high severity fall in September on Bedwell Ward

Overview

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

Following publication by the NHSi CHPPD guidance for Acute and Specialist Trusts in June 2018, monthly staffing data in quarter 2 is now submitted via the strategic data collection service (SCDS). Care hours per patient day (CHPPD) is now the principle measure of Nursing, midwifery and healthcare support staffing deployment CHPPD data for July 2018 is reported via SCDS in September 2018.

The Safe Care module of eroster will be implemented in Dec & Jan 2018. This will provide improved Ward Staffing reporting and the ability to monitor staffing on a shift to shift real time basis including, CHPPD, professional judgement decisions and a more auditable record of staff deployment. This will also provide compliance with the recommendation in the NHSi CHPPD guidance for Acute and Specialist Trusts (June 2018).

The trust vacancy position for Registered Nurses has increased by 11.94 WTE over the 3 months from 154.98 WTE in July to 166.92 WTE in September. The vacancy of WTE registered Nurses are based on funded establishment for ward areas.

In this report planned fill rates have been reduced in wards with bed/cot occupancy below 80%. This applied to the following areas; Neonatal, Critical care, Neptune Ward and Eastwood Ward.

Date Reviewed by SLT and JEG	22 November 2018
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 2 - Failure to meet constitutional and national performance targets Risk 4 - Inability to recruit and retain staff
Essex Success Regime	This report does not have any impact on other Trusts across MSB 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 receive assurance from the report.

Southend University Hospital Foundation Trust Safer Staffing Nursing and Midwifery

July, August & September 2018

1.0 PURPOSE

This paper outlines the Nursing and Midwifery safer staffing for July, August and September 2018.

2.0 BACKGROUND

Since April 2016 The Trust has been 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 has also been displayed on the Trust website. Commencing in September 2018 CHPPD data is required to be submitted to the strategic data collection service (SDCS). Monthly data collection is submitted during the subsequent month and displayed on the Model Hospital site on the following month. All data collected during the quarter 2 period has been submitted via SDCS with CHPPD now being the principal measure of nursing, midwifery and healthcare support deployment on inpatient wards.

The staffing level fill rates in this report are RAG rated as Green above 90%, Amber 80-89% and Red below 79%. Fill rates are calculated by the comparison of planned and actual fill rates. The Trust does not currently operate a system whereby planned fill rates can be adjusted on a shift to shift basis therefore for the purposes of this report fill rates have been adjusted based upon ward occupancy levels. Fill rates for areas with occupancy below 85% have had planned fill rates adjusted accordingly.

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 of Nursing. It is assessed against agreed staffing levels for each ward and department based upon NICE guidance of an RN ratio of 1:8 combined 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.

Care Hours per Patient Day (CHPPD)

From May 2016 acute Trusts began reporting monthly CHPPD data to NHS Improvement and commenced reporting in September. CHPPD is calculated by adding the hours of RN's and the hours of Healthcare Support Workers (HCSW's) and dividing the total by every 24 hours of inpatient admissions. CHPPD is reported as a total and split by RN's and HCSW's to provide a picture of care and skill mix. For the purpose of this report the Actual RN CHPPD are reported, though split and total CHPPD data is reported to SDCS each month as described above.










3.0 STAFFING LEVELS –

3.1. July 2018

Staffing Measures	Previous Month (1) June	Current Month (2) July	Change 1-2	
Nursing establishment wte RN	866.1	866.06	0.04	
Nursing establishment wte in post RN	719.69	711.08	8.61	
Vacancy RN wte	146.48	154.98	8.5	
Vacancy % RN	16.91%	17.89%	0.98%	
Number of nerve centre red flags raised	348	396	48	
Nurse agency % of pay bill RN	6%	8%	2%	
RN planned v actual hours used %	91.22%	91.60%	0.38%	
Care hours per patient day Actual -RN	4.8	4.7	0.1	










Nursing vacancies have increased by 0.98%; 8 wards have RN vacancy rates above 25% Bedwell Ward 32.17%, Acute Medical Service 26.82%, Eleanor Hobbs ward 51.4%, Princess Anne Ward 27.24%, Windsor ward 40.91%, Castlepoint Ward 38.43%, Southbourne Ward 30.22% and Surgical Assessment Unit 32.15%. This is the same as the previous month when 8 wards also had vacancies above 25%.

3.2 August 2018

Staffing Measures	Previous Month (1) July	Current Month (2) Aug	Change 1-2	
Nursing establishment wte RN	866.06	859.37	6.69	
Nursing establishment wte in post RN	711.08	701.46	9.62	
Vacancy RN wte	154.98	157.91	2.93	
Vacancy % RN	17.89%	18.38%	0.49%	
Number of nerve centre red flags raised	396	422	26	
Nurse agency % of pay bill RN	8%	7%	1%	
RN planned v actual hours used %	91.60%	87.78%	3.82%	
Care hours per patient day Actual -RN	4.7	4.4	0.3	

Nursing vacancies increased by 0.49%; 8 wards have vacancies above 25% these are the same wards as the previous month; Bedwell Ward 33.53%, Acute Medical service 26.39%, Eleanor Hobbs Ward, Princess Anne Ward 27.24%, Windsor Ward 40.91%, Castlepoint Ward 38.43%, Southbourne Ward 35.59% and Surgical Assessment Unit 28.13%.

3.2 September 2018

Staffing Measures	Previous Month (1) Aug	Current Month (2) Sept	Change 1-2	
Nursing establishment wte RN	859.37	864.04	4.67	
Nursing establishment wte in post RN	701.46	697.12	4.34	
Vacancy RN wte	157.91	166.92	9.01	
Vacancy % RN	18.38%	19.32%	0.94%	
Number of nerve centre red flags raised	422	481	59	
Nurse agency % of pay bill RN	7%	8%	1%	
RN planned v actual hours used %	87.78%	86.70%	1.08%	
Care hours per patient day Actual -RN	4.4	4.7	0.3	

Nursing establishment has increased by 4.67 wte due to an increase in establishment in pre-assessment. Nursing vacancies have increased by 0.94%; 6 wards have vacancies above 25%, Bedwell Ward 29.25%, Acute Medical Service 28.81%, Eleanor Hobbs ward 28.76%, Princess Anne Ward 37.04%, Windsor ward 35.47% and Castlepoint Ward 38.43%.

Red Flags

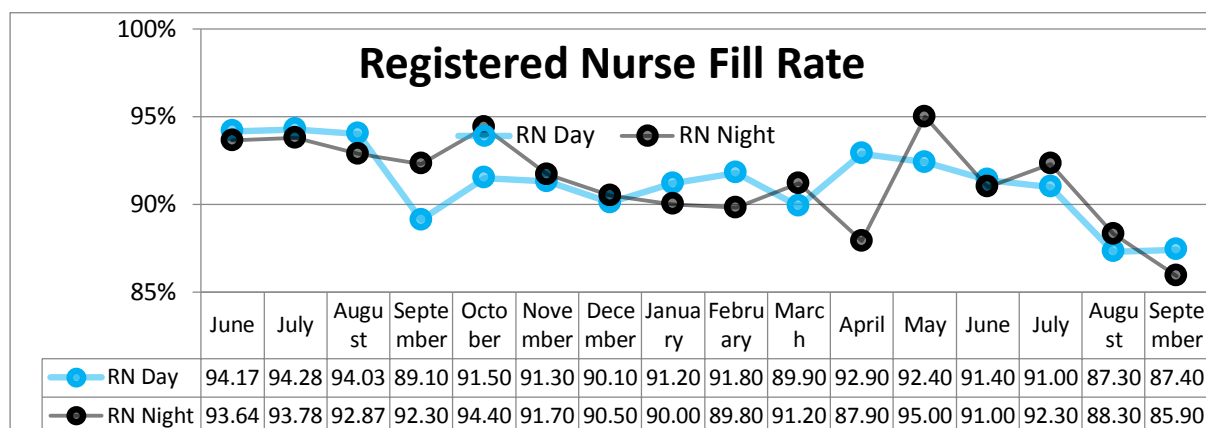
Red flag reporting throughout quarter 2 has increased, it should be noted that this is the school holiday period when vacant shifts are less likely to be filled by bank staff. Areas reporting highest numbers of red flags correlate with those wards that have higher vacancy rates and have escalation beds in use, such as Bedwell, Elizabeth Loury, Castlepoint Wards, Stroke Unit and Acute Medical Service. The Emergency department also reports a high level of staffing red flags due to vacancies, although vacancies are not above 25% due to the number of wte staff within the department e.g. Sept wte 19.31 vacancies of 80.08 budgeted wte.

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
July	91%	92.30%	107.80%	113.60%
August	87.30%	88%	105.30%	111.50%
Sept	87.40%	85.90%	105%	107.50%

4.2 Fill rates trend



4.3 Overall fill rate RAG rating for the directorates for July, August & September 2018

Division	Registered		Care Staff	
	Day	Night	Day	Night
July				
Emergency medicine	79.45%	89.41%	121.41%	101.68%
Surgery	89.10%	93.10%	93.10%	124.18%
Medicine	88.32%	95.34%	101.38%	107.97%
Diagnostic & Therapeutic	79.35%	89.85%	92.60%	127.65%
MSK	86.25%	99.85%	92.60%	125.10%
Theatre & Critical Care	98.00%	113.20%	89.20%	167.70%
Women & Children	97.40%	91.12%	100.42%	82.10%
August				
	Day	Night	Day	Night
Emergency medicine	78.29%	75.37%	92.26%	108.40%
Surgery	88.92%	91.26%	97.64%	117.72%
Medicine	81.86%	89.06%	106.56%	111.61%
Diagnostic & Therapeutic	67.50%	83.80%	89.40%	95.00%
MSK	81.60%	96.40%	106.40%	130.40%
Theatre & Critical Care	115.70%	106.20%	195.00%	154.50%
Women & Children	93.52%	83.82%	110.96%	94.74%
September				
	Day	Night	Day	Night
Emergency medicine	74.56%	77.10%	181.00%	107.69%
Surgery	87.08%	88.16%	84.88%	102.66%
Medicine	85.17%	91.52%	113.99%	115.42%
Diagnostic & Therapeutic	73.60%	79.00%	150.80%	97.20%
MSK	75.00%	86.85%	102.45%	97.20%
Theatre & Critical Care	90.00%	71.30%	76.70%	93.80%
Women & Children	96.72%	91.14%	104.20%	88.44%

Please see Appendix 1, 2 & 3 for breakdown of monthly fill rates by ward

4.4 Exceptions

July

- Red rating in Emergency department due to high vacancies, this is mitigated during day shifts by Matron and managers clinically supporting the teams. The vacancy rate is not above 25% but this does not reflect the vacancy 19.67 wte.
- Amber rating in Surgery, 3 wards, Balmoral, SAU and Hockley had Amber fill rates on days. SAU has a 32.15% vacancy rate and Balmoral has a vacancy rate of 22.44%.
- In Medicine 6 of the 9 wards are rated Amber for day fill rates, 4 of these wards have vacancy rates above 25%. These fill rates are mitigated by the Ward managers working clinically. Acuity and dependency is monitored for day and night shifts and safe staffing risk assessments made with staff being moved as appropriate.
- Red rating in Diagnostic and therapeutic due to high vacancy rate in Bedwell ward of 32.17%. Elizabeth Lorry ward has a vacancy rate of 23.21% therefore support is not available within the directorate. Staffing shortages have been mitigated by support from Matron and Ward Managers working clinically and extra Healthcare Assistants.
- Amber rating MSK due to high vacancy rate on Castlepoint ward of 38.43%. Low fill rates are mitigated by Trauma & Orthopaedic Nurse Specialists and band 4 Associate Practitioners.

August

- Red rating in emergency medicine on days, the department has a vacancy rate of 23.67%, this is mitigated during day shifts by Matron and managers clinically supporting the teams. On late and night shifts support is provided by paramedics working in the department.
- Amber rating in Surgery is due to low fill rates on SAU and Stambridge Ward. SAU have a vacancy rate of 28.13% and Stambridge Ward 23.53%.
- In Medicine 8 of 9 wards were rated amber for RN day fill rates, 4 of the 8 wards had vacancy rates above 25%.
- Red/Amber rating in Diagnostic & Therapeutic due to low fill rate in Bedwell and Elizabeth Lorry ward on days, this has been mitigated by the Ward Manager working clinically when necessary on day shift..
- MSK amber rating is due to reduced fill rate on both wards on day shifts; these are mitigated by the Ward Managers and Trauma & Orthopaedic Nurse Specialists and band 4 Associate Practitioners.
- Women & Children night amber rating mitigated by reduced occupancy at night in Neptune and maternity wards.

September

- Emergency department has Red rating for RN's on day and night shifts; this is mitigated on day shifts by Matrons and managers and on night shifts by bank paramedics.
- Amber rating for surgery on days due to Balmoral and Stambridge having fill rates below 80%, night fill rates below 75% on Stambridge and SAU. This is mitigated by risk assessment of acuity and dependency and movement of staff where necessary. SAU has a

	<p>vacancy rate of 24.11%.</p> <ul style="list-style-type: none"> • Medicine has an amber rating for days, 6 of 9 wards have amber fill rates on days, these wards also have high vacancy rates. It has not always been possible to move staff within the directorate to mitigate low fill rates. Ward Managers have worked clinical shifts to provide support. • Amber rating in Diagnostic & Therapeutic due to increased vacancy rate in Bedwell ward, this has been mitigated by the Ward Manager working clinically on day shift and increased HCA on both day & night shifts • MSK amber rating is due to reduced fill rate on both wards on day shifts; these are mitigated by the Ward Managers and Trauma & Orthopaedic Nurse Specialists and band 4 Associate Practitioners. Castlepoint vacancy has increased to 31.07%. • Red rating in critical care mitigated by support from outreach team and lower bed occupancy.
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4.5 Staffing v's Quality Impact

Month	Staffing vs Impact
July	<p>Pressure Ulcers – 5 hospital acquired avoidable pressure ulcers. These were classified as 3 x grade 2 and 2 x grade 3.</p> <p style="padding-left: 40px;">Blenheim Ward x2 grade 2</p> <p style="padding-left: 40px;">Paglesham Ward x1 grade 3</p> <p style="padding-left: 40px;">Castlepoint Ward x1 grade 2</p> <p style="padding-left: 40px;">Shopland ward x1 grade 3</p> <p>Falls – 2 moderate severity falls.</p> <p style="padding-left: 40px;">CCU/Hopkins Ward</p> <p style="padding-left: 40px;">Respiratory Unit (Rochford Ward)</p>
August	<p>Pressure Ulcers – 7 hospital acquired avoidable pressure ulcers. These were classified as 5 x grade 2 and 2 unstageable.</p> <p style="padding-left: 40px;">Stambridge Ward x1 grade 2</p> <p style="padding-left: 40px;">Castlepoint Ward x1 grade 2</p> <p style="padding-left: 40px;">Windsor Ward/AMU x 1 unstageable</p> <p style="padding-left: 40px;">Westcliff Ward x1 unstageable</p> <p style="padding-left: 40px;">Blenheim Ward x1 grade 2</p> <p style="padding-left: 40px;">Benfleet Ward x1 grade 2</p> <p style="padding-left: 40px;">Rochford Ward x1 grade 2</p>

	<p>Falls - 2 moderate severity falls.</p> <p>Acute Medical Unit</p> <p>Bedwell Ward</p>
September	<p>Pressure Ulcers – 2 Hospital acquired avoidable pressure ulcers. These were classified as 2 x grade 2 pressure ulcers.</p> <p>Stambridge Ward x1 grade 2</p> <p>Hockley Ward x 1 grade 2</p> <p>Falls- – They were no moderate/high severity falls.</p>

All the RCAs for falls and pressure ulcers have been completed and have been reviewed at the Patient Safety Panel. Action plans are in place and completion will be monitored through the Patient Safety team.

4.6 Recruitment & Retention Update

Skype interviews have continued with Registered Nurses from the Philippines and India via recruitment agencies and direct referrals from other overseas registered nurses who are working in the Trust. These referrals are being managed by a recruitment agency along with our recruitment department. 10 Overseas Nurses commenced in this quarter. All of these Nurses have undergone or commenced the Trust preparation programme for NMC OSCE examination to allow them to become registered nurses in the UK. At the time of reporting the Nurses recruited in Q2 have not yet undertaken their OSCE examination.

Further interviews have taken place with pre-registration nurses due to qualify in September 2018 and offers have been made, Engagement with this group has continued by the Practice Development team, currently 52 Newly qualified Nurses are expected to start in the Trust in Sept/Oct 2018.

A Recruitment event took place on 14th July, 2 return to Practice Nurses, 4 Newly Qualified Nurses and 3 overseas Nurses attended they met with Matrons and recruitment leads to discuss opportunities within the Trust. The overseas Nurses were given advice about English language requirements and advised to contact the NMC and 3 of the Newly Qualified Nurses have been interviewed. The overseas Nurse was given advice about beginning the application process for the Nursing and Midwifery Council.

As well as recruitment activity the Trust is participating in the NHSi retention work stream. There is a comprehensive retention action plan in place and a monthly retention dashboard is produced. A number of initiatives have commenced, examples of which are; an internal transfer process for movement of staff, promotion of a Retire and Return process and Pre-retirement seminars. The Trust has been shortlisted for 2 categories in the Nursing Times Workforce awards; Best workplace for learning and development and Best diversity and inclusion practice. The awards recognise our initiatives in growing our own workforce through the use of nursing apprenticeships and the development of our healthcare support workers and supporting age diversity in the Trust and the retire and return initiative. These awards enable us to promote positive aspects of working in the Trust.

4.7 Workforce Concerns

Nursing Student allocation

Across our local HEI's there has been a 30% reduction in the number of individuals commencing pre-registration nursing programme. In Sept 2017 this impacted with a reduction in students allocated to SUHFT. For September 2018 we have seen a further reduction with a total of 38 students allocated for this cohort, when we would generally expect 60. In Sept 2018 we successfully recruited 54 newly qualified registrants therefore there is significant risk that the reduction in pre-registration learners will impact on our workforce in 2021. There is a requirement to look at establishing a workforce plan, identifying the number of Health care support workers that we need to develop through Nursing apprenticeship routes to address the anticipated workforce deficits.

Creation of additional Band 4 roles

A number of HCA's employed within the Trust have completed higher apprenticeships and are employed in band 4 roles undertaking the Assistant Practitioner role; currently these roles are utilised to mitigate registered Nurse deficits. In September the NMC validated the Nursing Associate as a registered profession. These individuals on completion of the course are registered with the NMC and will be able to undertake additional nursing duties including assessment and the administration of some medication. We are awaiting further guidance from NHSi early 2019 as to how these roles will support safe staffing & CHPPD. There is however a push nationally to increase the number of Nursing Associates as this is seen as a role which bridges the gap between HCA'S and Registered Nurses. The trust is part of a Mid & South Essex STP partnership due to commence a pilot Nursing Associate programme in December 2018. Further exploration will be required to determine how this role will be incorporated into the nursing workforce.

5.0 Conclusion and further actions required

- The number of RN in post has reduced in Quarter 2 by 13.96 wte from 711.08 in July to 697.12 in September., RN vacancy in September is 166.92. 6- 8 Ward areas have vacancy rates above 25% during Q2 these are Bedwell Ward, Eleanor Hobbs Ward, Princess Anne Ward, Windsor Ward, Castlepoint Ward, Surgical Assessment Unit, Acute Medical Service and Southbourne Ward. The Emergency Department also has a high number of WTE vacancies with a peak in July of 19.67 wte (24.26%), this reduced to 19.31 (24.12%) in September.
- 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 NHS retention programme across the 3 sites. Initiatives such as 'Retire and return' and 'Stay @Southend' have been introduced.
- Daily monitoring continues for all staffing measures and quality indicators, daily monitoring will improve with the implementation of the Safe Care module.
- Workforce concerns have been raised in relation to decreasing Student Nursing allocations and the creation of band 4 roles

Appendix 1 July 2018 monthly fill rate %

RAG rated as Green above 90%, Amber 80-89% and Red below 79%.

Ward	Day		Night		Overall fill rate % RAG rating	CHPPD total (actual)	Max No of Esc beds in use
	% fill rate RN	%fill rate Care staff	% fill rate RN	%fill rate Care staff			
Emergency Medicine	79.45%	121.40%	89.41%	101.68%	97.99%		
Surgery							
Balmoral	80.20%	103.20%	102.40%	107.60%	98.35%	7.3	
Chalkwell SAU	85.80%	133.00%	75.70%	148.00%	110.63%	12.1	3
Hockley	89.90%	115.60%	101.00%	123.70%	107.55%	6.0	1
Southbourne	91.80%	96.30%	92.20%	107.30%	96.90%	5.9	
Stambridge	97.80%	112.00%	94.20%	134.30%	109.58%	8.9	1
Medicine							
AMS	88.90%	130.60%	97.00%	132.00%	112.13%	12.9	
Blenheim	82.90%	100.40%	100.80%	105.30%	97.35%	5.6	2
CCU Hopkins	90.80%	99.20%	78.80%	91.30%	90.03%	9.2	
Eleanor Hobbs	81.30%	134.10%	102.40%	138.00%	113.95%	7.2	
Estuary OPAS	107.70%	164.90%	104.30%	116.30%	123.30%	7.9	
Princess Anne	87.90%	101.10%	102.10%	121.60%	103.18%	6.8	
Stroke Unit	84.10%	119.60%	89.80%	129.70%	105.80%	9.4	9
Windsor	74.70%	107.20%	94.60%	112.60%	97.28%	6.6	
Respiratory Unit	96.60%	92.80%	88.30%	93.10%	92.70%	12.2	1
Diagnostic & Therapeutic							
Elizabeth Loury	85.30%	92.30%	97.70%	99.90%	93.80%	7.4	
Bedwell	73.40%	92.90%	82.00%	155.40%	100.93%	7.2	
Musculoskeletal							
Castlepoint	85.70%	92.30%	103.20%	145.90%	106.78%	6.2	
Shopland	86.80%	100.40%	96.50%	104.30%	97.00%	6.1	
Theatres & Anaesthetics							
Critical Care	103.80%	110.80%	90.70%	92.60%	99.48%	43.9	
Women & Children							
Eastwood	95.00%	96.80%	100.00%	98.20%	97.50%	7.9	
Neptune	113.50%	144.40%	93.40%	93.50%	111.20%	15.6	
Neonatal Unit*	83.60%	74.20%	89.60%	62.00%	77.35%	11.1	
Margaret Broom 1	116.50%	106.60%	84.00%	58.10%	91.30%	31.8	
Margaret Broom 2	78.40%	80.10%	88.60%	98.70%	86.45%	8.8	

Appendix 2 Aug 2018 monthly fill rate %

RAG rated as Green above 90%, Amber 80-89% and Red below 79%.

Ward	Day		Night		Overall fill rate % RAG rating	CHPPD total (actual)	Max No of Esc beds in use
	% fill rate RN	%fill rate Care staff	% fill rate RN	%fill rate Care staff			
Emergency Medicine	78.29%	92.26%	75.37%	108.40%	88.58%		
Surgery							
Balmoral	97.60%	110.50%	111.10%	130.70%	112.48%	7.0	6
Chalkwell SAU	85.40%	74.80%	78.10%	103.80%	85.53%	9.8	
Hockley	96.80%	111.60%	92.90%	124.30%	106.40%	5.7	1
Southbourne	75.90%	112.20%	88.30%	129.00%	101.35%	5.3	
Stambridge	88.90%	79.10%	85.90%	100.80%	88.68%	7.3	1
Medicine							
AMS	85.20%	130.30%	89.00%	131.30%	108.95%	11.8	
Blenheim	84.40%	111.30%	99.90%	113.70%	102.33%	6.0	2
CCU Hopkins	85.30%	84.90%	74.20%	91.00%	83.85%	7.8	
Eleanor Hobbs	84.40%	109.80%	96.80%	108.60%	99.90%	6.2	
Estuary OPAS	78.10%	99.20%	98.40%	110.00%	96.43%	7.4	1
Princess Anne	72.70%	109.60%	93.10%	127.10%	100.63%	6.9	
Stroke Unit	85.80%	110.80%	82.00%	122.50%	100.28%	8.0	9
Windsor	69.20%	104.60%	88.50%	106.30%	92.15%	6.3	
Respiratory Unit	91.60%	98.50%	79.60%	94.00%	90.93%	11.5	1
Diagnostic & Therapeutic							
Elizabeth Loury	66.00%	89.10%	78.70%	101.60%	83.85%	6.6	
Bedwell	69.00%	89.70%	88.90%	88.40%	84.00%	6.7	
Musculoskeletal							
Castlepoint	79.70%	106.30%	94.20%	157.60%	109.45%	6.6	
Shopland	83.50%	106.50%	98.60%	103.20%	97.95%	6.2	
Theatres & Anaesthetics							
Critical Care	115.70%	195.00%	106.20%	154.50%	142.85%	46.6	
Women & Children							
Eastwood	92.90%	95.70%	98.40%	98.40%	96.35%	8.6	
Neptune	98.70%	143.10%	88.40%	89.80%	105.00%	21.4	
Neonatal Unit*	99.90%	138.10%	80.50%	112.20%	107.68%	20.6	
Margaret Broom 1	96.60%	102.60%	76.00%	76.70%	87.98%	28.6	
Margaret Broom 2	79.50%	75.30%	75.80%	96.60%	81.80%	8.6	

Appendix 3 Sept 2018 monthly fill rate %

RAG rated as **Green** above 90%, **Amber** 80-89% and **Red** below 79%.

Ward	Day		Night		Overall fill rate % RAG rating	CHPPD total (actual)	Max No of Esc beds in use
	% fill rate RN	%fill rate Care staff	% fill rate RN	%fill rate Care staff			
Emergency Medicine	74.56%	181.00%	77.10%	107.69%	110.09%		
Surgery							
Balmoral	75.90%	91.00%	99.20%	118.70%	96.20%	7.6	6
Chalkwell SAU	92.10%	72.10%	77.20%	101.70%	85.78%	11.9	
Hockley	99.00%	110.10%	102.60%	124.90%	109.15%	6.4	1
Southbourne	93.80%	90.90%	90.80%	105.80%	95.33%	6.0	
Stambridge	74.60%	60.30%	71.00%	62.20%	67.03%	6.5	1
Medicine							
AMS	102.80%	144.90%	91.00%	125.10%	115.95%	13.5	
Blenheim	80.00%	120.00%	98.90%	120.00%	104.73%	6.5	2
CCU Hopkins	93.80%	104.90%	84.70%	105.40%	97.20%	8.6	
Eleanor Hobbs	85.70%	101.10%	102.20%	112.20%	100.30%	6.2	
Estuary OPAS	84.80%	116.60%	95.10%	124.10%	105.15%	8.1	1
Princess Anne	71.40%	104.70%	101.70%	117.00%	98.70%	6.8	
Stroke Unit	84.60%	122.20%	81.00%	130.10%	104.48%	9.1	9
Windsor	74.30%	113.10%	80.80%	113.80%	95.50%	6.6	
Respiratory Unit	89.10%	98.40%	88.30%	91.10%	91.73%	11.7	1
Diagnostic & Therapeutic							
Elizabeth Loury	69.90%	96.70%	88.90%	100.30%	88.95%	8.1	
Bedwell	77.30%	108.20%	69.10%	94.10%	87.18%	7.3	
Musculoskeletal							
Castlepoint	73.80%	97.70%	75.30%	115.40%	90.55%	6.7	
Shopland	76.20%	98.60%	98.40%	92.60%	91.45%	6.2	
Theatres & Anaesthetics							
Critical Care	90.00%	76.70%	71.30%	93.80%	82.95%	51.3	
Women & Children							
Eastwood	84.40%	91.70%	94.70%	100.00%	92.70%	9.0	
Neptune	105.30%	140.00%	85.50%	91.70%	105.63%	15.0	
Neonatal Unit*	84.80%	93.30%	89.10%	102.20%	92.35%	10.8	
Margaret Broom 1	107.90%	104.20%	92.00%	50.00%	88.53%	40.3	
Margaret Broom 2	101.20%	91.80%	94.40%	98.30%	96.43%	10.1	