Meeting: CQRG

Date: November 2017

Agenda Item:

# Monthly Report on Nurse Levels for November 2017

## Key Risks -

Clinical: The delivery of safe, high quality care is a fundamental to objective of the Trust. This paper reports on the shift by shift information required as part of the "Hard Truths".	<b>Business:</b> Failure to deliver on safe, high quality care may impact on the hospital of choice.
Environmental:	<b>Finance and Performance:</b> Failure to deliver on safe, high quality care may impact on the hospital of choice.
<b>Reputation:</b> Failure to deliver high quality care may impact on reputation.	Legal: None
Resource Required:	

Cross Reference to Trust Strategic Priorities and Objectives: Clinical and Service Excellence

Legal and Regulatory Implications/Equality and Diversity issues: None

**Trust Values and Behaviours consideration and impact:** Kind – Respectful and compassionate: Professional – Follows and shares best Practice.

#### Recommendation

The Finance and Performance Committee is asked to note the shift by shift information.

## **Requested Action**

None

## Summary

This paper is the monthly report of the nurse staffing levels on a shift by shift basis for the planned and actual staffing levels. This paper outlines the Trust's position on the mandatory submission for nursing fill rates to the Department of Health via UNIFY, highlighting key areas of risk and the mitigation taken at directorate level. The paper includes an over view by division of their staffing position for trained and untrained staff and the turnover.

## **BACKGROUND**

The Trust is required to submit data monthly to Unify, detailing ward nursing and midwifery staffing fill rates and bed days; this information 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%. Areas showing as purple will have used staffing additional to their ward establishment. The numbers of falls with serious harms and hospital acquired pressure ulcers are also correlated with safer staffing levels

#### STAFFING LEVELS

The data below highlights the funded and in post vacancy rates within the nursing directorate. Of concern is that vacancy rate within the inpatient areas in now reaching 25%. There is a decrease in vacancy for qualified nurses for this period and reflects the intake of student nurses with the September qualifying cohort.

#### **HEADLINES**

- **Total** nurse vacancies (all qual & unqual) reduced slightly but still high at **18%** as at end of November.
- The small improvement was part reduction in funding for non-recurring CIPS and part increase in staff numbers
- Ward qualified nurse vacancies increased and are now 26%.
- There is a total of **286 WTE** (contracted) **qualified** nurse vacancies a reduction from 296 WTE. (4 relate to NR movements in funded WTE for CIPs and the balance of 6 is a net increase in Wte's)
- All unqualified nurse vacancies have risen from 10% in March to just under 16.4% at November, with a small improvement on the previous month.

## All nursing - qualified & unqualified

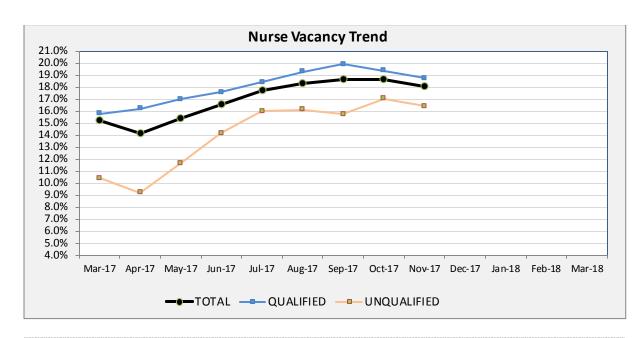
AREA	Funded	In Post	%	Vacant	Last Month
WARDS	1065.59	821.79	243.80	22.9%	21.8%
WANDO	1005.59	021.79	243.00	ZZ.3 /0	21.0%
THEATRES	420.83	352.13	68.70	16.3%	16.6%
ALL OTHER	684.70	605.32	79.38	11.6%	15.2%
TOTAL	2171.12	1779.24	391.88	18.0%	18.7%
LAST REPORT TOTAL	2169.94	1764.72	405.22	18.7%	

#### QUALIFIED ONLY

AREA	Funded	In Post	Vacant	%	%
WARDS	670.29	495.81	174.48	26.0%	25.4%
THEATRES	319.71	264.28	55.43	17.3%	16.2%
ALL OTHER	536.29	480.26	56.03	10.4%	13.8%
TOTAL	1526.29	1240.35	285.94	18.7%	19.4%
LAST REPORT TOTAL	1530.51	1234.23	296.28	19.4%	

## UNQUALIFIED ONLY

AREA	Funded	In Post	Vacant	%	%
WARDS	395.30	325.97	69.33	17.5%	17.3%
THEATRES	101.12	87.84	13.28	13.1%	14.8%
ALL OTHER	148.41	125.07	23.34	15.7%	17.7%
TOTAL	644.83	538.89	105.94	16.4%	17.0%
LAST REPORT TOTAL	639.43	530.49	108.94	17.0%	



TREND % VACAI	NCY	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17
QUALIFIED		15.8%	16.2%	17.0%	17.6%	18.4%	19.3%	19.9%	19.4%	18.7%
UNQUALIFIED		10.4%	9.2%	11.7%	14.2%	16.0%	16.1%	15.8%	17.0%	16.4%
TOTAL		15.2%	14.2%	15.4%	16.6%	17.7%	18.3%	18.7%	18.7%	18.0%

#### **FILL RATES**

The following data illustrates fill rates of expected staff levels including temporary staff within these figures. Data taken from Unify report

## **Overall Trust position**

RN day	RN night	HCA day	HCA night
96.2%	99.3%	97.4%	116.9%

Fill rates have improved for RN this month and this is reflected in the off framework agency usage.

# Fill rates: Overall Trust position and CHPPD

		Da	ау		Night		Day Night		Care Hours Per Patient Day (CHPPD)			(CHPPD)				
	_	stered es/nurses	Care	Staff	Regis midwive	stered s/nurses	Care	Staff	rate - (%)	e fill rate - staff (%)	rate - (%)	e fill rate - staff (%)	count nth of 23:59			
Ward name	Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours	Average fill rate RN/RM (%)	Average fill rate HCA staff (%)	Average fill RN/RM	Average fill   HCA staff	Cumulative count over the month of patients at 23:59 each day	RN/RM	Care Staff	Overall
Phoenix	2,960.75	2,720.00	962.00	1,069.33	2,219.50	2,292.33	676.50	910.25	91.9%	111.2%	103.3%	134.6%	585	8.6	3.4	12.0
Heybridge	2,185.00	2,050.08	1,256.50	1,610.08	1,380.00	1,368.50	690.00	862.50	93.8%	128.1%	99.2%	125.0%	937	3.6	2.6	6.3
Rayne	2,161.50	2,100.00	1,082.75	988.92	1,380.00	1,359.75	690.00	988.67	97.2%	91.3%	98.5%	143.3%	926	3.7	2.1	5.9
Goldhanger	1,475.00	1,455.83	1,464.00	1,631.83	1,035.00	1,053.75	690.00	963.20	98.7%	111.5%	101.8%	139.6%	796	3.2	3.3	6.4
Notley	1,642.00	1,554.83	1,281.50	1,422.00	1,035.00	1,023.50	690.00	943.00	94.7%	111.0%	98.9%	136.7%	739	3.5	3.2	6.7
Lister	1,087.50	1,038.58	917.50	925.58	1,034.25	1,034.25	690.00	735.25	95.5%	100.9%	100.0%	106.6%	573	3.6	2.9	6.5
John Ray	1,442.55	1,381.35	1,280.00	1,259.00	1,012.00	1,018.25	690.00	736.00	95.8%	98.4%	100.6%	106.7%	571	4.2	3.5	7.7
ESS	2,208.50	2,188.00	1,515.50	1,630.00	1,320.00	1,309.00	990.00	1,334.50	99.1%	107.6%	99.2%	134.8%	901	3.9	3.3	7.2
EAU	3,219.77	3,269.08	2,332.53	2,186.47	1,979.00	1,994.75	1,649.08	1,669.00	101.5%	93.7%	100.8%	101.2%	775	6.8	5.0	11.8
GICU	5,857.25	5,473.45	271.75	198.25	4,807.50	4,724.00	73.50	73.50	93.4%	73.0%	98.3%	100.0%	412	24.8	0.7	25.4
Danbury	1,805.07	1,763.98	1,476.00	1,506.00	1,034.50	1,026.00	1,035.00	1,251.25	97.7%	102.0%	99.2%	120.9%	951	2.9	2.9	5.8
Terling	1,813.00	1,780.42	1,474.50	1,413.58	1,035.00	1,368.08	690.00	689.25	98.2%	95.9%	132.2%	99.9%	911	3.5	2.3	5.8
Baddow	1,470.98	1,403.50	1,463.00	1,652.75	1,023.50	1,023.50	690.00	1,133.50	95.4%	113.0%	100.0%	164.3%	762	3.2	3.7	6.8
Braxted	1,464.50	1,440.25	1,460.00	1,541.50	1,035.00	1,023.17	690.00	1,065.00	98.3%	105.6%	98.9%	154.3%	773	3.2	3.4	6.6
Felsted	1,559.75	1,466.50	1,100.00	1,035.00	1,035.00	1,015.25	690.00	678.50	94.0%	94.1%	98.1%	98.3%	593	4.2	2.9	7.1
Stroke Unit	1,808.72	1,744.97	1,451.75	1,642.50	1,380.00	1,376.00	685.23	1,108.23	96.5%	113.1%	99.7%	161.7%	667	4.7	4.1	8.8
Burns ITU	2,694.27	2,609.27	536.97	453.47	2,214.75	2,193.50	304.50	262.50	96.8%	84.4%	99.0%	86.2%	106	45.3	6.8	52.1
Burns Adult	1,335.00	1,248.00	703.00	510.50	630.00	630.00	609.00	504.00	93.5%	72.6%	100.0%	82.8%	121	15.5	8.4	23.9
Burns Children	752.00	745.00	417.00	459.00	630.00	609.00	0.00	0.00	99.1%	110.1%	96.7%	•	45	30.1	10.2	40.3
Stock	1,923.50	1,884.75	1,202.50	1,171.50	1,375.50	1,375.25	315.00	513.50	98.0%	97.4%	100.0%	163.0%	699	4.7	2.4	7.1
Billericay	1,914.25	2,362.75	1,016.25	1,300.67	1,260.00	1,605.50	630.00	808.50	123.4%	128.0%	127.4%	128.3%	646	6.1	3.3	9.4
Birthing Unit	1,075.23	901.75	0.00	0.00	718.00	654.75	0.00	0.00	83.9%	-	91.2%	-	93	16.7	0.0	16.7
Neonatal Unit	1,968.50	1,439.50	345.00	190.00	1,962.25	1,375.75	345.00	322.00	73.1%	55.1%	70.1%	93.3%	308	9.1	1.7	10.8
Postnatal	1,450.50	1,321.00	912.50	749.75	1,075.00	1,047.00	720.00	721.00	91.1%	82.2%	97.4%	100.1%	869	2.7	1.7	4.4
Delivery Suite	2,736.50	2,469.58	697.50	729.00	2,515.50	2,469.50	717.00	678.00	90.2%	104.5%	98.2%	94.6%	255	19.4	5.5	24.9
St Peters	1,717.25	1,641.25	894.00	625.05	330.00	317.17	330.00	324.00	95.6%	69.9%	96.1%	98.2%	68	28.8	14.0	42.8
WJC	1,518.00	1,455.75	703.00	621.25	360.00	244.50	360.00	240.00	95.9%	88.4%	67.9%	66.7%	41	41.5	21.0	62.5
Mayflower	1,341.50	1,620.00	1,500.00	670.00	630.00	635.00	630.00	577.50	120.8%	44.7%	100.8%	91.7%	401	5.6	3.1	8.7
Gosfield	1,229.00	1,125.00	760.50	588.50	660.00	660.00	594.00	539.00	91.5%	77.4%	100.0%	90.7%	267	6.7	4.2	10.9
SEW	1,354.00	1,318.50	1,026.00	906.00	1,035.00	1,035.00	690.00	699.50	97.4%	88.3%	100.0%	101.4%	499	4.7	3.2	7.9

## Overall fill rate RAG rating for the divisions / directorates for month

		Registere	HCA						
Division	Prev	rious	Curren	t Month	Prev	ious	Current Month		
	Day	Night	Day	Night	Day	Night	Day	Night	
Medicine	95.2%	101.4%	96.9%	101.5%	101.6%	114.3%	103.1%	126.4%	
Surgery	102.8%	104.3%	100.4%	102.0%	235.3%	114.9%	95.6%	115.1%	
Women & Children	90.8%	94.9%	89.2%	92.1%	83.9%	89.0%	86.7%	99.8%	

## Fill Rate Variance report by ward

The table below demonstrates a break down or areas and associated RAG ratings of those that trigger Amber or Red alerts

No adult inpatient areas had a registered nurse fill rate below 90%. Low fill rates with Women and Children's services

	Da	ay	Ni	ght	
Ward name	Average fill rate - RN/RM (%)	Average fill rate - HCA staff (%)	Average fill rate - RN/RM (%)	Average fill rate - HCA staff (%)	Mitigation
GICU	93.4%	73.0%	98.3%	100.0%	HCA fill not essential for maintaining patient safety
Burns ITU	96.8%	84.4%	99.0%	86.2%	Short fall not affecting patient safety as RN fill rate adequate
SEW	97.4%	88.3%	100.0%	101.4%	Short fall in HCA supported with Band 4 practitioners. Vacant shift not requested for temporary staff fill
Burns Adult	93.5%	72.6%	100.0%	82.8%	
Neonatal Unit	73.1%	55.1%	70.1%	93.3%	Staffing shortfall is reviewed daily
St Peters	95.6%	69.9%	96.1%	98.2%	within the directorate. Staff are relocated to areas of risk to mitigate.
WJC	95.9%	88.4%	67.9%	66.7%	This includes utilisation of community
Mayflower	120.8%	44.7%	100.8%	91.7%	and on-call staff
Gosfield	91.5%	77.4%	100.0%	90.7%	

#### **Ward Sisters Supervisory Time**

At the time of writing the supervisory report was not available. AS part of the winter plan ward sisters are expected to provide at least one clinical shift within the nursing numbers to reduce the pressure of the staffing shortfall of the winter period. On review of the Nursing rosters this is in place and ward sisters are often providing additional clinical shifts to support the nurse staffing

#### Recruitment update

#### Local Recruitment

- 8.64 HCAs commenced employment in November 2017.
- 20.80 HCAs have confirmed start dates between December and February 2018.
- 13.66 HCAs have received conditional offer letters and are anticipated to start between January 2017 and March 2017.
- 30.00 Band 5 RGNs commenced employment in October 2017.
- 4.60 Band 5 RGNs commenced employment in November 2017.
- 9.60 Band 5s have confirmed start dates between December 2017 and February 2018.
- 4.88 RGNs have received conditional offer letters and are anticipated to start between January 2018 and March 2018.

#### International Recruitment

There are 44 nurses in the recruitment process.

#### Kate Cowhig Recruitment

There is 1 nurse in the recruitment process and awaiting allocation of CoS 1 nurse waiting start date, already NMC registered

#### MSI recruitment Agency

There are 7 nurses in the recruitment process with an additional 2 on hold

• 6 nurses are waiting to pass IELTS

#### Medacs Recruitment Agency

There are 33 nurses in the recruitment process

- 4 Nurses completing CBT
- 28 Nurse are completing recruitment process and have targeted start date after March 2018

#### Nurse and HCA Turnover by Division - 12 Months to November 2017

Data extracted from ESR. Primary Assignments only. Does not include leavers who retain a bank asssignment.

Nurse or HCA	DIVISION	Average WTE	Leaver s WTE	Turnover
HCAs	CORPORATE	0.00	0.00	-
HCAs	DIVISION 1 - MED & EMER CARE	175.96	18.87	10.72%
HCAs	DIVISION 2 - SURGICAL	140.45	10.47	7.45%
HCAs	DIVISION 3 - CLINICAL SUPPORT	89.03	8.51	9.56%
HCAs	DIVISION 4 - W & C	60.50	10.00	16.53%
HCAs	OPERATIONAL SUPPORT	20.92	1.80	8.60%
HCAs Trust Total		486.85	49.64	10.20%
Nurses and Midwives	CORPORATE	23.74	5.00	21.06%
Nurses and Midwives	DIVISION 1 - MED & EMER CARE	283.78	11.76	4.14%
Nurses and Midwives	DIVISION 2 - SURGICAL	331.74	32.22	9.71%
Nurses and Midwives	DIVISION 3 - CLINICAL SUPPORT	322.64	29.80	9.24%
Nurses and Midwives	DIVISION 4 - W & C	247.77	17.97	7.25%
Nurses and Midwives	OPERATIONAL SUPPORT	28.56	2.03	7.10%
Nurses and Midwives Trust Total		1238.23	98.77	7.98%

#### Incident reports and red flags

In November 2017, 21 incidents were reported with the specific category 'Staffing Issues', 10 of these fell within red flag criteria.

In total 17 incidents reported in November fell within red flag criteria and all are recorded as resulting in no or low harm.

#### **ED Paediatrics**

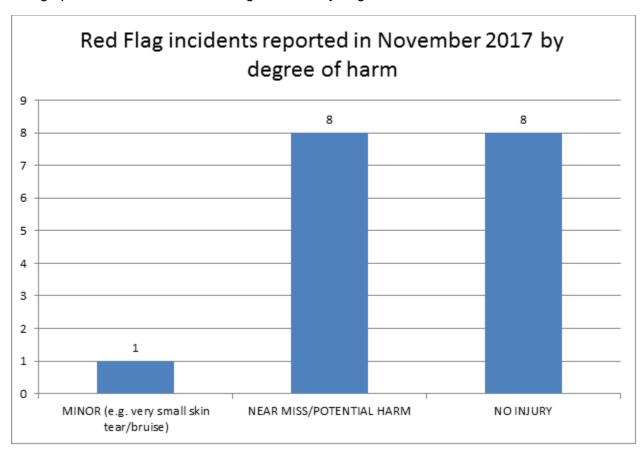
- 4 incidents were reported relating to ED Paediatrics whereby there was a shortage of staff affecting safe care.
  - WEB56544 high acuity, paediatric nurse moved to another area resulting in poor skill mix
  - WEB55695 no cover for triage when nurse on break resulting shorter breaks and compromise to safety
  - WEB55935 patient not escalated and required back to back nebs; such aggressive treatment may not have been required if treated earlier
  - WEB55936 difficulty handing over to Phoenix PAU nurse as high acuity, this resulted in delays freeing up rooms creating difficulties seeing further patients

## **Birthing Unit Closures**

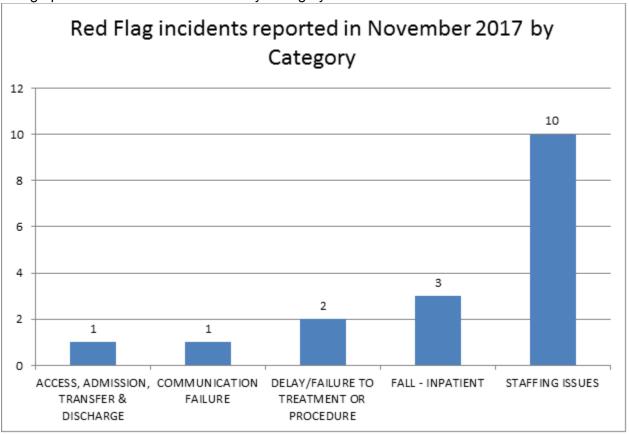
There were no reported birthing unit closures.

	November 2017
Incidents reported where the category was 'Staffing Issues'	21
Incidents reported where the category was 'Staffing Issues' and Red Flag criteria was met	10
Red Flag (where staffing issues or skill mix was a contributing factor – all recorded categories)	17
Of those the degree of harm:	
Near miss	8
No injury	8
Minor	1

The graph below details the Red Flag incidents by degree of harm:



The graph below details the incidents by Category selected on Datix:



### Sub Categories of issues relating to staffing numbers

- 6 x Shortage of staff affecting safe care
- 3 x other
- 1x delay in treatment
- 1x failure to communicate effectively
- 1 x lack of bed availability
- 1 x operation cancelled
- 3 x fall
- 1 x unprofessional standard of care

#### Conclusion and further actions required

Recruitment challenges remain within the nursing sector. Overseas nurse recruitment has continued however due to changes in the application process less nurses are landing within MEHT as previously experienced. This is mainly affected by the high score required in the English language test. The NMC is being lobbied about this by professional groups.

Staffing is reviewed daily by Matrons and ACNS and mitigation processed activated when temporary staffing measure are not achieved. Areas with low fill rate for this month do not appear to have adversely affected quality patient care.

#### **Further actions**

 Additional PMO support has been sourced to improve recruitment and formalise recruitment plan with clear measurable.

- Fortnightly task and finish group established to address RN and HCA vacancies
- Data from recruitment requested to understand the increase in percentage of leavers over the past month.
- ADNs working closely with the HRD and DON to review how the overseas nursing budget is spent. The drive is to use this money to attract people into the Trust with post registration course, due to the reduction in CPD monies being allocated to the Trust this is seen as positive action.
- Developing 5/6 roles which enable staff to develop into a higher band when the NNU course has been completed.
- Promoting work across the 3 hospitals to attract staff so that rotations across areas can be recruited to.
- 28 students Nurses set to be interviewed at recruitment fair in January 2018.

Daniel Spooner, Deputy Director of Nursing

Lyn Hinton, Director of Nursing

November 2017