

Meeting:CQRG

Date: April 2018

Agenda Item: 11

Monthly Report on Nurse Levels for March 2018

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”.	Business: Failure to deliver on safe, high quality care may impact on the hospital of choice.
Environmental:	Finance and Performance: Failure to deliver on safe, high quality care may impact on the hospital of choice.
Reputation: 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

1. 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.

2. 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.

3. Staffing Levels

The data below highlights the funded and in post vacancy rates within the nursing workforce.

- Total nurse vacancies remain high and largely static (i.e.: all qualified & unqualified) but have shown a small drop to 19% as at end of March 2018 as against 16% at March 2017.
- Unqualified vacancies continue to decrease (15% to 14% month on month) due to an increase in staff numbers.
- For qualified ward nurses there was a small net in post increase with vacancies remaining just under 30%.
- There is a total of 330 WTE (contracted) qualified nurse vacancies a decrease from 334 WTE.
- All unqualified nurse vacancies have risen from 10% in March 2017 to a 20% high in Dec 2017, but continue to show signs of improvement being 14% at the end of March 18.

ALL NURSING – QUALIFIED & UNQUALIFIED

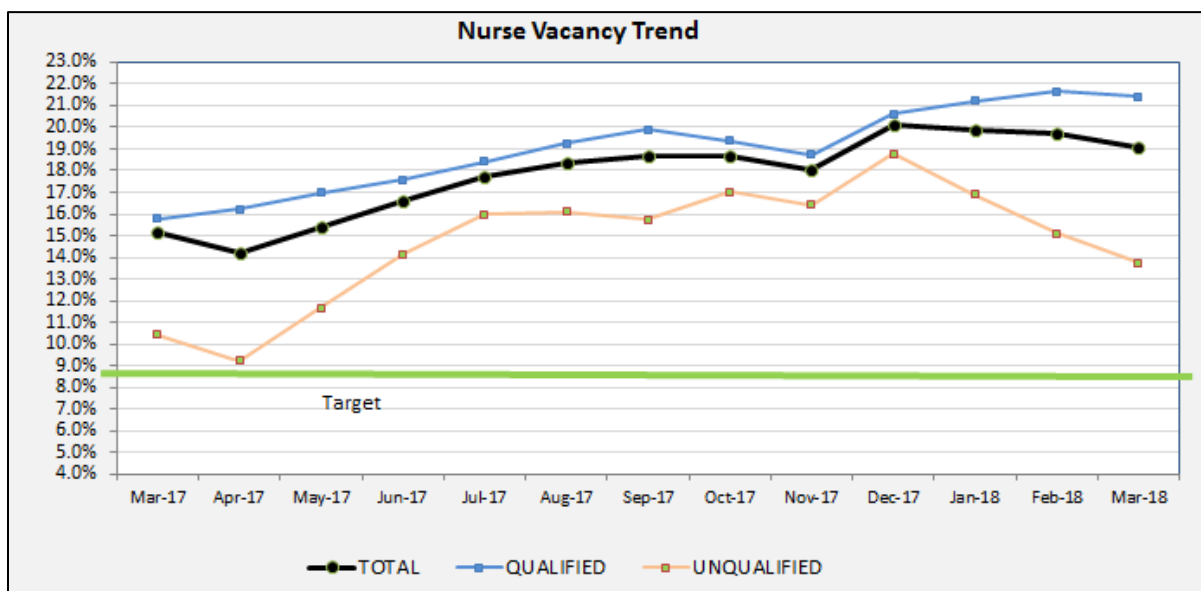
AREA	Funded	In Post	Vacant	%	Last Month
WARDS	1083.36	822.04	261.32	24.1%	25.1%
THEATRES	422.24	347.75	74.49	17.6%	17.5%
ALL OTHER	690.76	606.68	84.08	12.2%	12.5%
TOTAL	2196.36	1776.47	419.89	19.1%	19.7%
LAST REPORT TOTAL	2199.43	1766.22	433.21	19.9%	

QUALIFIED ONLY

AREA	Funded	In Post	Vacant	%	%
WARDS	679.66	479.62	200.04	29.4%	29.5%
THEATRES	321.31	259.31	62.00	19.3%	19.3%
ALL OTHER	541.83	473.75	68.08	12.6%	13.2%
TOTAL	1542.80	1212.68	330.12	21.4%	21.6%
LAST REPORT TOTAL	1545.39	1211.07	334.32	21.2%	

UNQUALIFIED ONLY

AREA	Funded	In Post	Vacant	%	%
WARDS	403.70	342.41	61.29	15.2%	17.8%
THEATRES	100.93	88.44	12.49	12.4%	12.0%
ALL OTHER	148.93	132.94	15.99	10.7%	9.9%
TOTAL	653.56	563.79	89.77	13.7%	15.1%
LAST REPORT TOTAL	654.04	555.15	98.89	16.9%	



The spike in November is attributed to the opening of Writtle ward which is the winter contingency ward. As previously stated, this represents 12.2 WTE registered nurses and 11.2 WTE health care assistants. It is acknowledged that the temporary staffing requests have increased in wards to replace the substantive nurses who have been redeployed to Writtle. Writtle ward remains open during this period with no clear plan of closure at this point

March is the third month where an improvement in HCA vacancies has been observed, this is likely to be due to the success of the HCA recruitment open days that have been delivered every month since January.

Nurse and HCA Turnover by Division - 12 Months to 31st March 2018

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

Nurse or HCA	DIVISION	Average WTE	Leavers not retaining Bank WTE	Leavers retaining Bank Headcount	Total Leavers	Turnover
HCA's	CORPORATE	0.00	0.00	0.00	0.00	-
HCA's	DIVISION 1 - MED & EMER CARE	192.14	13.47	30.00	43.47	22.62%
HCA's	DIVISION 2 - SURGICAL	153.57	12.63	30.00	42.63	27.76%
HCA's	DIVISION 3 - CLINICAL SUPPORT	90.21	9.97	2.00	11.97	13.27%
HCA's	DIVISION 4 - W & C	62.35	11.80	11.00	22.80	36.57%
HCA's	OPERATIONAL SUPPORT	15.33	1.00	1.00	2.00	13.05%
HCA's Trust Total		513.60	48.87	74.00	122.87	23.92%
Nurses and Midwives	CORPORATE	22.24	6.20		6.20	27.88%
Nurses and Midwives	DIVISION 1 - MED & EMER CARE	269.62	16.47	36.00	52.47	19.46%
Nurses and Midwives	DIVISION 2 - SURGICAL	329.77	27.95	48.00	75.95	23.03%
Nurses and Midwives	DIVISION 3 - CLINICAL SUPPORT	317.27	22.64	21.00	43.64	13.75%
Nurses and Midwives	DIVISION 4 - W & C	239.56	17.63	26.00	43.63	18.21%
Nurses and Midwives	OPERATIONAL SUPPORT	28.10	2.21	3.00	5.21	18.55%
Nurses and Midwives Trust Total		1206.56	93.10	134.00	227.10	18.82%

4. Fill Rates

The following data illustrates fill rates of expected staff levels including temporary staff within these figures. Full data set is taken from Unify report (Appendix A).

It is noted that Stock ward have used a significant number of HCAs overnight, above their establishment. This is because of a skill mix review pilot where the ward is trialling an increase in HCAs with a decrease in RNs for the night time period. Output of this pilot will be managed as part of the bi-annual staffing and skill mix review.

We need to say if there has been any impact to date on harm? Do we know?

4.1 Overall Trust Position

RN day	RN night	HCA day	HCA night
94.1%	89.7%	97.2%	114.4%

4.2 Overall Fill Rate RAG Rating for the Divisions / Directorates for Month

	Registered Nurses				HCA			
	Previous		Current Month		Previous		Current Month	
	Day	Night	Day	Night	Day	Night	Day	Night
Medicine	96.5%	102.4%	95.3	99.1	96.8%	117.8%	93.3%	117.3%
Surgery	99.2%	103%	97.3	100.9	98.5%	132.2%	90.6%	120.6%
Women & Children	87.8%	90.7%	87.9	89.2	83.3%	97.8%	78.0%	97.4%

4.3 Fill Rate Variance Report by Ward

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

Division	Ward name	Day		Night		Mitigation
		Average fill rate - RN/RMN (%)	Average fill rate - HCA (%)	Average fill rate - RN/RMN (%)	Average fill rate - HCA (%)	
1	EAU	100.6%	82.8%	101.5%	106.1%	HCA rotated within the division
	Felsted	87.9%	94.0%	97.8%	103.2%	All shifts sent to agency 2 x Nights supported by site and MHDU to ensure safety. Late shifts risk assessed by matron and ADoN and deemed safe as no NIV and lower acuity. MHDU available to support
2	Burns Adult	95.1%	65.2%	100.1%	74.2%	Low activity in burns not requiring essential HCA coverage. SEW covered by band 4 as need
	Burns Children	100.2%	55.8%	100.0%	-	
	SEW	93.4%	69.9%	100.0%	100.0%	
	John Ray	80.3%	86.4%	87.9%	88.6%	
3	GICU	91.9%	50.4%	91.6%	70.6%	HCA not essential for patient care. As patients nursed 1:1
4	Neonatal Unit	68.7%	82.2%	73.2%	138.7%	Staffing reviewed daily by ADoN and Matrons. Resources moved within the division to provide safe service. 2x ward closures this month in the community to ensure safe staffing
	Postnatal	94.8%	78.0%	91.8%	98.4%	
	St Peters Maternity	91.7%	64.7%	104.0%	99.4%	
	WJC Maternity	94.9%	63.8%	97.7%	100.4%	
	Mayflower	116.7%	47.7%	102.2%	96.8%	
	Gosfield	91.7%	88.1%	100.0%	87.3%	
	Phoenix	88.1%	76.4%	89.3%	90.7%	

5. Incident reports and red flags

In March 2018, 21 incidents were reported with the specific category 'Staffing Issues', 11 of these fell within red flag criteria.

In total 25 incidents reported in March fell within red flag criteria, all were recorded as resulting in no or low harm.

	March 2018
Incidents reported where the category was 'Staffing Issues'	25
Incidents reported where the category was 'Staffing Issues' and Red Flag criteria was met	11
Red Flag (where staffing issues or skill mix was a contributing factor – all recorded categories)	25
Of those the degree of harm:	
Near miss	11
No injury	12
Minor (small skin tear/bruise)	2

Of the two incidents where harm occurred, WEB61221 describes a delay in taking blood sugar and omission of care rounding, no harm documented in narrative or action taken. WEB 61023 refers to abrasions from hoist sling which was allegedly used inappropriately

5.1 ED Paediatrics

WEB61449 – high acuity of patients and no twilight nurse, so night nurses assigned to duty to relieve day nurses, resulting in 1 trained nurse and 1 HCA in department for shift.

WEB60921 – 2 Band 5 nurses on long day, one of which had not A&E experience – senior nurses from other wards were unable to help.

WEB61446 – staffing levels and skill mix for Phoenix and cover for A&E Resus

5.2 Birthing Unit Closures

WEB60513 – closure of the St Peter's Birthing Unit, due to adverse weather conditions when a staff member was unable to safely get to the unit.

WEB61333 – closure of St Peter's Birthing Unit due to staffing levels at Broomfield Hospital

5.3 Sub Categories of issues relating to staffing numbers

6x Shortage of staff affecting safe care

3x Fall

2x Lack of staff

2x Closure of unit

2x Delay in performing treatment

1x referral error

3x Unprofessional standard of care

3x Delay in admin of drugs

1x Inappropriate admission

1x Lost property

1x Admin of incorrect drug

1x Patient lifting and handling

6. Ward Sisters Supervisory Time

As part of the winter plan ward sisters are expected to provide at least one rostered clinical shift within the nursing numbers to reduce the pressure of the staffing shortfall, and to reduce the reliance on temporary staffing. On review of the nursing rosters this is in place and ward sisters are providing additional clinical shifts to support the nurse staffing, this is mirrored in the data below with a significant reduction in admin hours reflecting activity and organizational pressures during this period. The impact with lack of administration time that the Ward Sisters are taking potentially results in a backlog of appraisals, RCA's and datixs being completed. We are currently working with agencies to arrange for nurses to come into the Trust and work lines of off duty. The principle of this is to promote continuity of care and support clinical practice, patient flow and safety.

Date Period 1st - 31st March 2018			
Unit	Percentage of Contracted Admin Hours	Unit	Percentage of Contracted Admin Hours
D4OG Postnatal Ward	43.96%	D4OG Gosfield Ward	22.88%
D4CY Neonatal Unit	10.39%	D2GS Heybridge Ward	3.01%
D1M Baddow Ward	25.29%	D2MS John Ray Ward	6.62%
D2STA Billericay Ward	17.91%	D2MS Lister Ward	0.00%
D4OG Birthing Unit	44.01%	D2STA Mayflower Ward	44.26%
D1M Braxted Ward	0.00%	D2MS Notley Ward	0.00%
D2STA Burns Children's	45.16%	D4CY Phoenix Ward	26.21%
D2STA Burns ITU	11.73%	D2GS Rayne Ward	46.67%
D1M Danbury Ward	41.85%	D4OG St Peters Maternity	24.09%
D4OG Delivery Suite	15.70%	D2STA Stock Ward	57.21%
D1E Acute Medical Unit	40.65%	D1M Stroke Unit	43.96%
D1E ESS Ward	22.58%	D1M Terling Ward	28.00%
D1M Felsted Ward	27.10%	D4OG WJC Maternity	40.95%
D3CC GICU	18.18%		

7. Recruitment Update

7.1 Local Recruitment

- 23.32 HCAs commenced employment in March 2018.
- 28.04 HCAs have confirmed start dates between April 2018 and June 2018.
- 31.00 HCAs have received conditional offer letters and are anticipated to start between May 2018 and June 2018. Of these 24 post were offered from the open day held in May.
- 5.00 Band 5 RNs commenced employment in March 2018.
- 13.66 Band 5 RNs have confirmed start dates between April 2018 and August 2018.
- 20.60 RNs have received conditional offer letters and are anticipated to start between May 2018 and June 2018.

To ensure full grip and transparency of recruitment plans for divisions the Deputy Director Nursing has commenced weekly meetings with the Associate Directors of Nursing (ADoNs) Human Resources (HR) and Health Roster teams. This has resulted in proactive management of vacancies to ensure that recruitment processes are not delayed by systems and process.

8. International Recruitment

8.1 Medacs Recruitment Agency

42 Nurses in the pipeline from outside of the EU. 1 nurse is scheduled for arrival in Q1, 8 in Q2, 13 in Q3. 20 are still without start date. On discussion with the recruitment agency passing the English language test remains a barrier to securing start dates. However going forward, all interviews for overseas candidates will only be offered to candidates who have already achieve this level of English proficiency to expedite the recruitment process

A proposal for continued overseas nurse recruitment is being progressed to source and supply an additional one hundred nurses over the next financial year.

8.2 MSI recruitment Agency

6 nurses are in the recruitment process. These appointments were originally interviewed in July 2016 and still have not progressed with IELTS competencies due to financial difficulties in the Philippines. All receiving wards have been informed to ensure that vacancy is not being held.

9. Conclusion and Further actions

Recruitment challenges remain within the nursing sector. Overseas nurse recruitment has continued however due to changes in the application process less nurses are completing the application process and commencing employment in the Trust. This is mainly affected by the high score required in the English language test.

Staffing is reviewed daily by Matrons and Associate Directors of Nursing and mitigation processes are activated when temporary staffing measure is not achieved.

The safe care project has commenced with the plastics wards to pilot the implementation of this additional module of the Allocate software. Early indications and feedback from the pilot wards has been positive.

1. Further Actions

1.1 Strategy & Action Plans

- Recruitment strategy drafted by Head of HR
- Nurse recruitment action plan drafted and will be driven through a fortnightly task and finish group
- Retention plan for MEHT in place to address the NHSI retention wave 2 agenda with fortnightly task and finish group driving this work.

1.2 Recruitment processes

- 3 band 6 staff in place within recruitment to streamline processes, support day to day recruitment processes, ensure good governance applied, and ensure IT systems are fully utilised to improve efficiency
- Social media being more actively used to raise the Trusts profile regarding nursing vacancies which are available
- Fortnightly where health roster, vacancies and bank usage is reviewed to ensure post are being actioned appropriately
- Weekly strategic meeting with partners to ensure that staff side, Bank Partners and HR are addressing the agenda appropriately
- Deep dive into leavers information to determine actions which can address this

1.3 Recruitment events

- Advertising campaign to support nurse recruitment being sourced

- Newly qualified students for October recruited and proceeding through employment checks
- 2 RNs being offered interviews following the Recruitment Fair in Dublin March 23rd
- Posters being displayed in 53 schools to recruit people back to Nursing
- Open days for RNs booked for 21st April and May 12th
- HCA open days booked for 7th April, 19th May and 30th June
- Attending London Job Fair April 20th where there was a footfall of 28,000 people last year

Daniel Spooner, Deputy Director of Nursing
Lyn Hinton, Director of Nursing
April 2018

Appendix

Only complete sites
your organisation is
accountable for

Ward name	Day				Night				Day		Night		Care Hours Per Patient Day (CHPPD)			
	Registered		Care Staff		Registered		Care Staff		Average fill rate - RN/RMN (%)	Average fill rate - HCA (%)	Average fill rate - RN/RMN (%)	Average fill rate - HCA (%)	Cumulative count over the month of patients at 23:59 each day	RN/RM	Care Staff	Overall
	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								
Phoenix	3152.8	2777.3	1026.7	784.2	2391.5	2135.3	713.0	646.5	88.1%	76.4%	89.3%	90.7%	526	9.3	2.7	12.1
Heybridge	2270.0	2172.1	1310.5	1517.5	1426.0	1406.5	713.0	949.8	95.7%	115.8%	98.6%	133.2%	965	3.7	2.6	6.3
Rayne	2239.5	2144.5	1111.5	1049.5	1426.0	1438.5	713.0	1137.9	95.8%	94.4%	100.9%	159.6%	963	3.7	2.3	6.0
Goldhanger	2239.5	2144.5	1111.5	1049.5	1426.0	1438.5	713.0	1137.9	95.8%	94.4%	100.9%	159.6%	836	4.3	2.6	6.9
Notley	1694.5	1609.0	1304.0	1660.5	1069.5	1069.8	713.0	1035.0	95.0%	127.3%	100.0%	145.2%	786	3.4	3.4	6.8
Lister	1141.6	1038.4	938.5	1066.2	1069.5	1034.7	713.0	977.5	91.0%	113.6%	96.7%	137.1%	607	3.4	3.4	6.8
John Ray	1508.5	1211.9	1324.5	1144.5	1069.5	940.4	713.0	631.9	80.3%	86.4%	87.9%	88.6%	495	4.3	3.6	7.9
ESS	2254.5	2305.5	1554.0	1625.5	1364.0	1375.8	1023.0	1440.8	102.3%	104.6%	100.9%	140.8%	941	3.9	3.3	7.2
EAU	3378.9	3399.9	2494.6	2066.2	2047.0	2078.3	1692.5	1795.2	100.6%	82.8%	101.5%	106.1%	873	6.3	4.4	10.7
GICU	6205.3	5704.8	550.0	277.0	5197.0	4758.5	178.5	126.0	91.9%	50.4%	91.6%	70.6%	406	25.8	1.0	26.8
Danbury	1874.9	1800.9	1526.0	1411.5	1068.8	1058.3	1069.5	1058.0	96.1%	92.5%	99.0%	98.9%	984	2.9	2.5	5.4
Terling	1880.5	1800.5	1519.0	1448.5	1069.5	1416.0	711.3	733.3	95.7%	95.4%	132.4%	103.1%	955	3.4	2.3	5.7
Baddow	1497.0	1479.3	1516.0	1559.5	1058.8	1045.8	713.0	894.5	98.8%	102.9%	98.8%	125.5%	791	3.2	3.1	6.3
Braxted	1512.5	1384.8	1656.8	1640.3	1068.8	1034.3	711.0	858.8	91.6%	99.0%	96.8%	120.8%	802	3.0	3.1	6.1
Felsted	1632.4	1435.4	1146.0	1077.5	1069.5	1046.5	713.0	736.0	87.9%	94.0%	97.8%	103.2%	605	4.1	3.0	7.1
Stroke Unit	1881.3	1753.3	1517.0	1456.0	1426.0	1392.6	713.0	885.5	93.2%	96.0%	97.7%	124.2%	679	4.6	3.4	8.1
Burns ITU	2677.4	2577.9	452.7	451.7	2152.0	2222.5	294.0	325.5	96.3%	99.8%	103.3%	110.7%	92	52.2	8.4	60.6
Burns Adult	1250.3	1188.8	788.5	513.8	651.0	651.5	651.0	483.0	95.1%	65.2%	100.1%	74.2%	123	15.0	8.1	23.1
Burns Children	790.5	792.0	641.5	358.0	651.0	651.0	0.0	0.0	100.2%	55.8%	100.0%	-	93	15.5	3.8	19.4
Stock Ward	1939.3	1872.6	1176.0	1151.5	1428.0	1428.0	325.5	640.5	96.6%	97.9%	100.0%	196.8%	719	4.6	2.5	7.1
Billericay	1964.2	2194.0	1032.0	1111.0	1302.0	1514.3	650.0	734.0	111.7%	107.7%	116.3%	112.9%	674	5.5	2.7	8.2
Birthing Unit	1123.3	1011.5	0.0	0.0	744.0	673.4	0.0	0.0	90.1%	-	90.5%	-	79	21.3	0.0	21.3
Neonatal Unit	2235.8	1536.9	347.0	285.3	2016.6	1477.0	356.5	494.5	68.7%	82.2%	73.2%	138.7%	421	7.2	1.9	9.0
Postnatal	1480.5	1404.0	974.5	760.5	1116.0	1024.5	744.0	732.0	94.8%	78.0%	91.8%	98.4%	867	2.8	1.7	4.5
Delivery Suite	2687.5	2436.3	741.5	722.0	2597.0	2444.2	753.5	672.0	90.7%	97.4%	94.1%	89.2%	260	18.8	5.4	24.1
St Peters Maternity	1789.3	1640.1	877.8	567.5	341.0	354.8	341.0	339.0	91.7%	64.7%	104.0%	99.4%	44	45.3	20.6	65.9
WJC Maternity	1573.5	1493.3	734.5	468.5	372.0	363.3	372.0	373.5	94.9%	63.8%	97.7%	100.4%	68	27.3	12.4	39.7
Mayflower	1380.2	1610.3	1562.5	745.0	640.5	654.5	651.0	630.0	116.7%	47.7%	102.2%	96.8%	412	5.5	3.3	8.8
Gosfield	1276.0	1170.0	792.5	698.0	682.0	682.0	616.0	537.5	91.7%	88.1%	100.0%	87.3%	301	6.2	4.1	10.3
SEW	1384.0	1292.0	1056.0	738.5	1069.5	1069.5	712.0	712.0	93.4%	69.9%	100.0%	100.0%	583	4.1	2.5	6.5
Total	59915	56381	32783	29405	41010	39880	18982	21718	94.1%	89.7%	97.2%	114.4%				