

Meeting: Finance and Performance Committee

Date: January 14th 2015

Agenda Item:

Monthly report on Nurse levels for December 2014

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:
Resource Required:	

Cross Reference to Trust Strategic Priorities and Objectives:

Legal and Regulatory Implications/Equality and Diversity issues:

Recommendation

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

Requested Action

None

Summary

This paper is the sixth 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.

Introduction

The purpose of the paper is to outline the nursing staffing fill rates for the period of 1st December to 31st December 2014 and highlight the key areas of risk and mitigation taken throughout this period. This report meets the requirements of National Quality Board and expectations delivered to Trusts in December 2013. The data captures actual versus planned staffing on an hourly basis for day and night shifts. The revised layout of the paper is to reflect the staffing escalation policy

Trust Position.

The trust successfully upload the December unify data within the requested time frame from the TDA.

The majority of fill rates for nursing and care staff were above 80%.

6 wards reported staffing fill rates below 80% and are listed below in table 1.

Table 1

Ward name	Main 2 Specialties on each ward		Day		Night	
			Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)
	Specialty 1	Specialty 2				
Phoenix Ward E122	420 - PAEDIATRICS	421 - PAEDIATRICS	97.8%	78.7%	112.4%	185.2%
General Intensive Care Unit E226	192 - CRITICAL CARE MEDICINE	192 - CRITICAL CARE MEDICINE	95.7%	74.1%	98.7%	74.2%
Burns ITU E220	160 - PLASTIC SURGERY	160 - PLASTIC SURGERY	71.1%	80.1%	77.0%	100.0%
Burns Adult Ward E221	160 - PLASTIC SURGERY	160 - PLASTIC SURGERY	95.9%	75.6%	111.4%	65.3%
A4.3 Postnatal Ward (WF404)	501 - OBSTETRICS	501 - OBSTETRICS	79.9%	87.2%	77.2%	103.4%
St Peters Maternity	501 - OBSTETRICS	501 - OBSTETRICS	107.2%	63.2%	107.6%	103.5%

A summary of the mitigation taken at directorate and operational level for areas where fill rates were below 80% is described in table 2.

Table 2

Directorate	Ward/unit	Mitigation
Women's & Children's services	Phoenix ward	Low fill rate of support staff during day. No concerns regarding trained staff throughout this period. Staff concerns raised and escalated to site management as required
	Postnatal ward	<ul style="list-style-type: none"> • Full escalation plan in place to support ward areas. • Community and on call staff utilized to support ward environment • External units (WJC and St Peters) closed to support acute areas
	St Peter's maternity	Increased frequency of temporary unit closures during month of December to support acute trust
Critical Care	General ITU	Activity of unit flexed to meet patient demands. Staff redeployed in periods of low activity (which is reflected in low fill rate) to support Trust in areas of staffing shortfalls
Plastics Surgery	Burns ITU	Activity of unit flexed to meet patient demands. Staff redeployed in periods of low activity (which is reflected in low fill rate) to support Trust in areas of staffing shortfalls
	Burns Adult ward	Activity of unit flexed to meet patient demands. Staff redeployed in periods of low activity (which is reflected in low fill rate) to support Trust in areas of staffing shortfalls

Table 2

Ward by ward mitigation and narrative can be found in the directorate information in Appendix 1

Wards reporting above 100%

59% of wards reported fill rates of above 100%. 4 out of 27 wards (15%) reported over 100% fill rate of Registered Nurses within the day compared with 15 wards at night. The incident of HCSWs fill above 100% was significantly more within the day at 15 out of 27 (55%) and 20 out of 27 (74%) in the night. The following reasons are attributable to this.

- Submission of data includes additional duties that have been added over and above the ward establishment. This includes specials, increased capacity and increased acuity.
- Current establishment reviews have reflected the acuity of patients that require 1:1 nursing so the consideration must be taken when reviewing any staffing uplifts of changes to ward establishments
- Some identified wards require additional duties depending on the needs of the individual patients, specifically Goldhanger and Stroke who require additional RN at short notice (caring for patients with new Tracheostomies)
- Additional capacity beds. During this period and significant capacity pressures contingency areas (additional capacity beds) have been open for a prolonged period resulting in additional nursing hours required.

RED FLAG events

During this period 25 incidents were raised regarding staffing levels and fill rates within the inpatient and emergency areas.

Of these reported, 5 incidents have been identified as a red flag event. Due to escalation documentation and red flag reporting a recent concept and addition to the reporting system the potential for under reporting is recognised.

- WEB24117: Stock ward. 1 RN and 4 HCSW short (additional duties) for late shift resulting in delay in drug administration and care rounding. Lead Nurse aware, care prioritised to maintain safety. No harm reported.
- WEB23879: Stock ward. 2 RNs short on shift >25% available nursing time. Increased acuity to manage patient with 1:1 air way care. Escalated appropriately. No harm noted
- WEB: Heybridge ward: Night shift 1 RN short, agency DNA. >8 hours of nursing shortfall in shift. Delays in comfort rounding reported but no harm.
- WEB24407: Terling Ward. 1 x RN short on night shift >8hours/25% of nursing hours. Risk assessed by on call manager. No harm noted
- WEB24218: Terling ward. Delay in CD administration reported due to staffing levels. No Harm recorded.

Recruitment update

21 nurses from Overseas Recruitment Project commenced employment in December.

11 registered nurses commenced employment from local recruitment

5 HCSW commenced employment from local recruitment in the month of December.

Next Steps

The trust board is asked to;

- Note the monthly submission of nurse staffing data for December 2014
- Note the areas RAG rated and the mitigations and steps taken to address staffing shortfalls

Authors

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APPENDIX 1

Data extracted from Dec UNIFY upload

Ward name	Specialty	Day		Night		Risk rating	Mitigation/comments
		Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)		
Notley Ward E223	110 - TRAUMA & ORTHOPAEDICS	96.0%	113.4%	111.3%	126.8%	G	>100% Additional duties requested due to acuity on ward. Increasing medical outliers for December
Lister Ward C451	110 - TRAUMA & ORTHOPAEDICS	93.7%	171.5%	100.5%	226.9%	G	>100% Significant number of identified patients requiring special throughout this period and resident on ward in December
John Ray Ward E323	110 - TRAUMA & ORTHOPAEDICS	86.4%	96.7%	105.0%	138.7%	A	>100. Additional beds open during this period. Increasing acuity as trauma patients now admitted to ward due relieve capacity pressures and aid service delivery
Heybridge Ward A303	100 - GENERAL SURGERY	95.5%	90.9%	98.9%	112.6%	G	>100 HCSW increased acuity requiring additional duties
Rayne Ward A304	101 - UROLOGY	91.0%	119.5%	98.8%	158.2%	G	Long stay patients requiring specials on ward throughout December
Goldhanger Ward E222	120 - ENT	106.7%	118.4%	139.6%	153.2%	G	Use of additional trained to ensure supervision and 1:1 of trachy patients

Ward name	Specialty	Day		Night		Risk rating	Mitigation/comments
		Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)		
Writtle Ward C450	502 - GYNAECOLOGY	85.4%	114.2%	90.3%	156.0%	A	>100% contingency beds consistently open. increase in termination activity in December
Phoenix Ward E122	420 - PAEDIATRICS	97.8%	78.7%	112.4%	185.2%	R	Complex needs patient resulting in consistent need for additional nursing duties since October
Birthing Unit A402	501 - OBSTETRICS	66.8%	87.0%	104.0%	97.0%	R	Low fill rate mitigated by full maternity escalation plane. Closure of external units to redeploy staff on several occasions
A4.4 Neonatal Unit (WF 405)	420 - PAEDIATRICS	90.2%	80.6%	81.1%	106.5%	A	Unit flexes staffing to accommodation patient demand. >100% of Nursery nursed used to cover RN shortfall
A4.3 Postnatal Ward (WF404)	501 - OBSTETRICS	79.9%	87.2%	77.2%	103.4%	R	Increase staffing requirement after recommendations from CQC. Establishment not yet reflected therefore additional duties requested but not always filled by temporary staff
Delivery Suite/Labour Ward A402	501 - OBSTETRICS	87.0%	87.0%	103.6%	97.0%	A	>100% due to perceptorship training for staff requiring additional supervision. Non-recurring
St Peters Maternity	501 - OBSTETRICS	107.2%	63.2%	107.6%	103.5%	R	>100% due to perceptorship training for staff requiring additional supervision. Non-recurring

Ward name	Specialty	Day		Night		Risk rating + 90% green + 80% amber - 80% red	Mitigation/comments
		Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)		
Burns ITU E220	160 - PLASTIC SURGERY	71.1%	80.1%	77.0%	100.0%	A	Low activity in month of December. Staff were redeployed to support other areas with shortfalls. 100% fill rate not required
Burns Adult Ward E221	160 - PLASTIC SURGERY	95.9%	75.6%	111.4%	65.3%	A	Low HCSW fill rate reflected in vacancy rate. No detriment to ward due to low activity in month of December
Burns Children Ward E225	160 - PLASTIC SURGERY	91.1%	149.9%	96.8%	0.0%	G	Play specialist factored into support staff data so illustrated as >100%. 0% HCSW on nights as no HCSW are required for night shift
Stock Ward E320	160 - PLASTIC SURGERY	86.0%	145.4%	100.2%	314.4%	A	>100% reflected in specials and Dols patients. Unable to cohort patients so prolonged period of 3 specials required over every shift
Billericay Ward E321	160 - PLASTIC SURGERY	92.9%	118.7%	100.1%	138.6%	G	Additional duties due to the increase activity and amount of medical outliers cared for (which required a temporary uplift)

Ward name	Specialty	Day		Night		Risk rating	Mitigation/comments
		Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)		
ESS Ward A205	300 - GENERAL MEDICINE	104.0%	104.7%	112.5%	135.6%	G	>100% due to required specials
EAU Ward A204	300 - GENERAL MEDICINE	106.0%	112.1%	108.6%	122.3%	G	>100% due to additional contingency beds opened throughout this period
General Intensive Care Unit E226	192 - CRITICAL CARE MEDICINE	95.7%	74.1%	98.7%	74.2%	G	HCSW not essential for effective running of unit and are often redeployed to assist other areas with emergency and critical care. This is reflected in low fill rate
MH DU Ward A211	192 - CRITICAL CARE MEDICINE	92.5%	4.5%	104.4%	96.0%	G	Low fill rate at 4.5 %. Since uplift HCA role not required within MH DU unless RN shifts not filled at short notice

Ward name	Specialty	Day		Night		Risk rating	Mitigation/comments
		Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)		
Danbury Ward A302	301 - GASTROENTEROLOGY	94.4%	103.4%	95.9%	123.7%	G	>100% due to required specials
Terling Ward A305	300 - GENERAL MEDICINE	90.6%	132.5%	97.3%	166.2%	G	>100% due to required specials
Baddow Ward C250	300 - GENERAL MEDICINE	90.3%	141.5%	94.6%	228.6%	G	>100% due to required specials and DOLS
Braxted Ward C251	300 - GENERAL MEDICINE	85.3%	140.5%	99.1%	190.1%	A	>100% due to required specials and DOLS
Felsted (A207)	300 - GENERAL MEDICINE	99.3%	114.8%	141.5%	246.7%	G	Due to new location of ward the footprint of the ward is considered as
Stroke Unit E125	300 - GENERAL MEDICINE	115.1%	99.8%	127.8%	117.9%	G	>100% additional RN due to patients requiring trachy 1:1 nursing