

**Meeting:** Finance and Performance Committee

**Date:** 26 November 2015

**Agenda Item:** 8

## Monthly Report on Nurse Levels for October 2015

### Key Risks:

<p><b>Clinical:</b> 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”</p>	<p><b>Business:</b> Failure to deliver on safe, high quality care may impact on the hospital of choice.</p>
<p><b>Environmental:</b></p>	<p><b>Finance and Performance:</b> Failure to deliver on safe, high quality care may impact on the hospital of choice.</p>
<p><b>Reputation:</b> Failure to deliver high quality care may impact on reputation.</p>	<p><b>Legal:</b></p>
<p><b>Resource Required:</b></p>	

**Cross Reference to Trust Strategic Priorities and Objectives:**

**Legal and Regulatory Implications/Equality and Diversity issues:**

### Recommendation

The Patient Safety and Quality Committee are 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.

### 1. Introduction

The purpose of the paper is to outline the nursing staffing fill rates for the period of 1<sup>st</sup> to 31<sup>st</sup> October 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.

## **2. Trust Position.**

The trust successfully uploaded the October unify data within the requested time frame from the TDA. Appendix 1 shows the unify return for October. In order to enable an overview of the actual against planned a summary table is detailed in table 1. The table includes the reasons, the impact and the actions which have been taken to address the staffing deficit and support quality, safety and patient experience.

Table 1 September unify upload summary

Ward Unit	Day		Night		Reasons	Impact	Actions taken to address the gap
	Average Fill Rate RN %	Average Fill Rate HCA %	Average Fill Rate RN %	Average Fill Rate Care Staff %			
Phoenix Ward E122	103.80%	110.70%	110.70%	255.80%			
Heybridge Ward A303	90.70%	100.50%	98.50%	122.20%			
Rayne Ward A304	94.30%	97.90%	95.10%	103.40%			
Goldhanger Ward E222	90.00%	113.00%	99.00%	145.40%			
Notley Ward E223	92.90%	122.50%	97.00%	169.30%			
Lister Ward C451	92.40%	142.80%	93.50%	216.10%			
John Ray Ward E323	92.00%	83.50%	94.90%	56.10%	Have not had beds open to 28 beds therefore staffed accordingly	Staffed accordingly for safe care	No further action required
ESS Ward A205	108.30%	105.30%	114.50%	139.80%			
EAU Ward A204	86.50%	92.10%	103.70%	116.10%	Numbers on duty are as agreed through the revised rota, FSR not signed off yet as part of the emergency floor approach	15 RN shifts not covered through the month, therefore minimal impact	Rotas to be signed off by the end of November
General Intensive Care Unit E226	92.40%	59.00%	99.10%	51.50%	HCSW not always rostered to cover the unit	Minimal	None required
MHDU Ward A211	92.70%	#DIV/0!	94.40%	#DIV/0!			
Danbury Ward A302	92.40%	129.00%	97.80%	150.50%			
Terling Ward A305	93.10%	92.80%	100.00%	116.00%			
Baddow Ward C250	91.30%	113.20%	97.80%	140.20%			
Braxted Ward C251	92.40%	124.40%	97.90%	182.20%			
Felsted (A207)	84.10%	103.80%	98.60%	108.00%	The late RN shift is not put	Safe care provided	None required

					out for agency cover if there are no new/ unstable NIV patients		
Stroke Unit E125	93.70%	133.00%	98.00%	170.80%			
Burns ITU E220	69.20%	59.00%	73.30%	80.60%	Unit staffed to meet the patient activity requirements	Safe care provided to reflect the patient activity levels	None required
Burns Adult Ward E221	90.20%	101.30%	100.00%	93.40%			
Burns Children Ward E225	92.40%	106.50%	90.30%	#DIV/0!			
Stock Ward E320	90.00%	96.20%	98.10%	104.00%			
Billericay Ward E321	85.20%	89.20%	91.20%	104.60%	The RN mid shifts are only put out if patients acuity is high and this is for 24 hours, this had not been required in October. HCSWs workforce flexed as required for safe care.	Safe care provided	No further action required
Birthing Unit A402	79.50%	0.00%	88.10%	0.00%	Staff allocated according to patient activity	safe care provided	No further action required
A4.4 Neonatal Unit (WF 405)	79.10%	116.10%	84.10%	86.50%	Unit staffed to meet the patient activity requirements	Safe care provided to reflect the patient activity levels	None required
A4.3 Postnatal Ward (WF404)	102.10%	99.10%	101.80%	98.20%			
Delivery Suite/Labour Ward A402	93.10%	183.00%	105.10%	203.50%			
St Peters Maternity	111.70%	97.90%	104.30%	110.00%			
WJC Maternity	95.30%	106.70%	109.40%	116.50%			
Mayflower (BADB)	90.60%	102.00%	116.50%	101.20%			
Gosfield (EACD)	94.30%	72.20%	109.10%	93.50%	Staff sickness	Safe care provided	None required as ward fully established
SEW (GBBK)	83.60%	68.80%	96.90%	103.10%	Unit staffed to meet the patient activity requirements	Safe care provided to reflect the patient activity levels	None required

The majority of fill rates for nursing and care staff were above 80% (Appendix 1).

In October 2015 10 wards reported staffing fill rates below 90%. This excludes GICU/GHDU who have reported low fill rates of unregistered support staff, as this resource is not essential to provide safe staffing levels within these acute units, and generally reflects the patient activity requirements.

Each ward has been reviewed with the Associate Chief Nurse (or representative) within each directorate to provide mitigation to areas where a shortfall was identified. In areas where there are high levels of HCSW numbers this is due to specials. This will decrease in the future as the Enhanced Support Assistants begin work, 8 people are in post, 6.6 wte and another 2 full time staff are commencing in November. Interviews are planned for the 23 shortlisted candidates.

### **3. Wards reporting above 100%**

#### **3.1**

4 out of 28 wards (14%) reported over 100% fill rate of Registered Nurses within the day compared with 9 wards at night (32%). The incident of HCSWs fill above 100% was significantly more within the night duty period. On day duty there were 17 out of 28 wards with excess of 100% (60%) compared to 21 out of 28 (75%) 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.
- Some identified wards require additional duties depending on the needs of the individual
- It has been identified during this period that some wards planned hours (reflected in the FSR) does not match with the amount of staff the ward is actually using (irrespective of 1:1 special requests).
- As part of the V10 update all MAPS templates are being reviewed against budgeted establishment and FSRs to ensure an accurate picture of fill rates
- It is easier to fill night duty shifts with temporary staff than day duty shifts and explains the higher numbers of wards with more than 100% fill on night duty

#### 4. Incident reports and red flags

In October 2015, there were 20 Incidents reported with the category 'Staffing Issues' (14 of these fell within the red flag criteria). A total of 31 incidents reported in October fall within the red flag criteria. The majority of these incidents were near miss, low or no harm incidents.

3 are currently coded as major harms:

- 1 x declared SI relating to a safeguarding adult incident where the patient absconded from ED and self-harmed in the grounds.
- 2 x declared SI's relating to patient falls where the patients sustained fractured hips.

	October 2015
Incidents reported where the category was 'Staffing Issues'	20
Red Flag (where staffing issues or skill mix was a contributing factor)	31
Of those the degree of harm:	10
Near miss	
No injury	11
Minimal	7
Major	3

#### 5. Recruitment update

- 12 nurses from Overseas Recruitment Project commenced employment in October
- 13 registered nurses were recruited into posts in October from local recruitment, at the time of appointment only 1 had their NMC registration, these are gradually coming through
- 23 HCSW commenced employment from local recruitment

The Trust attended the ARU Essex wide student nurse recruitment day on November 5th, we will offer to 31 Student Nurses. Another recruitment event is planned for the students who qualify in March.

##### 5.1 Italy/Portugal recruitment

The Trust went to Italy in May and recruited 10 trained nurses who commenced on 22nd October. The recruitment trip to Portugal in July 2015 will have 25 new recruits commencing on November 23rd 2015.

63 Further interviews have taken place for European staff through October/ November and at least 24 more nurses are expected to commence in December and January.

## 5.2 International recruitment

The Trust has invested in international nurse recruitment and the previous NMC route for international nurses wishing to join the UK was to have the ILETs (English language) test at a score of 7.5, to have a decision letter from the NMC which articulated how long and in some cases the specific aspects which were required to be covered as part of their Overseas Nurses programme. The nurses who have been recruited over the last 18 months are now gaining their NMC registration and it is anticipated that the following numbers will gain their registration as detailed below:

Month	Number anticipated to be receiving NMC Registration	Number who actually received NMC registration
August	5	7
September	21	11
October	5	2
November	2	
December	7	
January	3	

The Home Office has confirmed that Nursing is now included on the shortage occupation list and we are now applying for sponsorship through this route.

## 5.3 Monitor/TDA Nurse agency rules

The agency rules have been published and include a consultation on the agency price cap. The use of non framework agencies has been put in place from Monday 19<sup>th</sup> October. Trusts that use non framework agencies will have these monitored via the TDA/Monitor. It has been identified that the chemo day unit, ED, winter pressure ward and burns ITU are areas that we may have to use non framework agencies in. The variance requested by the Trust to the TDA to achieve the agency trajectory of 12% by the end March 2016 has been declined. A revised trajectory has been submitted. The Trust failed to achieve the 12% agency spend as part of its total qualified nursing spend in October which ran at 17.7%

Month	TDA ceiling target %	Actual %
October	15.88	17.7
November	12.79	
December	11.9	
January	10.39	
February	10.61	
March	10.13	

## Next Steps

The Trust board is asked to;

- Note the monthly submission of nurse staffing data for October 2015
- Note the areas below 90% and the mitigations and steps taken to address staffing shortfalls

**Authors**

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November 2015



Appendix 1 (October 2015 unify upload)

Only complete sites your organisation is accountable for			Day				Night				Day		Night	
Ward name	Main 2 Specialties on each ward		Registered midwives/nurses		Care Staff		Registered midwives/nurses		Care Staff		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	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 Ward E122	420 - PAEDIATRICS		2970	3083	1481	1641	1639	1813	310	793	103.8%	110.7%	110.7%	255.8%
Heybridge Ward A303	100 - GENERAL SURGERY		2697	2446	1581	1588	1178	1160	589	720	90.7%	100.5%	98.5%	122.2%
Rayne Ward A304	101 - UROLOGY	100 - GENERAL SURGERY	2398	2261	1395	1366	1178	1120	589	609	94.3%	97.9%	95.1%	103.4%
Goldhanger Ward E222	120 - ENT	140 - ORAL SURGERY	1736	1563	1736	1963	884	875	589	857	90.0%	113.0%	99.0%	145.4%
Notley Ward E223	110 - TRAUMA & ORTHOPAEDICS	300 - GENERAL MEDICINE	1969	1828	1504	1842	884	857	589	997	92.9%	122.5%	97.0%	169.3%
Lister Ward C451	110 - TRAUMA & ORTHOPAEDICS		1302	1203	1101	1572	884	826	295	637	92.4%	142.8%	93.5%	216.1%
John Ray Ward E323	110 - TRAUMA & ORTHOPAEDICS		1736	1598	1535	1282	884	838	589	331	92.0%	83.5%	94.9%	56.1%
ESS Ward A205	300 - GENERAL MEDICINE		1969	2132	1736	1827	884	1012	589	824	108.3%	105.3%	114.5%	139.8%
EAU Ward A204	300 - GENERAL MEDICINE	100 - GENERAL SURGERY	2637	2281	2230	2053	2170	2250	1550	1800	86.5%	92.1%	103.7%	116.1%
General Intensive Care Unit E226	192 - CRITICAL CARE MEDICINE		4156	3840	372	220	3255	3226	326	168	92.4%	59.0%	99.1%	51.5%
MHDU Ward A211	192 - CRITICAL CARE MEDICINE		1612	1495	0	0	1302	1229	0	10	92.7%	-	94.4%	-
Danbury Ward A302	301 - GASTROENTEROLOGY	370 - MEDICAL ONCOLOGY	2155	1990	1736	2239	884	865	884	1330	92.4%	129.0%	97.8%	150.5%
Terling Ward A305	300 - GENERAL MEDICINE	320 - CARDIOLOGY	2170	2020	1736	1611	884	884	589	684	93.1%	92.8%	100.0%	116.0%
Baddow Ward C250	300 - GENERAL MEDICINE		1736	1586	1736	1965	884	865	589	826	91.3%	113.2%	97.8%	140.2%
Braxted Ward C251	300 - GENERAL MEDICINE		1736	1603	1736	2159	884	865	589	1073	92.4%	124.4%	97.9%	182.2%
Felsted (A207)	300 - GENERAL MEDICINE	340 - RESPIRATORY MEDICINE	1769	1488	1302	1351	884	872	589	636	84.1%	103.8%	98.6%	108.0%
Stroke Unit E125	300 - GENERAL MEDICINE	430 - GERIATRIC MEDICINE	1721	1611	1287	1711	884	866	589	1006	93.7%	133.0%	98.0%	170.8%
Burns ITU E220	160 - PLASTIC SURGERY		3197	2212	620	366	2604	1910	326	263	69.2%	59.0%	73.3%	80.6%
Burns Adult Ward E221	160 - PLASTIC SURGERY		1612	1454	620	628	651	651	651	608	90.2%	101.3%	100.0%	93.4%
Burns Children Ward E225	160 - PLASTIC SURGERY		837	773	636	677	651	588	0	21	92.4%	106.5%	90.3%	-
Stock Ward E320	160 - PLASTIC SURGERY		2135	1922	1236	1189	1488	1460	326	339	90.0%	96.2%	98.1%	104.0%
Billericay Ward E321	160 - PLASTIC SURGERY		1971	1679	1163	1037	1139	1040	651	681	85.2%	89.2%	91.2%	104.6%
Birthing Unit A402	501 - OBSTETRICS		1163	924	388	0	682	601	341	0	79.5%	0.0%	88.1%	0.0%
A4.4 Neonatal Unit (WF 405)	420 - PAEDIATRICS		2037	1611	357	414	2037	1714	357	308	79.1%	116.1%	84.1%	86.5%
A4.3 Postnatal Ward (WF404)	501 - OBSTETRICS		1163	1187	775	768	1023	1042	682	670	102.1%	99.1%	101.8%	98.2%
Delivery Suite/Labour Ward A402	501 - OBSTETRICS		2859	2661	388	709	2387	2509	341	694	93.1%	183.0%	105.1%	203.5%
St Peters Maternity	501 - OBSTETRICS		1428	1596	651	638	341	356	310	341	111.7%	97.9%	104.3%	110.0%
WJC Maternity	501 - OBSTETRICS		1428	1361	538	574	341	373	310	361	95.3%	106.7%	109.4%	116.5%
Mayflower (BADB)	160 - PLASTIC SURGERY		1802	1634	977	996	775	903	651	659	90.6%	102.0%	116.5%	101.2%
Gosfield (EACD)	502 - GYNAECOLOGY		1594	1504	797	576	757	826	295	276	94.3%	72.2%	109.1%	93.5%
SEW (GBBK)	100 - GENERAL SURGERY		1860	1556	1395	960	884	856	589	607	83.6%	68.8%	96.9%	103.1%