

<b>Date of Meeting:</b>	Wednesday 24 <sup>th</sup> April 2019			
<b>Report Title:</b>	Nursing Staffing Exception Report			
<b>Purpose of Report:</b>	Provide assurance to the Board that staffing establishments are being met month by month			
	<b>Decision:</b> <input type="checkbox"/>	<b>Discussion:</b> <input type="checkbox"/>	<b>Assurance:</b> <input checked="" type="checkbox"/>	<b>Information:</b> <input type="checkbox"/>
<b>Trust Goals that the report relates to: (Including reference to any specific risk)</b>	<p><b>Goal 2</b> All the services we deliver will be good or outstanding when assessed against being safe, effective, caring, responsive, and well-led.</p> <p><b>Goal 3</b> In all locations and settings of delivery, our patients will experience excellent, timely and seamless care that meets their individual needs.</p> <p><b>Goal 5</b> All our services will be effective: we will reduce unwarranted variation, ensure our practice is consistent with recognised best practice 7 days a week, and improve outcomes for patients.</p>			
<b>Recommendations: (Action required by Board of Directors)</b>	The Board are asked to receive the report for assurance			
<b>Financial Implications:</b>	Costs associated with nurse bank to provide cover for maternity and sickness			
<b>Risk Management Implications:</b>	Areas of potential risk have been mitigated against through the implementation of robust staffing plans and ongoing monitoring of staffing levels across the organisation			
<b>Human Resource Implications:</b>	Nurse recruitment continues to be a challenge; however the Trust is being proactive and innovative in terms of recruitment solutions			
<b>Diversity and Inclusion Implications:</b>	<p><b>Objective 3</b> Leaders within the Trust are informed and knowledgeable about the impact of business decisions on a diverse workforce and the differing needs of the communities we serve</p>			
<b>Author:</b>	Yvonne Evans, Deputy Director of Nursing, Midwifery & Quality Gareth Armstrong, Chief Matron Surgery			
<b>Presented by:</b>	Hilary Lloyd, Direct of Nursing, Midwifery & Quality			

## Gateshead Health NHS Foundation Trust

### Nursing and Midwifery Staffing Exception Report

March 2019

#### **1. Introduction**

This report is to provide assurance to the Board that staffing establishments are being met on a shift-to-shift basis. The Board will receive monthly updates on workforce information, including the number of actual staff on duty during the previous month, compared to the planned staffing level, the reasons for any gaps and the actions being taken to address these. This report provides information for March 2019.

#### **2. Staffing**

The actual ward staffing against the budgeted establishments for March are presented in Table 1: Whole Trust wards staffing and Table 2: Ward by ward staffing in this report. In addition the Trust has published this information on our website for the public, and provided a link from NHS Choices to this information.

**Table 1:** Whole Trust wards staffing March 2019

<b>Day</b>	<b>Day</b>	<b>Night</b>	<b>Night</b>
<b>Average fill rate - registered nurses/midwives (%)</b>	<b>Average fill rate - care staff (%)</b>	<b>Average fill rate - registered nurses/midwives (%)</b>	<b>Average fill rate - care staff (%)</b>
85.4%	118.0%	102.6%	127.6%

The Trust is required to present information on funded establishments (planned) against actual nurses on duty.

#### **Appendix 1**

Illustrates the Trusts staffing fill rates over the past 12 months by Qualified days, Nursing Assistant days, Qualified nights and Nursing Assistant nights.

**Table 2:** Ward by Ward staffing March 2019

Ward	Day		Night		Care Hours Per Patient Per Day (CHPPD)			
	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Cumulative patient count over the month	Registered midwives / nurses	Care Staff	Overall
Cragside Court	79.9%	103.9%	90.5%	110.3%	342	5.0	5.8	10.8
Critical Care	74.2%	90.0%	99.1%	90.6%	316	25.0	3.7	28.7
EAU	110.1%	141.8%	94.8%	137.9%	1296	5.2	2.9	8.1
Maternity	77.9%	123.1%	119.6%	96.1%	397	12.7	5.1	17.8
Paediatrics	97.4%	82.0%	135.4%	-	71	45.0	8.0	53.0
SCBU	93.4%	64.3%	105.8%	95.9%	125	14.3	3.8	18.1
St Bedes	98.3%	105.1%	98.7%	108.8%	265	6.0	5.1	11.1
Sunniside	90.7%	98.2%	108.0%	114.2%	285	5.7	5.4	11.0
Ward 1	83.0%	90.0%	103.5%	108.3%	679	2.7	2.9	5.6
Ward 11	78.1%	112.2%	108.9%	122.7%	806	2.6	3.3	5.9
Ward 12	81.5%	113.6%	110.8%	129.6%	693	3.1	3.3	6.5
Ward 14	116.3%	136.7%	130.3%	132.9%	876	3.3	4.3	7.6

Ward	Day		Night		Care Hours Per Patient Per Day (CHPPD)			
	Average fill rate - nurses/midwives (%)	Average fill rate - care staff (%)	Average fill rate - nurses/midwives (%)	Average fill rate - care staff (%)	Cumulative patient count over the month	Registered midwives / nurses	Care Staff	Overall
Ward 21	92.0%	96.5%	101.7%	102.1%	439	4.0	3.0	7.0
Ward 22	70.2%	140.2%	98.5%	156.0%	872	2.2	3.7	5.9
Ward 23	79.9%	153.5%	105.0%	244.7%	708	2.5	6.2	8.7
Ward 24	81.4%	120.9%	102.2%	148.4%	859	2.5	3.4	5.9
Ward 25	76.7%	119.5%	89.6%	150.8%	892	2.2	3.2	5.4
Ward 26	82.0%	97.0%	100.5%	108.4%	737	2.9	3.3	6.2
Ward 27	72.5%	81.2%	103.8%	103.0%	816	2.4	2.5	4.9
Ward 4	86.2%	138.7%	101.3%	125.3%	893	3.0	3.7	6.6
Ward 6	121.8%	177.6%	99.6%	90.0%	779	2.1	4.0	6.0
Ward 8	89.2%	112.9%	69.2%	201.5%	597	4.4	2.8	7.2
Ward 9	72.8%	127.0%	102.1%	114.6%	1045	2.8	3.3	6.0

### 3. Exceptions:

The Board will be advised of those wards where staffing capacity and capability frequently falls short of what is planned, the reasons why, any impact on quality and the actions taken to address gaps in staffing. In terms of exception reporting, we will report to the Board if the safe planned staffing drops below 75% or above 125%.

The exceptions to report are as below:

<b>March 2019</b>	
<b>Qualified Nurse Days</b>	<b>%</b>
Critical Care	74.2%
Ward 22	70.2%
L2 PSSC	72.5%
Ward 9	72.8%
<b>Nursing Assistant Days</b>	<b>%</b>
EAU	141.8%
SCBU	64.3%
Ward 14	136.7%
Ward 22	140.2%
Ward 23	153.5%
Ward 4	138.7%
Ward 6	177.6%
Ward 9	127.0%
<b>Qualified Nurse Nights</b>	<b>%</b>
Paediatrics	135.4%
Ward 14	130.3%
Ward 8	69.2%
<b>Nursing Assistant Nights</b>	<b>%</b>
EAU	137.9%
Ward 12	129.6%
Ward 14	132.9%
Ward 22	156.0%
Ward 23	244.7%
Ward 24	148.4%
Ward 25	150.8%
Ward 4	125.3%
Ward 8	201.5%

## Qualified Nurses

During the month of March Critical Care, Ward 22, Ward 9 and L2 PSSC have low Qualified Nurse day fill rates due to vacancies, sickness absence and maternity leave. Both Critical Care and Ward 22 have recruited to these posts there should be an improvement to fill rates in April.

Paediatrics have high Qualified Nurse night fill rates due to Advanced Paediatric Nurse Practitioners supporting the night medical rota. Ward 14 have high fill rates for Qualified Nights due to 8 additional beds being open as part of the winter pressure plan.

Ward 8 continues to have low fill rates for Qualified Nurse nights due to vacancies and sickness absence, recently three qualified nurses have been recruited which should improve fill rates from the end of April.

## Nursing Assistants

There are high Nursing Assistant fill rates for days and nights due to escalation areas being open, patients requiring enhanced care on several Wards and back filling for qualified vacancies.

Ward 23 have high fill rates for Nursing Assistant days and nights due to multiple patients requiring one-to-one enhanced care during March.

SCBU have low fill rates in March for Nursing Assistant days due to vacancies and additional training needs, during this period on the unit there was reduced patient activity and dependency which ensured safe staffing numbers were maintained.

## **4. Care Hours Per Patient Day (CHPPD)**

Following the Lord Carter Cole report, it was recommended that all trusts start to report on care hours per patient per day (CHPPD) this is to provide a single consistent way of recording and reporting deployment of staff working on inpatient wards/units. It is calculated by adding the hours of registered nurses to the hours of support workers and dividing the total by every 24 hours of inpatient admissions. CHPPD is relatively stable month on month but they can show variation due to a number of factors including:

- Patient acuity and dependency
- Patients required enhanced care and support
- Bed occupancy (activity)

Work is ongoing to use the CHPPD metric to monitor and provide assurance in relation to the safe staffing of our ward areas. In line with this review more information will be provided in future board papers.

## **5. Monitoring Nurse Staffing via Datix**

The Trust has in place a process for reporting and monitoring any concerns regarding nurse staffing levels. This is via the Datix incident reporting system. A report is generated on a monthly basis and discussed at the Nursing and Midwifery Professional Forum. This report helps identify

areas where nurse staffing may have fallen below planned levels and what actions were taken to manage the situation. It is also helpful in identifying trends and organisational learning. There were 3 incidents reported in March.

## **6. Governance**

Actual staff on duty on a shift to shift basis compared to planned staffing is clearly displayed on the ward 'time to care' boards alongside key quality and outcome metrics i.e. safety thermometer; infection measures. These 'time to care' boards are all located in an area clearly visible to the public.

## **7. Conclusion**

This paper provides an exception report for nursing and midwifery staffing in March 2019.

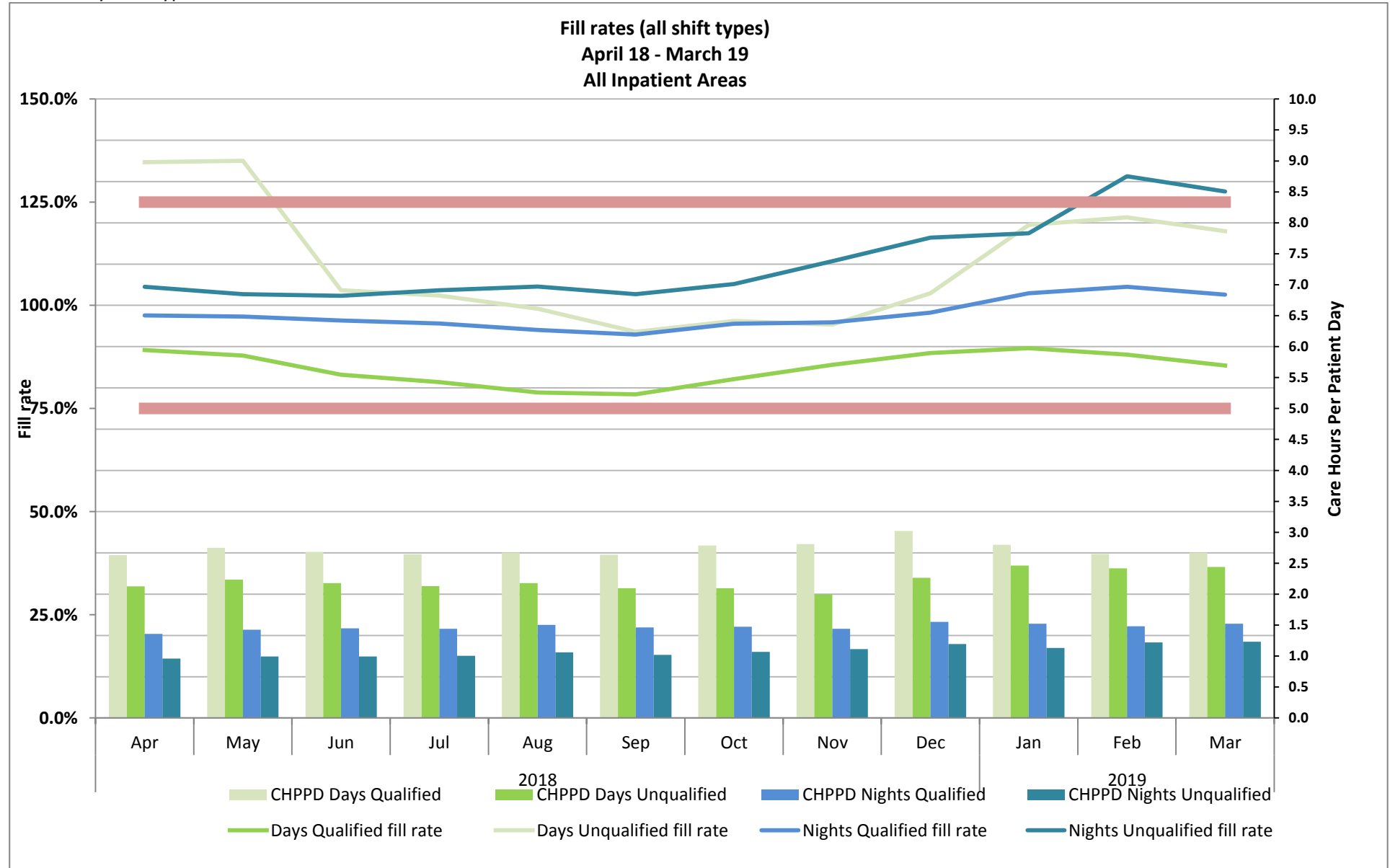
## **8. Recommendations**

The Board is asked to receive this report for assurance.

**Yvonne Evans, Deputy Director of Nursing, Midwifery and Quality**  
**Gareth Armstrong, Chief Matron Surgery**

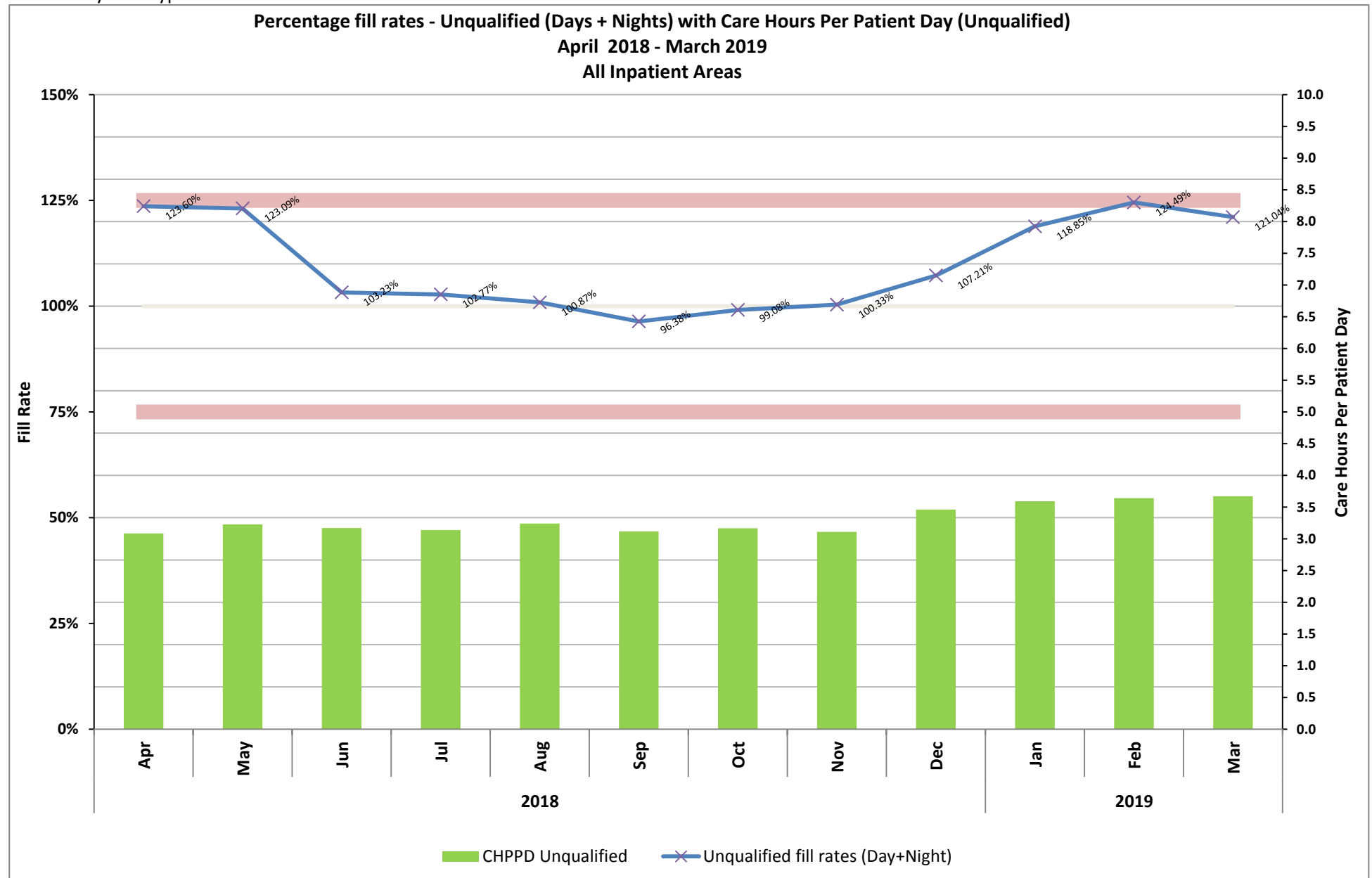
**Appendix 1**

Fill rates by shift type



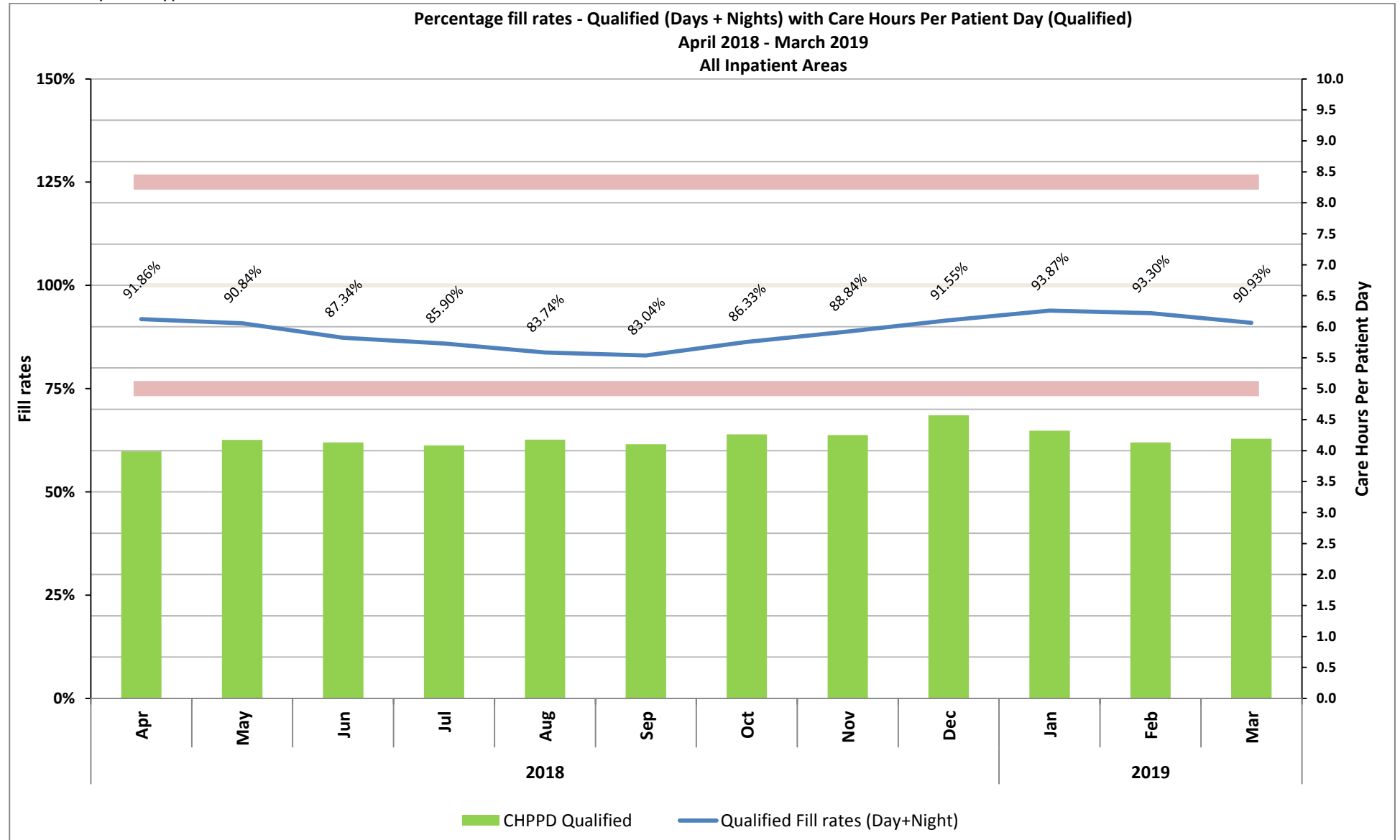


Fill rates by shift type







**Appendix 1**

Fill rates by shift type



**Table 3:**

**Fill rates (all shift types)  
March 2019  
All inpatient areas**

								
	Days Qualified fill rate	Days Unqualified fill rate	Nights Qualified fill rate	Nights Unqualified fill rate	CHPPD Days Qualified	CHPPD Days Unqualified	CHPPD Nights Qualified	CHPPD Nights Unqualified
Apr 2018	89.2%	134.7%	97.57%	104.5%	2.63	2.13	1.36	0.96
May 2018	87.8%	135.0%	97.28%	102.7%	2.75	2.23	1.43	0.99
Jun 2018	83.2%	103.7%	96.30%	102.3%	2.68	2.18	1.45	0.99
Jul 2018	81.4%	102.4%	95.60%	103.6%	2.65	2.13	1.44	1.00
Aug 2018	78.9%	99.2%	94.06%	104.5%	2.67	2.18	1.50	1.06
Sep 2018	78.4%	93.6%	92.94%	102.7%	2.64	2.10	1.46	1.02
Oct 2018	82.1%	96.2%	95.54%	105.2%	2.79	2.10	1.47	1.07
Nov 2018	85.6%	95.3%	95.90%	110.7%	2.81	2.00	1.44	1.11
Dec 2018	88.5%	102.9%	98.20%	116.4%	3.02	2.19	1.55	1.16
Jan 2019	89.6%	119.5%	102.90%	117.5%	2.80	2.46	1.52	1.13
Feb 2019	88.0%	121.3%	104.50%	131.3%	2.65	2.42	1.48	1.22
Mar 2019	85.4%	118.0%	102.57%	127.6%	2.67	2.44	1.52	1.23