Report Cover Sheet   Agenda Item:

Report Title:	**Nursing Staffing Exception Report**
Name of Meeting:	Quality Governance Committee
Date of Meeting:	19th January 2022
Author:	Janet Thompson, Head of Nursing Laura Edgar, People Information and Data Lead
Executive Sponsor:	Gillian Findley, Chief Nurse and Professional Lead for Midwifery and AHP's
Report presented by:	

Purpose of Report *Briefly describe why this report is being presented at this meeting*	**Decision:** ☐	**Discussion:** ☐	**Assurance:** ☒	**Information:** ☒
	This report is to provide assurance to the Board that staffing establishments are being monitored on a shift-to-shift basis.			

Proposed level of assurance – <u>to be completed by paper sponsor</u>:	**Fully assured** ☐ *No gaps in assurance*	**Partially assured** ☐ *Some gaps identified*	**Not assured** ☐ *Significant assurance gaps*	**Not applicable** ☐

Paper previously considered by: *State where this paper (or a version of it) has been considered prior to this point if applicable*	

| **Key issues:**
Briefly outline what the top 3-5 key points are from the paper in bullet point format

Consider key implications e.g.
• *Finance*
• *Patient outcomes / experience*
• *Quality and safety*
• *People and organisational development*
• *Governance and legal*
• *Equality, diversity and inclusion* | This report provides information relating to ward staffing levels (funded against actual) and details of the actions taken to address any shortfalls.

December continued with significant staffing challenges following on from November as the Organisation managed the COVID-19 activity that impacted on staffing resource and the clinical operating model.

Wards where staffing fell below 75% of the funded establishment are shown within the paper. Actions taken are documented. Assurance that the escalation process is operating as expected is provided via the number of Datix reports relating to staffing.

Assurance will be strengthened going forward as a task and finish group has been set-up to look at reporting, recording and escalation of staffing in more detail. Quality |

	Governance Committee will be updated as the group progresses.				
Recommended actions for this meeting: *Outline what the meeting is expected to do with this paper*	The Board are asked to: • receive the report for assurance • note the work being undertaken to address the shortfalls in staffing				
Trust Strategic Aims that the report relates to:	**Aim 1** ☒	We will continuously improve the quality and safety of our services for our patients			
	Aim 2 ☒	We will be a great organisation with a highly engaged workforce			
	Aim 3 ☒	We will enhance our productivity and efficiency to make the best use of resources			
	Aim 4 ☐	We will be an effective partner and be ambitious in our commitment to improving health outcomes			
	Aim 5 ☐	We will develop and expand our services within and beyond Gateshead			
Trust corporate objectives that the report relates to:					
Links to CQC KLOE	Caring ☒	Responsive ☒	Well-led ☐	Effective ☒	Safe ☒
Risks / implications from this report (positive or negative):					
Links to risks (identify significant risks and DATIX reference)	There were 3 staffing risks identified throughout December, of which no patient harm occurred as a result. These incidences relate to datix incident ID 92317, 92358, 93012.				
Has a Quality and Equality Impact Assessment (QEIA) been completed?	**Yes** ☐		**No** ☐		**Not applicable** ☒

Gateshead Health NHS Foundation trust
Nursing and Midwifery Staffing Exception Report
December 2021

1. Introduction

2. Staffing

The actual ward staffing against the budgeted establishments for December are presented in Table 1. Whole Trust wards staffing are presented within this report in appendix 1, broken down into each ward areas staffing. 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 December 2021

Day	Day	Night	Night
Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)
86.6%	100.2%	93.2%	99.4%

The Trust is required to present information on funded establishments (planned) against actual nurses on duty. The above figures are average fill rates and thus do not reflect the daily challenges experienced during COVID pandemic to maintain adequate staffing levels.

Exceptions:
The guidance on safe staffing requires that 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, Gateshead Health NHS Foundation Trust reports to the Board if the planned staffing in any area drops below 75%.

Contextual information and actions taken

JASRU, Wards 22 and 25 continue to have significant vacancy rates, equating to five wte registered staff per each area. There is bespoke and trust wide recruitment initiatives ongoing to recruit into these posts. JASRU also demonstrate significant unregistered vacancies, of which have now successfully been recruited to and are awaiting start dates. JASRU are also continuing to support ward 12 with two registered staff. Ward 8 continue to support wards 4 and 12 with two registered staff. Ward 27 has 3.9 wte registered vacancies which have been recruited to and are awaiting start dates.

Emergency Care Centre ward 2 and ward 10 supported the respiratory support unit with registered staff.

Ward 21, our 14 bedded elective orthopaedics was closed over the Christmas period for a total of 7 days, with staff being redeployed across the organisation. 89 redeployment moves were made from ward 21 throughout the month of December, resulting in a reduced fill rate for this month. The exceptions to report for December are as below:

December 2021	
Qualified Nurse Days	**%**
ECC Ward 2	68.
JASRU	63.4%
Ward 8	67.3%
Ward 21 Ortho	51.5%
Ward 22	71.2%
Ward 25	69.8%
Ward 27	73.3%
Qualified Nurse Nights	**%**
ECC Ward 2	70.1
Ward 10	72.3%
Healthcare Assistant Days	**%**
JASRU	74.7%
Sunniside	72.5%
Healthcare Assistant Nights	**%**
JASRU	64.6%
Ward 21 Orth	68.7%

In December the Trust worked to the agreed clinical COVID model which meant at times some wards listed above had lower patient occupancy and staff were redeployed appropriately to areas with the greatest clinical need. Throughout December, areas of deficit were escalated as per staffing policy and mitigations were put in place by the Matron teams using professional judgement as to the acuity and demand in each area which included:

- Redeployments of Registered Nurses and HealthCare assistants on a daily and at times hourly basis between wards according to patient acuity and demand.
- Mobilisation of part of the non-ward based nurse workforce away from normal duties to support areas most in need of support as detailed in the Trust's winter surge plans.

Work is continuing with the Matrons and the People and Organisational Development team to address the sickness levels within the divisions and to recruit to any vacancies.

3. 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.

4. 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.

There were 3 staffing incidents in December. Of the identified staffing incidents within December, there were no patient harms relating to reduced staffing.

The numbers of staffing incidents are an effect of the Global COVID19 pandemic and subsequent government guidelines around self-isolation when staff have tested positive or had significant contact throughout the 4th wave of COVID 19.

5. Governance

Actual staff on duty on a shift to shift basis compared to planned staffing is displayed on the ward boards alongside key quality and outcome metrics i.e. safety thermometer; infection measures.

6. Conclusion

This paper provides an exception report for nursing and midwifery staffing in December 2021.

7. Recommendations

The Board is asked to receive this report for assurance.

Gill Findley

Appendix 1- Table 3: Ward by Ward staffing December 2021

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
Ward 1	82.4%	103.3%	75.9%	93.9%	658	5.9	3.6	9.6
Ward 2	68.6%	102.8%	70.1%	81.0%	651	5.2	3.6	8.8
Ward 8	67.3%	84.3%	98.7%	102.5%	607	3.4	2.9	6.3
Ward 9	99.9%	124.0%	84.9%	104.0%	635	3.0	3.4	6.3
Ward 10	95.4%	110.9%	72.3%	106.2%	611	3.1	3.3	6.4
Ward 11	85.7%	98.9%	103.6%	116.8%	698	2.8	3.1	5.9
Ward 12	89.2%	160.0%	105.4%	95.8%	715	2.5	2.7	5.2
Ward 14 Medicine	78.0%	107.9%	103.2%	133.0%	728	2.5	3.1	5.6
Ward 14A	76.8%	107.6%	108.4%	101.2%	729	2.8	3.8	6.5
Ward 21	51.5%	131.7%	82.1%	68.7%	124	9.3	11.8	21.1
Ward 22	71.2%	85.3%	100.9%	80.1%	687	2.7	3.4	6.1
Ward 23	84.7%	122.8%	105.9%	129.8%	706	2.6	4.2	6.8
Ward 24	82.3%	91.0%	104.8%	86.5%	861	2.4	2.9	5.3

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 25	69.8%	86.8%	104.3%	83.7%	890	2.1	2.6	4.8
Ward 26	90.9%	93.9%	115.4%	141.1%	774	3.1	3.4	6.5
Ward 27	73.3%	88.5%	104.5%	93.7%	844	2.4	2.7	5.0
Cragside Court	78.4%	99.1%	125.9%	110.3%	269	7.1	7.2	14.4
Critical Care	79.8%	85.6%	91.1%	105.9%	243	29.7	4.9	34.6
JASRU	63.4%	74.7%	98.6%	64.6%	500	3.2	3.8	7.0
Maternity	121.9%	102.7%	93.9%	95.9%	550	13.6	4.8	18.4
Paediatrics	123.3%	97.9%	102.8%	-	72	33.3	7.7	41.0
SCBU	91.1%	118.8%	95.7%	93.6%	149	11.3	4.4	15.7
St Bedes	99.9%	105.5%	101.2%	99.8%	254	6.2	5.0	11.2
Sunniside	112.5%	72.5%	101.4%	108.6%	267	6.7	4.7	11.4