

## Report Cover Sheet

## Agenda Item: 12

<b>Date of Meeting:</b>	26 June 2019			
<b>Report Title:</b>	Nurse 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, Director of Nursing, Midwifery & Quality			

## Gateshead Health NHS Foundation Trust

### Nursing and Midwifery Staffing Exception Report

April – May 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. 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. This report provides information for April and May 2019.

#### **2. Staffing**

The actual ward staffing against the budgeted establishments for April and May are presented in Tables 1a and 1b: Whole Trust wards staffing and Tables 2a and 2b: 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 1a:** Whole Trust wards staffing April 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>
86.1%	117.4%	97.2%	122.5%

**Table 1b:** Whole Trust wards staffing May 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>
85.8%	116.6%	98.1%	117.0%

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 2a:** Ward by Ward staffing April 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	69.4%	132.5%	85.1%	100.4%	383	3.9	5.6	9.4
CCD	83.7%	89.9%	95.1%	82.1%	280	28.6	3.9	32.5
EAU	110.9%	158.1%	95.7%	124.5%	1233	5.3	3.0	8.4
Maternity	72.8%	87.5%	93.6%	90.2%	298	15.4	6.8	22.2
Paediatrics	81.3%	106.5%	107.8%	-	59	46.9	12.1	59.0
SCBU	83.6%	83.6%	105.0%	103.3%	89	18.1	6.0	24.1
St Bede's	99.1%	116.0%	98.3%	111.4%	244	6.3	5.8	12.1
Sunniside	111.4%	95.2%	102.2%	111.6%	316	5.5	4.6	10.0
Ward 1	87.7%	101.4%	100.0%	105.5%	667	2.7	3.1	5.8
Ward 11	79.6%	109.9%	105.4%	151.8%	801	2.5	3.4	5.9
Ward 12	89.1%	104.8%	105.7%	96.8%	625	3.5	3.1	6.6

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 14	109.6%	107.4%	110.1%	112.9%	767	3.4	3.8	7.2
Ward 21	99.2%	88.5%	101.7%	105.9%	431	4.1	2.8	6.9
Ward 22	94.4%	138.3%	76.7%	136.5%	856	2.5	3.5	6.0
Ward 23	74.3%	175.8%	104.7%	253.7%	687	2.4	6.8	9.2
Ward 24	80.2%	119.3%	102.7%	156.7%	838	2.4	3.4	5.8
Ward 25	64.9%	137.6%	100.0%	143.2%	862	2.0	3.5	5.5
Ward 26	73.5%	93.3%	100.4%	102.1%	679	2.8	3.3	6.1
Ward 27	80.8%	84.5%	102.1%	103.7%	719	2.8	2.8	5.7
Ward 4	85.4%	146.1%	104.1%	119.8%	879	2.9	3.7	6.6
Ward 6	111.6%	126.8%	101.5%	80.5%	670	2.2	3.4	5.6
Ward 8	95.8%	110.2%	70.4%	209.5%	584	4.6	2.8	7.4
Ward 9	73.3%	131.2%	101.1%	115.0%	1017	2.7	3.3	6.1

**Table 2b:** Ward by Ward staffing May 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	70.1%	113.2%	81.9%	140.0%	412	3.7	5.4	9.1
CCD	79.2%	95.4%	95.3%	95.9%	307	26.0	4.0	30.0
EAU	109.4%	172.5%	90.7%	136.0%	1289	5.1	3.3	8.4
Maternity	74.8%	95.2%	86.7%	87.5%	357	13.1	6.5	19.6
Paediatrics	91.0%	119.8%	170.6%	-	73	48.3	11.4	59.7
SCBU	70.9%	117.0%	100.4%	96.8%	83	17.9	7.4	25.3
St Bede's	101.8%	105.4%	100.0%	106.5%	250	6.5	5.4	11.9
Sunnyside	110.2%	85.9%	104.6%	110.8%	409	4.4	3.4	7.7
Ward 1	84.7%	92.5%	103.3%	96.8%	700	2.6	2.8	5.4
Ward 11	74.0%	110.0%	103.4%	105.1%	840	2.4	3.0	5.3
Ward 12	87.5%	112.7%	104.8%	102.8%	683	3.3	3.1	6.4

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 14	100.5%	110.2%	106.6%	101.8%	813	3.1	3.6	6.7
Ward 21	98.7%	87.6%	101.8%	100.6%	434	4.2	2.8	7.1
Ward 22	74.1%	144.1%	100.0%	128.9%	864	2.3	3.6	5.9
Ward 23	82.2%	139.7%	96.2%	212.4%	700	2.5	5.6	8.1
Ward 24	85.3%	108.8%	108.5%	132.6%	860	2.6	3.1	5.7
Ward 25	69.3%	127.1%	93.3%	154.2%	894	2.1	3.4	5.4
Ward 26	75.1%	90.7%	101.7%	95.6%	683	2.9	3.4	6.3
Ward 27	74.9%	104.6%	102.1%	101.8%	795	2.5	3.1	5.6
Ward 4	74.2%	142.1%	106.2%	120.7%	941	2.5	3.5	6.1
Ward 6	178.1%	176.1%	102.2%	58.8%	520	4.0	5.3	9.3
Ward 8	98.9%	97.9%	69.8%	206.1%	621	4.6	2.5	7.1
Ward 9	78.3%	119.2%	101.1%	108.8%	1059	2.8	3.0	5.9

### 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:

April 2019			May 2019	
Qualified Nurse Days	%		Qualified Nurse Days	%
Cragside Court	69.4%		Cragside Court	70.1%
Maternity	72.8%		Maternity	74.8%
Ward 23	74.3%		SCBU	70.9%
Ward 25	64.9%		Ward 11	74.0%
L1 PSSC	73.50%		Ward 22	74.1%
Ward 9	73.3%		Ward 25	69.3%
			L2 PSSC	74.9%
			Ward 4	74.2%
			Ward 6	178.1%
Nursing Assistant Days	%		Nursing Assistant Days	%
Cragside	132.5%		EAU	172.5%
EAU	158.1%		Ward 22	144.1%
Ward 22	138.3%		Ward 23	139.7%
Ward 23	175.8%		Ward 25	127.1%
Ward 25	137.6%		Ward 4	142.1%
Ward 4	146.1%		Ward 6	176.1%
Ward 6	126.8%			
Ward 9	131.2%			
Qualified Nurse Nights	%		Qualified Nurse Nights	%
Ward 8	70.4%		Paediatrics	170.6%
			Ward 8	69.8%
Nursing Assistant Nights	%		Nursing Assistant Nights	%
Ward 11	151.8%		Cragside Court	140.0%
Ward 22	136.5%		EAU	136.0%
Ward 23	253.7%		Ward 22	128.9%
Ward 24	156.7%		Ward 23	212.4%
Ward 25	143.2%		Ward 24	132.6%
Ward 8	209.5%		Ward 25	154.2%
			Ward 6	58.8%
			Ward 8	206.1%

## Qualified Nurses

The following areas had low fill rate on day shift in April and May due to vacancies, sickness/absence and maternity leave; Cragside court, Maternity, SCBU, Wards 4, 6, 23, 11, 25, L2 PSSC and Ward 9. Ward 8's fill rates for April and May remains low on night shift due to rostering practices on the unit, with the third qualified nurse often backfilled by Nursing Assistants.

Paediatrics qualified fill rate for night shift is high due to the newly recruited advanced practitioners who work on the medical rota but are still part of the nursing establishment. Work is being undertaken to ensure that these shifts will be linked to the appropriate rota for the next report.

All areas which have shown shortfalls are monitored on a shift by shift basis by the Ward Manager and Matron responsible the ward to ensure safe staffing numbers are maintained.

## Nursing Assistants

Fill rates for Nursing Assistant days in April and May remain high for EAU, Cragside Court, Wards 4, 9, 6, 23, 24 and 25 due to back filling for qualified vacancies, maternity leave and long term sickness absence. Wards 8,11, 22, 23, 24 and 25 have also needed to roster additional Nursing Assistants on night shifts to maintain patient safety and provide enhanced care.

## **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 have been no reportable nurse staffing resource Datix's submitted in April or May 2019

## **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 April and May 2019.

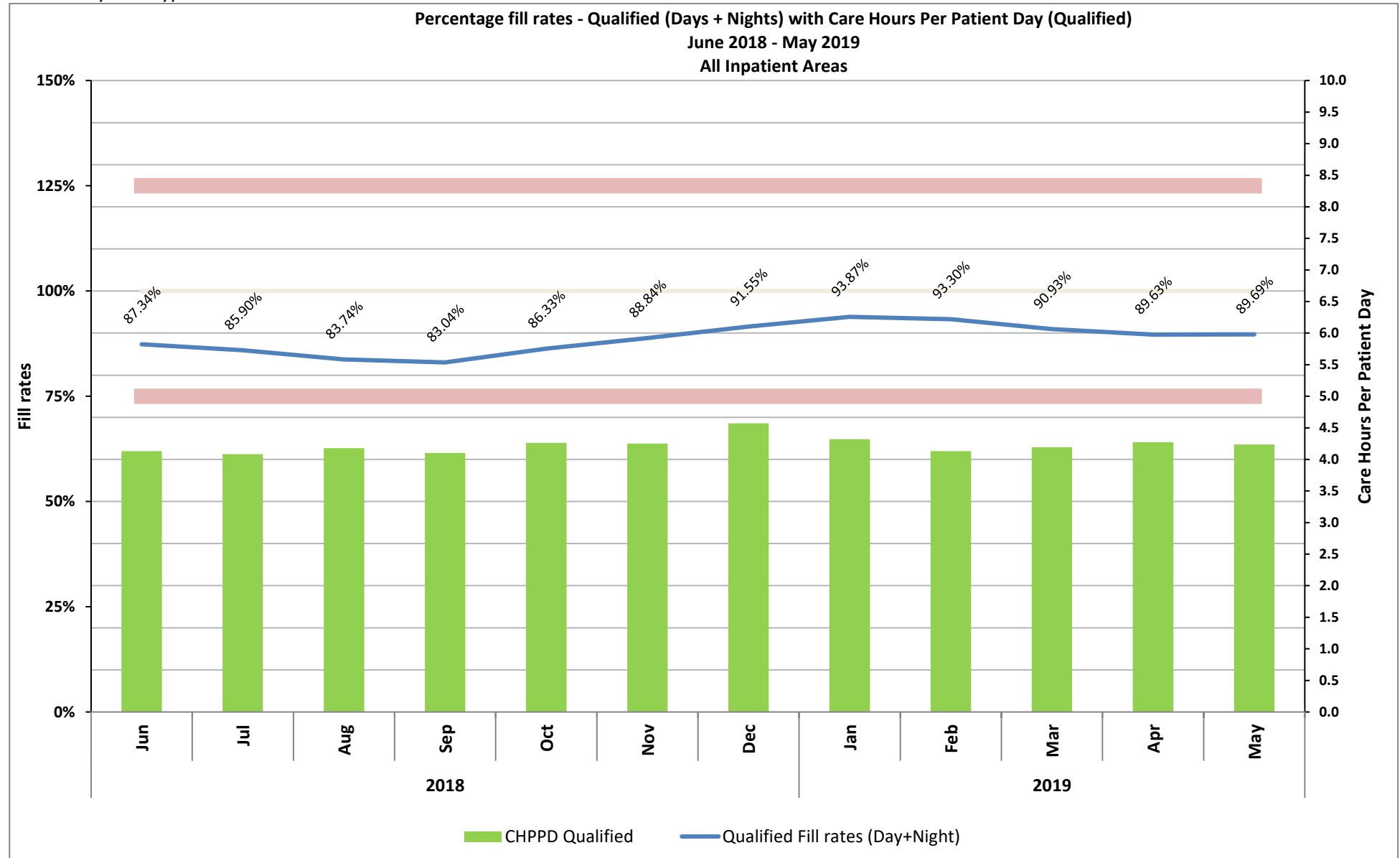
## **8. Recommendations**

The Board is asked to receive this report for assurance.

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

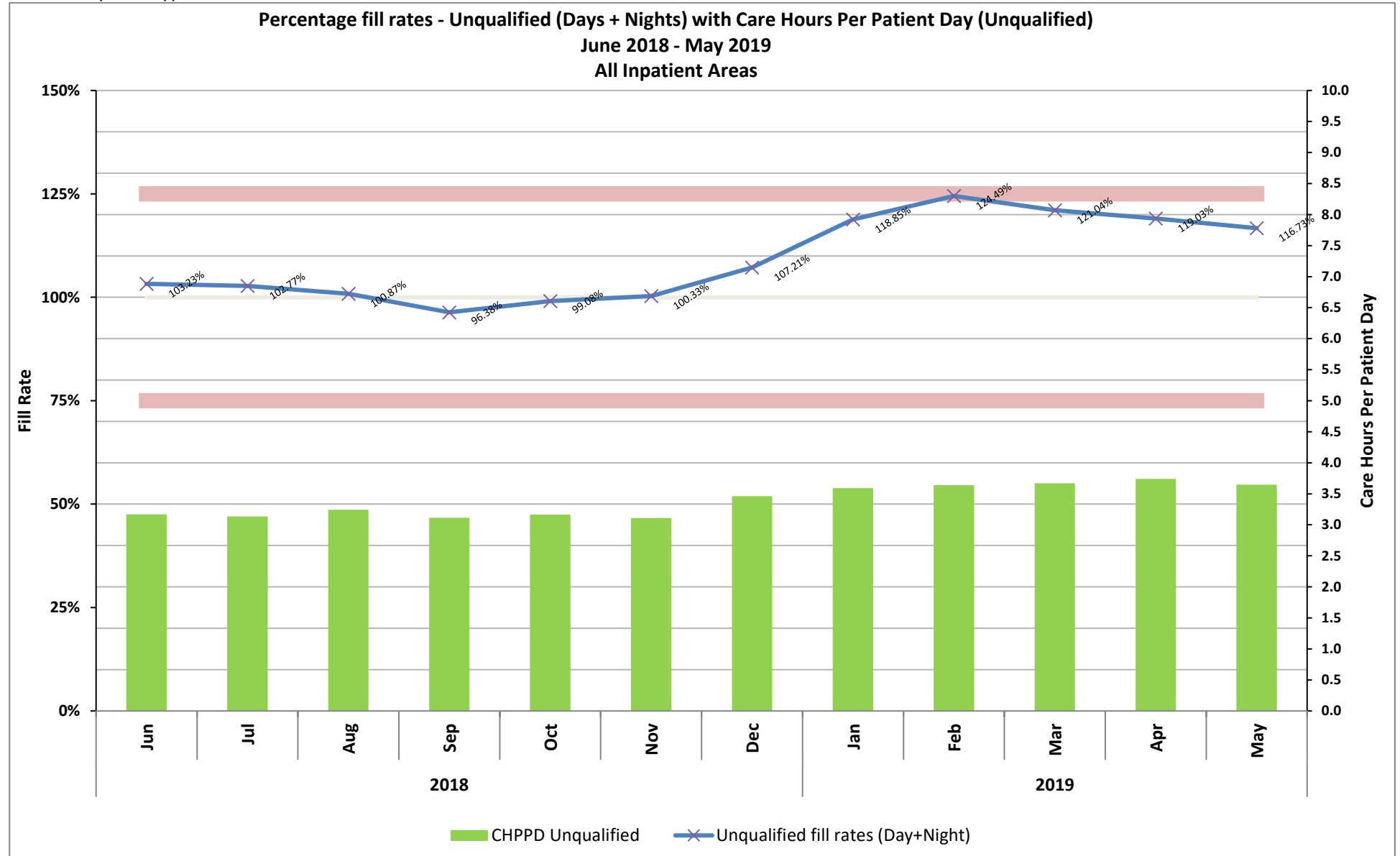
**Appendix 1**

Fill rates by shift type



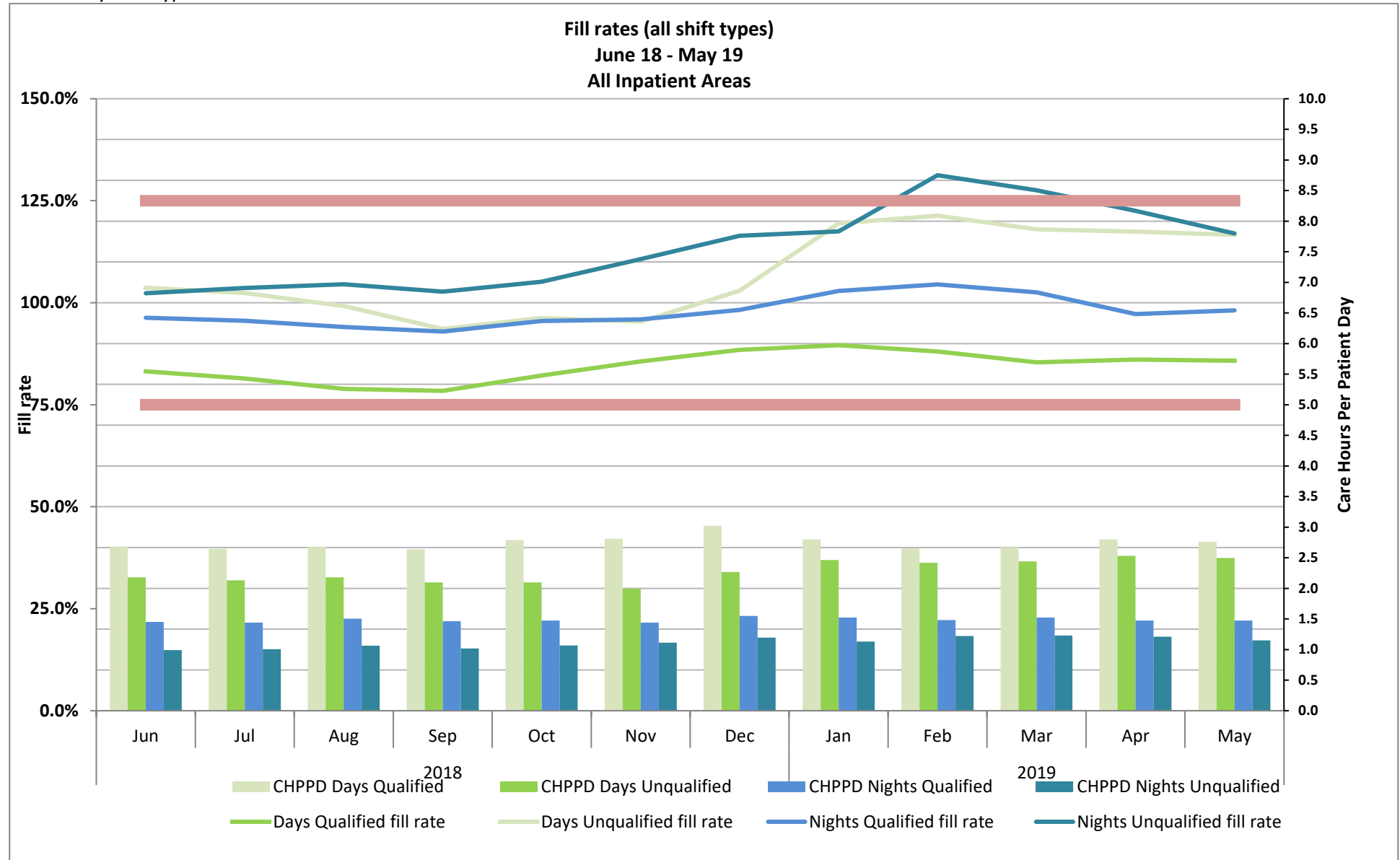
**Appendix 1**

Fill rates by shift type



**Appendix 1**

Fill rates by shift type



**Appendix 1**

Fill rates by shift type

**Fill rates (all shift types)  
June 18 – May 19  
All inpatient areas**

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	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
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
Apr 2019	86.1%	117.4%	97.23%	122.5%	2.80	2.53	1.48	1.21
May 2019	85.8%	116.6%	98.12%	117.0%	2.76	2.50	1.48	1.15