# **Trust Board**



# **Report Cover Sheet**

Agenda Item: 10

Date of Meeting:	Wednesday 30 <sup>th</sup> October 2019					
Report Title:	Nursing Staffing Exception Report					
Purpose of Report:	Provide assurance to the Board that staffing establishments are					
	being met month by month					
	Decision:	Discussion:	Assurance:	Information:		
			$\boxtimes$			
Trust Goals that the	Goal 2					
report relates to:		ve deliver will be g		_		
(Including reference to	-	e, effective, caring	, responsive, and	well-led.		
any specific risk)	Goal 3					
		nd settings of del	• •	•		
		and seamless	care that meets	their individual		
	needs.					
	Goal 5					
		will be effective				
		e our practice is		_		
	-	week, and improv	·			
Recommendations:	The Board are as	ked to receive the	report for assura	nce		
(Action required by						
Board of Directors)						
Financial	Costs associated with nurse bank to provide cover for maternity and					
Implications:	sickness					
-						
Risk Management	Areas of potential risk have been mitigated against through the					
Implications:	implementation of robust staffing plans and ongoing monitoring of					
	staffing levels across the organisation					
Human Resource	Nurse recruitment continues to be a challenge; however the Trust is					
Implications:	being proactive and innovative in terms of recruitment solutions					
Diversity and Inclusion	Objective 3					
Implications:	Leaders within the Trust are informed and knowledgeable about the					
	impact of busines	ss decisions on a d	liverse workforce	and the differing		
	needs of the com	nmunities we serve	9			
Author:						
	Gareth Armstrong, Chief Matron Surgery					
Presented by:	Hilary Lloyd, Director of Nursing, Midwifery & Quality					

#### **Gateshead Health NHS Foundation Trust**

#### **Nursing and Midwifery Staffing Exception Report**

#### September 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 September 2019.

#### 2. Staffing

The actual ward staffing against the budgeted establishments for September are presented in Table 1: Whole Trust ward 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 September 2019

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 (%)
82.4%	125.7%	99.8%	127.3%

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 September 2019

	Day		Night		Care Hours Per Patient Per Day (CHPPD)			
Ward	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	73.8%	155.8%	101.3%	183.3%	407	4.0	7.2	11.2
Critical Care	80.1%	88.5%	92.5%	100.7%	283	25.3	4.1	29.4
EAU	103.5%	175.0%	87.5%	172.2%	1212	5.0	3.9	8.9
Maternity	96.4%	101.9%	112.2%	109.6%	389	17.5	7.0	24.5
Paediatrics	89.1%	95.5%	131.2%	-	66	42.3	9.6	51.9
SCBU	73.0%	67.5%	124.2%	130.2%	82	20.6	7.3	27.9
St Bedes	90.4%	100.8%	101.1%	97.4%	275	5.3	4.6	9.9
Sunniside	112.6%	123.8%	83.2%	83.2%	391	4.1	4.0	8.1
Ward 1	80.3%	140.5%	100.2%	95.0%	675	2.5	3.2	5.8
Ward 11	73.2%	139.5%	101.7%	109.2%	813	2.3	2.9	5.3
Ward 14 Surgery	100.9%	117.9%	102.8%	118.9%	404	4.5	4.6	9.1
Ward 14A Trauma	76.9%	107.5%	102.9%	108.5%	611	3.4	4.2	7.6

	Day		Night		Care Hours Per Patient Per Day (CHPPD)			
Ward	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	97.1%	76.9%	101.8%	102.7%	474	3.8	2.5	6.3
Ward 22	67.1%	147.4%	98.3%	148.5%	854	2.1	3.4	5.5
Ward 23	68.6%	169.6%	100.1%	218.0%	681	2.3	5.5	7.8
Ward 24	63.8%	160.7%	101.2%	139.2%	845	2.1	3.3	5.4
Ward 25	77.8%	162.8%	98.4%	151.0%	867	2.3	3.4	5.6
Ward 26	74.5%	98.2%	100.0%	100.0%	596	2.9	3.7	6.6
Ward 27	75.3%	88.7%	102.1%	96.5%	797	2.9	2.7	5.7
Ward 4	69.3%	159.4%	103.5%	108.3%	898	2.4	3.4	5.8
Ward 6	137.4%	21.1%	97.9%	-	543	2.6	0.9	3.5
Ward 8	69.8%	456.3%	98.7%	90.1%	580	4.0	2.7	6.7
Ward 9	72.3%	144.3%	100.3%	101.3%	975	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:

September 2019						
Qualified Nurse Days	%					
Cragside Court	73.8%					
SCBU	73.0%					
Ward 11	73.2%					
Ward 22	67.1%					
Ward 23	68.6%					
Ward 24	63.8%					
Ward 26	74.5%					
Ward 4	69.3%					
Ward 6	137.4%					
Ward 8	69.8%					
Ward 9	72.3%					
Nursing Assistant Days	%					
Cragside Court	155.8 %					
EAU	175.0%					
SCBU	67.5%					
Ward 1	140.5%					
Ward 11	139.5%					
Ward 22	147.4%					
Ward 23	169.6%					
Ward 24	160.7%					
Ward 25	162.8%					
Ward 4	159.4%					
Ward 6	21.1%					
Ward 8	456.3%					
Ward 9	144.3%					
Qualified Nurse Nights	%					
Paediatrics	131.2%					
Nursing Assistant Nights	%					
Cragside	183.3%					
EAU	172.2%					
SCBU	130.2%					
Ward 22	148.5%					
Ward 23	218.0%					
Ward 24	139.2%					
Ward 25	151.0%					
Ward 8	195.2%					
Qualified AHP's (Days & Nights)	%					
Ward 6	160.4%					
Unqualified AHP's (Days & Nights)	%					
Ward 6	218.9%					

## **Qualified Nurses**

The following wards have had low fill rates on days due vacancies in establishment, long term sickness and maternity leave; Cragside Court, SCBU, Wards 4,8,9,11,22,23 and 24. Ward 26 had low qualified fill rates due to qualified nurses rostered to support Ward 14a in the month of September.

Ward 8 had low fill rates for qualified nurses on nights due to vacancies in establishment, three qualified nurses on secondment and have therefore been backfilling with support staff.

Paediatrics have had high fill rates for qualified nurse nights due to twilight shifts rostered with APNP's to cover part of the medical rota.

#### **Nursing Assistants**

Wards 4, EAU, 11 and Cragside court have high fill rates on nights and days due to enhanced care being delivered. Wards 22, 23,24 and 25 have high fill rates on nights due to enhanced care.

Ward 9 has a high fill rate on days due to the ward being in escalation in September.

Ward 8 has high Nursing Assistant fill rates on days due to a deduction in establishment for days in September.

The unqualified nurse/AHPs for ward 6 is being realigned to reflect the specialised skill mix on the ward. This group of staff will be grouped differently and therefore will have a higher percentage of AHPs and HCAs due to the specialised nature of the ward.

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

Following the Lord Carter Cole report, it was recommended that all trusts 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.

#### 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 0 incidents reported in September.

#### 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.

A safer staffing group has been established in the Trust to make better use of this information and develop metrics on bank and agency staffing, review enhanced care provision and maximise the use of Health Roster

#### 7. Conclusion

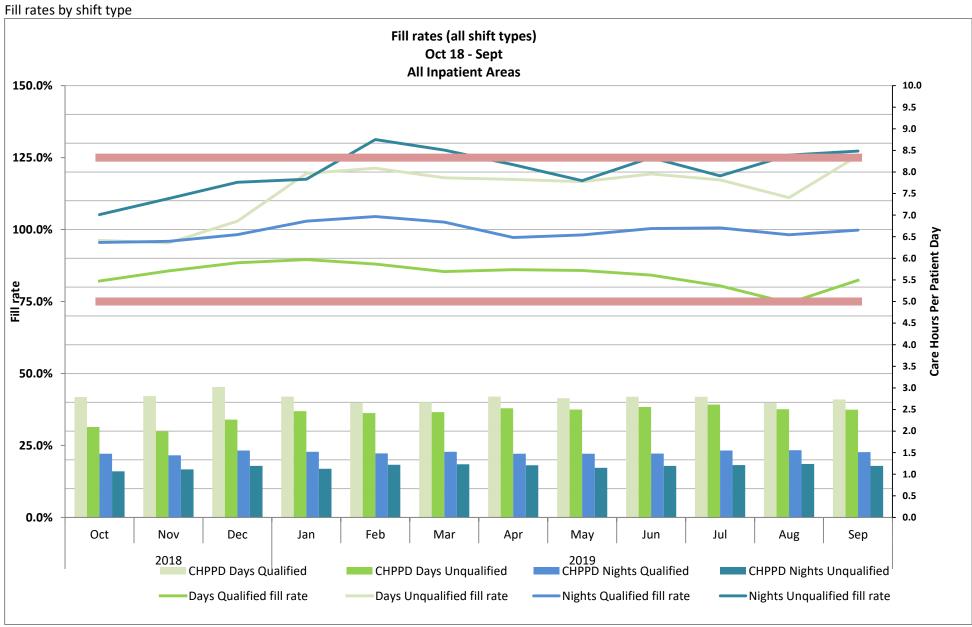
This paper provides an exception report for nursing and midwifery staffing in September 2019.

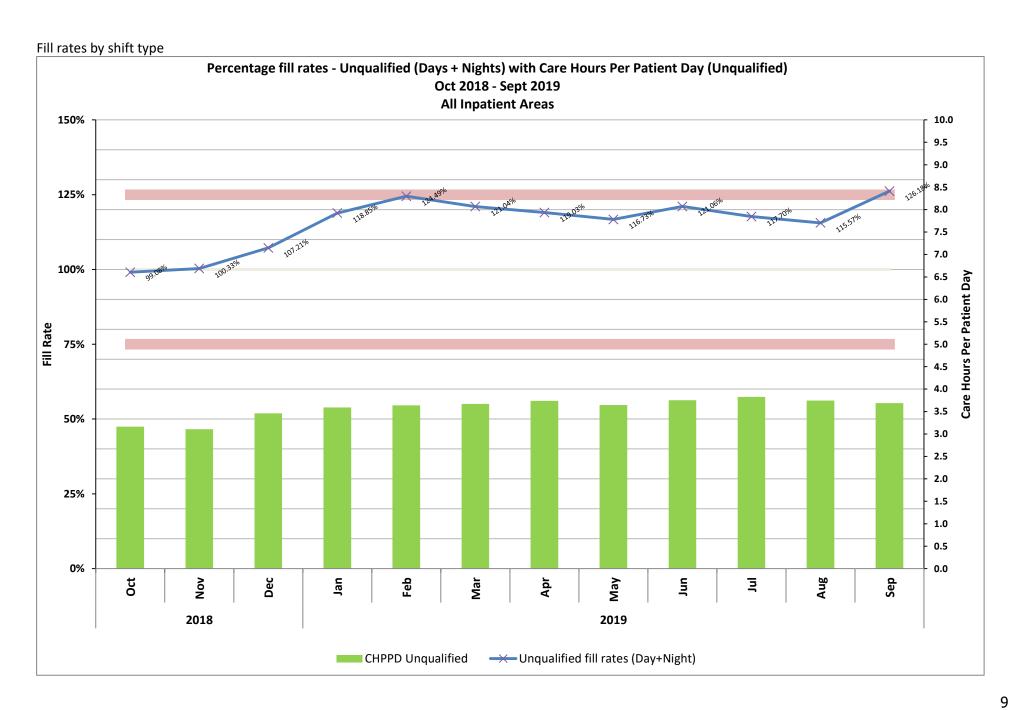
#### 8. Recommendations

The Board is asked to receive this report for assurance and acknowledge the development of the safer staffing group to ensure robust systems and processes and inform future reporting.

**Gareth Armstrong, Chief Matron Surgery** 

Appendix 1





Appendix 1

Fill rates by shift type

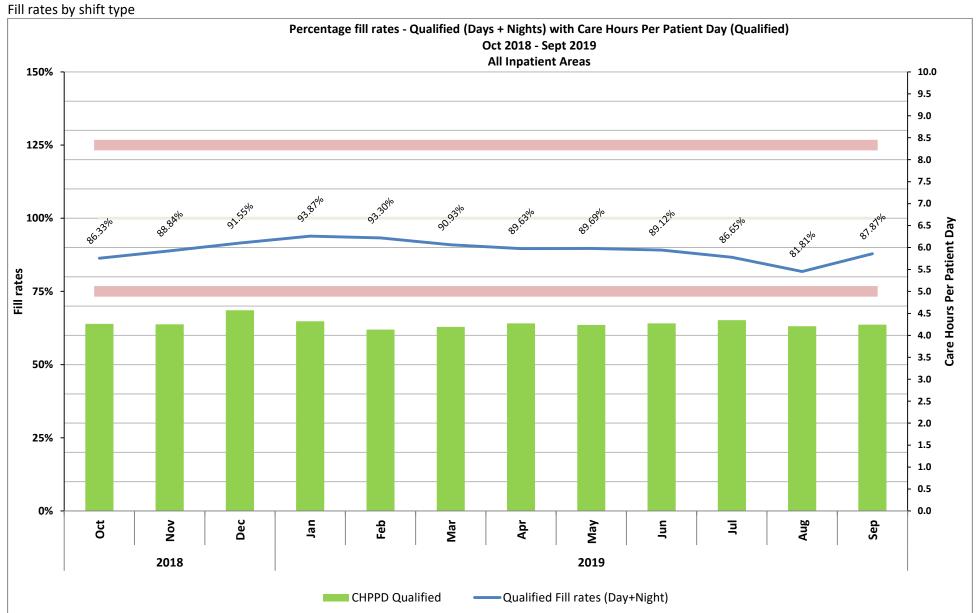


Table 3:

# Fill rates (all shift types) September 2019 All inpatient areas

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	_		-	ı				
	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
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
Jun 2019	84.2%	119.3%	100.33%	125.0%	2.80	2.56	1.48	1.19
Jul 2019	80.5%	117.3%	100.59%	118.7%	2.79	2.62	1.55	1.21
Aug 2019	74.5%	111.1%	98.16%	125.9%	2.65	2.51	1.56	1.24
Sep 2019	82.4%	125.7%	99.81%	127.3%	2.73	2.50	1.51	1.19