

**TRUST BOARD REPORT**

Item **221**

**28 October 2015**

**Purpose** Monitoring

<b>Title</b>	Safer Staffing Report
<b>Author</b>	Mrs J Molyneaux, Deputy Chief Nurse
<b>Executive sponsor</b>	Mrs C Pearson, Chief Nurse

**Summary:** The paper details the Boards commitment to the publishing of staffing data regarding nursing, midwifery and care staff. It provides details of the staffing fill rates (actual versus planned) in hours published on the NHS Choices Website each month.

**Report linkages**

Related strategic aim and corporate objective	Put safety and quality at the heart of everything we do
	Invest in and develop our workforce
	Work with key stakeholders to develop effective partnerships
	Become a successful Foundation Trust
Related to key risks identified on assurance framework	The Trust fails to deliver and develop a safe, competent workforce
	Partnership working fails to support delivery of sustainable safe, personal and effective care
	The Trust fails to achieve a sustainable financial position
	The Trust fails to achieve required contractual and national targets and its improvement priorities
	Corporate functions fail to support delivery of the Trust's objectives

**Impact**

Legal	No	Financial	Yes
Equality	No	Confidentiality	No

Previously considered by: NA

## Purpose of the report

1. This paper will provide an update to the Trust Board in respect of the expectations set out by the National Quality board (NQB) in November 2013, contained within “Hard Truths” (Department of Health 2013).
2. The report will also provide the Trust Board with an exception report for September 2015 actual and planned staffing figures.

## Summary Headlines

3. September continued to be an extremely challenging month for nurse staffing within the organisation caused by similar factors as in previous months. Contributory factors detailed below:
  - a) Vacancies
  - b) Maternity leave
  - c) Sickness and absence levels
  - d) Limited coordinators on daylight shifts
  - e) Ability to match demand for nurse staffing with bank and agency fill rate/availability

## Areas for Concern – September (below 80% actual versus planned)

4. 10 wards fell below 80% for actual versus planned for registered nurse hours on daylight shifts. An improvement on previous month
5. 4 wards fell below 80% for actual versus planned for care staff for daylight hours
6. 0 wards fell below 80% actual versus planned for registered nurses for night duty
7. 2 wards fell below 80% actual versus planned for care staff for night duty

## Composite percentage for all wards ELHT (Appendix 1 details Unify upload of safe staffing return)

	Day		Night	
	Average fill rate: registered nurses/midwives (%)	Average fill rate: care staff (%)	Average fill rate: registered nurses/midwives (%)	Average fill rate: care staff (%)
<b>Sep-15</b>	<b>87.4%</b>	<b>104.7%</b>	<b>98.4%</b>	<b>114.4%</b>

## Issues affecting actual versus planned (Appendix 2 highlights safe staffing return and nurse sensitive indicators)

8. Within Surgical and Anaesthetics (SAS) no care issues or harms were identified as a consequence of staffing. Themes remain as in previous months, sickness, unfilled bank or agency shifts, no coordinator in daylight hours, vacancies, maternity leave and third nurse on night duty being moved.
9. Family Care staffing figures do not reflect the level of acuity, bed occupancy or women in labour. Shortages were due to long and short term sickness, vacancies and maternity leave .It was necessary on occasion in September to suspend Rossendale Birth centre and home birth services to safely cover other areas. No care issues have been identified as a consequence.
10. Within the Integrated Care Group (ICG) the themes remain similar as above, but with a higher proportion of vacancies and less coordinator shifts filled. A number of wards fell below 1:8 registered nurse ratios on several occasions.
  - a) C3 – Whilst no incidents were reported where harm occurred as a result of staffing incidents, 2 DATIX incidents (Trust Incident Reporting System) were submitted when staffing levels fell below ward recommended staffing levels. Both DATIX reported the nurses felt sub-optimal care had been given due to acuity and staffing ratio. 3 newly qualified registered nurses are due to commence in post in October. C3 has also now moved location and has reduced its bed base from 28 beds to 24.
  - b) Hartley ward submitted 3 DATIX incidents which correlate to staffing falling below the recommended staffing levels, the DATIX detailed 2 patient's falling with low/minor harm and 1 patient fall with no harm
  - c) Similarly Reedyford ward submitted 3 DATIX which correlated to staffing falling below recommended staffing levels, all falls detailed no harm.
11. All shifts above 100%, particularly for care staff are in relation to them being utilised to compensate for registered nurse deficits or to provide 1:1 care

### Staffing Related DATIX

12. There were 103 staffing related incidents reported in September, 7 of them red flag incidents. Of the red flag incidents, 4 relate to missed meal breaks, 2 relates to unable to reliably carry out intentional rounding and 1 relates to less than 2 registered nurses on a shift, although on investigation this was inaccurate and a misunderstanding on the inputters part.

13. Further work is required to encourage staff to record staffing incidents within the correct section of DATIX

## September 2015 Recruitment Update

Division	New starters April 14 To Sep 15 in post (WTE)*		In pipeline recruitment (WTE)		Outstanding vacancies per division (not including in pipeline) (WTE)		Outstanding vacancies per division (including in pipeline) (WTE)	
	RN**	HCA***	RN	HCA	RN	HCA	RN	HCA
<b>ICG</b>	163.65	43.6	29.95	7	110.31	19.74	80.36	12.74
<b>SAS</b>	56.43	44.49	18.58	3.94	36.31	17.56	17.73	13.62
<b>Family Care</b>	71.54	30.6	9.44	1.47	25.00	8.35	15.56	6.88
<b>DCS</b>	3.65	2.02	0.53	0	0.90	10.40	0.37	10.40
<b>Total:</b>	<b>295.27</b>	<b>117.8</b>	<b>58.5</b>	<b>12.41</b>	<b>172.52</b>	<b>56.05</b>	<b>114.02</b>	<b>43.64</b>

\*Whole Time Equivalent (WTE)

\*\*Registered Nurse (RN)

\*\*\*Healthcare Assistant (HCA)

14. Outstanding registered nurse vacancies following in pipeline recruitment is 114.02 Whole Time Equivalent (WTE).
15. The government has temporarily added nurses to the shortage occupation list which will support the Trusts recent international recruitment drive to the Philippines.
16. Active recruitment strategy continues with an open day planned for early in the New Year, as well as attendance at national recruitment events, and the use of social media.
17. 4 Allied Health Care Professionals have now been recruited to, to support the nursing workforce. 2 physiotherapists and 1 occupational therapists are working at Pendle Hospital and 1 physiotherapist at Clitheroe Hospital as a test of change. The effectiveness of this initiative is under review

## Bank & Agency Fill Rates September 2015

18. Staffing continues to be challenging and active recruitment is on-going alongside robust sickness and absence management
19. A professional judgment review of safe staffing numbers is underway. And due to be completed in November. To date SAS and ICG have been completed, with very little change recommended to registered nurse numbers. Health care support worker numbers are also being reviewed and initially findings would suggest that in some areas health care support worker hours may need to be increased.

Division	No of Shifts Requested		% of shifts filled by Bank or Agency				% of shifts unfilled	
	RN	HCA	RN Bank	RN Agency	HCA Bank	HCA Agency	RN	HCA
<b>ICG</b>	1405	2295	47.62%	30.39%	90.76%	0.80%	33.52%	20.78%
<b>SAS</b>	557	848	44.27%	22.21%	67.45%	11.76%	43.81%	15.57%
<b>F/Care</b>	441	249	31.24%	24.96%	67.10%	17.33%	22.00%	8.43%
<b>Total</b>	<b>2189</b>	<b>2247</b>	<b>42.36%</b>	<b>24.34%</b>	<b>70.22%</b>	<b>12.35%</b>	<b>33.29%</b>	<b>17.42%</b>

## Recommendation

20. The Trust Board is asked to receive the report and agree its content