






Quality & Safety Committee – 28 February 2020

Agenda item:	2.10									
Presented by:	Sharon McNally – Director of Nursing & Midwifery									
Prepared by:	Andy Dixon - Matron for Quality Improvement Sarah Webb – Deputy Director of Nursing and Midwifery									
Date prepared:	January 2020									
Subject / title:	Report on Nursing and Midwifery and Care Staff Levels (Hard Truths) and an Update to Nursing and Midwifery Workforce Position									
Purpose:	Approval		Decision		Information	x	Assurance		x	
Key issues:	<p>This paper sets out the regular nursing and midwifery retrospective staffing report for the month of December 2019 (part A), and provides an update to the workforce position (part B). Headlines:</p> <ul style="list-style-type: none"> The summary position for the Trust Safer Staffing Fill rates for January 2020 is included in the table below with a comparison with December 2019. The fill rate has increased for overall RN/RM in month to 95.2% which is an increase of 1.4% despite additional winter capacity being open in January - 30 beds). The overall nursing vacancy position reduced again in January to 11.8% and the Band 5 rate to 12.3%. While slightly behind original forecast vacancy rate this is a significant achievement as over 153 additional nurses have joined the Trust YTD. 									
Recommendation:	The committee is asked to note the information within this report									
Trust strategic objectives: please indicate which of the five Ps is relevant to the subject of the report										
	Patients	People	Performance	Places	Pounds	x	x	x		x
Previously considered by:										
Risk / links with the BAF:	BAF: 2.1 Workforce capacity All Health Groups have both recruitment and retention on their risk registers									
Legislation, regulatory, equality, diversity and dignity implications:	NHS England and CQC letter to NHSFT CEOs (31.3.14): Hard Truths Commitment regarding publishing of staffing data. NHS Improvement letter: 22.4.16 NHS Improvement letter re CHPPD: 29/6/18									
Appendices:	Appendix 1: Ward level fill rates Appendix 2: Registered fill rates by month. RAG rated Appendix 3: Ward staffing exception reports									

1.0 PURPOSE

To update and inform the Committee on actions taken to provide safe, sustainable and productive staffing levels for nursing, midwifery and care staff in January 2020. To provide an update to the nursing vacancy rate, that the plans to further reduce the vacancy rate over 2019/20.

2.0 BACKGROUND

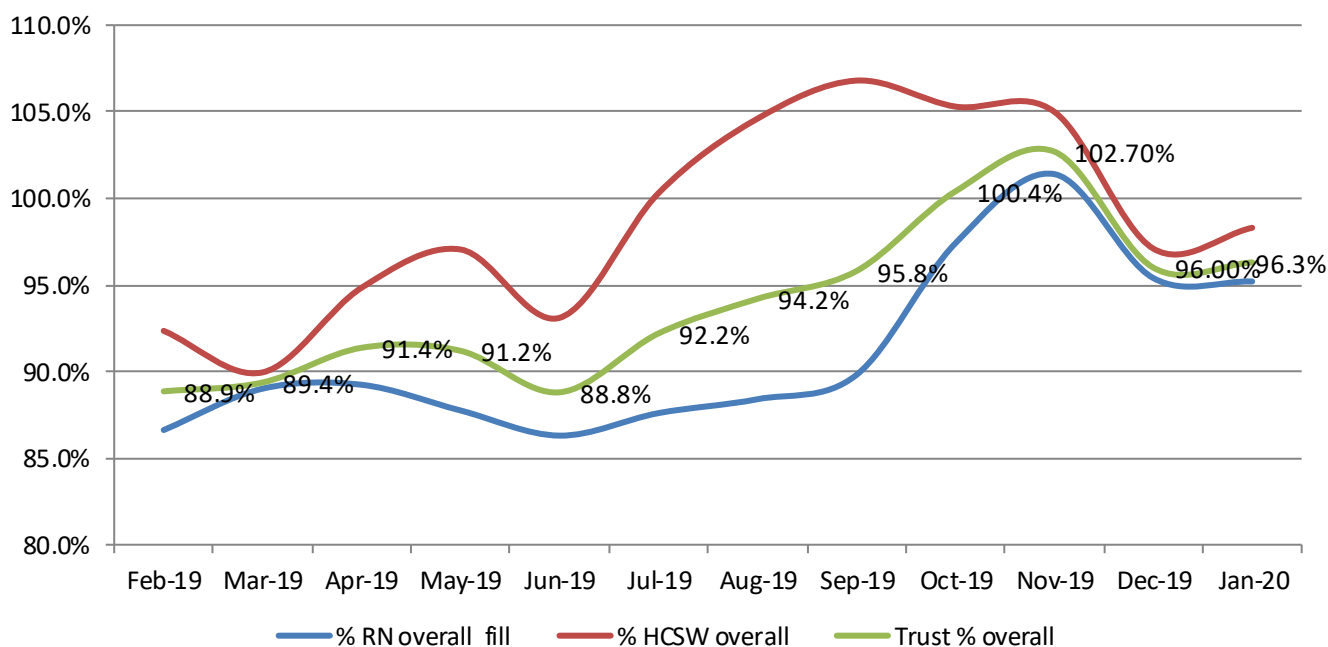
The report is collated in line with The National Quality Board recommendations (June, 2016).

3.0 ANALYSIS

3.1 This report provides an analysis based on the actual coverage in hours against the agreed static demand templates for the calendar month of January 2020.

3.2 The summary position for the Trust Safer Staffing Fill rates for January 2020 is included in the table below with a comparison with December 2019. The fill rate has increased for overall RN/RM in month to 95.2% which is an increase of 1.4%.

Trust average	Days RM/RN	Days Care staff	Nights RM/RN	Nights care staff	Overall RM/RN	Overall care staff	Overall ALL staff
Trust average January 20	102%	92.7%	93.0%	106.3%	95.2%	98.3%	96.3%
Trust average December	102%	91.6%	91.7%	101.1%	93.8%	95.5%	94.4%
Change against December	-	↑1.1%	↑1.3%	↑5.2%	↑1.4%	↑2.8%	↑1.9%



3.4 Exception reporting: Appendix 4 shows the exception report for the wards where the fill rate is less than 75%. The report includes analysis of the position, impact on quality, safety or experience and details actions in place to mitigate and improve the position where safe staffing is of concern. Following benchmarking with other acute Trusts in the STP the threshold for the RAG rating has been adjusted this month with the following thresholds applied.

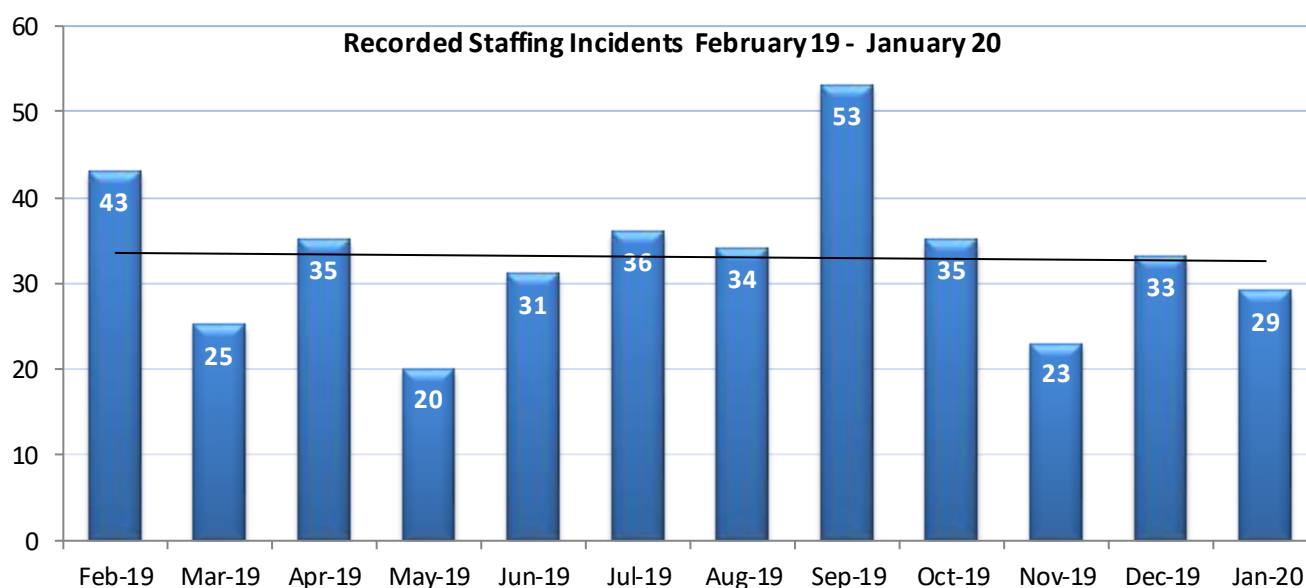
Red <75%	Amber 75 – 95%	Green >95%
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3.4.1 National reporting is for inpatient areas, and therefore does not include areas including the emergency department or day units. To ensure the Board is sighted to the staffing in these areas, the data for these areas is included below using the same methodology as the full UNIFY report.

	Day		Night	
January 2020	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)
A&E Nursing	92.9%	88.8%	92.9%	91.7%
PAH Theatres	82.5%	57.8%	80.9%	17.8%
Endoscopy Nursing	71.3%	105.0%		

NB The demand template for endoscopy wasn't adjusted in time for this report and represents a data quality issue rather than clinical safety concern.

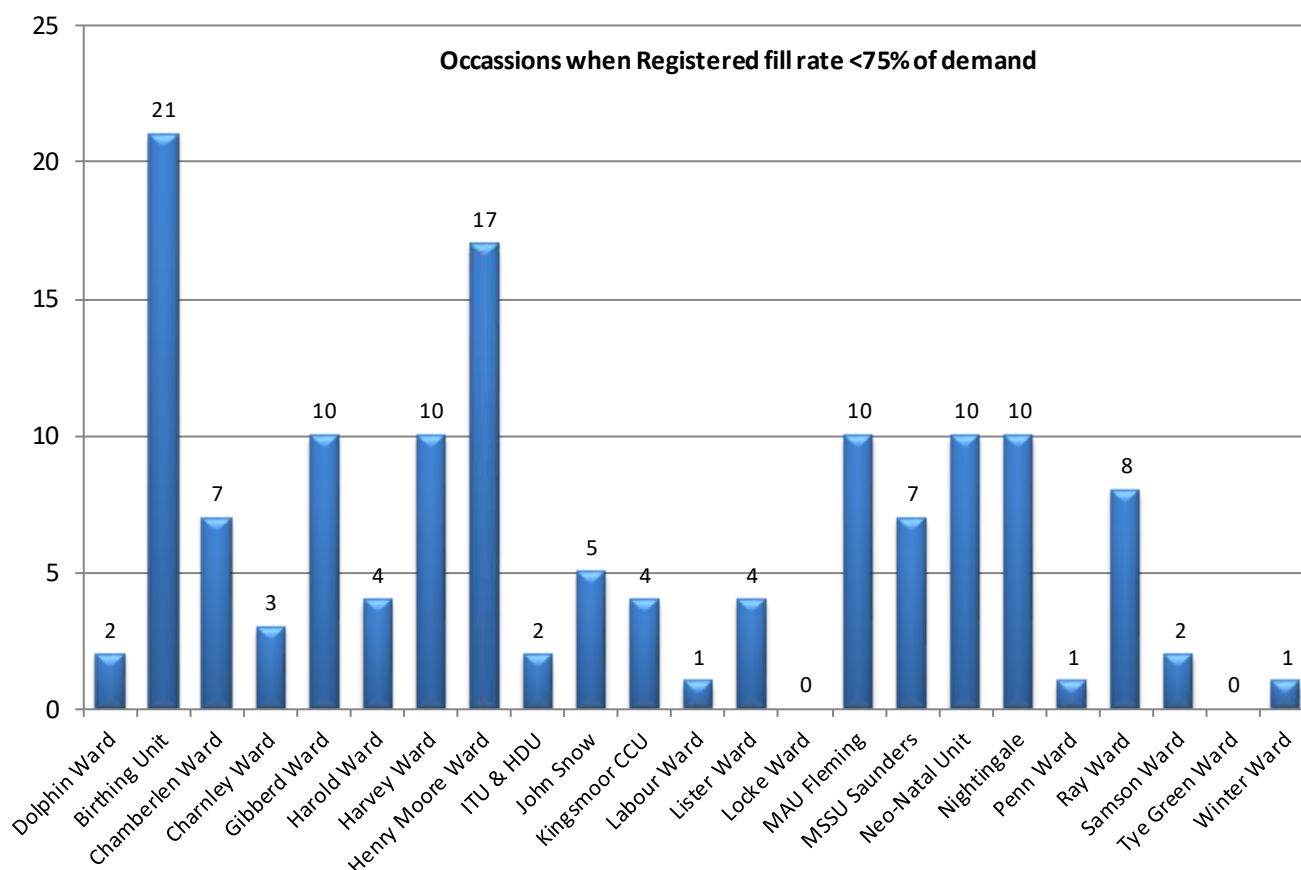
3.5 Datix reports: The trend in reports completed in relation to nursing and midwifery staffing is included below and shows a decrease in January. All incidents continue to be reviewed by the safety and quality review process.



3.6 There were no beds closed as a direct result of safer staffing concerns during January 2020

3.7 Red flag data: The Trust has commenced collating and validating red flag events. A red flag event occurs when registered nurse fill rate drops below 75% of the planned demand.

The graph below demonstrates the number of occasions/shifts where the reported fill rate has fallen below 75% by ward. The change of report is enabling Associate Directors of Nursing to undertake a deeper dive of underlying data and identified that some staff moves and alternative measures to support staffing such as redeploying community or non-clinical staff are not being captured. This is particularly relevant to maternity services who redeploy staff across all the maternity areas to ensure patient safety.



3.8 Care Hours per Patient Day* (CHPPD) has been confirmed as the national principle measure of nursing, midwifery and healthcare support worked deployment on inpatient wards (NHSI, 2018). The table below shows the Trust data from the Model Hospital. Current model hospital data for national median is based on latest available data. This shows the Trust and National data from November 2019, this shows that while the Trust continued to exceed the National median for Registered CHPPD, it has also shown a reduction in overall CHPPD and HCA CHPPD.

	Trust November 2019 data	National Median (Nov 2019)	Variance against national median
CHPPD Total	7.6	8.0	↓0.4
CHPPD RN	4.8	4.7	↑0.1
CHPPD HCA	2.8	3.2	↓0.4

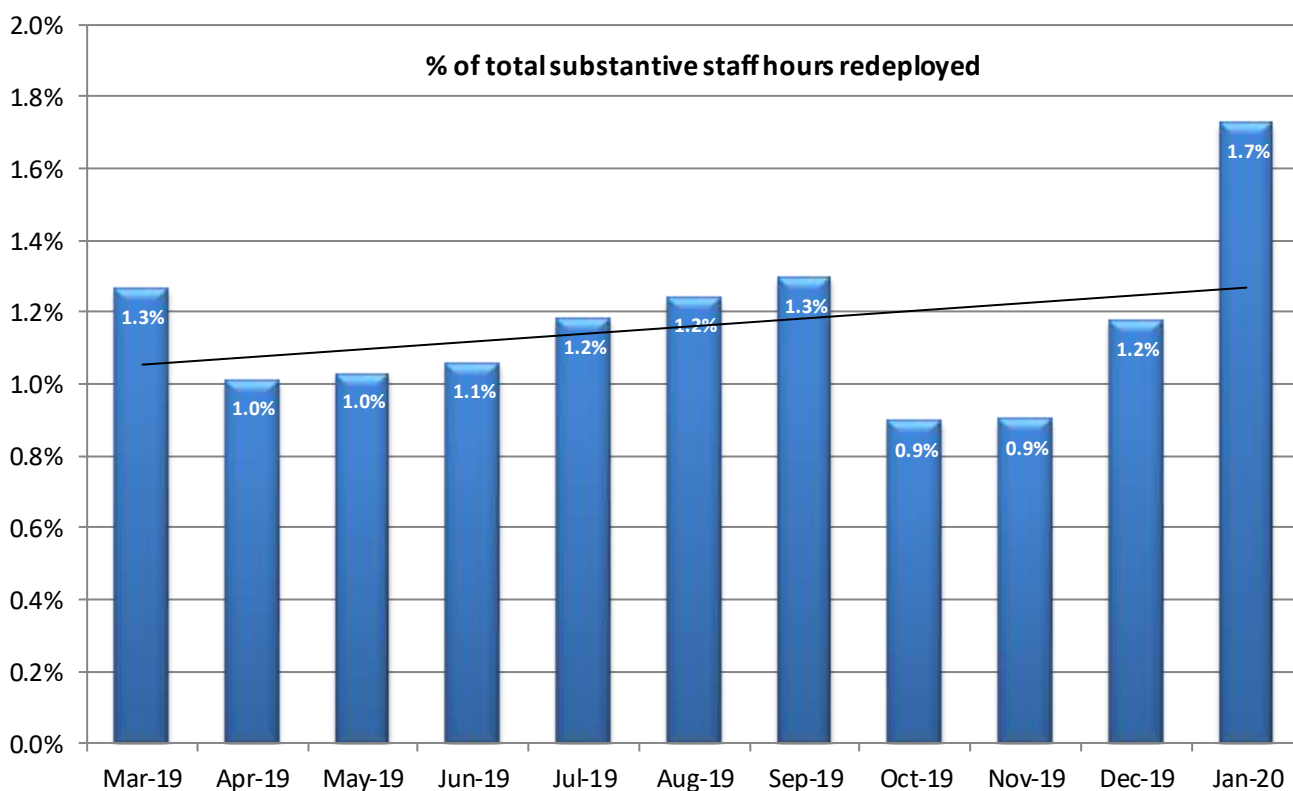
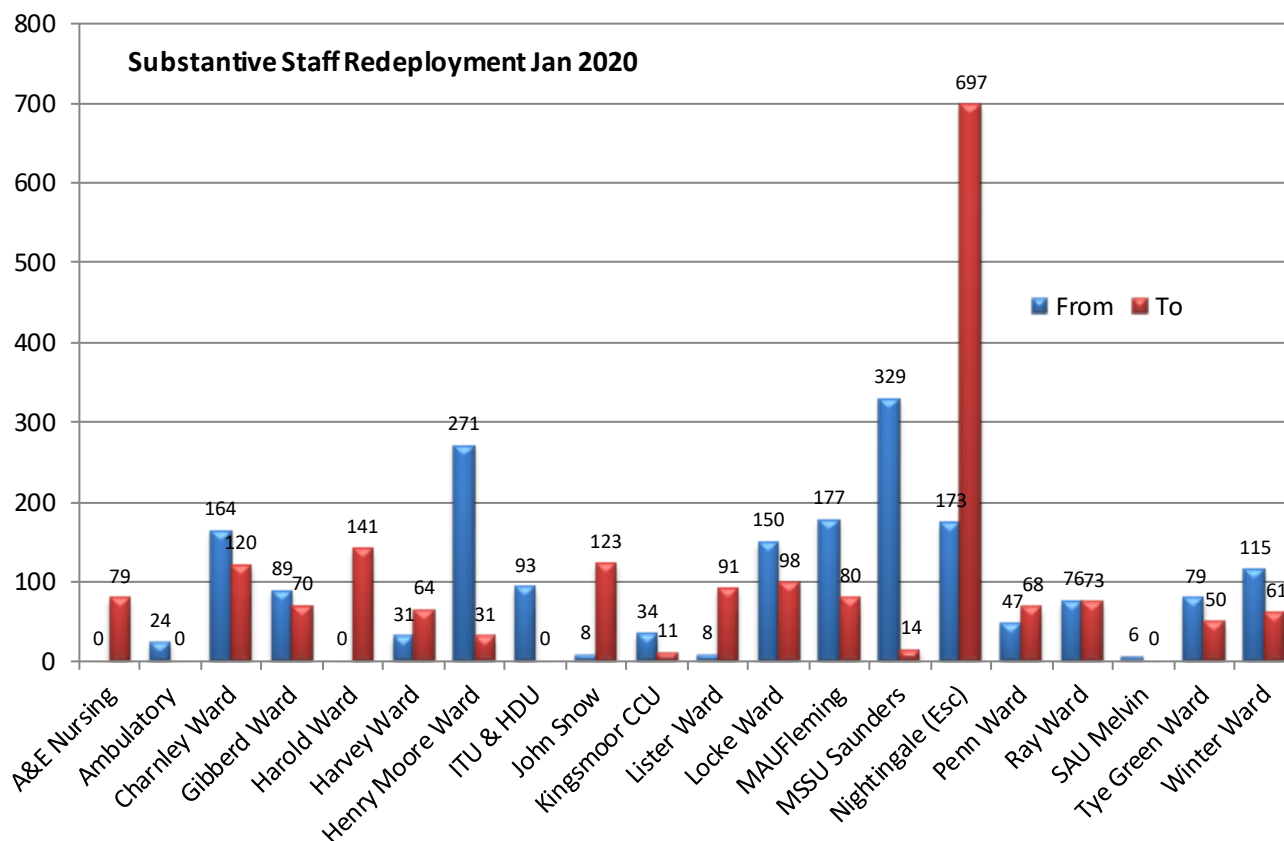
3.9 Mitigation:

The day to day management of safer staffing across the organisation is managed through the daily staffing huddles and information from SafeCare to ensure support is directed on a shift: shift basis as required in line with actual patient acuity and activity demands. Ward managers support safe staffing by working in the numbers which continues to compromise their ability to work in a supervisory capacity.

3.10 Redeployment of staff:

The 2 graphs below show how the Trust is supporting safe staffing through redeployment of staff to meet acuity and dependency. The graph only shows the redeployment of substantive Trust staff and does not capture the moves of bank or agency staff. The maternity wards and Dolphin have been excluded from this report as they flex staff across the whole service dependant on patient and service needs.

The first graph shows the number of hours of staff redeployed from and to the adult inpatient ward to support safe staffing while the second graph shows the percentage of the total number of staff hours that are redeployed which has shown an increase against the previous month.



The accuracy of these reports continues to be dependent on the wards and site team redeploying staff, capturing and recording these moves in real-time in the e-Roster or SafeCare system. There was a spike this month due to substantive staff being moved to Noightingale winter escalation ward to

support the skill mix and safe care. This is being managed in a planned way with staff being given notice of the move and choice.

While essential to ensure the safe staffing across the Trust moving substantive staff can impact on staff satisfaction and retention rates and therefore is monitored closely to minimise the impact on staff.

3.11 Bank and Agency fill rates:

The use of NHSP continues to support the clinical areas to maximise safer staffing. The Trust has worked with NHSP to increase the availability of resource, and are working in partnership to improve this further. The table below shows that there was an increase in registered demand (↑433 shifts) due to the opening of Nightingale ward and an additional 5 escalation beds on Harold in January. There was an increase in NHSP fill, although there was a decrease in agency fill for RN, which resulted in an overall decrease in fill rate for RNs (↓3.2%) in month.

The HCSW demand shows an increase (↑43 shifts) with the overall fill rate down by 0.6% against December.

RN temporary staffing demand and fill rates: (January 2020 data supplied by NHSP 4th Feb 2020)

Last YTD Month & Year	Shifts Requested	NHSP Filled Shifts	% NHSP Shift	Agency Filled Shifts	% Agency Filled Shifts	Overall Fill Rate	Unfilled Shifts	% Unfilled Shifts
October 19	4,156	1777	42.8%	1029	24.8%	67.5%	1350	32.5%
November 19	4,185	1888	45.1%	1043	24.9%	70.0%	1254	30.0%
December 19	3,891	1703	42.3%	1020	27.9%	70.2%	1168	29.8%
January 20	4,324*	1903	44.0%	993	23.0%	67.0%	1428	33.0%
January 19	3,904	1881	47.9%	1040	26.5%	74.0%	1005	25.65

HCA temporary staffing demand and fill rates: (January 2020 data supplied by NHSP 4th Feb 2020)

Last YTD Month & Year	Shifts Requested	NHSP Filled Shifts	% NHSP Shift	Agency Filled Shifts	% Agency Filled Shifts	Overall Fill Rate	Unfilled Shifts	% Unfilled Shifts
October 19	2,533	1874	74.0%	0	0%	74.0%	659	26.0%
November 19	2,594	1872	72.2%	0	0%	72.2%	722	27.8%
December 19	2,689	1805	68.5%	0	0%	68.5%	884	31.5%
January 20	2,732*	1855	67.9%	0	0%	67.9%	877	32.1%
January 19	2,125	1681	79.1%	0	0%	79.1%	444	20.9%

*includes demand for staffing winter escalation areas equivalent to 279 RN shifts and 217 HCA shifts

B: Workforce:

+

Nursing Recruitment Pipeline

The nurse vacancy rate continues to fall steadily. The overall nursing vacancy rate in January fell to 11.8 %. Although this is slightly behind the forecast rate of 9.7% the Trust remains on track to achieve the overall target of <10% by March 2020.

Band 5 posts continue to make up the bulk of the vacancy rate and in January the vacancy rate fell further 3.8% in month to 12.3% slightly behind the forecast rate of 7.8%. The trajectory remains green as the number of starters planned for Q4 will keep us on track to meet forecast outturn position. The recruitment pipeline has over 100 nurses who are holding offers of employment and there is confidence that sufficient number of offer holders will convert into starters by the end of March to achieve the trajectory. The pipeline is supplemented with a better than expected domestic recruitment

and in house assistant practitioners who have completed their top up programme to achieve registered nurse status.

The Recruitment and Retention Nurse is working with the DDoN to develop the pipeline for 2020/21 and target Band 6 and above vacancies which now make up equivalent WTE vacancies as Band 5's. The following table shows confirmed recruitment figures (in green) against the planned trajectory. turnover rate falling from 15.06% to 10.88% over the last 12 months.

Establishment V Staff in Post												
Funded Establishment WTE	942.61	942.61	942.61	942.61	942.61	942.61	942.61	942.61	942.61	942.61	942.61	942.61
Staff in Post WTE	704	710.00	711.00	716.00	737.00	759.00	774.00	796.00	816.00	831.00	848.00	860.00
Vacancy WTE	238.61	232.61	231.61	226.61	205.61	183.61	168.61	146.61	126.61	111.61	94.61	82.61
Actual RN Vacancy Rate	25.3%	24.7%	24.6%	24.0%	21.8%	19.5%	17.9%	15.6%	13.4%	11.8%	10.0%	8.8%
Forecast Vacancy Rate in Business Plan	26.8%	26.9%	25.4%	24.0%	22.7%	19.3%	16.2%	13.1%	10.8%	9.7%	9.4%	9.3%

Band 5 Establishment V Staff in Post												
	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
Funded Band 5 Establishment WTE	487.93	487.93	487.93	487.93	487.93	487.93	487.93	487.93	487.93	487.93	487.93	487.93
Band 5 Staff in Post WTE	289	294	296	302	322	347	364	387	411	428	436	450
Band 5 Starters	9	7	7	8	22	29	20	28	27	25	14	20
Vacancy Band 5 WTE	198.93	193.93	191.93	185.93	165.93	140.93	123.93	100.93	76.93	59.93	51.93	37.93
Actual Band 5 Vacancy Rate	40.8%	39.7%	39.3%	38.1%	34.0%	28.9%	25.4%	20.7%	15.8%	12.3%	10.6%	7.8%
Forecast Vacancy Rate in Business Plan	40.8%	41.0%	38.1%	35.4%	32.8%	26.2%	20.3%	14.3%	9.8%	7.8%	7.2%	7%

Projected Starters Pipeline												
	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
RNs (not Band 5)	1	1	2	2	4	1	2	3	1	5	1	1
Band 5 Newly Qualified + Local	3	2	0	1	1	3	7	3	4	5	11	0
Band 5 International Recruitment	6	5	7	7	21	26	13	25	23	20	14	20
Band 5 Starters	9	7	7	8	22	29	20	28	27	25	25	20
Total Starters	10	8	9	10	26	30	22	31	28	30	26	21

Projected Leavers WTE												
	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
RNs (not Band 5) Leavers	2	3	3	3	3	4	4	4	5	7	3	3
Band 5 Leavers	3	2	5	2	2	4	3	5	3	8	6	6
Total Leavers	5	5	8	5	5	8	7	9	8	15	9	9
Nursing turnover %	15.06%	14.86%	14.79%	13.41%	12.13%	12.22%	11.83%	11.09%	10.13%	10.88%		

4.0 RECOMMENDATION

The Board is asked to receive the information describing the position regarding nursing and midwifery recruitment, retention and vacancies and note the plan to review and make further recommendations to improve the trajectory.

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Date: 17th February 2020

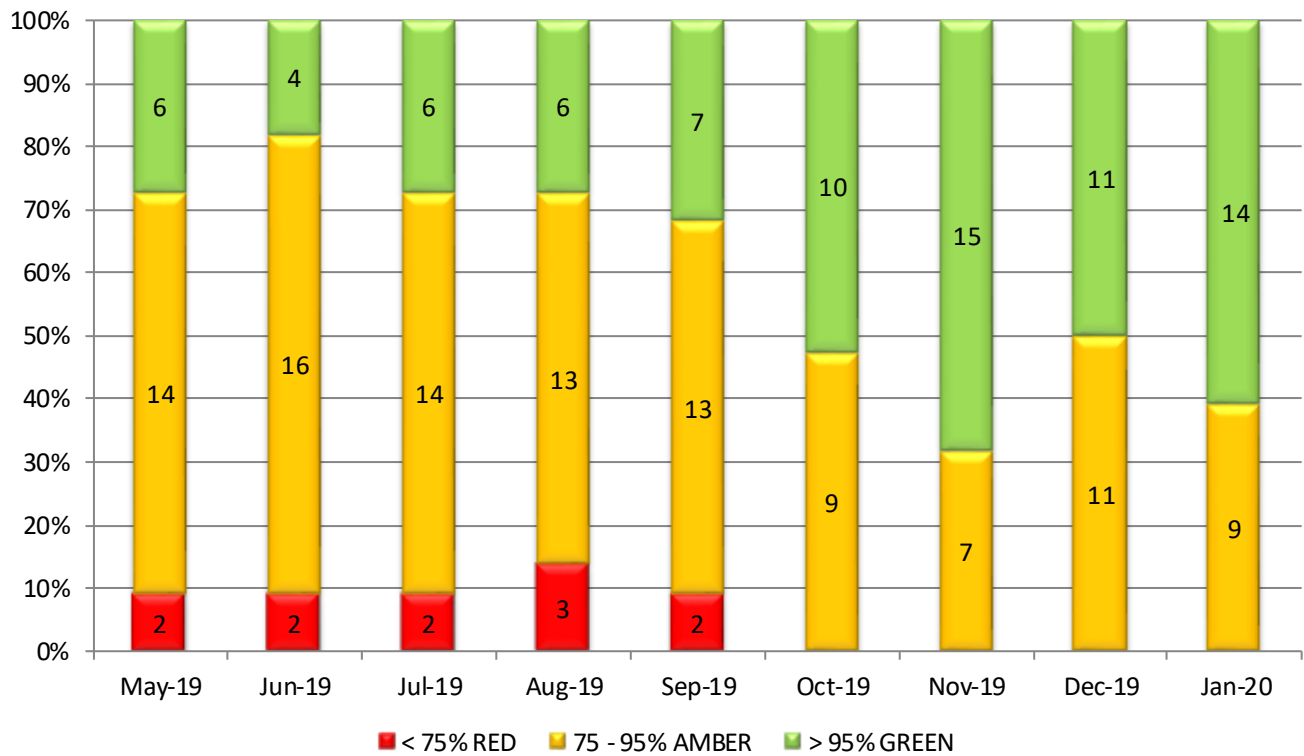
Appendix 1.

Ward level data: fill rates December 2019.

Ward name	Day		Night		% RN overall fill rate	% overall HCSW fill rate	% Overall fill rate
	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)			
Dolphin Ward	121.5%	108.6%	89.7%	132.1%	107.4%	116.4%	109.6%
Kingsmoor CCU	83.6%	126.7%	99.2%	114.1%	90.2%	121.9%	101.6%
MAU Fleming	94.6%	126.9%	88.4%	95.4%	91.9%	111.8%	100.3%
Tye Green Ward	106.2%	86.4%	99.5%	120.7%	103.4%	100.4%	102.1%
Harvey Ward	96.6%	72.3%	96.8%	82.0%	96.6%	76.9%	87.6%
ITU & HDU	88.6%	102.0%	90.6%	114.7%	89.6%	108.1%	91.4%
John Snow	96.7%	88.8%	101.1%	104.0%	98.5%	94.6%	96.8%
Charnley Ward	96.9%	103.3%	111.0%	119.2%	101.9%	109.3%	104.8%
Lister Ward	104.8%	87.4%	86.0%	147.6%	96.1%	106.3%	100.5%
Locke Ward	107.7%	94.3%	103.2%	115.2%	105.8%	102.2%	104.5%
Neo-Natal Unit	85.6%	113.5%	75.2%	132.3%	80.4%	122.9%	87.5%
Nightingale	92.6%	56.5%	106.4%	64.7%	98.3%	60.4%	80.9%
Penn Ward	102.3%	106.9%	90.3%	144.4%	97.2%	121.1%	105.7%
Ray Ward	84.7%	84.9%	85.6%	134.8%	85.1%	100.6%	91.3%
MSSU Saunders	86.5%	90.3%	81.8%	98.4%	84.5%	93.6%	88.5%
Harold Ward	98.1%	90.9%	92.5%	108.0%	95.7%	97.8%	96.6%
Henry Moore Ward	73.2%	63.9%	87.7%	75.8%	78.7%	67.6%	74.5%
Gibberd Ward	90.1%	97.8%	97.7%	97.9%	93.2%	97.8%	95.7%
Winter Ward	98.4%	101.1%	106.5%	140.7%	101.3%	116.1%	107.0%
Chamberlen Ward	98.3%	72.6%	94.5%	71.6%	96.5%	72.1%	90.4%
Labour Ward	117.5%	82.0%	95.5%	96.0%	107.0%	88.7%	102.9%
Samson Ward	107.6%	86.6%	97.6%	85.5%	102.8%	86.2%	95.2%
Birthing Unit	87.7%	60.5%	81.9%	80.6%	84.9%	70.1%	81.2%
Trust total	102.0%	92.7%	93.0%	106.3%	95.2%	98.3%	96.3%

Appendix 2

Number of wards - RAG rated for RN fill rate



Appendix 3

Ward staffing exception reports

Reported where the fill is < 75% during the reporting period, or where the ADoN has concerns re: impact on quality/ outcomes

Report from the Associate Director of Nursing for the HCG			
Ward	Analysis of gaps	Impact on Quality / outcomes	Actions in place
Henry Moore ward	Reduction in RN and HCA on both day and night shifts due to reduced patient capacity within the ward.	No impact	Regular monitoring of patient flow and capacity within the ward.
Harvey	Reduction in HCA on nights shifts. Ward has high number of supernumerary student AP, NA and overseas nurses who provide additional support but not included in numbers	No Impact	Regular monitoring of patient flow and capacity within the ward.
Nightingale	Reduction in HCA on both day and night shifts due to reduced patient capacity within the ward while the unit was opening at the beginning of January	No Impact	Regular monitoring of patient flow and capacity within the ward.
Chamberlein	Reduction in Maternity CA on both day and night shifts.	No impact as staff moved across unit to support need. Moves of less than 6 hours are not captured on Healthroster	Regular monitoring of patient flow and capacity within the ward.
Birthing Unit			