People Committee

Giuseppe Labriola – Deputy Chief Nurse						
David Dellow – Safe Staffing Lead and Giuseppe Labriola – Deputy Chief Nurse						
12.5.2023						
Report on Nursing and Care Staff Levels for April 2023– Hard Truths Report						
Approval	Decis	ion	Informa	tion x A	ssurance	Х
The overall fill rate for April was 97.4%. Registered Nurse (RN) fill rate increasing by 1.0% to 90.4% and care staff fill rates increased by 4.7% to 112.3%. No wards reported average fill rates below 75% for RN against the standard planned template during April. This is the first time in 7 months.						
The committee is asked to note the information within this report.						
Patients x	People x	Р	Performance X	Places	Pounds	
	David Dellow Nurse 12.5.2023 Report on Nu Approval The overall fi increasing by 112.3%. No wards replanned temporal	David Dellow – Safe Staf Nurse 12.5.2023 Report on Nursing and Caracher Approval The overall fill rate for Apincreasing by 1.0% to 90.112.3%. No wards reported average planned template during application of the committee is asked to the plane.	David Dellow – Safe Staffing Lands 12.5.2023 Report on Nursing and Care Staffing Lands 20.5.2023 Patients Decision Decision The overall fill rate for April was increasing by 1.0% to 90.4% a 112.3%. No wards reported average fill planned template during April. The committee is asked to note the patients People Pe	David Dellow – Safe Staffing Lead and Giuse Nurse 12.5.2023 Report on Nursing and Care Staff Levels for A Approval Decision Informa The overall fill rate for April was 97.4%. Regis increasing by 1.0% to 90.4% and care staff fill 112.3%. No wards reported average fill rates below 75 planned template during April. This is the first The committee is asked to note the information Performance	David Dellow – Safe Staffing Lead and Giuseppe Labriola Nurse 12.5.2023 Report on Nursing and Care Staff Levels for April 2023– Face of the Performance Places 12.5.2023 Report on Nursing and Care Staff Levels for April 2023– Face of the Performance Labriola Nurse increasing by 1.0% to 90.4% and care staff fill rates increasing by 1.0% to 90.4% and care staff fill rates increasing 12.3%. No wards reported average fill rates below 75% for RN applanned template during April. This is the first time in 7 model. The committee is asked to note the information within this People Performance Places	David Dellow – Safe Staffing Lead and Giuseppe Labriola – Deputy Converse 12.5.2023 Report on Nursing and Care Staff Levels for April 2023 – Hard Truths Report on Nursing and Care Staff Levels for April 2023 – Hard Truths Report on Nursing and Care Staff Levels for April 2023 – Hard Truths Report on Nursing and Care Staff Levels for April 2023 – Hard Truths Report on Nursing and Care Staff Levels for April 2023 – Hard Truths Report on Nursing and Care Staff Levels for April 2023 – Hard Truths Report on Nursing and Care Staff Levels for April 2023 – Hard Truths Report 2023 – Hard Tr

Previously considered by:	NA NA
Risk / links with the BAF: Legislation, regulatory,	BAF: 2.1 Workforce capacity All Divisions have both recruitment and retention on their risk registers NHS England and CQC letter to NHSFT CEOs (31.3.14): Hard Truths Commitment
equality, diversity and dignity implications:	regarding publishing of staffing data. NHS Improvement letter: 22.4.16 NHS Improvement letter re CHPPD: 29/6/18
Appendices:	Appendix 1: Registered fill rates by month against adjusted standard planned template. RAG rated. Appendix 2: ITU / HDU compliance with Guidelines for the provision of Intensive Care Services

There was an upward trend in average fill rates in April; with the overall fill rates for February being 97.4%. RN fill rate increasing by 1% to 90.4% and care staff fill rates increasing by 4.7% to 112.3%. Nightingale ward continues to be open as part of winter escalation plans.

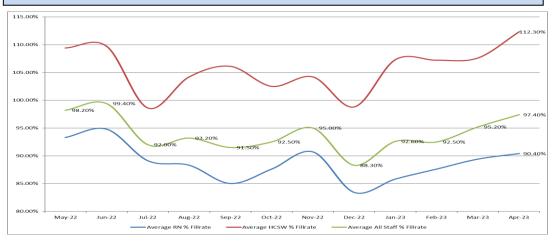
The Acute Admissions Unit (AAU) continues to be an area of concern with 39% Band 5 vacancy rate. The ward is being supported and prioritised for new starters from International pipeline and as well a number of other measures to ensure fill rates and skill mix meet demand and acuity. 6 new RN's are due to commence in May. Additionally, the chief nurse has held a round table review to support safe staffing.

We continue to utilise NHS Professionals (NHSP) and agency to mitigate vacant shifts and enhancements for NHSP shifts continue to promote improved fill rates. The Practice Development Nurse across Acute Medicine is providing enhanced support to AAU with additional support when required from the central Practice Development Team.

Emergency Department (ED) fill increased in April with the day fill over 92%. There was a slight decrease in fill rates for care staff in April due to an increase in short term sickness for Healthcare Support Workers.

Critical care fill rates in April - the unit had more than the required numbers of staff for acuity of patients on 17 occasions during the day (green bars) and 21 occasions at night. The numbers on the left of the graph and strength of the bars denotes by how many staff. There were 15 occasions in the month when staffing fell below the required staffing levels across day and night. On three occasions this was by 2 staff. On these occasions, the Intensive Therapy Unit (ITU) team were supported by the Critical Care Matron, Practice development nurse and the supervisory nurse in charge working in the clinical numbers to support delivery of safe patient care. Regular reporting and comparison month on month will help to provide a benchmark for this variation. Regular reporting and comparison month on month will help to provide a bench mark for this variation. See Appendix 3 for background on how safe staffing is calculated for critical care areas.

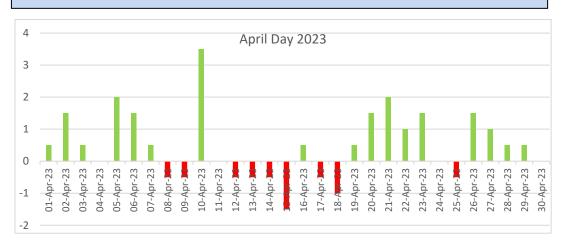
Inpatient Fill rate including maternity wards



ED Fill rate

	D	ay	Night		
A&E Nursing	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	
Feb-23	76.50%	93.40%	91.40%	95.30%	
Mar-23	77.90%	90.50%	90.70%	90.90%	
Apr-23	92.00%	88.10%	92.30%	84.70%	

Critical Care Fill rate



The number of occasions/shifts where the reported fill rate has fallen below 75% across the wards (excluding Maternity) decreased to 189 (\downarrow 9) against March, (December had 383 occasions). If a nursing red flag event occurs for number of staff on duty to meet the care needs of patients, staff escalate the situation and if appropriate complete a Datix.

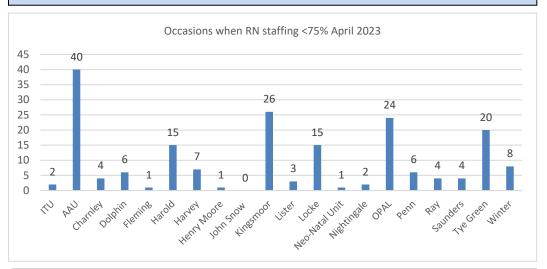
Datix reports in relation to staffing levels decreased to 30 (\$\dagge\$26) against March and 38 in February. AAU raised 10, with Fleming Ward and Saunders Ward raising three each.

No wards reported average fill rates below 75% for RN against the standard planned template during April. This is the first time in 7 months. Details on the impact on care can be found below.

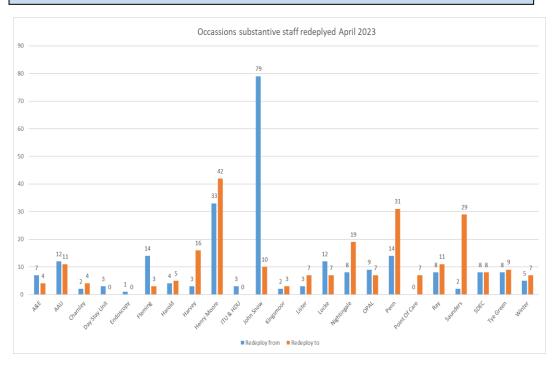
Redeployment of staff continues to be undertaken to support SafeCare as part of the daily huddles. In April, staff were moved from elective surgical wards (John Snow Ward and Henry Moore Ward), with John Snow Ward being closed for a number of days. Fleming ward have very low vacancies. Highest net receivers of staff were Penn and Saunders wards

Following the ward managers awayday a small working group are developing a buddy ward redeployment SOP, this is being reviewed with our band 6 nursing staff during May.

Occasion when RN staffing <75%

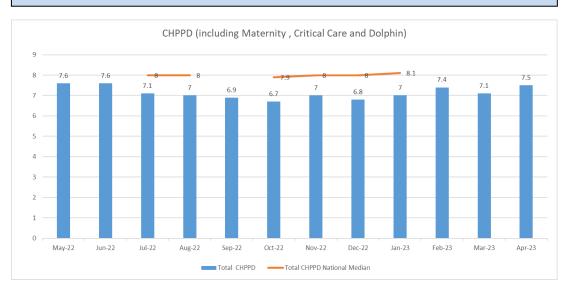


Redeployment



Overall Care Hours Per Patient Day (CHPPD) was 7.5 for April 2023. The Model Hospital data for January 2023 shows the Trust with a CHPPD of 7.0 against the national median of 8.1.

CHPPD



Appendix.1. Ward level data: fill rates April 2023. (Adjusted Standard Planned Ward Demand- excluding Maternity Wards)

	Day Night						
Ward name	Average fill rate - registered nurses/midwi ves (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	% RN overall fill rate	% overall HCSW fill rate	% Overall fill rate
ITU & HDU	90.4%	84.3%	95.0%	99.1%	92.7%	91.7%	92.6%
Saunders Unit	86.0%	108.9%	116.9%	150.3%	97.5%	124.6%	107.7%
Nightingale	106.0%	69.3%	103.2%	79.7%	104.6%	74.3%	89.5%
Penn Ward	85.0%	108.8%	90.0%	162.7%	87.1%	129.2%	102.2%
Henry Moore Ward	118.7%	67.2%	114.3%	66.7%	116.6%	66.9%	92.0%
Harvey Ward	83.2%	100.8%	103.2%	108.0%	91.3%	104.2%	96.0%
John Snow Ward	106.5%	42.3%	101.4%	64.7%	104.1%	49.1%	80.2%
Charnley Ward	84.4%	138.9%	86.7%	139.2%	85.5%	139.0%	100.8%
AAU	72.0%	102.6%	84.2%	126.9%	77.4%	114.2%	85.2%
Harold Ward	79.1%	102.0%	93.3%	128.7%	85.4%	114.8%	94.6%
Kingsmoor General	68.2%	117.7%	96.6%	133.5%	79.0%	125.3%	96.2%
Lister Ward	83.1%	103.7%	95.2%	125.6%	88.3%	114.2%	98.6%
Locke Ward	74.8%	97.2%	91.6%	109.6%	81.9%	103.1%	90.4%
Ray Ward	105.0%	123.2%	126.0%	176.8%	113.9%	143.5%	124.5%
Tye Green Ward	72.8%	111.1%	80.8%	118.9%	76.3%	114.3%	91.1%
OPAL	92.7%	118.0%	81.2%	116.6%	87.2%	117.3%	99.3%
Winter Ward	81.1%	114.6%	96.3%	139.1%	87.5%	126.3%	103.0%
Fleming Ward	84.8%	114.2%	99.2%	131.4%	90.9%	122.4%	100.5%
Neo-Natal Unit	98.7%	98.6%	98.7%	96.7%	98.7%	97.6%	98.5%
Dolphin Ward	90.4%	78.3%	99.9%	88.7%	94.6%	81.7%	91.4%
Total	85.0%	103.4%	95.9%	122.8%	89.8%	112.1%	97.1%

Appendix 3: ITU / HDU compliance with Guidelines for the provision of Intensive Care Services (Version 2.1 July 2022)

To ensure that the Board is given an overview of departments other than the inpatient wards and ED and to strengthen our compliance with the NQB 2013 and NQB 2016, this report will be looking at other metrics going forward.

Registered nurse staffing standards published within the Core Standards for Intensive Care Units, state

- Level 3 patients must have a registered nurse/patient ratio of a minimum 1:1 to deliver direct care
- Level 2 patients must have a registered nurse/patient ratio of a minimum of 1:2 to deliver direct care

The graph shows the actual staffing levels against the required number for the patients within the department each day shift. Red bars indicate when shifts had less than the recommended staffing numbers. The strength of the bar indicates how many shift short it was. The green bars indicate when there were more staff than the patient numbers required.

All shifts include a supervisory nurse.