






## People Committee

<b>Agenda item:</b>								
<b>Presented by:</b>	Giuseppe Labriola – deputy chief nurse							
<b>Prepared by:</b>	David Dellow, safe staffing lead and Giuseppe Labriola, deputy chief nurse							
<b>Date prepared:</b>	9 July 2023							
<b>Subject / title:</b>	Report on nursing and care staff levels for July 2023.							
<b>Purpose:</b>	<b>Approval</b>		<b>Decision</b>		<b>Information</b>	<b>x</b>	<b>Assurance</b>	<b>x</b>
<b>Key issues:</b>	<p>The overall fill rate for July was 99.39%. Registered nurse (RN) fill increased to 93.6% with care staff fill rates decreasing by 1.3% to 111.3%.</p> <p>No wards reported average fill rates below 75% for RN against the standard planned template during July, this is the forth consecutive month.</p>							
<b>Recommendation:</b>	The committee is asked to note the information within this report.							
<b>Trust strategic objectives:</b> please indicate which of the five Ps is relevant to the subject of the report	 <b>Patients</b> x	 <b>People</b> x	 <b>Performance</b> x	 <b>Places</b>	 <b>Pounds</b> x			
<b>Previously considered by:</b>	NA							
<b>Risk / links with the BAF:</b>	BAF: 2.1 Workforce capacity All divisions have both recruitment and retention on their risk registers.							
<b>Legislation, regulatory, equality, diversity and dignity implications:</b>	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 and NHS Improvement letter re CHPPD: 29/6/18.							

<p><b>Appendices:</b></p>	<p><b>Appendix 1:</b> Registered fill rates by month against adjusted standard planned template. RAG rated.</p> <p><b>Appendix 2:</b> ITU/HDU compliance with guidelines for the provision of intensive care services.</p>
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There was an upward trend in registered and the overall average fill rates in July; with the overall fill rate increasing to 99.3%. RN fill rate increased by 1.2% to 93.6% with care staff fill rates decreasing by 1.3% to 111.3%. Nightingale Ward closed 28 June.

We continue to utilise NHS Professionals (NHSP) and agency to mitigate vacant shifts and enhancements for NHSP shifts continue to promote improved fill rates.

Emergency department (ED) fill decreased in July, with RN nights being the exception. RN Day fill was 92.4%, (↓0.7%) with RN night increasing 0.2% to 98.3%. There was also a reduction in fill rates for care staff in July with days, (↓2.3%) and nights decreasing by 9.8%% to 86.8%

Critical care fill rates in July - the unit had more than the required numbers of staff for acuity of patients on 25 occasions during the day (green bars) and 30 occasions at night. The numbers on the left of the graph and strength of the bars denotes by how many staff. There were 5 occasions in the month when staffing fell below the required staffing levels across day and night. On one occasion this was by 2 or more 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. See Appendix 2 for background on how safe staffing is calculated for critical care areas.

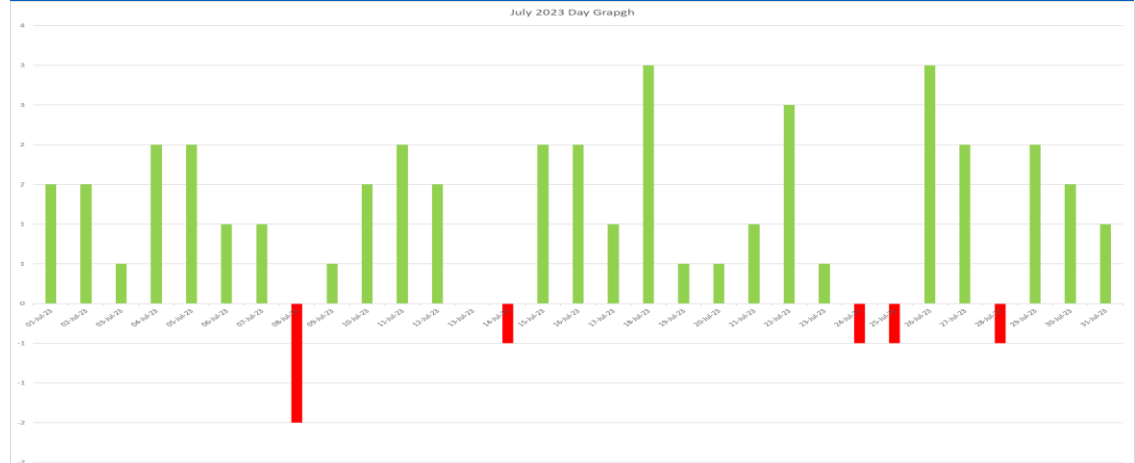
### Inpatient fill rate including maternity wards



### ED fill rate

A&E Nursing	Day		Night	
	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)
May 2023	91.8%	89.1%	94.6%	92.7%
June 2023	93.1%	91.7%	98.1%	96.6%
July 2023	92.4%	89.4%	98.3%	86.8%

### Critical care fill rate



The number of occasions/shifts where the reported fill rate has fallen below 75% across the wards increased to 162(↑5) against June. This report now includes maternity (41). (December 22 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.

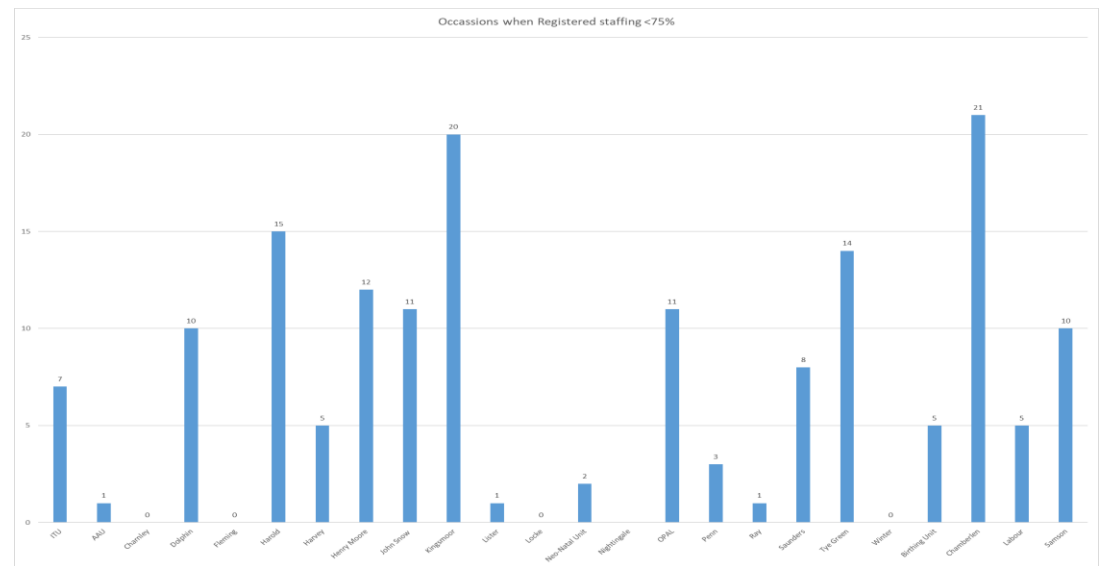
Datix reports in relation to staffing levels decreased to 26 (↓10) against June. Tye Green raised 10 with Birthing Unit and OPAL raising 3 each.

No wards reported average fill rates below 75% for RN against the standard planned template during July. This is the fourth month in a row. Details on the impact on care can be found below.

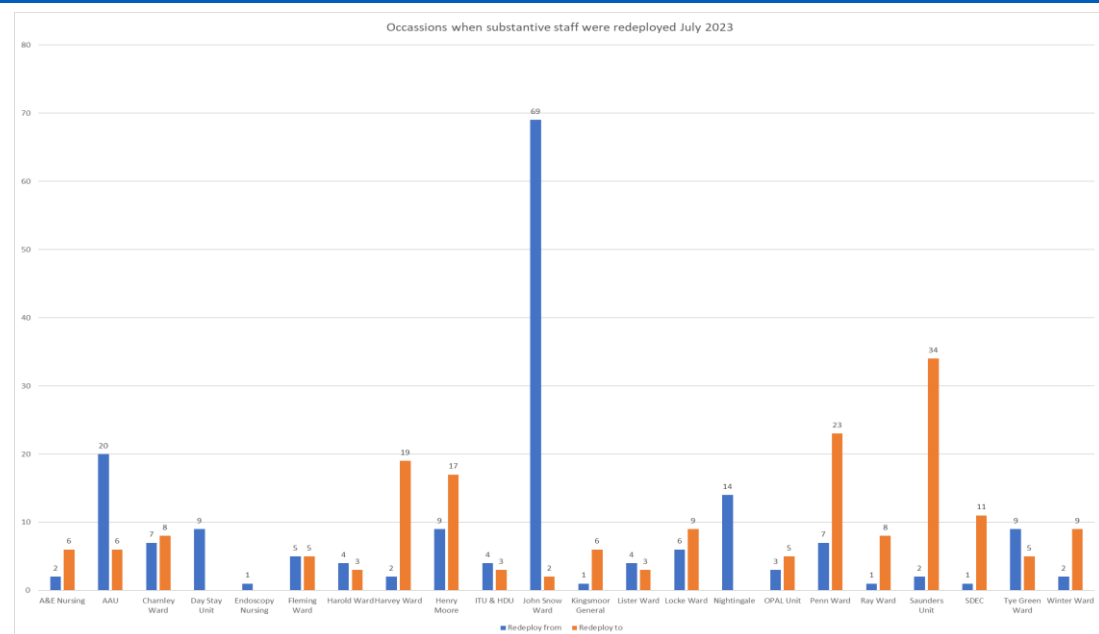
Redeployment of staff continues to be undertaken to support SafeCare as part of the daily huddles. In July, AAU and John Snow were the wards who redeployed the highest number of substantive staff. Highest net receivers of staff were Saunders, Penn and Harvey Wards. The deputy chief nurse and safer staffing lead are formalising a new process for the daily staffing huddles and the use of SafeCare which will commence from September 2023.

Following the ward managers awayday a small working group are developing a buddy ward redeployment SOP, this has been presented to the nursing teams and is currently undergoing the ratification process.

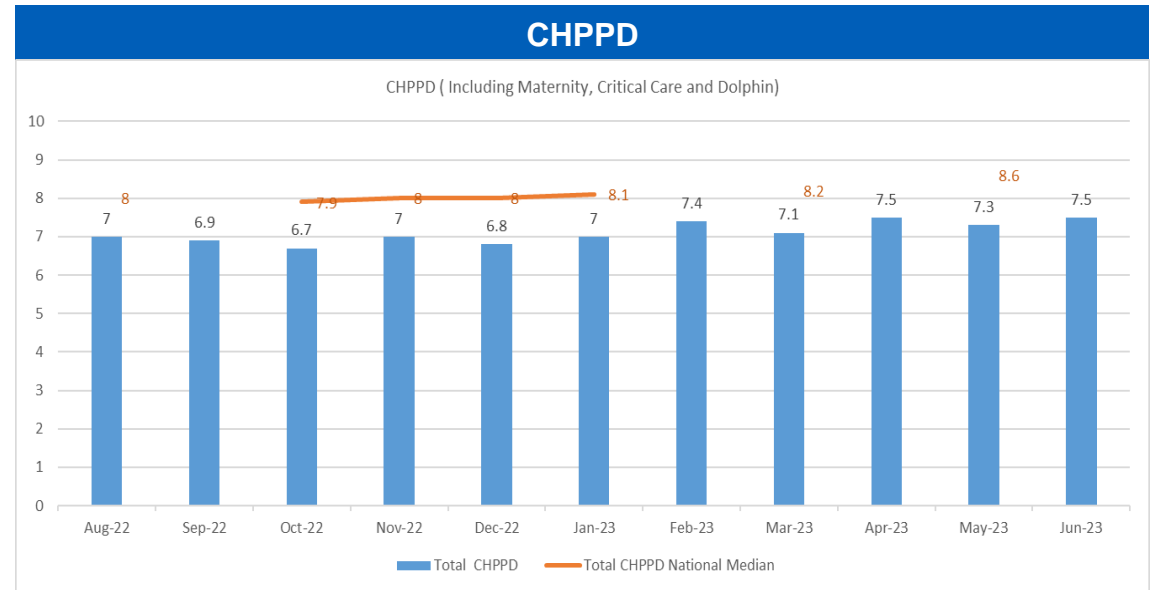
## Occasion when RN staffing <75%



## Redeployment



Overall care hours per patient day (CHPPD) was 7.6 for July 2023. The Model Hospital data for May 2023 shows the trust with a CHPPD of 7.3 against the national median of 8.6.



**Appendix 1: Ward level data - fill rates July 2023 (adjusted standard planned ward demand)**

Ward name	Day		Night		% RN overall fill rate	% overall HCSW fill rate	% Overall I fill rate
	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)			
ITU & HDU	82.7%	76.4%	88.9%	71.0%	85.8%	73.7%	84.7%
Saunders Unit	81.0%	125.5%	120.3%	160.9%	95.7%	138.9%	112.0%
Penn Ward	87.6%	110.4%	99.8%	159.7%	92.8%	129.1%	105.8%
Henry Moore Ward	87.2%	73.0%	119.8%	81.9%	100.2%	77.2%	90.3%
Harvey Ward	81.8%	116.9%	101.3%	124.7%	89.8%	120.6%	100.9%
John Snow Ward	90.2%	35.6%	84.2%	52.2%	87.3%	40.8%	67.2%
Charnley Ward	93.9%	132.2%	103.2%	115.7%	98.4%	124.3%	105.8%
AAU	90.6%	141.2%	109.0%	122.4%	98.8%	132.2%	105.8%
Harold Ward	77.4%	92.3%	97.5%	104.1%	86.2%	97.9%	89.9%
Kingsmoor General	73.1%	105.8%	102.6%	133.7%	84.3%	119.2%	97.3%
Lister Ward	89.5%	109.7%	107.9%	138.9%	97.3%	123.7%	107.8%
Locke Ward	101.5%	106.8%	118.5%	125.2%	108.7%	115.6%	111.5%
Ray Ward	93.3%	120.5%	113.0%	181.6%	101.6%	143.7%	116.7%
Tye Green Ward	77.5%	100.4%	88.5%	135.8%	82.2%	114.8%	94.9%
Nightingale Ward	100.0%	114.9%	90.4%	120.2%	95.4%	117.4%	104.2%
Opal Unit	94.8%	120.2%	117.1%	141.2%	104.2%	130.2%	114.6%
Winter Ward	85.8%	101.6%	100.0%	103.1%	91.8%	102.3%	95.0%
Fleming Ward	99.5%	100.0%	97.7%	90.3%	98.6%	95.2%	98.0%
Neo-Natal Unit	81.0%	64.4%	93.1%	75.9%	86.3%	68.3%	81.8%
Dolphin Ward	82.7%	76.4%	88.9%	71.0%	85.8%	73.7%	84.7%
Birthing Unit	93.5%	100.8%	97.5%	104.3%	95.4%	102.4%	97.0%

Chamberlin Ward	109.5%	99.1%	97.5%	96.8%	103.8 %	98.0%	101.8 %
Labour Ward	93.3%	108.2%	95.0%	91.3%	94.1%	100.1 %	97.1%
Samson Ward	85.6%	95.3%	90.8%	88.6%	88.1%	92.1%	89.1%
<b>Total</b>	<b>87.9%</b>	<b>104.5%</b>	<b>100.7%</b>	<b>119.8%</b>	<b>93.6%</b>	<b>111.3 %</b>	<b>99.3%</b>

## Appendix 2: 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 shifts short it was. The green bars indicate when there were more staff than the patient numbers required.

All shifts include a supervisory nurse.