






People Committee

Agenda item: Presented by: Prepared by: Date prepared: Subject / title:	Giuseppe Labriola – Deputy Chief Nurse David Dellow – Safe Staffing Lead and Giuseppe Labriola – Deputy Chief Nurse 21.11 2023 Report on Nursing and Care Staff Levels for October 2023.				
Purpose:	Approval		Decision		Information x Assurance x
Key issues:	The overall fill rate for October was 112.9%. Registered Nurse fill rate increased by 12.8% to 105 % with care staff fill rates increasing by 19.7% to 130.1%. An increase in fill rate was noted due to additional enhanced care needs and new joiners in maternity and critical care. No wards reported average fill rates below 75% for RN against the standard planned template during October, this is the seventh consecutive month.				
Recommendation:	The committee are 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:	NA				
Risk / links with the BAF:	BAF: 2.1 Workforce capacity All Divisions 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: 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 increase in the Registered, Unregistered and the overall average fill rates in October; with the overall fill rate increasing to 112.9%. RN fill rate increased by 12.8% to 105% with care staff fill rates increasing by 19.7% to 130.1%.

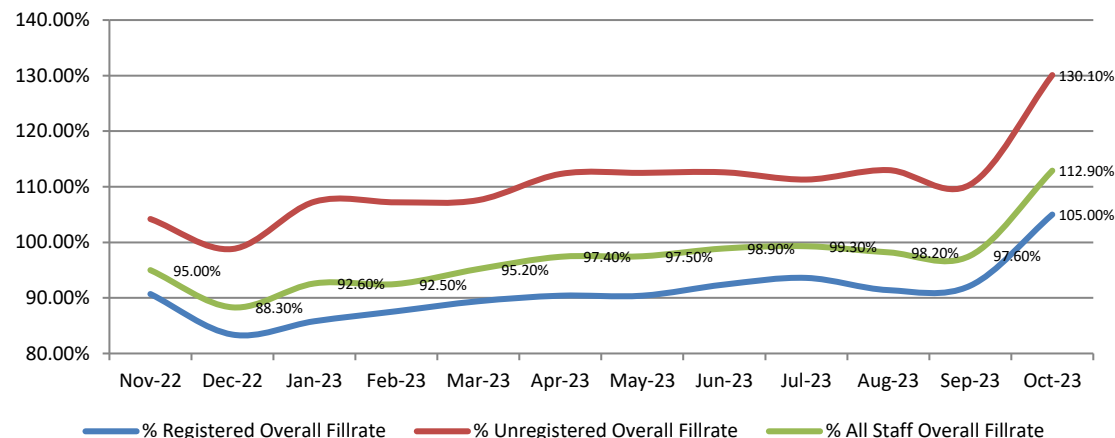
There were approximately 50 more additional duties created for enhanced care or 1:1 care by a registered mental health nurse which will impact on the overall fill rate. The additional shifts are created due to the activity and acuity of patients, with additional staff needed to provide care. Maternity services and ITU have recently recruited to their vacancies and have new registered staff within their establishment. With new staff joining an organisation, time for supernumerary status, training and orientation is required, and this will impact on the fill rate.

We continue to utilise NHS Professionals (NHSP) and agency to mitigate vacant shifts. In addition, our senior nurses and midwives are also supporting individual areas.

Emergency Department (ED) Registered fill increased in October RN Day fill was 93.3%, (↑1.8%) with RN Night at 96%. (↓1%) There was an increase in fill rates for care staff in October with days, (↑1.6%) to 79.5% and nights increasing by 4.5% to 87%

Critical care fill rates in October - the unit had more than the required numbers of staff for acuity of patients on 27 occasions during the day (green bars) and 28 occasions at night. The numbers on the left of the graph and strength of the bars denotes by how many staff. There were 7 occasions in the month when staffing fell below the required staffing levels across day and night. There were 2 occasions when this was by 2 or more staff. On occasions when staffing fell below the required levels, 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. See Appendix 2 for background on how safe staffing is calculated for critical care areas.

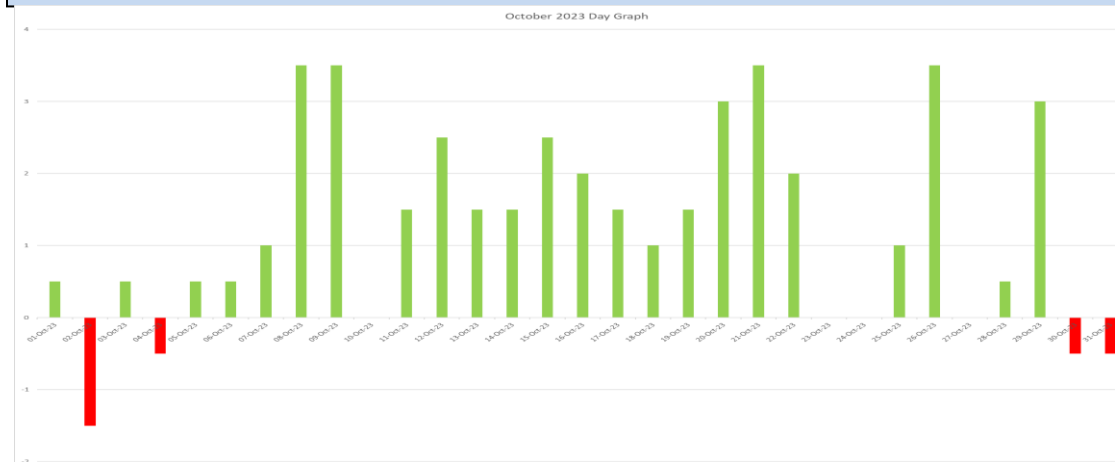
Inpatient Fill rate including maternity wards



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 (%)
August 2023	87.6	87.0	96.5	92.6
September 2023	91.5%	77.9%	97.0%	82.5%
October 2023	93.3%	79.5%	96.0%	87.0%

Critical Care Fill rate



The number of occasions/shifts where the reported fill rate has fallen below 75% across the wards decreased to 132 (↓53) against September. This report now includes Maternity (45). 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 40 (↓5) against September. Labour Ward raised 5 with Penn, Samson, AAU and Ray raising 4 each.

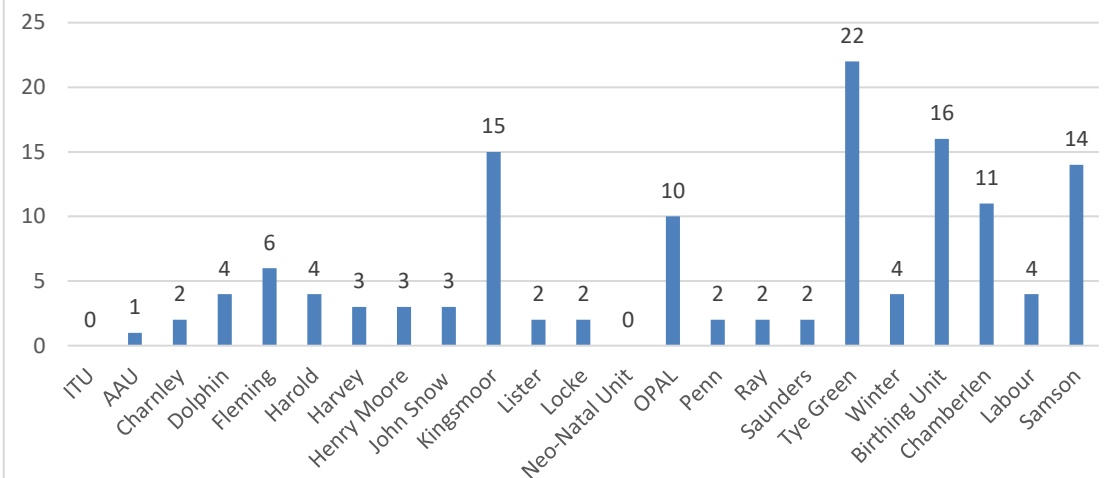
No wards reported average fill rates below 75% for RN against the standard planned template during October. This is the seventh consecutive month in a row. Henry Moore average unregistered fill rate was 45.6%.

Redeployment of staff continues to be undertaken to support SafeCare as part of the daily huddles. In October, John Snow remained the ward who redeployed the highest number of substantive staff. The highest net receiver of staff was Nightingale, with Henry Moore and Saunders Wards being the next highest. The deputy chief nurse and safer staffing lead are formalising a new process for the daily staffing huddles and the use of SafeCare with a planned implementation date of mid-January. SafeCare data is now collected three times a day.

Following the ward managers awayday a small working group have developed a buddy ward redeployment SOP, this has been presented to the nursing teams and is currently undergoing the ratification process with presentation to the Trust Policy Group on 13th December 2023

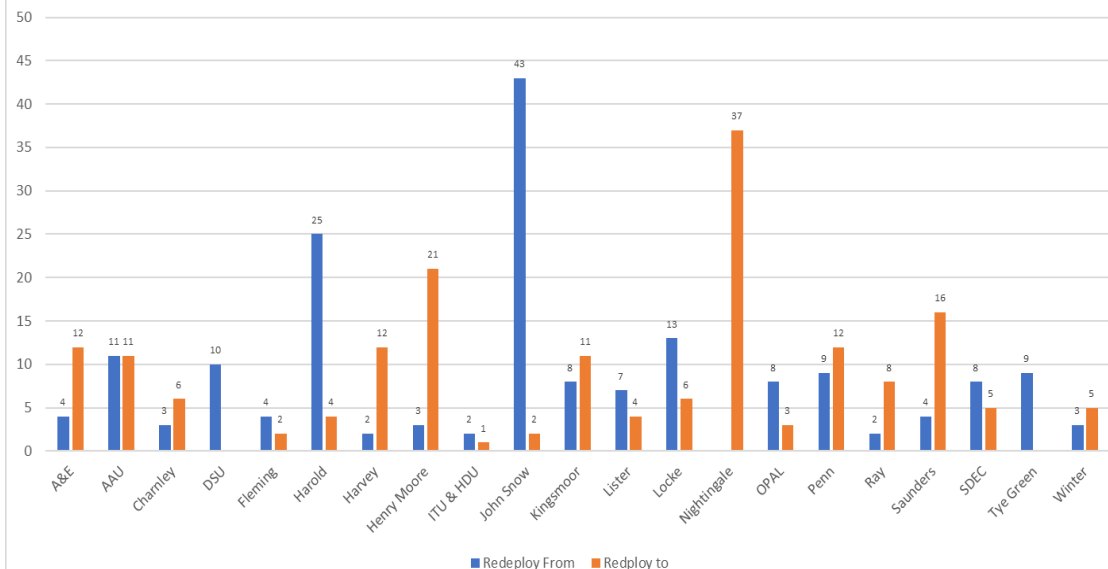
Occasion when RN staffing <75%

Ocassions when registered staff <75% October 2023

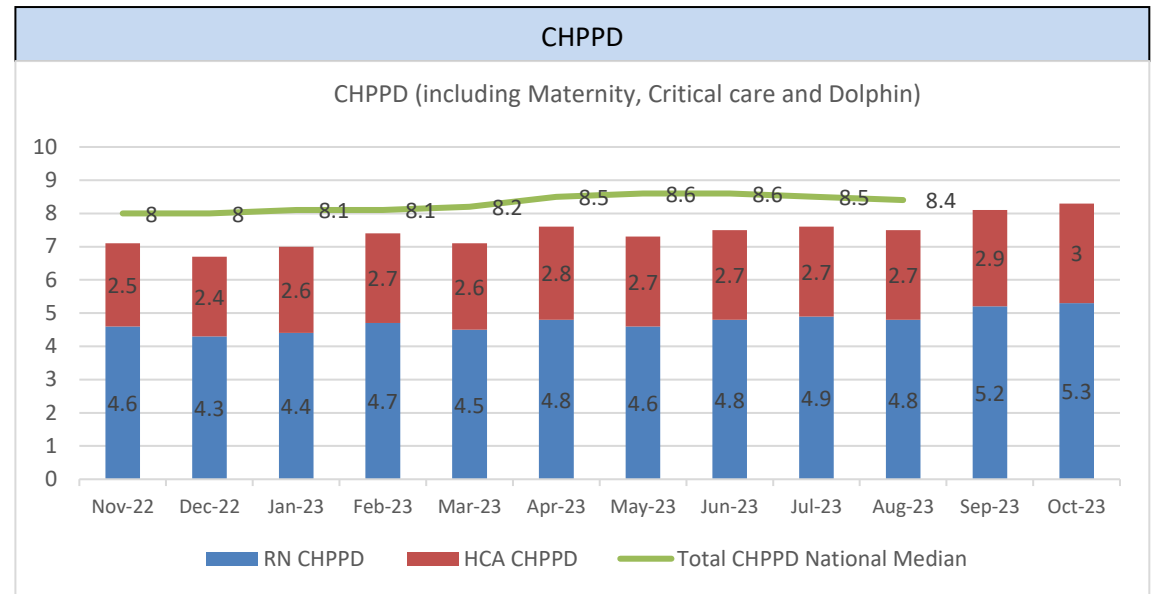


Redeployment

Ocassions when substantive staff were redeployed October 2023



Overall Care Hours Per Patient Day (CHPPD) was 8.3 for October 2023. The Model Hospital data for August 2023 shows the Trust with a CHPPD of 7.5 against the national median of 8.4.



Appendix.1. Ward level data: fill rates October 2023. (Adjusted Standard Planned Ward Demand)

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 (%)			
ITU & HDU	113.0%	79.1%	131.6%	133.2%	122.3%	106.2%	120.8%
Saunders Unit	86.1%	103.1%	114.5%	161.8%	96.8%	125.4%	107.5%
Penn Ward	89.0%	117.0%	101.6%	150.9%	94.4%	129.9%	107.1%
Henry Moore Ward	111.0%	107.1%	162.0%	160.3%	131.4%	132.5%	131.9%
Harvey Ward	85.6%	116.0%	112.0%	120.2%	96.3%	118.0%	104.2%
John Snow Ward	105.6%	44.4%	93.5%	48.4%	99.9%	45.6%	76.4%
Charnley Ward	89.5%	120.8%	93.5%	116.0%	91.4%	118.5%	99.2%
AAU	88.4%	103.3%	103.8%	122.4%	95.3%	112.4%	98.9%
Harold Ward	94.7%	119.3%	135.5%	190.4%	112.6%	153.3%	125.4%
Kingsmoor General	76.8%	109.4%	105.5%	135.0%	87.7%	121.6%	100.4%
Lister Ward	94.8%	158.6%	120.0%	183.9%	105.5%	170.7%	131.5%
Locke Ward	93.5%	136.5%	119.2%	199.5%	104.4%	166.6%	129.2%
Ray Ward	103.7%	135.3%	152.0%	265.4%	124.1%	184.7%	145.8%
Tye Green Ward	75.1%	92.0%	82.2%	137.5%	78.2%	110.6%	90.8%
Opal Unit	96.7%	126.3%	91.7%	124.2%	94.3%	125.3%	106.7%
Winter Ward	90.4%	103.3%	104.6%	121.8%	96.4%	112.2%	102.7%
Fleming Ward	77.9%	104.1%	99.3%	111.3%	86.9%	107.6%	93.3%
Neo-Natal Unit	98.9%	116.1%	112.4%	64.5%	105.6%	90.3%	103.1%
Dolphin Ward	126.3%	94.7%	133.3%	101.5%	129.4%	97.0%	121.3%
Labour Ward	108.0%	127.4%	120.7%	115.0%	114.1%	121.5%	115.7%
Birthing Unit	95.9%	114.4%	88.1%	156.9%	92.2%	134.7%	106.3%
Samson Ward	132.4%	177.3%	118.9%	186.2%	125.9%	181.6%	148.2%
Chamberlen Ward	128.2%	126.7%	125.2%	142.8%	126.8%	134.4%	128.7%
Total	97.0%	115.4%	115.1%	148.1%	105.0%	130.1%	112.9%

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 shift short it was. The green bars indicate when there were more staff than the patient numbers required.

All shifts include a supervisory nurse.