

Royal National Orthopaedic Hospital NHS Trust

Executive Summary

Report/Paper:	April Staffing Report (Hard Truths Commitment)
Date:	16 May 2014
Purpose of Paper:	To inform the Trust Board of the details and summary of planned and actual inpatient ward staffing on a shift-by-shift basis and to advise about wards (if any) where staffing falls short of what is required to provide quality care, the reasons for the gap, the impact and the actions being taken to address the gap.
Context/Summary:	<p>This is the first Board Report since publication of the Chief Nurse' paper (<i>How to ensure the right people, with the right skills, are in the right place at the right time: a guide to nursing, midwifery and care staffing capacity and capability</i>, 2013) on safer staffing.</p> <p>The information provided supports decision making; enabling the Board to evaluate risks, seek assurances regarding contingency planning, mitigating actions and incident reporting and ensure that the Executive Team is supported to take decisive action to protect patient safety and experience.</p> <p>39.7% of weekly shifts on inpatient wards were staffed by the planned number of staff. As April included Easter, there were ward closures and lower than normal occupancy rates.</p> <p>The average planned ratio for adult acute inpatient wards at the Royal National Orthopaedic Hospital NHS Trust is 1:5.5.</p> <p>The Trust continues to use a large amount of bank/agency and has a total 68.65 nursing vacancies across inpatient and outpatient settings.</p> <p>Real-time systems have been developed within the Trust, and have been implemented from May 1st 2014.</p> <p>One patient safety clinical incident could be attributed to staffing levels, and there were three repots made of short staffing in April.</p> <p>Incident reporting should be modified to allow for more details of staffing levels to be captured as a cause/contributory factor.</p> <p>The next dependency review is due to start on 2nd June 2014.</p>

April Staffing Report (Hard Truths Commitment)

Introduction:

The publication of the second Francis Report in 2013 highlighted potential issues around safe staffing levels at Mid-Staffordshire NHS Foundation Trust and lack of transparency was among the contributing factors. The response from the Chief Nurse at NHS England (*How to ensure the right people, with the right skills, are in the right place at the right time: a guide to nursing, midwifery and care staffing capacity and capability*, 2013) requires hospitals to collect and publically publish individual NHS inpatient ward staffing levels on a shift by shift basis. This close monitoring enables managers to visualise nursing activity within their organisation in a timely and efficient manner. Wards must publish this information on patient information boards and organisations are required to review staffing levels at least six monthly, using validated methods. The next review at the Royal National Orthopaedic Hospital NHS Trust (RNOH; the Trust) is scheduled for June 2014. Although it is not yet mandated, the Trust is also gathering data from private patients, outpatients and plans to incorporate Recovery in the future.

In line with the guidance, this report ensures the Trust Board:

- a) Receives an update containing details and summary of planned and actual inpatient ward staffing on a shift-by-shift basis
- b) Is advised about wards where staffing falls short of what is required to provide quality care, the reasons for the gap, the impact and the actions being taken to address the gap

The information provided supports decision making, enabling the Board to:

- 1) Evaluate risks associated with staffing issues
- 2) Seek assurances regarding contingency planning, mitigating actions and incident reporting
- 3) Ensure that the Executive Team is supported to take decisive action to protect patient safety and experience

The Trust must also publish this report in a form accessible to patients and the public on their Trust website and via NHS Choices.

This is the first report following publication of the guidance (31st March 2014). The development of a real-time system during April has ensured all staff (from Ward to Board) are able to visualise staffing activity and levels on a shift by shift basis (also noted in: *How to ensure the right people, with the right skills, are in the right place at the right time: a guide to nursing, midwifery and care staffing capacity and capability*, 2013). As this tool was not ready from April 1st, information provided in this report on 'actual staffing levels' is based on retrospective data.

a) Update:

The details of planned and actual (average) staffing for April 2014 can be found at the end of this report. In summary, 39.7% of weekly shifts were 'actually' filled by the 'planned' number of staff. Although it appears many shifts were understaffed, during April there were a number of days with lower than normal activity, resulting in lower than normal occupancy and consequential staffing levels. This is particularly prevalent on Alan Bray Unit. Three wards were closed during the Easter break.

The Trust continues to use a high amount of bank and agency staff as a result of vacancies (total 44.12 nursing vacancies; see details at the end of this report). Some of these are due to uplifts in inpatient areas following the staffing reviews (repeat due in June 2014). Of 1,230 bank shifts requested (inpatient wards), 874 were filled and only 94 were unfilled (7.6%). Of the filled inpatient ward shifts, 306 (35%) were filled by agency. 262 requests were cancelled (21.3%); the most frequent reason code was 'cancelled by Department' (n=164). In addition, 126 were undertaken in outpatient settings, 153 were in Theatres (scrub) and 59 were in Recovery.

A short-staffing 'Escalation Protocol' has been developed by the Senior Nursing Team (due for review August 2014).

The average Registered Nurse to patient ratio for adult acute inpatient wards at the RNOH is 1:5.5 (based on planned average staffing levels and full occupancy). The draft NICE recommended maximum number of patients per nurse is 8. The Trust should be mindful of the specialism and complexity of patient requirements.

b) Advisory

The new data collection tools (one currently in use via the shared drive, and another in development for use via the Trust intranet - Grapevine) require staff to enter data in real-time, shift by shift. These tools require staff to indicate reasons for under/over staffing and give actions taken as a result. This was not possible during April. The next report will be more detailed in this regard.

Clinical incidents have been reviewed; there were three reports of 'staffing shortage' as an incident in April (one Margaret Harte Ward, one Ward 4 and one Recovery). Patient safety incidents which may have had staffing as a contributing factor have also been reviewed alongside the staffing data. One report on Duke of Gloucester (17:00 medication error), cites the ward as 'busy'; insight data reports between 79.2-104.2% occupancy, and staffing was one Registered Nurse less than normal. One patient fall on Private Patients Unit occurred on a shift which had one Healthcare Assistant (non-registered staff) less than normal. Staffing or workload was not cited in the report. One report from the Coxen & Adolescent Unit (medication error) occurred on a shift with lower than normal numbers (one nurse less); however occupancy at the time was only 44.8%.

The wards are aware of the high bank/agency use and a recruitment strategy is in place. A skill mix review is required at the same time as the patient dependency assessments (June 2014) which may indicate a requirement to adjust the budgeted WTE.

Until eRostering is implemented, Matrons and Ward Managers need to ensure their staff are appropriately allocated leave (including study leave); preventing fluctuations in staffing levels as a result of poor roster management. Planned Leave is not a valid reason to request bank cover (and not an option on the HR Bank Staff system); an audit/investigation is suggested to directly compare requests made with the nursing roster.

Ongoing Plan:

The next staffing review will begin on 2nd June 2014. This process takes 4 weeks for data collection, and approximately two further weeks for analysis and reporting.

Incident reporting should allow for more detailed data entry when reporting staffing problems (or citing staffing levels as a contributing factor/cause), and staff should be encouraged to report issues.

Once ready, the intranet based data collection tool will link to Insight and facilitate improvements in reporting. It is anticipated this system will be ready from June 2014.

Performance indicators have been identified for staffing levels.

Report date: 16/5/14

Report compiled by: Rebecca Maslin (Project Nurse)

Details:

Planned							
Ward	Day	Registered			Non Registered		
		Early	Late	Night	Early	Late	Night
Spinal Cord Injury Centre	Sun	8	5	4	5	3	3
	Mon	8	5	4	5	3	3
	Tue	8	5	4	5	3	3
	Wed	8	5	4	5	3	3
	Thu	8	5	4	5	3	3
	Fri	8	5	4	5	3	3
	Sat	8	5	4	5	3	3
Angus McKinnon Ward	Sun	4	3	3	2	1	1
	Mon	5	3	3	2	1	1
	Tue	4	3	3	2	1	1
	Wed	4	3	3	2	1	1
	Thu	4	3	3	2	1	1
	Fri	4	3	3	2	1	1
	Sat	4	3	3	2	1	1
Jackson Burrows Ward	Sun	4	3	2	2	2	1
	Mon	5	4	2	2	2	1
	Tue	5	4	2	2	2	1
	Wed	5	4	2	2	2	1
	Thu	5	4	2	2	2	1
	Fri	5	4	2	2	2	1
	Sat	4	3	2	2	2	1
The Coleman Unit	Sun	4	3	2	2	2	1
	Mon	5	4	3	2	2	1
	Tue	5	4	3	2	2	1
	Wed	5	4	3	2	2	1
	Thu	5	4	3	2	2	1
	Fri	5	4	3	2	2	1
	Sat	4	4	3	2	2	1
Margaret Harte Ward	Sun	3	3	3	2	2	1
	Mon	4	3	3	2	2	1
	Tue	4	3	3	2	2	1
	Wed	4	3	3	2	2	1
	Thu	4	3	3	2	2	1
	Fri	4	3	3	2	2	1
	Sat	3	3	3	2	2	1
Ward 4	Sun	4	4	3	2	2	1
	Mon	6	5	3	2	2	1
	Tue	6	5	3	2	2	1
	Wed	6	5	3	2	2	1
	Thu	6	5	3	2	2	1
	Fri	6	5	3	2	2	1
	Sat	5	4	3	2	2	1

April Actual (Average, by shift, by day)							
Ward	Day	Registered			Non Registered		
		Early	Late	Night	Early	Late	Night
Spinal Cord Injury Centre	Sun	6.50	4.25	4.00	5.75	2.75	3.00
	Mon	5.75	4.75	4.50	5.50	2.00	2.00
	Tue	6.60	5.20	4.20	5.40	3.60	2.80
	Wed	6.60	5.40	4.20	5.60	2.60	2.60
	Thu	7.00	5.75	4.75	5.00	2.50	2.50
	Fri	7.00	5.75	4.00	4.75	2.00	2.75
	Sat	5.50	4.50	4.00	6.00	2.00	3.00
Angus McKinnon Ward	Sun	4.00	3.00	3.00	2.50	2.00	1.00
	Mon	4.25	3.50	2.75	2.75	1.75	1.00
	Tue	4.80	4.00	3.20	3.00	1.80	1.00
	Wed	4.20	3.40	3.00	2.80	1.40	1.00
	Thu	4.50	3.75	3.00	3.00	1.25	1.00
	Fri	4.25	3.75	3.00	2.50	1.50	1.00
	Sat	4.25	3.25	3.00	2.75	2.25	1.00
Jackson Burrows Ward	Sun	3.33	3.00	2.33	1.33	1.00	1.00
	Mon	4.67	4.00	2.33	2.00	1.33	1.00
	Tue	4.80	3.60	2.75	2.20	1.40	1.00
	Wed	5.00	4.40	2.00	2.00	1.80	1.00
	Thu	4.75	3.75	2.00	2.00	1.50	1.00
	Fri	5.00	4.00	2.33	2.33	1.67	1.00
	Sat	4.67	4.00	2.00	2.00	1.67	1.00
The Coleman Unit	Sun	3.67	3.33	2.00	1.33	1.00	1.00
	Mon	5.00	4.33	2.33	2.00	1.67	1.00
	Tue	4.60	3.40	2.25	2.00	1.80	1.00
	Wed	5.00	4.20	2.80	2.20	1.80	1.00
	Thu	4.75	4.00	2.33	1.67	1.50	1.00
	Fri	4.67	4.00	2.00	2.00	1.33	1.00
	Sat	4.67	3.33	2.50	1.67	1.67	1.00
Margaret Harte Ward	Sun	3.00	3.00	3.00	2.00	2.00	0.25
	Mon	3.50	2.75	3.00	1.75	2.00	1.00
	Tue	3.60	2.80	3.00	2.00	1.75	1.00
	Wed	3.80	3.00	3.00	2.00	1.80	1.00
	Thu	4.00	3.00	3.00	1.75	1.75	1.00
	Fri	3.50	3.00	3.00	2.00	1.75	1.00
	Sat	3.00	2.75	3.00	2.25	1.75	1.00
Ward 4	Sun	3.50	3.33	3.00	1.00	1.00	1.00
	Mon	4.75	4.00	3.00	2.00	2.00	1.00
	Tue	4.80	4.40	3.00	2.00	2.00	1.00
	Wed	5.00	4.40	3.00	1.80	1.80	1.00
	Thu	5.00	4.00	3.00	2.00	2.00	1.00
	Fri	4.75	4.00	3.00	2.00	2.00	1.00
	Sat	4.00	4.00	3.00	1.75	1.75	1.00

Planned							
Ward	Day	Registered			Non Registered		
		Early	Late	Night	Early	Late	Night
Ian Monro Ward	Sun	3	3	2	1	1	1
	Mon	3	3	2	1	0	1
	Tue	3	3	2	1	1	1
	Wed	3	3	2	1	0	1
	Thu	3	3	2	1	0	1
	Fri	3	3	2	1	0	1
	Sat	3	3	2	1	1	1
Phillip Newman Ward	Sun	3	3	2	1	0	0
	Mon	3	3	2	1	0	0
	Tue	3	3	2	1	0	0
	Wed	3	3	2	1	0	0
	Thu	3	3	2	1	0	0
	Fri	3	3	2	1	0	0
	Sat	3	3	2	1	0	0
Duke of Gloucester	Sun	5	5	3	2	2	1
	Mon	5	5	3	2	2	1
	Tue	5	5	3	2	2	1
	Wed	5	5	3	2	2	1
	Thu	5	5	3	2	2	1
	Fri	5	5	3	2	2	1
	Sat	5	5	3	2	2	1
Coxen & Adolescent Unit	Sun	6	6	4	2	2	1
	Mon	8	8	4	2	1	1
	Tue	8	8	4	2	1	1
	Wed	8	8	4	2	1	1
	Thu	9	9	4	2	2	1
	Fri	9	9	4	2	2	1
	Sat	6	6	4	2	2	1
Jubilee Rehabilitation Centre	Sun	3	2	2	1	1	1
	Mon	5	3	2	2	1	1
	Tue	4	2	2	2	1	1
	Wed	4	2	2	2	1	1
	Thu	4	2	2	2	1	1
	Fri	5	2	2	2	1	1
	Sat	3	2	2	1	1	1
Alan Bray Unit (Intensive Care)	Sun	11	11	11	1	1	0
	Mon	13	13	13	1	1	0
	Tue	18	18	18	1	1	0
	Wed	18	18	18	1	1	0
	Thu	16	16	16	1	1	0
	Fri	13	13	13	1	1	0
	Sat	15	15	15	1	1	0

April Actual (Average, by shift, by day)							
Ward	Day	Registered			Non Registered		
		Early	Late	Night	Early	Late	Night
Ian Monro Ward	Sun	2.50	2.50	2.00	0.75	0.50	0.25
	Mon	2.50	2.00	2.00	1.00	1.00	1.00
	Tue	3.20	2.20	2.00	0.80	0.80	1.00
	Wed	3.20	2.20	2.00	1.00	0.20	1.00
	Thu	3.50	2.75	2.00	1.00	0.50	0.50
	Fri	3.25	2.50	2.00	1.00	0.75	0.00
	Sat	2.75	2.25	2.00	0.75	0.00	0.25
Phillip Newman Ward	Sun	2.50	2.25	2.00	0.75	0.75	0.25
	Mon	2.50	2.25	2.00	0.50	0.25	0.00
	Tue	2.60	2.20	2.00	0.40	0.40	0.00
	Wed	2.80	2.40	2.00	0.80	0.80	0.00
	Thu	3.00	2.75	2.00	0.75	0.75	0.75
	Fri	2.50	2.25	2.00	1.00	1.00	1.00
	Sat	2.25	2.00	2.00	1.00	1.00	0.75
Duke of Gloucester	Sun	4.25	4.00	3.00	2.00	1.75	1.00
	Mon	4.75	4.50	3.00	2.00	2.00	1.00
	Tue	5.00	4.20	3.00	2.00	2.00	1.00
	Wed	5.00	4.00	3.00	2.00	2.00	1.00
	Thu	5.00	4.50	3.00	2.00	2.00	1.00
	Fri	5.00	4.25	3.00	2.00	1.75	1.00
	Sat	4.75	3.75	3.00	2.00	1.75	1.00
Coxen & Adolescent Unit	Sun	5.75	5.00	4.00	1.00	0.75	1.00
	Mon	8.00	7.00	4.75	2.75	2.00	0.75
	Tue	7.00	7.00	4.60	3.20	1.80	1.00
	Wed	8.00	7.80	4.80	3.20	1.80	1.00
	Thu	7.50	7.50	4.75	3.50	1.50	1.25
	Fri	6.50	6.00	4.25	3.00	2.25	0.75
	Sat	5.75	5.75	4.25	1.25	1.25	0.75
Jubilee Rehabilitation Centre	Sun	2.00	1.50	2.00	1.00	0.50	1.00
	Mon	3.33	2.33	2.00	1.00	1.00	1.00
	Tue	3.20	2.20	2.00	1.20	1.00	1.00
	Wed	3.00	2.25	2.00	1.00	1.00	1.00
	Thu	3.75	2.00	2.00	1.25	0.67	1.00
	Fri	3.00	2.00	2.00	1.33	0.67	1.00
	Sat	2.00	1.50	2.00	1.00	0.50	1.00
Alan Bray Unit (Intensive Care)	Sun	6.50	6.50	5.75	0.00	0.00	0.00
	Mon	7.50	7.50	7.75	0.75	0.75	0.00
	Tue	9.80	9.80	8.80	1.60	1.60	0.00
	Wed	7.25	7.25	6.75	1.00	1.00	0.00
	Thu	6.75	6.75	6.50	0.75	0.75	0.00
	Fri	7.00	7.00	7.25	1.00	1.00	0.00
	Sat	6.50	6.50	5.75	0.00	0.00	0.00

Ward/Dept WTE and Vacancies

Ward	WTE	Nursing Vacancies	
		Registered (RN, Band 5-8b)	Un-Registered (Band 2-4)
Spinal Cord Injury Centre	49.1	2.78	2.52
Angus McKinnon Ward	25.93	1.37	0
Short-Stay Unit (Jackson Burrows Ward & The Coleman unit)	50.33	3.5	-0.22
Margaret Harte Ward	24.64	0.4	0.02
Ward 4	30.81	2.77	1.63
Duke of Gloucester	31.82	1.49	3.48
Private Patients Unit (Ian Monro Ward & Phillip Newman Ward)	28.16	4.71	1
Alan Bray Unit (Intensive Care)	64.34	7.04	1.29
Recovery	26.2	1.38	0
Jubilee Rehabilitation Centre	12.8	2	0
Coxen & Adolescent Unit	38.95	0.59	1.27
Plaster Theatre	9.18	1.16	0.38
Outpatients (Stanmore)	17.65	2.55	0.01
Outpatients (Bolsover Street)	16.49	0	1
Pre-Operative Assessment	12.27	0	0
Total	438.67	31.74	12.38

Inpatient Ward Bank Usage

Ward	total number of filled bank shifts*		
	Registered	non-Registered	total
Spinal Cord Injury Centre	22	128	150
Angus McKinnon Ward	16	18	34
Short-Stay Unit (Jackson Burrows Ward & The Coleman unit)	143	57	200
Margaret Harte Ward	51	18	69
Ward 4	43	3	46
Private Patients Unit (Ian Monro Ward & Phillip Newman Ward)	109	39	148
Duke of Gloucester	35	33	68
Coxen & Adolescent Unit	46	2	48
Jubilee Rehabilitation Centre	28	14	42
Alan Bray Unit (Intensive Care)	69	0	69
total	562	312	874

*this includes all shifts undertaken, it does not factor in shift duration (e.g. long days)