

Royal National Orthopaedic Hospital NHS Trust

Trust Board Meeting - Executive Summary

Report Title:	December Staffing Report (Hard Truths Commitment)
Author:	Karen Mannion, Project Nurse / lead for Implementation of safe staffing Tool
Lead Director:	Professor Paul Fish, Director of Nursing
Date of Meeting:	
Purpose:	For Noting
Please state the Board Committee that has considered this paper:	
Supporting Documents (these may be emailed separately from the Executive summary):	<ul style="list-style-type: none"> i. XXXX ii. XXXX

a. Recommendation

For information only

b. Executive Summary

This paper is presented to the Board following publication of 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 (Nursing Quality Board, 2013).

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.

Care hours per patient day (CHPPD) will be collected monthly from May 2016.

There were ten reported incidents relating to ‘staffing levels’ filed by the inpatient wards during December 2017.

The planned vs actual staffing levels is still within safe limits, at 97.59%

Organisational Objectives to support Strategic Aims

(Please indicate which Organisational Objective(s) this paper relates to)

1	Maintain clinical excellence and high quality care for patients	x
2	Provide more timely access to care	
3	To recruit, develop and retain highly skilled and engaged staff who embrace and deliver the Trust's aims and values	
4	Meet in-year milestones for enabling projects for new Stanmore site redevelopment	
5	Develop Digital Strategy in support of the Trust's aims and objectives	
6	Maintain financial control and achieve agreed activity levels	
7	Increase income from non-NHS sources in line with strategic aims	
8	Continue to develop relationships and partnerships to help achieve Trust vision	
9	Further develop financially viable integrated clinical research activities and academic track record	

1.0 Introduction

The Nursing Quality Board (*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. 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 and Care hours per patient day. Adult and paediatric in-patient units only are reported in the data, which is uploaded monthly via UNIFY.
- 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

1.2 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.

- 1.3 This report and the details within it can be found on the Trust website, and also via the NHS Choices page (Stanmore site). The detail from the recent in-depth establishment review is contained in the report '*6 Monthly Staffing Capacity and Capability Report (Hard Truths Commitment)*' which will be presented at the December 2017 Trust Board.
- 1.4 This report has been compiled using the information provided by the wards in real-time. The Intranet (Grapevine) supported staffing tool has been launched and has been in use since 1st October 2014. For transparency, all staff with access to the Grapevine are able to review the staffing levels, though permission is required to input data. An Insight report has been generated to present the data in the same format as the UNIFY upload.

2.0 Summary

- 2.1 An E-Rostering and Safe care is currently being implemented across the inpatient wards.
- 2.2 The planned vs actual staffing levels is still within safe limits, at 97.59%
- 2.3 In November all adult wards (excluding Alan Bray Unit) undertook a quarterly acuity reviews using the NICE recommended Safer Nursing Care Tool (SNCT). The tool has not been ratified for use in I.T.U / H.D.U or Paediatrics and therefore these areas were excluded from this review. The information from this review will be reported to the board at a later date.

3.0 Quality Impact of Staffing

- 3.1 There were ten reports of staffing issues filed by the inpatient wards during December 2017.
 - Two reports from Alan Bray unit that they were unable to transfer a patient back to the ADU due to short staff on the ward. On investigation it was found that staffing was in normal range on the first incident, the second incident is currently being investigated by the senior nursing team.
 - One incident report from Alan Bray unit of a delayed patient discharge back to ward due to shortness of staff on the SCIC, patient kept in ABU overnight and discharged to the ward the next day.
 - One report of shortness of staff on Ian Monro ward, on investigation it was found to be within safe limits with a ratio of 1:3.5 (RN:Patient) Not including the band 6 Nurse in charge.

- One report from Duke of Gloucester of the kitchen domestic not arriving on ward this impacted on nursing time and delayed the administration of medication that was required with food.
- One report from Coxon/ ADU of a large number of high acuity spinal patients (12) with 3 Registered Nurses (RN) (one nurse in charge, one junior nurse and one agency nurse) in the morning and 3 RN on the late, due to the acuity of the patients and only one nurse being able to single check medication, all medications had to be double checked impacting on the nursing time. Ward staff identified that in addition to this they felt “pressurised to except a patient from CHDU” This is currently being investigated by the senior nursing team.
- One report from AMU of two HCA shifts being unfilled delaying patient washes and bowel care. , Staff unable to take break, Nurse in charge allocated patients, DHON informed. This is currently under investigation by the senior nursing team.
- One report from theatre of a delay due to late arrival of patient to theatres due to shortage of staff on Coxon / ADU resulting in a delay in giving pre-operative medication. This is currently being investigated by the senior nursing team.
- One report from DOG ward of shortage of staff due to short notice sickness, agency nurse booked but did not attend. 21 patients including 2 confused patients. Support obtained from Alan Bray ward. This is currently under investigation by the DHON.
- One report from SCIC of short notice sickness resulting in 2 Registered nurses with 22 patients on the early and 17 patients on the late (2 discharged, 3 on weekend leave). On investigation it was found that temporary cover for a registered nurse was unavailable and an additional HCA was found in their place.

4.0 Vacancies and list of current recruitment activity

- 4.1 International Recruitment: The first nurse from the international recruitment process has now arrived in the trust from the Philippines and is undertaking the Trust induction programme.
- 4.2 A full update on the Nursing recruitment will be given in next month’s report.

5.0 Care Hours Per Patient Day

- 5.1 The Lord Carter Review highlighted the importance of ensuring that workforce and financial plans are consistent in order to optimise deliver of clinical quality and use of resources. The review recommended that Care hours per patient day (CHPPD) is collected monthly - beginning in April 2016.
- 5.2 The CHPPD approach to recording and reporting builds upon the Nursing Hour per Patient Day (NHPPD) practice we have seen in Western Australia, New Zealand, and the US, where local senior leaders have greater control and flexibility in deploying staff, with greater effectiveness. This has also demonstrated improvements in quality and patient outcomes.
- 5.3 CHPPD are calculated by taking the actual hours worked (split into registered nurses/midwives and healthcare support workers) divided by the number of patients at midnight this is shown in table nine.

Table 1: Care Hours for Patient Day – December 2017

	Care Hours Per Patient Day (CHPPD)			
	Cumulative count over the month of patients at 23:59 each day	Registered midwives/ nurses	Care Staff	Overall
Adolescent/Coxen Ward	300	10.2	3.9	14.0
Alan Bray Unit	226	15.5	0.3	15.7
Angus McKinnon Unit	255	6.8	3.6	10.4
Duke of Gloucester	499	5.7	2.9	8.6
Ian Monro Ward	51	14.1	4.3	18.4
Margaret Harte Ward	310	7.5	3.9	11.5
Phillip Newman Ward	120	15.0	4.3	19.3
Rehabilitation Unit	125	6.2	3.2	9.4
Short Stay Unit	403	8.4	4.3	12.7
Spinal Unit	588	5.6	4.9	10.5
Ward 4	340	7.5	3.3	10.8

- 5.4 Ian Monro ward have a higher CHPPD at 23:59 (18.4) compared to the CHPPD of 13.2 using the bed occupancy at 15:00 this is due to the number of day case patients and the ward closing overnight, this figure is also higher in comparison to the other clinical areas due to the lower number of patient attendance. Table 2 shows the CHPPD using the bed occupancy at 15:00.

5.5 The CHPPD does not reflect the throughput of patients during the day particularly SSU, and the Paediatric unit.

Table 7: Care Hours for Patient Day at 15:00 – December 2017

	Care Hours Per Patient Day (CHPPD) 15:00			
	Cumulative count over the month of patients at 15:00 each day	Registered midwives/ nurses	Care Staff	Overall
Adolescent/Coxen Ward	401	7.6	2.9	10.5
Alan Bray Unit	172	20.3	0.3	20.7
Angus McKinnon Unit	267	6.5	3.5	10.0
Duke of Gloucester	551	5.2	2.6	7.7
Ian Monro Ward	71	10.1	3.1	13.2
Margaret Harte Ward	336	7.0	3.6	10.6
Phillip Newman Ward	148	12.2	3.5	15.7
Rehabilitation Unit	133	5.8	3.0	8.8
Short Stay Unit	415	8.2	4.2	12.4
Spinal Unit	588	5.6	4.9	10.5
Ward 4	392	6.5	2.9	9.3

6.0 Percentage Qualified

6.1 Table 8 shows the percentage of registered staff for the past three months.

Table 8: Qualified staff as percentage of total

Ward	Oct-17	Nov-17	Current Month	Average
Adolescent/Coxen Ward	73.92%	73.95%	72.42%	73.43%
Alan Bray Unit	94.92%	95.05%	98.37%	96.11%
Angus McKinnon Unit	64.84%	65.40%	65.30%	65.18%
Duke of Gloucester	64.00%	66.77%	66.67%	65.81%
Margaret Harte Ward	65.40%	67.33%	65.69%	66.14%
Private Patient Unit	73.56%	78.65%	77.42%	76.54%
Rehabilitation Unit	67.19%	67.75%	65.97%	66.97%
Short Stay Unit	66.79%	68.59%	66.37%	67.25%
Spinal Unit	50.21%	50.50%	52.99%	51.23%
Ward 4	68.42%	70.46%	69.45%	69.45%

Key		
55%	-	64%

Report compiled by: Karen Mannion; Project Nurse /Lead for Implementation of Safe Staffing Tool and

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Date 11/1/18

Appendix 1:

Table 3: % Fill rates by ward, month, and shift and staff group

Shift	Oct-17				Nov-17				Current Month			
	Day		Night		Day		Night		Day		Night	
	Average fill rate - registered nurses (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses (%)	Average fill rate - care staff (%)
Ward												
Adolescent/Coxen Ward	91.4%	94.5%	93.9%	100.0%	94.9%	91.4%	99.1%	97.9%	91.1%	93.9%	97.5%	100.0%
Alan Bray Unit	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	0.0%	100.0%	100.0%	100.0%	0.0%
Angus McKinnon Unit	99.2%	100.0%	100.0%	100.0%	93.9%	91.4%	100.0%	100.0%	94.3%	89.0%	100.0%	100.0%
Duke of Gloucester	96.8%	92.6%	100.0%	100.0%	98.5%	93.1%	100.0%	100.0%	100.0%	98.4%	100.0%	100.0%
Ian Monro Ward	100.0%	97.1%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	99.8%	101.5%	100.0%	100.0%
Margaret Harte Ward	99.3%	91.3%	100.0%	100.0%	97.8%	98.9%	100.0%	100.0%	96.5%	97.0%	100.0%	100.0%
Phillip Newman Ward	100.0%	100.0%	100.0%	100.0%	100.0%	80.0%	100.0%	66.7%	97.9%	96.2%	100.0%	100.0%
Rehabilitation Unit	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Short Stay Unit	96.4%	98.9%	100.0%	100.0%	100.0%	98.9%	100.0%	100.0%	98.8%	100.0%	100.0%	100.0%
Spinal Unit	98.2%	100.3%	98.9%	98.8%	94.7%	96.2%	100.0%	97.8%	94.8%	96.0%	100.0%	94.4%
Ward 4	95.4%	96.9%	98.9%	100.0%	94.0%	100.0%	100.0%	100.0%	98.4%	96.7%	96.4%	100.0%

Non Required	<80%	80-90%	90-100%	>100%
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Appendix 2

Table 4: Detail of hours planned and worked December 2017

Ward name	Specialty 1	Registered midwives/nurses		Care Staff		Registered midwives/nurses		Care Staff		Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Cumulative count over the month of patients at 23:59 each day	Registered midwives/ nurses	Care Staff	Overall
		Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours								
Adolescent/Coxen Ward	171 - PAEDIATRIC SURGERY	2,259.5	2,059.0	797	748	1,012.5	987.5	412.5	412.5	91.1%	93.9%	97.5%	100.0%	300	10.2	3.9	14.0
Alan Bray Unit	192 - CRITICAL CARE MEDICINE	1,870.0	1,870.0	58	58	1,625.0	1,625.0	0	0	100.0%	100.0%	100.0%	0.0%	226	15.5	0.3	15.7
Angus McKinnon Unit	110 - TRAUMA & ORTHOPAEDICS	1,103.7	1,040.7	781	695	696.0	696.0	228	228	94.3%	89.0%	100.0%	100.0%	255	6.8	3.6	10.4
Duke of Gloucester	110 - TRAUMA & ORTHOPAEDICS	1,733.5	1,733.5	785.5	773	1,112.5	1,112.5	650	650	100.0%	98.4%	100.0%	100.0%	499	5.7	2.9	8.6
Ian Monro Ward	110 - TRAUMA & ORTHOPAEDICS	417.5	418.5	135	133	300.0	300.0	87.5	87.5	99.8%	101.5%	100.0%	100.0%	51	14.1	4.3	18.4
Margaret Harte Ward	110 - TRAUMA & ORTHOPAEDICS	1,333.0	1,286.5	768.5	745.5	1,050.0	1,050.0	475	475	96.5%	97.0%	100.0%	100.0%	310	7.5	3.9	11.5
Phillip Newman Ward	110 - TRAUMA & ORTHOPAEDICS	961.0	940.5	327.5	315	862.5	862.5	200	200	97.9%	96.2%	100.0%	100.0%	120	15.0	4.3	19.3
Rehabilitation Unit	314 - REHABILITATION	487.6	487.6	280	280	288.0	288.0	120	120	100.0%	100.0%	100.0%	100.0%	125	6.2	3.2	9.4
Short Stay Unit	110 - TRAUMA & ORTHOPAEDICS	2,190.5	2,191.0	1137	1137	1,212.5	1,212.5	587.5	587.5	98.8%	100.0%	100.0%	100.0%	403	8.4	4.3	12.7
Spinal Unit	110 - TRAUMA & ORTHOPAEDICS	2,246.0	2,130.0	1972	1893	1,140.0	1,140.0	1068	1008	94.8%	96.0%	100.0%	94.4%	588	5.6	4.9	10.5
Ward 4	110 - TRAUMA & ORTHOPAEDICS	1,554.5	1,529.5	755.5	730.5	1,050.0	1,012.5	387.5	387.5	98.4%	96.7%	96.4%	100.0%	340	7.5	3.3	10.8