

**Royal National Orthopaedic Hospital NHS Trust**

**Trust Board Meeting - Executive Summary**

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

**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 five reported incidents relating to 'staffing levels' filed by the inpatient wards during March.

The planned vs actual staffing levels is still within safe limits, at 98.37%

## **Organisational Objectives to support Strategic Aims**

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

<b>1</b>	Maintain clinical excellence and high quality care for patients	<b>x</b>
<b>2</b>	Provide more timely access to care	
<b>3</b>	To recruit, develop and retain highly skilled and engaged staff who embrace and deliver the Trust's aims and values	
<b>4</b>	Meet in-year milestones for enabling projects for new Stanmore site redevelopment	
<b>5</b>	Develop Digital Strategy in support of the Trust's aims and objectives	
<b>6</b>	Maintain financial control and achieve agreed activity levels	
<b>7</b>	Increase income from non-NHS sources in line with strategic aims	
<b>8</b>	Continue to develop relationships and partnerships to help achieve Trust vision	
<b>9</b>	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 1<sup>st</sup> 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 E-Rostering and 'safe care' has been rolled out across the wards.
- 2.2 The planned vs actual staffing levels is still within safe limits, at 98.37%

## 3.0 Quality Impact of Staffing

There were three reports of staffing issues filed during April 2018

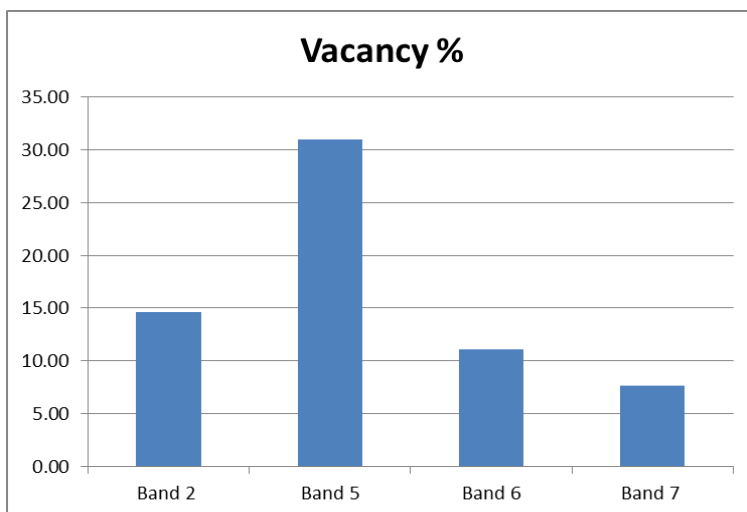
- One report from paediatrics of insufficient porters available affecting the planned move from the Short stay wards back to Coxon ward following a planned closure of the ward over the bank holiday period.
- One report from recovery of a delay in transferring a patient back to Coxon ward. The recovery nurse transferred the patient to the ward but had to wait 20 minutes to hand over as ward staff busy.
- One report from Recovery of the Short stay unit being unable to collect a patient from recovery. When the DHON was contact they were informed that there was sufficient staff on the ward to collect the patient. Recovery waited over an hour for the patient to be collected.

#### 4.0 Vacancies and list of current recruitment activity

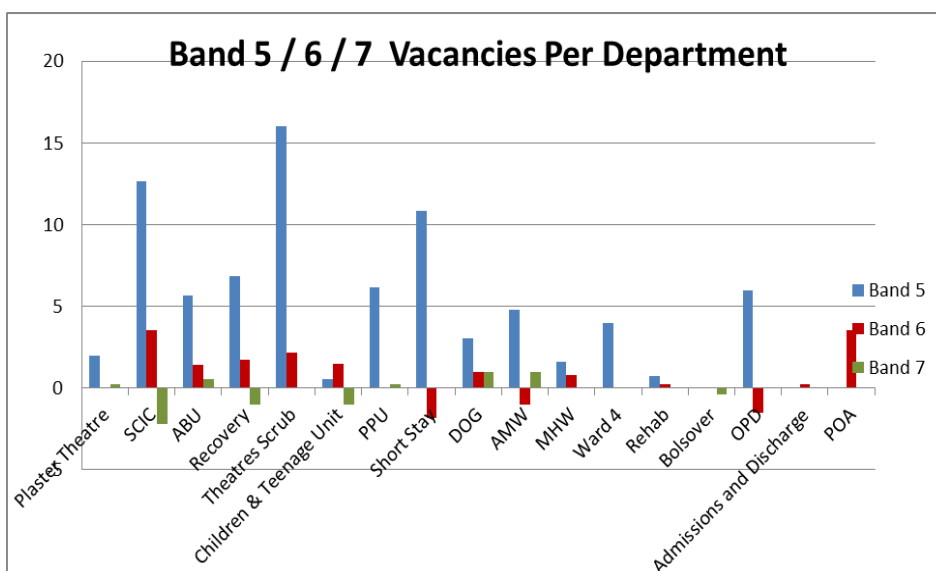
4.1 There continue to be a number of wards and departments that have pressure in relation to recruitment and retention. These pressures are being experienced nationally and have resulted in the migration advisory committee making a recommendation on 15<sup>th</sup> October to place nursing on the home office shortage occupation list.

4.2 Theatres, paediatrics, outpatients (paediatrics) and Spinal Cord Injury Centre ward have vacancy levels which are driving high numbers of temporary staff use.

**Table 1: Vacancies per Grade (WTE)**



**Table 2 Band 5-7 Vacancies per Department.**



- 4.3 In relation to band 5 posts, which are of primary concern in relation to safe staffing there is currently a 30.95% (WTE 80.82) vacancies in the Trust. There are currently 2 WTE Band 5 Nurses going through pre-employment checks and 2 WTE given a start date.
- 4.4 Band 6 vacancies are currently at 11.11% (11.69 WTE).
- 4.5 Band 7 vacancies are currently at 7.67% (2.40 WTE). The Senior Nursing team are currently running a leadership programme that will support nurses to develop their leadership skills and give them the skills to enable them to become the ward leaders of the future.

Information obtained from Finance & Recruitment team 23/4/18

- 4.6 International Recruitment: One nurse started with the trust in January 2018. One nurse has recently passed the first level of the NMC registration process and the trust has applied for her visa and subject to this being approved, two further nurses are likely to be withdrawn. The remaining nurses have all now withdrawn.
- 4.7 A detailed recruitment and retention action plan is in place and is being coordinated jointly by the Director of Nursing and Associate Director of Workforce and OD.

## **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 3: Care Hours for Patient Day 23:59 – April 2018**

	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	366	8.9	3.1	12.0
Alan Bray Unit	186	26.1	0.9	27.1
Duke of Gloucester	472	5.7	2.8	8.5
Ian Monro Ward	179	8.2	3.7	11.9
Margaret Harte Ward	327	6.4	4.6	11.0
Phillip Newman Ward	72	14.6	4.5	19.1
Rehabilitation Unit	226	3.5	1.6	5.1
Short Stay Unit	404	7.0	3.7	10.7
Spinal Unit	796	4.6	4.6	9.1
Ward 4	391	6.3	2.9	9.2

- 5.4 The CHPPD does not reflect the throughput of patients during the day particularly SSU, and the Paediatric unit. Table 4 shows the CHPPD for 15:00

**Table 4 Care Hours for Patient Day 15:00 – April 2018**

	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	444	7.3	2.6	9.9
Alan Bray Unit	130	37.4	1.3	38.7
Duke of Gloucester	495	5.4	2.7	8.1
Ian Monro Ward	189	7.7	3.5	11.3
Margaret Harte Ward	346	6.0	4.4	10.4
Phillip Newman Ward	123	8.5	2.7	11.2
Rehabilitation Unit	254	3.1	1.4	4.5
Short Stay Unit	587	4.8	2.5	7.4
Spinal Unit	805	4.5	4.5	9.0
Ward 4	434	5.7	2.6	8.3

## 6.0 Percentage Qualified

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

**Table 5: Qualified staff as percentage of total**

Ward	Feb-18	Mar-18	Current Month	Average
Adolescent/Coxen Ward	75.50%	75.44%	73.99%	74.98%
Alan Bray Unit	97.19%	95.91%	96.52%	96.54%
Angus McKinnon Unit	Closed			
Duke of Gloucester	65.65%	67.52%	67.09%	66.75%
Margaret Harte Ward	61.89%	61.74%	58.00%	60.54%
Private Patient Unit	74.89%	72.38%	71.57%	72.95%
Rehabilitation Unit	67.91%	67.90%	67.96%	67.92%
Short Stay Unit	67.14%	65.11%	65.58%	65.94%
Spinal Unit	52.01%	50.44%	50.10%	50.85%
Ward 4	68.23%	67.78%	68.47%	68.16%

Key 55%	-	64%
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Report compiled by: Karen Mannion; Project Nurse /Lead for Implementation of Safe Staffing Tool and

Dr Julie-Anne Dowie, Deputy Director of Nursing/Head of Nursing on behalf of Professor Paul Fish, Director of Nursing

Date: 16/5/18

**Appendix 1:**

**Table 6: % Fill rates by ward, month, and shift and staff group**

Shift	Feb-18				Mar-18				Current Month			
	Day	Night	Day	Night	Day	Night	Day	Night	Day	Night	Day	Night
Ward	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 (%)
Adolescent/Coxen Ward	95.7%	95.5%	96.0%	97.4%	96.8%	100.0%	93.0%	96.4%	95.1%	95.9%	98.0%	100.0%
Alan Bray Unit	100.0%	100.0%	100.0%	0.0%	100.0%	100.0%	100.0%	0.0%	100.0%	100.0%	100.0%	0.0%
Angus McKinnon Unit	Ward Closed											
Duke of Gloucester	93.2%	100.0%	100.0%	100.0%	94.4%	95.1%	100.0%	100.0%	98.1%	97.1%	100.0%	100.0%
Ian Monro Ward	99.9%	96.2%	100.0%	100.0%	99.6%	100.0%	100.0%	100.0%	97.9%	96.6%	100.0%	100.0%
Margaret Harte Ward	96.9%	97.0%	100.0%	100.0%	90.0%	90.4%	100.0%	100.0%	93.5%	100.0%	100.0%	100.0%
Phillip Newman Ward	97.6%	95.3%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	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	97.5%	97.0%	100.0%	100.0%	98.2%	98.3%	100.0%	100.0%	98.7%	100.0%	100.0%	100.0%
Spinal Unit	98.9%	99.2%	100.0%	100.0%	95.2%	93.1%	100.0%	100.0%	97.6%	97.2%	100.0%	100.0%
Ward 4	94.0%	96.7%	100.0%	100.0%	91.8%	95.5%	98.9%	100.0%	91.0%	100.0%	100.0%	100.0%

<b>Non Required</b>	<80%	80-90%	90-100%	>100%
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## Appendix 2

### Table 7: Detail of hours planned and worked (April 2018)

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	2,118.5	2,028.0	809.5	776.5	1,237.5	1,212.5	362.5	362.5	95.1%	95.9%	98.0%	100.0%	366	8.9	3.1	12.0
Alan Bray Unit	192 - CRITICAL CARE MEDICINE	2,648.0	2,648.0	175	175	2,212.5	2,212.5	0	0	100.0%	100.0%	100.0%	0.0%	186	26.1	0.9	27.1
Angus McKinnon Unit	110 - TRAUMA & ORTHOPAEDICS																
Duke of Gloucester	110 - TRAUMA & ORTHOPAEDICS	1,651.0	1,632.5	626.5	603.5	1,050.0	1,050.0	712.5	712.5	98.1%	97.1%	100.0%	100.0%	472	5.7	2.8	8.5
Ian Monro Ward	110 - TRAUMA & ORTHOPAEDICS	743.5	734.5	369.5	357	725.0	725.0	312.5	312.5	97.9%	96.6%	100.0%	100.0%	179	8.2	3.7	11.9
Margaret Harte Ward	110 - TRAUMA & ORTHOPAEDICS	1,214.0	1,134.5	1009.5	1009.5	950.0	950.0	500	500	93.5%	100.0%	100.0%	100.0%	327	6.4	4.6	11.0
Phillip Newman Ward	110 - TRAUMA & ORTHOPAEDICS	625.5	625.5	290	290	425.0	425.0	37.5	37.5	100.0%	100.0%	100.0%	100.0%	72	14.6	4.5	19.1
Rehabilitation Unit	314 - REHABILITATION	444.4	444.4	200	200	336.0	336.0	168	168	100.0%	100.0%	100.0%	100.0%	226	3.5	1.6	5.1
Short Stay Unit	110 - TRAUMA & ORTHOPAEDICS	1,961.5	1,936.5	1039	1039	900.0	900.0	450	450	98.7%	100.0%	100.0%	100.0%	404	7.0	3.7	10.7
Spinal Unit	110 - TRAUMA & ORTHOPAEDICS	2,302.0	2,247.0	2248	2185	1,392.0	1,392.0	1440	1440	97.6%	97.2%	100.0%	100.0%	796	4.6	4.6	9.1
Ward 4	110 - TRAUMA & ORTHOPAEDICS	1,550.5	1,410.5	720.5	720.5	1,050.0	1,050.0	412.5	412.5	91.0%	100.0%	100.0%	100.0%	391	6.3	2.9	9.2