

## Royal National Orthopaedic Hospital NHS Trust

### Trust Board Meeting - Executive Summary

<b>Report Title:</b>	August 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 Seven reported incidents relating to 'staffing levels' filed by the inpatient wards during August.

The planned vs actual staffing levels is still within safe limits, at 96.76%

## **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 was presented at the December 2016 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 is currently being implemented within the Trust.
- 2.2 The planned vs actual staffing levels is still within safe limits, at 96.76%
- 2.3 All adult wards (excluding Alan Bray Unit) have recently undertaken the second of the 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 will be excluded from this review. A report will be presented to the board at a later date.

## 3.0 Quality Impact of Staffing

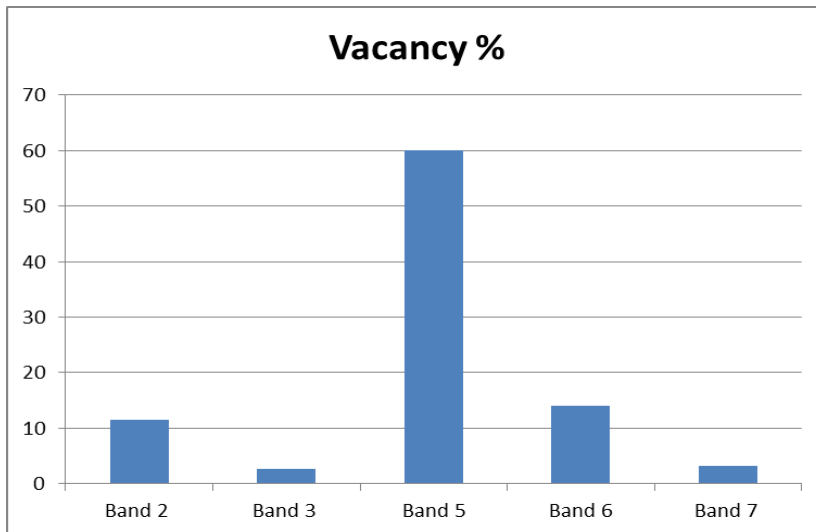
- 3.1 There were seven reports of staffing issues filed by the inpatient wards during August 2017. There was a total of three reports in total from SCIC relating to staffing.
  - One report from SCIC of a reduction on 1 RN resulting in 3RN & 1 HCA giving a ratio of 1:8.3 (RN : Patient). At the time of the incident the ward had 25 spinal injury patients 17 of these at risk of Autonomic Dysreflexia. This reduction in staffing impacted on patient care.
  - One report from SCIC of a reduction in 1 RN impacting on patient care. At the time of the incident there were 24 spinal injury patients 17 of these at risk of Autonomic Dysreflexia. 'Patients distressed due to the time it took to attend to their needs'.
  - One report of short notice sickness resulting in reduction in staffing impacting on patient care. Escalated to DHON, 1 HCA sent from AMU for 2 hours to help. Temporary staffing unable to cover. Ward commended for the ability to work well as a team, prioritise patient care and maintain patient safety.

- One report from DoG ward of a patient collapsing on the ward and staff having to return from their break to help support. On investigation the ward staffing was reduced due to an agency nurse not attending and 1RN and 1 HCA being sent on break at the same time. DHON discussed incident with RN in charge at the time of incident and understands the importance of escalation and better allocation of breaks.
- One report from Coxon ward of an agency nurse nonattendance resulting in reduced staffing. At the time of the incident the ward had high patient acuity. The staff felt unable to escalate to the site manager as previously they had asked for help and 'no help had been forthcoming'.
- One report from a physiotherapist relating to the competency of an Agency nurse on ABU. Following the concern being raised the care of the patient was delivered by another member of staff and the agency / temporary staffing department was informed of the incident.
- One report from AMU of concern for a Bank / Agency nurses competency. This is currently under investigation.

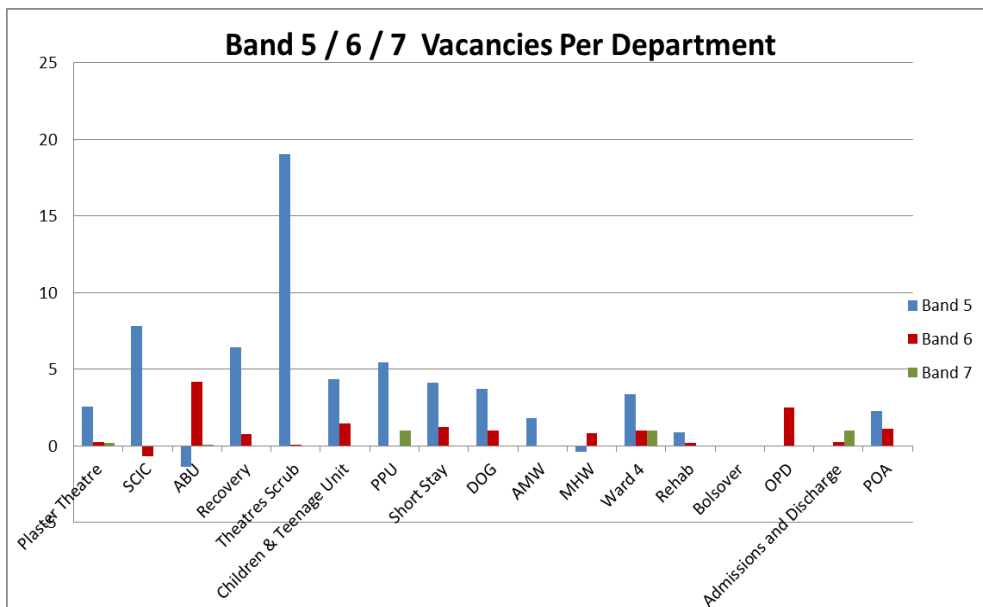
#### **4.0 Vacancies and list of current recruitment activity**

- 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, Duke of Gloucester, 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)**

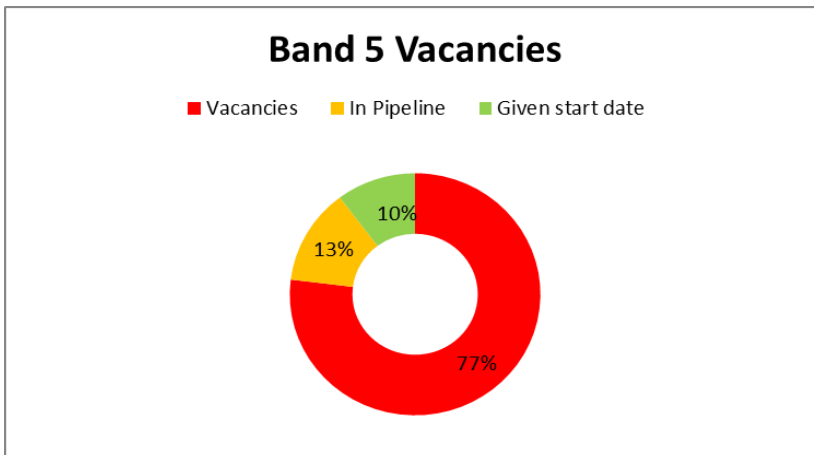


**Table 2 Band 5-7 Vacancies per Department.**

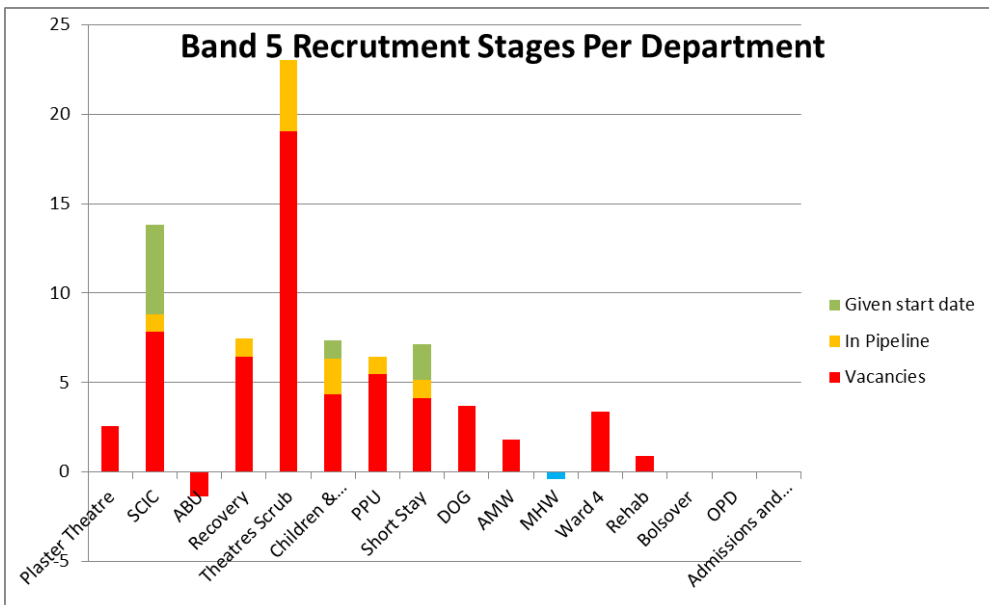


4.3 In relation to band 5 posts, which are of primary concern in relation to safe staffing there is currently a 23.38% (WTE 60.07) vacancies in the Trust. There are currently 10 WTE Band 5 Nurses going through pre-employment checks and 8 WTE given a start date. See table 3 & 4.

**Table 3: Band 5 Recruitment Stages**

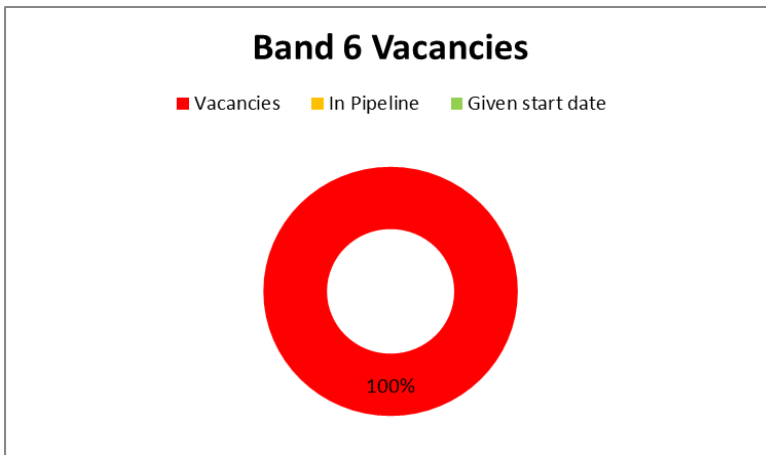


**Table 4: Band 5 Recruitment Stages per Department**

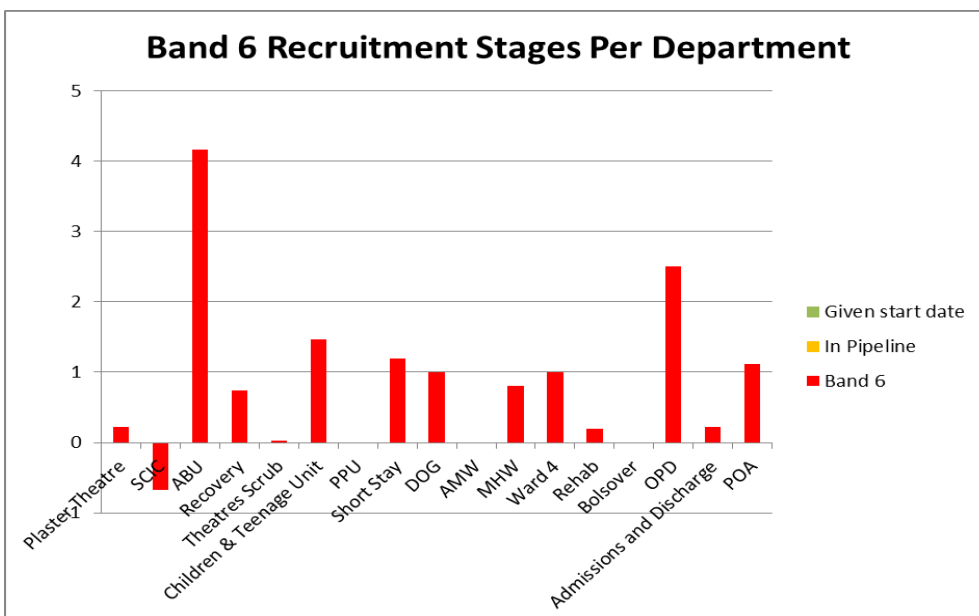


4.4 Band 6 vacancies are currently at 13.97% (14.29 WTE) this is an increase of 2.75% since December 2016 when the vacancy was 11.25% (See Table 5 & 6).

**Table 5: Band 6 Recruitment Stages**

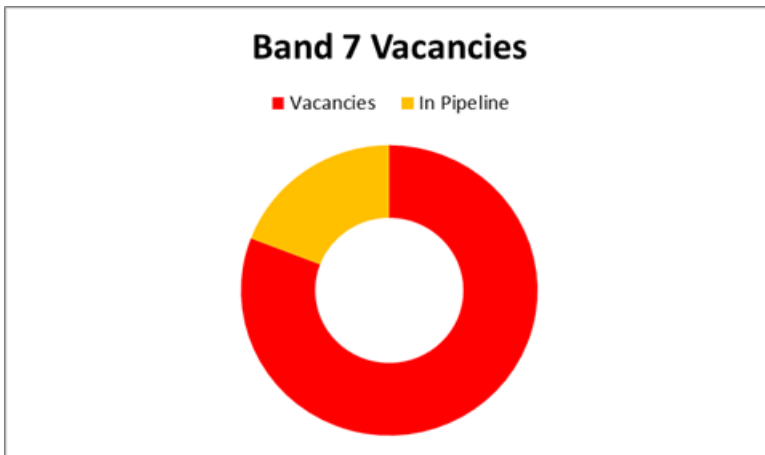


**Table 6: Band 6 Recruitment Stages per Department**

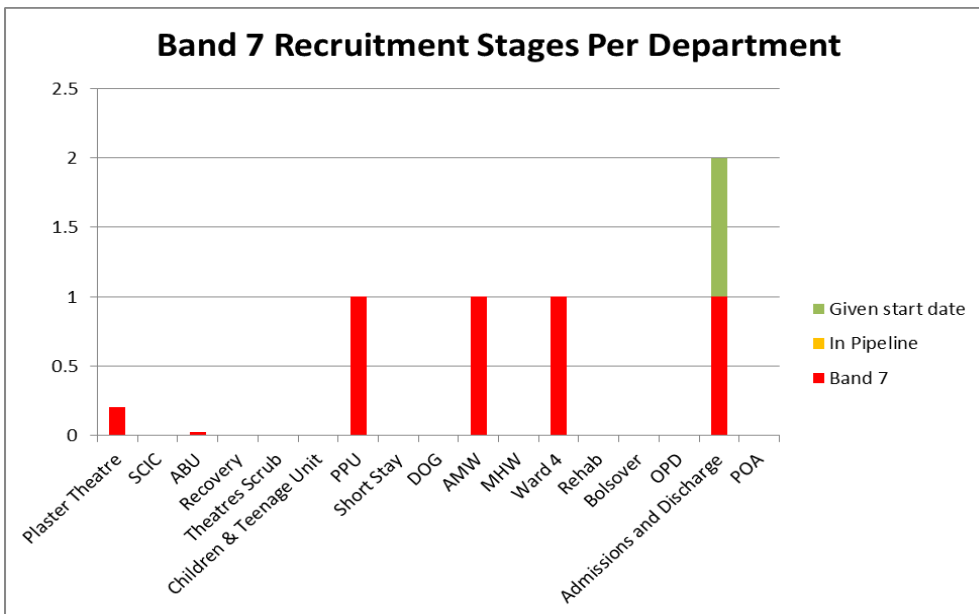


4.5 Band 7 vacancies are currently at 14.07% (4.22 WTE). The Senior Nursing team are currently developing a leadership programme that will support nurses to develop their leadership skills and give them the skills to enable them to become the ward leaders of the future.

**Table 7: Band 7 Recruitment Stages**



**Table 8: Band 7 Recruitment Stages per Department**



Information obtained from Finance & Recruitment team 28/8/17

- 4.6 International recruitment: 39 offers were made. 32 nurses have since withdrawn their application. The remaining candidates are currently going through the process to enable them to register with the NMC. 2 Nurses have passed their CBT and are currently awaiting confirmation from the NMC of registration.
- 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 - begun 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 9: Care Hours for Patient Day - June 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	364	9.8	3.5	13.3
Alan Bray Unit	202	17.8	0.7	18.5
Angus McKinnon Unit	255	7.4	3.8	11.2
Duke of Gloucester	551	4.9	3.1	8.0
Ian Monro Ward	151	10.4	4.7	15.0
Margaret Harte Ward	368	6.1	3.1	9.2
Phillip Newman Ward	43	17.8	4.2	22.0
Rehabilitation Unit	257	4.3	1.9	6.2
Short Stay Unit	553	6.8	3.8	10.6
Spinal Unit	733	4.3	3.4	7.8
Ward 4	360	7.3	3.1	10.4

- 5.4 Phillip Newman ward have a higher CHPPD at 23:59 (22.0) compared to the CHPPD of 10.5 using the bed occupancy at 15:00 this is due to the number of day case patients and the ward closing overnight. Table ten 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 10: Care Hours for Patient Day at 15:00 – June 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	439	8.1	2.9	11.0
Alan Bray Unit	151	23.8	0.9	24.8
Angus McKinnon Unit	274	6.9	3.5	10.4
Duke of Gloucester	594	4.6	2.8	7.4
Ian Monro Ward	173	9.1	4.1	13.1
Margaret Harte Ward	413	5.5	2.8	8.2
Phillip Newman Ward	90	8.5	2.0	10.5
Rehabilitation Unit	277	4.0	1.7	5.8
Short Stay Unit	734	5.1	2.9	8.0
Spinal Unit	737	4.3	3.4	7.7
Ward 4	436	6.0	2.6	8.6

## 6.0 Percentage Qualified

6.1 Table 11 shows the percentage of registered staff for the past three months.

**Table 11: Qualified staff as percentage of total**

Ward	June 17	July 17	Current Month	Average
Adolescent/Coxen Ward	73.97%	75.67%	73.83%	74.49%
Alan Bray Unit	93.90%	91.93%	96.23%	94.02%
Angus McKinnon Unit	66.57%	66.08%	66.47%	66.37%
Duke of Gloucester	61.63%	61.22%	61.68%	61.51%
Margaret Harte Ward	64.08%	65.19%	66.31%	65.20%
Private Patient Unit	72.18%	76.71%	72.47%	73.79%
Rehabilitation Unit	70.44%	66.90%	69.77%	69.03%
Short Stay Unit	68.47%	72.11%	63.98%	68.19%
Spinal Unit	55.09%	54.35%	55.84%	55.10%
Ward 4	71.12%	70.39%	69.92%	70.47%

Key		
55%	-	64%

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: 12/09/17

**Appendix 1:**

**Table 12: % Fill rates by ward, month, and shift and staff group**

Month	Jun-17				Jul-17				Current Month			
Shift	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	95.8%	96.8%	98.0%	100.0%	97.6%	97.6%	100.0%	100.0%	91.7%	99.9%	99.0%	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	92.7%	94.4%	100.0%	100.0%	94.6%	91.9%	100.0%	100.0%	92.3%	89.1%	100.0%	96.6%
Duke of Gloucester	97.0%	88.8%	100.0%	100.0%	98.6%	92.2%	100.0%	100.0%	92.2%	90.8%	96.7%	100.0%
Ian Monro Ward	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Margaret Harte Ward	98.8%	98.5%	100.0%	100.0%	92.4%	98.4%	100.0%	100.0%	94.7%	98.2%	100.0%	100.0%
Phillip Newman Ward	98.8%	111.9%	100.0%	0.0%	99.1%	102.5%	100.0%	100.0%	100.0%	100.0%	100.0%	0.0%
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	97.7%	94.2%	100.0%	100.0%	96.8%	95.1%	100.0%	100.0%	95.9%	96.5%	100.0%	100.0%
Spinal Unit	99.2%	97.6%	100.0%	98.9%	97.0%	98.7%	99.2%	100.0%	95.8%	97.8%	99.1%	96.5%
Ward 4	98.4%	97.2%	100.0%	100.0%	99.5%	100.0%	100.0%	100.0%	93.8%	96.8%	97.7%	100.0%



## Appendix 2

**Table 13: Detail of hours planned and worked (August 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	2,503.5	2,308.5	831.5	816	1,275.0	1,262.5	450	450	91.7%	99.9%	99.0%	100.0%	364	9.8	3.5	13.3
Alan Bray Unit	192 - CRITICAL CARE MEDICINE	1,823.0	1,823.0	141	141	1,775.0	1,775.0	0	0	100.0%	100.0%	100.0%	0.0%	202	17.8	0.7	18.5
Angus McKinnon Unit	110 - TRAUMA & ORTHOPAEDICS	1,128.7	1,047.7	698.1	622.1	852.0	852.0	348	336	92.3%	89.1%	100.0%	96.6%	255	7.4	3.8	11.2
Duke of Gloucester	110 - TRAUMA & ORTHOPAEDICS	1,763.5	1,626.0	1085.5	985.5	1,125.0	1,087.5	700	700	92.2%	90.8%	96.7%	100.0%	551	4.9	3.1	8.0
Ian Monro Ward	110 - TRAUMA & ORTHOPAEDICS	791.0	791.0	341	341	775.0	775.0	362.5	362.5	100.0%	100.0%	100.0%	100.0%	151	10.4	4.7	15.0
Margaret Harte Ward	110 - TRAUMA & ORTHOPAEDICS	1,336.0	1,265.5	707	694.5	987.5	987.5	450	450	94.7%	98.2%	100.0%	100.0%	368	6.1	3.1	9.2
Phillip Newman Ward	110 - TRAUMA & ORTHOPAEDICS	465.5	465.5	182	182	300.0	300.0	0	0	100.0%	100.0%	100.0%	0.0%	43	17.8	4.2	22.0
Rehabilitation Unit	314 - REHABILITATION	684.8	684.8	280	280	432.0	432.0	204	204	100.0%	100.0%	100.0%	100.0%	257	4.3	1.9	6.2
Short Stay Unit	110 - TRAUMA & ORTHOPAEDICS	2,583.5	2,493.0	1510.5	1457	1,250.0	1,250.0	650	650	95.9%	96.5%	100.0%	100.0%	553	6.8	3.8	10.6
Spinal Unit	110 - TRAUMA & ORTHOPAEDICS	1,931.0	1,850.0	1566	1532	1,344.0	1,332.0	1020	984	95.8%	97.8%	99.1%	96.5%	733	4.3	3.4	7.8
Ward 4	110 - TRAUMA & ORTHOPAEDICS	1,669.5	1,566.0	781	756	1,087.5	1,062.5	375	375	93.8%	96.8%	97.7%	100.0%	360	7.3	3.1	10.4