

Royal National Orthopaedic Hospital NHS Trust

Trust Board Meeting - Executive Summary

Report Title:	January 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 seven reported incidents relating to 'staffing levels' filed by the inpatient wards during January.

The planned vs actual staffing levels is still within safe limits, at 98.62%

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 implementation plan is currently under development.
- 2.2 The planned vs actual staffing levels is still within safe limits, at 98.62%
- 2.3 In November 2017 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

There were seven reports of staffing issues filed by the inpatient wards during January 2017

- One report from Phillip Newman Ward of reduced staffing numbers due to confusion at the morning site manager hand over meeting, subsequently a consultant clinic had to be cancelled.
- One report from DoG of no nurse's on the night shift being competent to administer antibiotics via a PICC line, the medication was administered by a senior nurse from another department. .
- One from Jackson Burrows ward of the unit being short staffed and staffing feeling under pressure.
- One report from Margaret Harte ward of an agency nurse being sent home from a night shift due to ill health and the site manger being unable to cover with another nurse.

- One report from Private patient unit of only one nurse on the unit, on investigation it was found that the site manager had arranged for the ward to be covered but this nurse had subsequently gone off sick, resulting in 1 RN and 1 HCA caring for 4 patients (ratio of 1:4) with the sister unit supporting.
- Two reports from CHDU of them being unable to transfer patient's that were ready for transfer, back to Coxon ward, due to reduced staffing on the ward.

There was an additional 23 reports from Recovery of the ward staffing affecting the care they can deliver.

- There were eleven reports from recovery that Jackson Burrows ward and the Colman unit was unable to collect patient from recovery due to shortness of staff on unit. Staff have been reminded to liaise with the opposite unit to ensure that collection from recovery can be prioritised.
- There was one report from recovery that ward 4 was unable to collect their patient from recovery, on investigation it was found that there was two nurses on the ward and they had recently received two patient from HDU therefore it would have been unsafe to have left one nurse on the ward.
- Three reports from recovery that there was no nurse available from the Children's ward to collect patients due to short staffing on the ward. Patients were transferred to the ward by the recovery staff leaving recovery with reduced staffing.
- A further eight reports from recovery of the ward reporting that they were unable to collect patient due to shortness of staff on ward. These are currently under investigation by senior nursing staff.

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 15th 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)

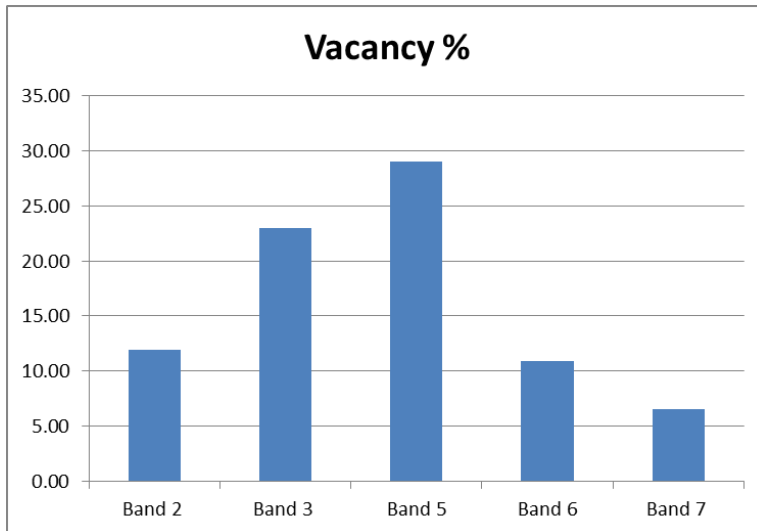
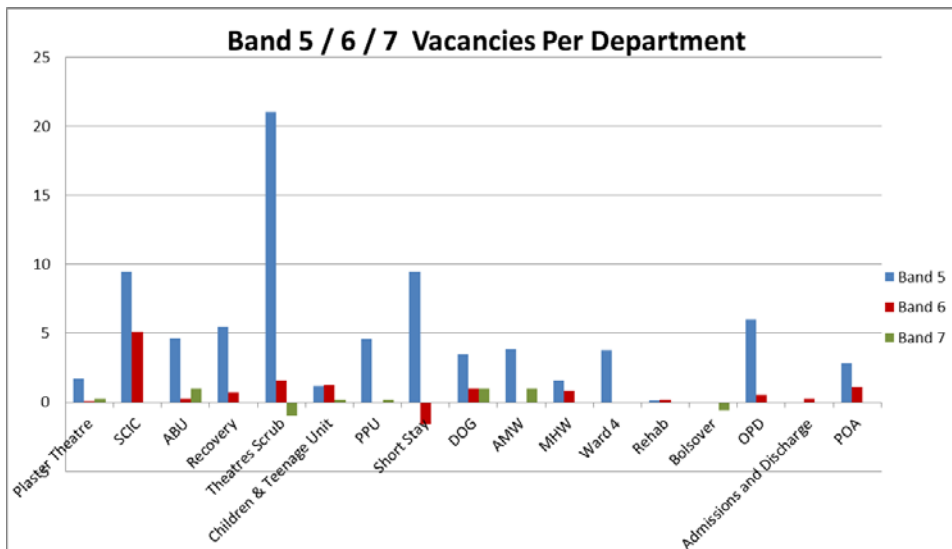
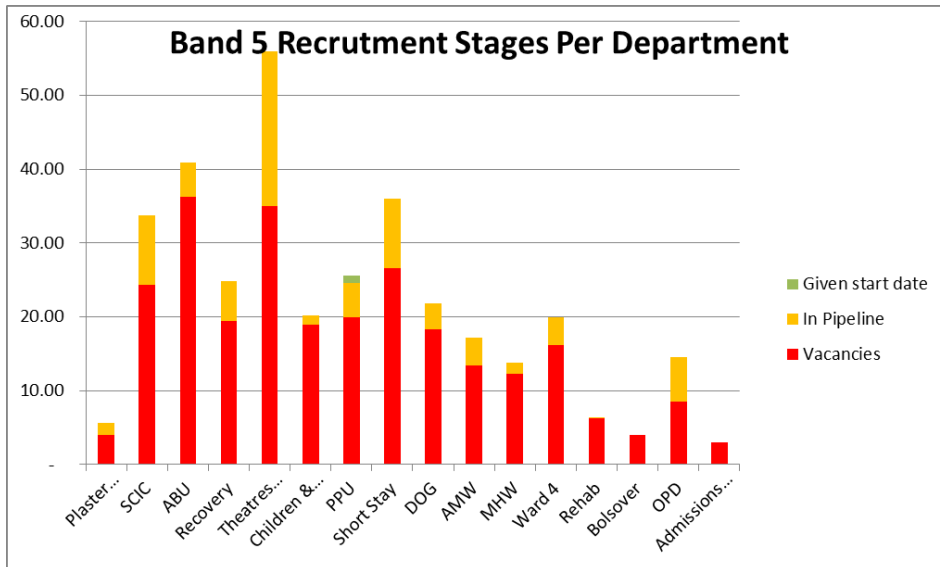


Table 2 Band 5-7 Vacancies per Department.



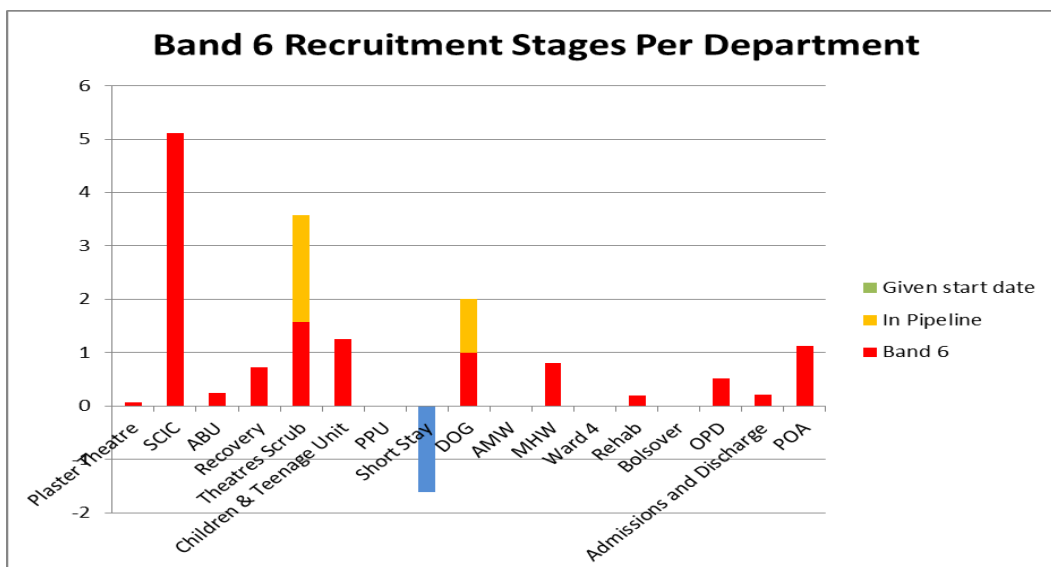
4.3 In relation to band 5 posts, which are of primary concern in relation to safe staffing there is currently a 29.07% (WTE 78.95) vacancies in the Trust. This is an increase of 5.7% (18.92 WTE) since September 2017. There are currently 2 WTE Band 5 Nurses going through pre-employment checks and 1 WTE given a start date.

Table 3: Band 5 Recruitment Stages per Department



4.4 Band 6 vacancies are currently at 10.91% (11.22 WTE) this is a reduction of 6.88% since April 2017 when the vacancy was 17.79% (See Table 4).

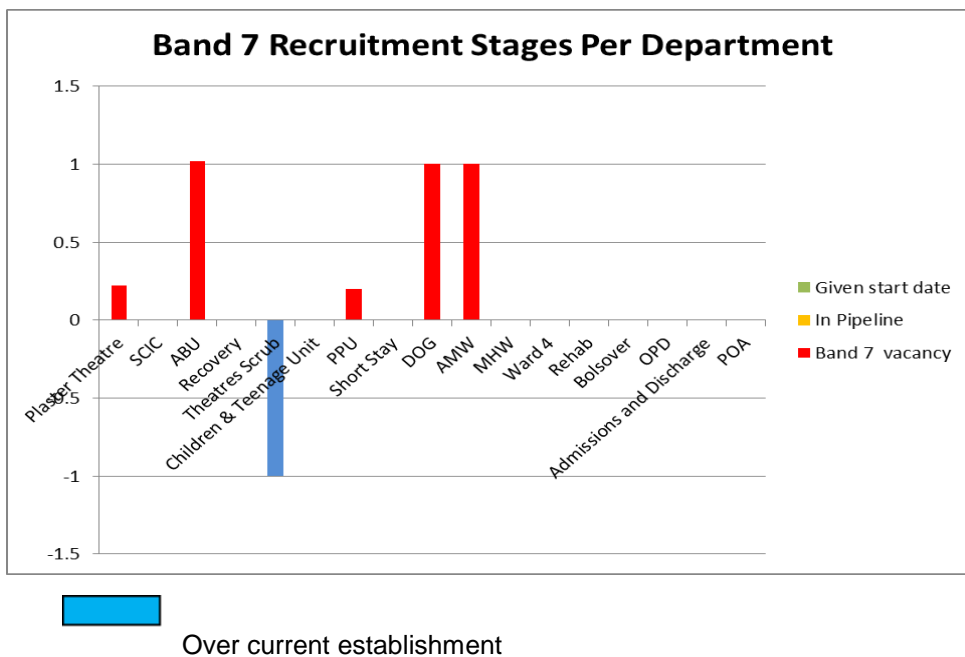
Table 4: Band 6 Recruitment Stages per Department



Over current establishment

4.5 Band 7 vacancies are currently at 6.52% (2.04 WTE). This is a reduction in 8.8% (2.6 WTE) since September 2017. 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 5: Band 7 Recruitment Stages per Department



Information obtained from Finance & Recruitment team 15/1/17

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, it is hoped that she will commence with the trust in April 2018, 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 6: Care Hours for Patient Day – January 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	306	11.8	3.9	15.6
Alan Bray Unit	285	15.6	0.9	16.5
Angus McKinnon Unit				
Duke of Gloucester	518	6.1	2.9	9.0
Ian Monro Ward	127	9.0	4.1	13.1
Margaret Harte Ward	367	6.3	4.1	10.4
Phillip Newman Ward	86	13.4	4.1	17.4
Rehabilitation Unit	269	3.9	1.9	5.7
Short Stay Unit	339	10.0	4.6	14.6
Spinal Unit	771	5.3	4.5	9.7
Ward 4	378	7.3	3.4	10.7

- 5.4 Short Stay unit have a higher CHPPD at 23:59 (14.6) compared to the CHPPD of 9.2 using the bed occupancy at 15:00 this is due to the number of day case patients and the ward closing overnight. Table 7 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 – January 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	383	9.4	3.1	12.5
Alan Bray Unit	204	21.8	1.3	23.1
Angus McKinnon Unit	0	-	-	-
Duke of Gloucester	571	5.5	2.6	8.1
Ian Monro Ward	146	7.8	3.6	11.4
Margaret Harte Ward	397	5.8	3.8	9.6
Phillip Newman Ward	129	8.9	2.7	11.6
Rehabilitation Unit	287	3.6	1.7	5.4
Short Stay Unit	539	6.3	2.9	9.2
Spinal Unit	777	5.2	4.4	9.7
Ward 4	439	6.3	2.9	9.2

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	Nov-17	Dec -17	Current Month	Average
Adolescent/Coxen Ward	73.95%	72.42%	75.30%	73.89%
Alan Bray Unit	95.05%	98.37%	94.53%	95.98%
Angus McKinnon Unit	65.40%	65.30%	65.18%	65.29%
Duke of Gloucester	66.77%	66.67%	68.13%	67.19%
Margaret Harte Ward	67.33%	65.69%	60.24%	64.42%
Private Patient Unit	78.65%	77.42%	72.33%	76.13%
Rehabilitation Unit	67.75%	65.97%	67.58%	67.10%
Short Stay Unit	68.59%	66.37%	68.44%	67.80%
Spinal Unit	50.50%	52.99%	54.17%	52.55%
Ward 4	70.46%	69.45%	68.57%	69.50%

Key	-	64%
55%		

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: 12/2/18

Appendix 1:

Table 9: % Fill rates by ward, month, and shift and staff group

Shift	Nov-17				Dec-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	94.9%	91.4%	99.1%	97.9%	91.1%	93.9%	97.5%	100.0%	98.9%	95.4%	100.0%	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	93.9%	91.4%	100.0%	100.0%	94.3%	89.0%	100.0%	100.0%	Closed	Closed	Closed	Closed
Duke of Gloucester	98.5%	93.1%	100.0%	100.0%	100.0%	98.4%	100.0%	100.0%	98.3%	96.9%	100.0%	100.0%
Ian Monro Ward	100.0%	100.0%	100.0%	100.0%	99.8%	101.5%	100.0%	100.0%	97.9%	100.0%	100.0%	100.0%
Margaret Harte Ward	97.8%	98.9%	100.0%	100.0%	96.5%	97.0%	100.0%	100.0%	95.9%	98.8%	100.0%	100.0%
Phillip Newman Ward	100.0%	80.0%	100.0%	66.7%	97.9%	96.2%	100.0%	100.0%	100.0%	94.4%	100.0%	100.0%
Rehabilitation Unit	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	98.7%	100.0%	100.0%	100.0%
Short Stay Unit	100.0%	98.9%	100.0%	100.0%	98.8%	100.0%	100.0%	100.0%	97.5%	93.3%	98.9%	100.0%
Spinal Unit	94.7%	96.2%	100.0%	97.8%	94.8%	96.0%	100.0%	94.4%	98.7%	96.4%	100.0%	99.1%
Ward 4	94.0%	100.0%	100.0%	100.0%	98.4%	96.7%	96.4%	100.0%	97.9%	100.0%	98.9%	100.0%

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

Table 10: Detail of hours planned and worked (January 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	2,380.0	2,354.0	715.5	682.5	1,250.0	1,250.0	500	500	98.9%	95.4%	100.0%	100.0%	306	9.0	3.2	12.1
Alan Bray Unit	192 - CRITICAL CARE MEDICINE	2,443.5	2,443.5	258	258	2,012.5	2,012.5	0	0	100.0%	100.0%	100.0%	0.0%	285	7.6	0.4	8.0
Angus McKinnon Unit	110 - TRAUMA & ORTHOPAEDICS	0.0	0.0	0	0	0	0	0	0	0.0%	0.0%	0	0		0.0	0.0	0.0
Duke of Gloucester	110 - TRAUMA & ORTHOPAEDICS	1,841.5	1,811.0	803.5	778.5	1,350.0	1,350.0	700	700	98.3%	96.9%	100.0%	100.0%	518	5.3	2.6	7.9
Ian Monro Ward	110 - TRAUMA & ORTHOPAEDICS	588.5	576.0	237.5	237.5	562.5	562.5	287.5	287.5	97.9%	100.0%	100.0%	100.0%	127	11.4	3.6	15.0
Margaret Harte Ward	110 - TRAUMA & ORTHOPAEDICS	1,301.0	1,247.5	1066.5	1054	1,050.0	1,050.0	462.5	462.5	95.9%	98.8%	100.0%	100.0%	367	6.4	3.1	9.5
Phillip Newman Ward	110 - TRAUMA & ORTHOPAEDICS	661.5	661.5	225	212.5	487.5	487.5	137.5	137.5	100.0%	94.4%	100.0%	100.0%	86	15.1	2.1	17.3
Rehabilitation Unit	314 - REHABILITATION	618.4	610.4	296	296	432.0	432.0	204	204	98.7%	100.0%	100.0%	100.0%	269	2.8	1.3	4.2
Short Stay Unit	110 - TRAUMA & ORTHOPAEDICS	2,354.5	2,296.5	1116.5	1041.5	1,112.5	1,100.0	525	525	97.5%	93.3%	98.9%	100.0%	339	10.3	4.7	15.0
Spinal Unit	110 - TRAUMA & ORTHOPAEDICS	2,614.0	2,580.0	2126	2050	1,488.0	1,488.0	1404	1392	98.7%	96.4%	100.0%	99.1%	771	4.8	4.7	9.5
Ward 4	110 - TRAUMA & ORTHOPAEDICS	1,738.0	1,701.5	860	860	1,087.5	1,075.0	412.5	412.5	97.9%	100.0%	98.9%	100.0%	378	6.3	2.7	9.0