

## Royal National Orthopaedic Hospital NHS Trust

### Trust Board Meeting - Executive Summary

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

The planned vs actual staffing levels is still within safe limits, at 98.25%

## **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 An E-Rostering implementation plan is currently under development.
- 2.2 The planned vs actual staffing levels is still within safe limits, at 98.25%
- 2.3 All adult wards (excluding Alan Bray Unit) are currently undertaking 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 six report of staffing issues filed by the inpatient wards during June 2017.
  - One report from Coxon ward of feeling 'chaotic and poorly staffed', on investigation the ward was found to have staffing within safe range, staff advised to contact site manager for support to help reduce the impression of ward feeling chaotic.
  - One report from Coxon ward of short notice sickness that could not be covered by temporary staffing, resulting in reduced skill mix therefore the nurse in charge had to spend a large amount of time administering I.V medication.
  - One report from Alan Bray Unit of an out of hours transfer from Alan Bray to the Adolescent unit to accommodate an unexpected transfer from theatres. The Children's unit nurse-in-charge, the night site/outreach practitioner, the

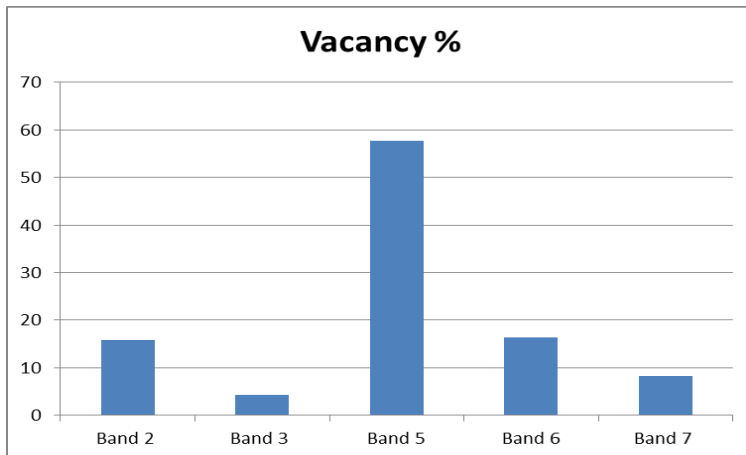
patient and their family were all informed of the decision making process and no party expressed any concerns.

- One report from Private patient of a HCA being moved to Coxon ward, resulting in the unit having reduced staffing. The plan to move the HCA was risk assessed by the matron of the day to ensure safe staffing was maintained across the Trust.
- One report from Jackson Burrows ward of a member of staffing having to leave a night shift urgently due to a family emergency resulting in a 1:12 ratio. Support was requested from the site manager and from colleagues on The Colman unit. This incident has been discussed at the Matrons meeting to identify the best approach if this incident was to occur in the future.
- One report from Angus Mackinnon ward of two members of staff reporting short notice sickness and temporary staffing being unable to fill the shift. Staff moved from another clinical area to give 2 RN & 1 HCA compared to the 3 RN & 2 HCA.

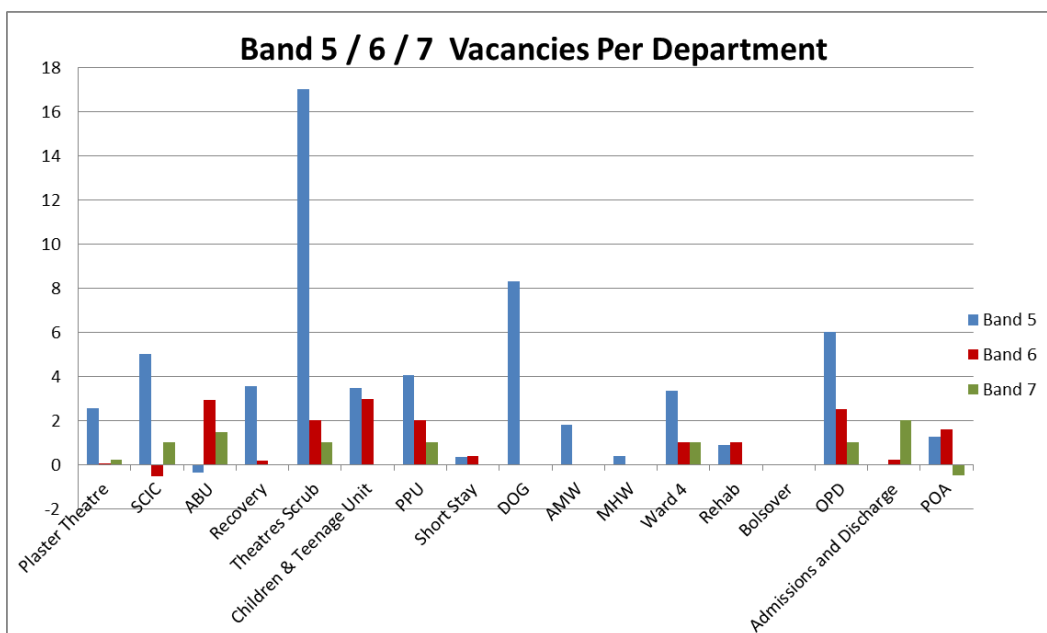
#### **4.0 Vacancies and list of current recruitment activity**

- 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)**

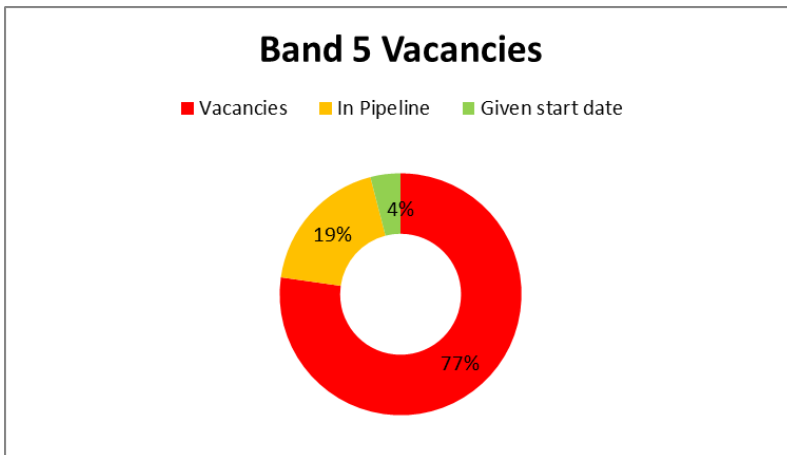


**Table 2 Band 5-7 Vacancies per Department.**

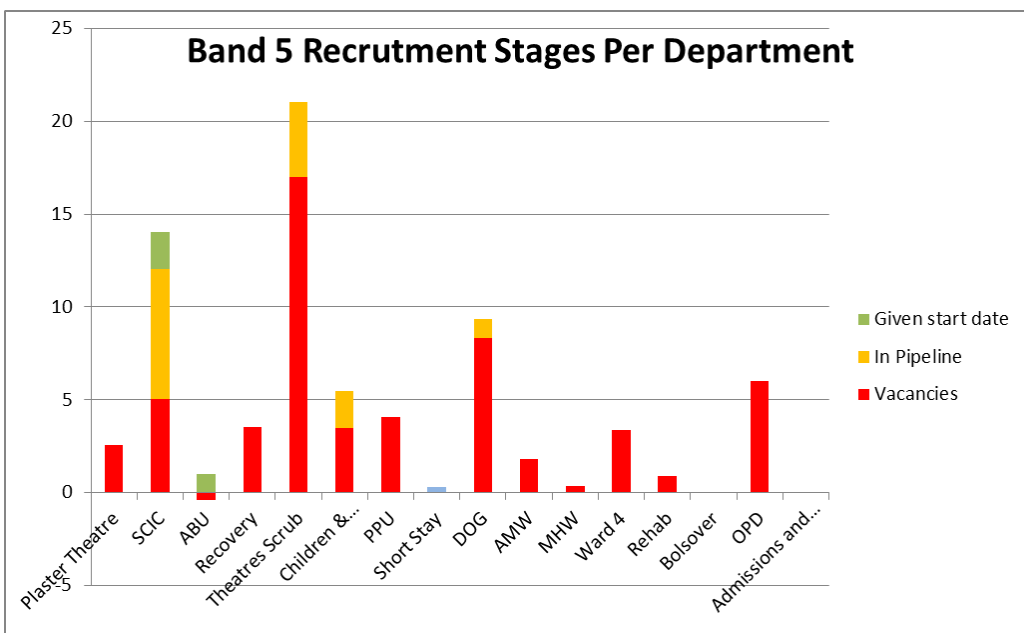


4.3 In relation to band 5 posts, which are of primary concern in relation to safe staffing there is currently a 21.88% (WTE 57.69) vacancies in the Trust. There are currently 14 WTE Band 5 Nurses going through pre-employment checks and 3 WTE given a start date. See table 3 & 4. The next set of Band 5 interviews are due to take place on 28/7/17

**Table 3: Band 5 Recruitment Stages**

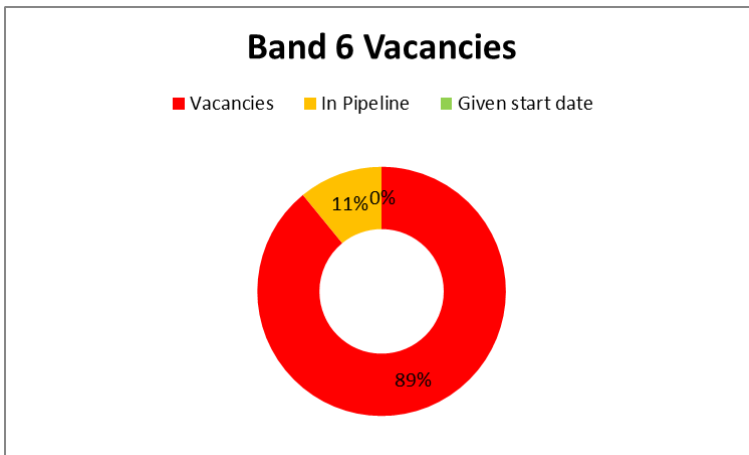


**Table 4: Band 5 Recruitment Stages per Department**

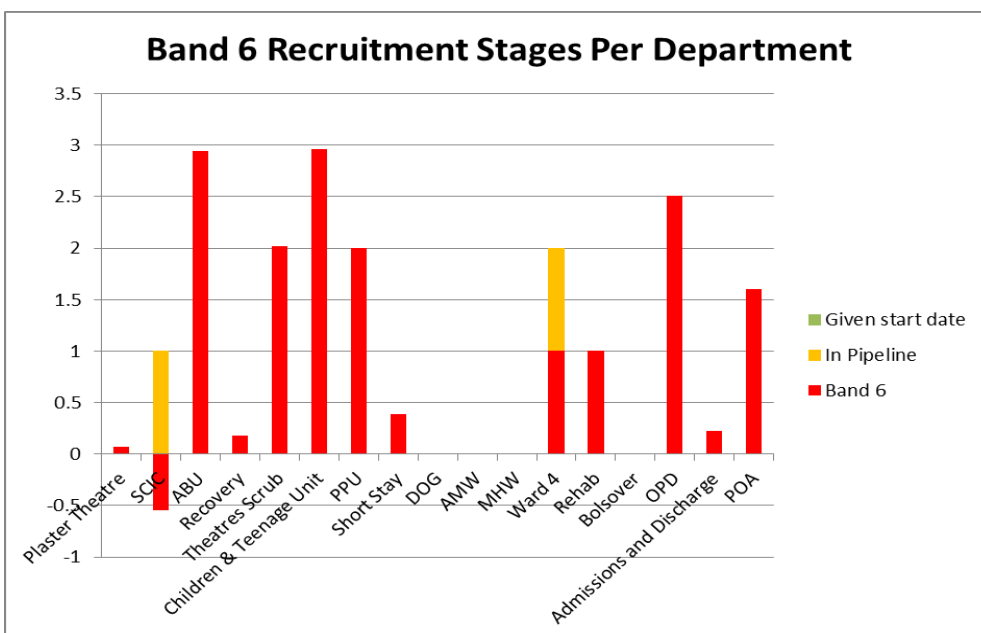


4.4 Band 6 vacancies are currently at 16.34% (16.50 WTE) this is an increase of 5.09% since December 2016 when the vacancy was 11.25% (See Table 5 & 6).

**Table 5: Band 6 Recruitment Stages**

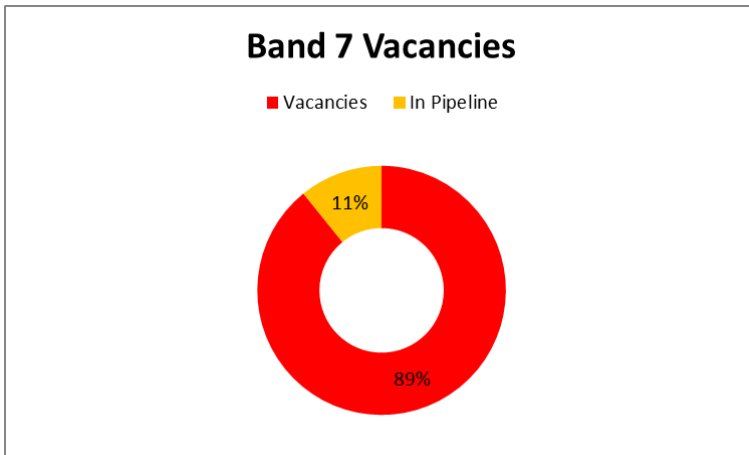


**Table 6: Band 6 Recruitment Stages per Department**

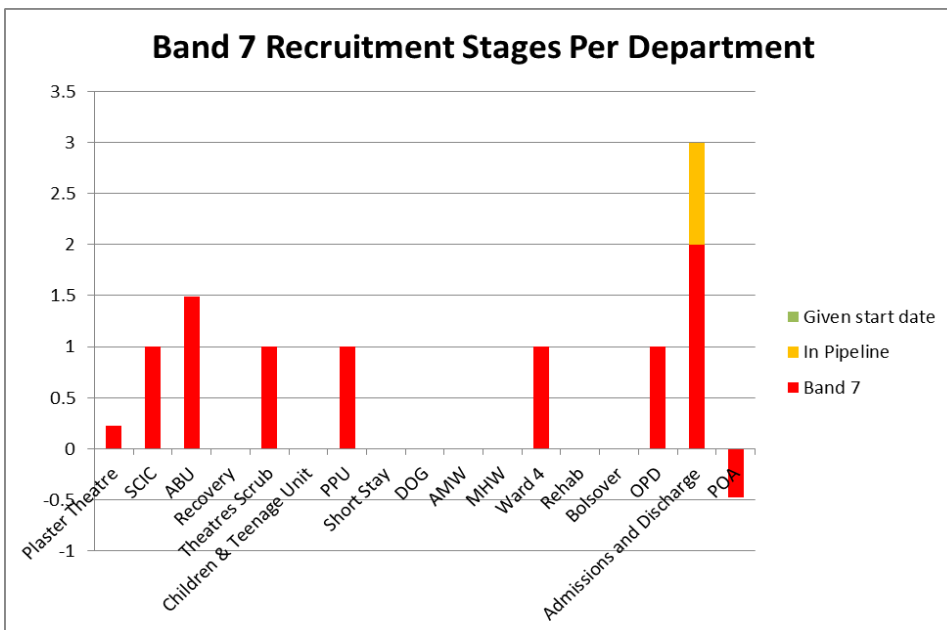


4.5 Band 7 vacancies are currently at 25.92% (8.23 WTE). The Senior Nursing team are currently developing a leadership programme that will support nurses to develop their leadership skills and give them the skills to enable them to become the ward leaders of the future.

**Table 7: Band 7 Recruitment Stages**



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



Information obtained from Finance & Recruitment team 11/7/17

- 4.6 International recruitment: 39 offers were made. 27 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 - 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 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	302	12.0	4.2	16.2
Alan Bray Unit	234	18.6	1.2	19.8
Angus McKinnon Unit	379	6.5	3.3	9.8
Duke of Gloucester	512	5.9	3.7	9.6
Ian Monro Ward	181	8.6	3.8	12.4
Margaret Harte Ward	355	6.3	3.5	9.8
Phillip Newman Ward	47	20.2	6.0	26.2
Rehabilitation Unit	354	3.1	1.3	4.4
Short Stay Unit	349	10.5	4.9	15.4
Spinal Unit	604	5.4	4.4	9.9
Ward 4	388	6.9	2.8	9.7

- 5.4 Phillip Newman ward have a higher CHPPD at 23:59 (26.2) compared to the CHPPD of 11.0 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	399	9.1	3.2	12.2
Alan Bray Unit	160	27.2	1.8	29.0
Angus McKinnon Unit	398	6.2	3.1	9.4
Duke of Gloucester	549	5.5	3.4	9.0
Ian Monro Ward	189	8.2	3.6	11.8
Margaret Harte Ward	388	5.8	3.2	9.0
Phillip Newman Ward	112	8.5	2.5	11.0
Rehabilitation Unit	367	3.0	1.3	4.2
Short Stay Unit	570	6.5	3.0	9.4
Spinal Unit	610	5.4	4.4	9.8
Ward 4	218	12.3	5.0	17.3

## 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	April -17	May-17	Current Month	Average
Adolescent/Coxen Ward	75.37%	72.59%	73.97%	73.98%
Alan Bray Unit	97.05%	95.51%	93.90%	95.49%
Angus McKinnon Unit	66.02%	64.61%	66.57%	65.73%
Duke of Gloucester	66.83%	64.58%	61.63%	64.35%
Margaret Harte Ward	65.01%	66.08%	64.08%	65.06%
Private Patient Unit	74.03%	71.45%	72.18%	72.56%
Rehabilitation Unit	63.94%	63.26%	70.44%	65.88%
Short Stay Unit	69.47%	68.91%	68.47%	68.95%
Spinal Unit	51.47%	52.41%	55.09%	52.99%
Ward 4	68.55%	68.07%	71.12%	69.25%

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: 10/07/17

**Appendix 1:**

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

Month	Apr-17				May-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	99.7%	98.4%	100.0%	100.0%	97.2%	99.0%	100.0%	100.0%	95.8%	96.8%	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%	100.0%
Angus McKinnon Unit	96.6%	96.3%	100.0%	100.0%	97.8%	98.4%	100.0%	100.0%	92.7%	94.4%	100.0%	100.0%
Duke of Gloucester	97.6%	100.0%	98.9%	100.0%	100.0%	94.1%	100.0%	100.0%	97.0%	88.8%	100.0%	100.0%
Ian Monro Ward	98.5%	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	99.3%	100.0%	100.0%	100.0%	98.8%	100.0%	100.0%	100.0%	98.8%	98.5%	100.0%	100.0%
Phillip Newman Ward	97.3%	96.6%	100.0%	100.0%	100.0%	102.3%	100.0%	100.0%	98.8%	111.9%	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	99.2%	100.0%	100.0%	100.0%	96.9%	97.3%	100.0%	100.0%	97.7%	94.2%	100.0%	100.0%
Spinal Unit	97.7%	97.8%	98.8%	100.0%	99.6%	98.7%	100.0%	98.8%	99.2%	97.6%	100.0%	98.9%
Ward 4	99.8%	98.6%	100.0%	100.0%	99.3%	95.7%	100.0%	100.0%	98.4%	97.2%	100.0%	100.0%



## Appendix 2

**Table 13: Detail of hours planned and worked (June 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	2,390.0	2,376.0	850.5	809	1,262.5	1,237.5	462.5	462.5	95.8%	96.8%	98.0%	100.0%	302	12.0	4.2	16.2
Alan Bray Unit	192 - CRITICAL CARE MEDICINE	2,382.0	2,382.0	270.5	270.5	1,975.0	1,975.0	12.5	12.5	100.0%	100.0%	100.0%	100.0%	234	18.6	1.2	19.8
Angus McKinnon Unit	110 - TRAUMA & ORTHOPAEDICS	1,509.4	1,399.0	937.1	884.9	1,080.0	1,080.0	360	360	92.7%	94.4%	100.0%	100.0%	379	6.5	3.3	9.8
Duke of Gloucester	110 - TRAUMA & ORTHOPAEDICS	1,954.0	1,895.0	1168.5	1038	1,137.5	1,137.5	850	850	97.0%	88.8%	100.0%	100.0%	512	5.9	3.7	9.6
Ian Monro Ward	110 - TRAUMA & ORTHOPAEDICS	803.5	803.5	344.5	344.5	750.0	750.0	337.5	337.5	100.0%	100.0%	100.0%	100.0%	181	8.6	3.8	12.4
Margaret Harte Ward	110 - TRAUMA & ORTHOPAEDICS	1,328.5	1,312.5	841.5	829	925.0	925.0	425	425	98.8%	98.5%	100.0%	100.0%	355	6.3	3.5	9.8
Phillip Newman Ward	110 - TRAUMA & ORTHOPAEDICS	656.0	648.0	312	282	300.0	300.0	0	0	98.8%	111.9%	100.0%	0.0%	47	20.2	6.0	26.2
Rehabilitation Unit	314 - REHABILITATION	688.0	688.0	256	256	408.0	408.0	204	204	100.0%	100.0%	100.0%	100.0%	354	3.1	1.3	4.4
Short Stay Unit	110 - TRAUMA & ORTHOPAEDICS	2,623.3	2,602.0	1333	1256	1,075.0	1,075.0	437.5	437.5	97.7%	94.2%	100.0%	100.0%	349	10.5	4.9	15.4
Spinal Unit	110 - TRAUMA & ORTHOPAEDICS	2,058.0	2,042.0	1654	1614	1,248.0	1,248.0	1080	1068	99.2%	97.6%	100.0%	98.9%	604	5.4	4.4	9.9
Ward 4	110 - TRAUMA & ORTHOPAEDICS	1,755.5	1,727.0	795.5	767	962.5	962.5	325	325	98.4%	97.2%	100.0%	100.0%	388	6.9	2.8	9.7