

**MONTHLY REPORT OF NURSE MIDWIFERY STAFFING LEVELS**  
**1 MAY 2014 – 31 MAY 2014**

**Executive Summary**

**Purpose:**

- To provide the Board with an overview of nurse midwifery staffing levels in inpatient areas as outlined in the Nurse Staff Guide 'How to ensure the right people, with the right skills are in the right place at the right time!' Published by the National Quality Board and NHS Commissioning Board.
- To provide the Board with an overview of nurse midwifery shifts not covered, vacancies and sickness rates.
- To bring to the attention of the board any workforce risks.

**Methodology and scope of review:**

This report is focused on the following areas:

- All in-patient adult wards including critical care
- All in-patient maternity wards and departments on the acute site
- All in-patient paediatric wards including neonates

This report does not yet include non-in-patient areas such as the operating theatres, day surgery, endoscopy and emergency department. At the present time there is no requirement to report the planned and actual numbers of staffing for our escalation ward or bays.

**Key Points:**

- To demonstrate compliance with new staffing expectations and staffing guidance.
- Ward establishments are based on evidence based assessments of acuity and dependency which is recorded on Swiftplus, alongside professional judgment and key clinical indicators. The Trust has utilised the (Association of UK University Hospitals (AUKUH) tool for a number of years and will continue to apply this methodology for the workforce establishment review
- We are now collecting the number of times shifts fell below agreed staffing levels, as this is currently being undertaken manually there may be slight inaccuracies in the data. It is expected we will be able to automate this by the winter, following the purchase of the E-Rostering software, Allocate.
- Staffing during May was challenging, due to high acuity, vacancies and sickness, however 663 shifts were covered by bank and agency staff. Staff were also been moved from wards following professional clinical judgment, this would have been possible due to low patient numbers on a ward, for example Kingston Wing, therefore allowing for staff moves.

The national return on Unify for the month of May 2014, demonstrated that EAU were the highest staffed area with HCA's during the day with 106.9% and the lowest staffed area was Freya with HCA's during the night with 90.3%. The Trust's overall return was 100.4%.

Ward name	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 (%)
	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				
Jasmine	1488	1488	1002	1002	1488	1488	1159.5	1159.5	100.0%	100.0%	100.0%	100.0%
Kingston Wing	604.5	604.5	638	638	644	644	365.5	365.5	100.0%	100.0%	100.0%	100.0%
6A	1031	1042.5	1444	1488.5	713	713	589	589	101.1%	103.1%	100.0%	100.0%
6B	2139	2186	2371.5	2394.5	713	730.5	713	701.5	102.2%	101.0%	102.5%	98.4%
7A	1293	1316.5	960.5	960.5	713	713	713	713	101.8%	100.0%	100.0%	100.0%
EAU	1376.5	1376.5	1223	1307.5	1069.5	1069.5	713	747.5	100.0%	106.9%	100.0%	104.8%
8A	2122	2122	2015	2038	713	713	713	713	100.0%	101.1%	100.0%	100.0%
8B	2360	2354.5	2015	2061.5	713	713	713	713	99.8%	102.3%	100.0%	100.0%
9B	2139	2145	2268	2302.5	713	713	713	742	100.3%	101.5%	100.0%	104.1%
10	1069.5	1087	356.5	368	1069.5	1081		11.5	101.6%	103.2%	101.1%	
ICU	2495.5	2555	155	160	2495.5	2541.5		11.5	102.4%	103.2%	101.8%	
CCU	1395	1383.5			883.5	860.5			99.2%		97.4%	
Freya	2671.5	2596.5	868	800.5	1953	2005.5	325.5	294	97.2%	92.2%	102.7%	90.3%
SCBU	930	936	453	447.5	465	465	294.5	283	100.6%	98.8%	100.0%	96.1%
<b>Trust Wide</b>									<b>100.3%</b>	<b>101.3%</b>	<b>100.7%</b>	<b>100.5%</b>

When the data is broken down on a shift by shift basis, there were a total of 52 shifts which were not covered in the month of May.

- 17 HCA shifts during the day  
(2 due to sickness, 1 agency DNA and 14 no reason has been documented)
- 9 HCA shifts during the night  
(3 due to sickness, 1 agency DNA and 5 no reason documented)
- 17 Registered Nurse shifts during the day  
(1 due to sickness, 1 agency DNA and 15 no reason documented)
- 9 Registered Nurse shifts during the night  
(2 due to sickness, and 7 no reason has been documented)

Ongoing work continues with the Nurse Bank to ensure that where shifts have not been covered that the reason why is clearly documented, so that Board can be fully informed of staffing shortfalls.

- Ward Staffing Boards are now in place on all in-patient wards which records the planned number of registered nurses, health care assistants and therapy staff with the actual staff on duty, this is recorded for early, late and night shifts.
- Acuity, dependency and complexity of patients is escalated to senior nursing and midwifery teams and if a change in staffing skill mix is required in order to meet the acuity needs of patients this is actioned in order to maintain patient safety.
- Where individual shifts triggered the acuity measure agreed Trust escalation process were triggered and contingency plans implemented. However staffing levels remained safe with flexing of staff across wards and department, utilisation of temporary staff and the use of the specials team to care for the unwell patient requiring one to one care
- Vacancy levels vary across wards and departments. There is a continued central drive to recruit.
- 3 new staff nurses and 2 endoscopy nurses were appointed in May 2014, 1 Health Care Assistant and 1 Nursery Nurse were given temporary contracts.
- Staffing numbers planned versus actual published on each ward on a shift by shift basis, commenced May 2014.
- Vacancy shortfall covered by the use of temporary staff
- Maternity staffing has been challenging in the month of May with a lack of midwifery staff. There are also no agency or bank midwives which the Trust can call upon. The home birth service has been stopped on two occasions. Staffing on the maternity unit has been escalated to the Risk Register.

The following table shows the number of bank and agency staff used for the month of May 2014, which has been broken down by ward and specialty.

A total of 678 bank and agency staff was used in May 2014 to cover shifts on the ward, of this 377 were agency staff and 310 were booked from the YDH bank.

	Jasmine	Kingston	6A	6B	7A	EAU	8A	8B	9B	10	ICU	CCU	Freya	SCBU
<b>HCA Agency</b>	12	1	9	13	15	20	13	11	32	6	4	1	1	
<b>Agency D Grade</b>	8	10	37	60	16	15	17	31	23	1	9	3		
<b>Bank Band 1</b>	5		12	6	4	12	7	20	16	1	2			
<b>Bank Band 2</b>	7		12	6	5	11	9	16	10					
<b>Bank Band 3</b>								2	2					
<b>Bank Band 5</b>	3	14	2	39	7	7	6	12	7	8	22	3		7
<b>Bank Band 6</b>									1					7
<b>Total</b>	35	25	72	124	47	65	52	92	91	16	37	7	1	14
<b>Agency Total</b>	20	11	46	73	31	35	30	42	55	7	13	4	1	0
<b>Bank Total</b>	15	14	26	51	16	30	22	50	36	9	24	3	0	14

#### Implications:

- Constant focus on recruitment required.
- Continue to review nurse midwifery staffing levels and patient acuity on a shift by shift basis, using escalation procedures as required.
- Director of Nursing and Clinical Governance to report staffing levels to the Board monthly.
- A planned workforce review will be undertaken to fully understand actions required to meet the 1:8 ratio as recommended in the National Safe Staffing Alliance for relevant adult wards.

#### Recommendations:

- The Board of Directors is asked to NOTE the information contained in this summary report and the actions we have in place