



**Board of Directors Meeting
August 2015**

Director of Nursing Report

Monthly Report of Nurse/Midwifery Staffing Levels

1 July 2015 - 31 July 2015

EXECUTIVE SUMMARY

The NHS National Quality Board published a new guidance in November 2013 to support providers and commissioners to make the right decisions about nursing, midwifery and care staffing capacity and capability "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 Staff Capacity and Capability.

There are nine key expectations that apply to the Trust:

1. Boards take full responsibility for the quality of care provided.
2. Processes are to be in place to enable staffing establishments to be met on a shift by shift basis.
3. Evidence based tools to be used.
4. Clinical and managerial leaders foster a culture of professionalism and responsiveness where staff feel able to raise concerns.
5. Multi-professional approach is taken when setting staffing establishments.
6. Sufficient time to undertake care and duties in practice.
7. Boards receive monthly updates on workforce information and staffing capacity and capability and is discussed at public Board meetings every six months.
8. Clearly display information about the nursing and care staff present on each ward, clinical setting or service on each shift.
9. Provider to take an active role in securing staff in line with their workforce requirements.

PURPOSE

The purpose of this report is to provide the Board of Directors with monthly information regarding the nursing and midwifery registered and unregistered staffing levels on a shift by shift basis of the planned and actual nurse staffing levels across the organisation and across inpatient areas of the Trust as per the guidance received from NHS England and the Care Quality Commission.

METHODOLOGY AND SCOPE FOR REVIEW

This report focusses on all adult inpatient areas including Critical Care, inpatient maternity wards and inpatient paediatric wards. With the Trust working towards the 1:8 ratio as recommended in the National Safe Staffing Alliance for relevant adult wards. For the purpose of this report non inpatient areas such as the operating theatres, day theatre, endoscopy and emergency department are currently excluded.

KEY POINTS

- National Unify Returns

- Safer Staffing: A Guide to Care Contact Time
- Recruitment, the recruitment drive is ongoing
- e-Rostering
- Bank and Agency usage
- Unfilled Shifts
- Supervisory Status

Unify Return

Ward	Day				Night				Day		Night	
	Registered Nurses/Midwives		Care Staff		Registered Nurses/Midwives		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				
JW	987.5	739.5	1229.5	1125.5	775	775	600	588.5	75%	92%	100%	98%
KW	713	707	713	545.5	713	690	356.5	299	99%	77%	97%	84%
6A	1426	1391	1463.5	1463.5	1069.5	1069.5	713	667	98%	100%	100%	94%
6B	1069.5	912	1496	204.5	713	690	589	612	85%	14%	97%	104%
7A	1286.5	1197	944.5	1028.5	713	701.5	713	724.5	93%	109%	98%	102%
EAU	1426	1407.5	1607.5	1607.5	1069.5	1104	713	920	99%	100%	103%	129%
8A	1069.5	1012	1358.5	1358.5	713	713	713	793.5	95%	100%	100%	111%
8B	1302	1238	1302	1260	713	713	713	724.5	95%	97%	100%	102%
9A	1426	1418.5	899	897	713	736	713	736	99%	100%	103%	103%
9B	1069.5	845	1227.5	1227.5	713	713	713	713	79%	100%	100%	100%
10	1069.5	1001.5	368.5	368.5	1069.5	1011.5	0	0	94%	100%	95%	
ICU	2007.5	2007.5	155	101	2495.5	2058.5	0	0	100%	65%	82%	
CCU	1395	1395	0	0	883.5	883.5	0	0	100%		100%	
Freya	2857.5	2467.5	997.5	840	1953	1717	651	587.5	86%	84%	88%	90%
SCBU	930	817.5	465	367.5	294.5	152	294.5	285	88%	79%	52%	97%

Safe Staffing: A Guide to Care Contact Time

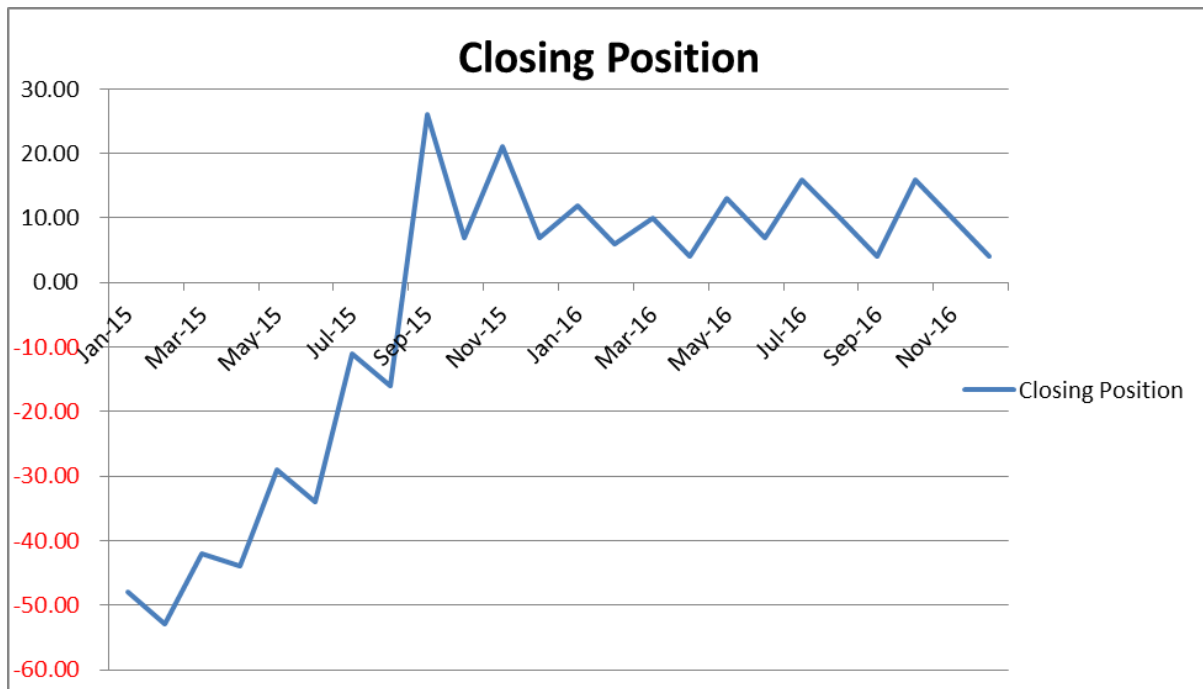
Data collection will commence with next cohort of students.

Recruitment

Registered Nurses: The rolling fortnightly interviews continue with successful candidates being offered positions on the day. Candidates are both UK and EU of origin.

June Cohort: The nurses that commenced in July completed their supported induction programme on 2 August 2015. Those nurses that still require their PIN are included in the overall numbers for the ward but not as a registered nurse.

The following graph indicates our current recruitment position and going forward as of 18 August 2015:



The closing position includes the numbers required for the Winter Escalation Ward.

NB: It should be noted this is only accurate on the day it is calculated due to the fluidity of recruitment.

e-Rostering

Ongoing training and support is required by the Sisters to maintain their e-rosters to ensure accurate, meaningful reports are available on the system and that they utilise the functionalities of e-rostering to its full potential.

Temporary Staffing

The following table indicates the number of bank / agency used during July 2015.

	10	9A	9B	8A	8B	ACCU	7A	EAU	6A	6B	ICU	KW	MFFD/GYNAE	Maternity	SCBU	TOTAL
Registered Bank	2	3	10	1	35	2	16	12	6	22	18	6	5	57	25	220
Unregistered Bank	16	28	28	17	59	8	13	25	26	55	1	17	65	6	24	388
Total Bank	18	21	38	18	94	10	29	37	32	77	19	23	70	63	49	598
Registered Agency	10	36	52	85	49	13	68	75	40	120	50	28	55	0	1	682
Unregistered Agency	5	29	44	37	71	0	9	26	18	74	2	10	24	0	0	349
Total Agency	15	65	96	122	120	13	77	101	58	194	52	38	79	0	1	1031
TOTAL Bank/Agency	33	86	134	140	214	23	106	138	90	271	71	61	149	63	50	1629

Bank and Agency Usage

The use of bank and agency increased during July with several underlying reasons. There was an increase in the number of patients requiring specialising during this period. In addition, some of the nurses recruited from the EU have had a delay in receiving their NMC PIN, meaning they are unable to be counted as a registered nurse, although they can be counted in the overall numbers for the ward. Some individual nurses required additional supernumerary support to ensure a safe integration into the team, which was not factored into the initial induction programme.

In order to ensure the appropriate use of bank and agency, the rotas continue to be scrutinised on a daily basis and staff re-allocated and bank and agency cancelled as appropriate

Unfilled Shifts

		10	9A	9B	8A	8B	ACCU	7A	EAU	6A	6B	ICU	KW	JW	FREYA	SCBU	TOTAL
Using Professional Judgement	Registered	7	4	1	5	2	0	9	7	5		104	2	1			147
	Unregistered									2			8				10
Nurse unavailable	Registered		1	3	2	2	0	4	4					8	66	34	124
	Unregistered		1			1	0		3		2			5	27	20	59
TOTAL		7	6	4	7	5	0	13	14	7	2	104	10	14	93	54	340

The registered nurse unfilled shifts on Wards 10, 6A and 6B were a combination in a reduction in activity as well as including preceptorship nurses as part of the overall numbers for registered nurses. This is reviewed on an individual basis to ensure that patient safety and care is not compromised. ICU unfilled shifts are as a result of reduced patient dependency. If the shifts were required they would have been escalated to specialist agencies to fill.

E-rostering does have the facility to report on unfilled shifts; however the e-rosters need to be accurate for the report to be meaningful. Ongoing training is taking place with the Ward Sister by the e-Rostering team. It is imperative the sisters fully understand the rationale of this prior to the implementation of the Safe Care Module.

Supervisory Status

The vacancy rate continues to decrease and the ward sisters are increasing their supervisory time in their clinical areas.

SUPERVISORY STATUS REPORT
 (% calculated on number of days available to work)

Ward	April	May	June	July
10	46%	46%	100%	62%
9A	55%	52%	100%	100%
9B	18%	0	Sister Chell covering Level 9	Sister Chell covering Level 9
8A	14%	38%	100%	73%
CCU	5%	0	23%	12%
8B	0	29%	95%	77%
7A	0	5%	32%	67%
EAU	95%	67%	100%	95%
T&O	118%	64%	86%	69%
Elective	0	10%	52%	95%
MFFD	0	10%	68%	77%
ICU	23%	38%	33%	50%

RECOMMENDATIONS

The Board of Directors is asked to note the information contained in this summary report and the actions currently in place.