

## **Board of Directors Meeting**

August 2014

### **Director of Nursing Report**

#### **Monthly Report of Nurse Midwifery Staffing Levels**

**1 July 2014 – 31 July 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 June was again challenging, due to high acuity, vacancies and sickness, however 645 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.
- NICE guidance – Safe Staffing for nursing in adult inpatients wards in acute hospitals was published in July 2014 and the Trust will be drawing up a safer staffing project plan to work through the guidance across the adult inpatient wards.

The national return on Unify for the month of July 2014, demonstrated that 9B were the highest staffed area with 110% during the night with care staff and the lowest staffed area was ICU with 74.21% of care staff during the day. The Trust's overall return was 98.9%.

Ward Name	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	Formula= IF(F4="","",G4/F4)	Formula= IF(H4="","",I4/H4)	Formula= IF(J4="","",K4/J4)	Formula= IF(L4="","",M4/L4)
Jasmine	1488	1512.5	1034	1034	1488	1488	1196	1187.5	101.6%	100.0%	100.0%	99.3%
Kingston Wing	713	722	713	715.5	667	667	356.5	356.5	101.3%	100.4%	100.0%	100.0%
6A	1025	1006	1482	1543.5	713	724.5	589	635	98.1%	104.1%	101.6%	107.8%
6B	1196	1190	1146	1180.5	701.5	690	713	735.5	99.5%	103.0%	98.4%	103.2%
7A	1218.5	1207	969.5	1071	713	713	713	725	99.1%	110.5%	100.0%	101.7%
EAU	1397.5	1374	1598.5	1680.5	1069.5	1081	713	759	98.3%	105.1%	101.1%	106.5%
8A	1058.5	1047	1302	1367	713	713	713	747.5	98.9%	105.0%	100.0%	104.8%
8B	1290	1284	1302	1280	713	713	713	713	99.5%	98.3%	100.0%	100.0%
9B	1069.5	1069.5	1150	1206.5	713	713	713	784.5	100.0%	104.9%	100.0%	110.0%
10	1069.5	1070	356.5	362	1069.5	1069.5		23	100.0%	101.5%	100.0%	
ICU	2427	2421	155	115	2449.5	2449.5		11.5	99.8%	74.2%	100.0%	
CCU	1395	1395			849	837.5			100.0%		98.6%	
Freya	2857.5	2613.5	997.5	765.5	1953	1795.5	651	609	91.5%	76.7%	91.9%	93.5%
SCBU	930	990	465	315	294.5	294.5	294.5	228	106.5%	67.7%	100.0%	77.4%

When the data is broken down on a shift by shift basis, there were a total of 115 shifts which were not covered in the month of July.

- 8 HCA shifts during the day  
(5 due to sickness and 3 due to no staff being available)
- 5 HCA shifts during the night  
(2 due to sickness and 3 due to no staff being available)
- 30 HCA shifts on the Maternity Unit during the day not covered and 4 night shifts  
(no staff available).
- 20 Nursing Nurse Shifts on SCBU during the day not covered and 7 night shifts  
(no staff available)
- 18 Registered Nurse shifts during the day  
(13 unable to cover shift, 1 agency DNA, 4 due to sickness)
- 2 Registered Nurse shifts during the night  
(1 due sickness, 1 agency DNA)
- 32 Midwifery shifts not covered during the day and 15 shifts at night  
(no staff available)

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.
- 4 new staff nurses, 1 Clinical Nurse Specialist, 1 Sister, 1 Safeguarding Sister, 1 preceptorship nurse, 4 HCA's on temporary staffing were appointed in July 2014.
- As at 11 August 2014 there are 2 interviews planned for HCA's and 2 for staff nurses.
- Staffing numbers planned versus actual published on each ward on a shift by shift basis, commenced May 2014 and is ongoing.
- Vacancy shortfall covered by the use of temporary staff
- Activity has risen at Yeovil maternity unit over the preceding six months leading to an increased midwife to birth ratio requiring us to review our agreed staffing levels with the finance team and draw up a revised template in consideration of a long term plan to address the issue. In the short term we have some issues around sickness and maternity leave, to address this and move to towards the long term strategy we have very recently over recruited by 2.2 WTE midwives and we are also just about to advertise for band 5 midwife preceptorship posts to capture the newly qualified midwifery students and cover the considerable amount of planned maternity leave. We are also currently advertising for bank midwives to improve our number of "bank only" midwives which is currently a small pool. On a daily basis unit and on call staffing of all grades is reviewed by the senior midwifery team and every effort is made to cover shortfalls where possible, staff are also encouraged to incident report all deficits and contact the on call supervisor when necessary.

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

A total of 645 bank and agency staff was used in July 2014 to cover shifts on the ward, of this 283 were agency staff and 362 were booked from the YDH bank.

	Jasmine	Kingston	6A	6B (now 9A)	7A	EAU	8A	8B	9B	10	ICU	CCU
<b>HCA Agency A</b>	13	3	15	3	17	19	10	7	23	5	2	2
<b>Agency D Grade</b>	6	24	25	18	5	24	17	18	14	3	3	7
<b>Bank Band 1</b>	15	6	15	5	20	25	16	9	25	3	4	
<b>Bank Band 2</b>	4	1	9	11	15	15	9	9	13	1		
<b>Bank Band 3</b>			1			1			1			
<b>Bank Band 5</b>	3	13	5	25	5	5	10	12	7	14	10	9
<b>Bank Band 6</b>								5	6			
<b>Total</b>	41	47	70	62	62	89	62	60	89	26	19	18
<b>Agency Total</b>	19	27	40	21	22	43	27	25	37	8	5	9
<b>Bank Total</b>	22	20	30	41	40	46	35	35	52	18	14	9

#### Implications:

- Planned recruitment campaign to reduce the need for temporary staff. New HR Manager starting 2 September 2014.
- Continue to review nursing and midwifery staffing levels and patient acuity on a shift by shift basis and establishment reviewed planned for August 2014. Where appropriate the Trust will work to 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.