

Board of Directors Meeting

July 2014

Director of Nursing Report

Monthly Report of Nurse Midwifery Staffing Levels

1 June 2014 – 30 June 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 705 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 June 2014, demonstrated that 6B were the highest staffed area with 113% during the day and night and the lowest staffed area was SCBU with 81% of care staff during the day. The Trust's overall return was 99.8%.

Ward Name	Day				Night				Day		Night	
	Registered Nurses/Midwives		Care Staff		Registered Nurses/Midwives		Care Staff		Registered nurses/midwives (%)	Average fill rate - care staff (%)	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	1440	1466.5	957.5	957.5	1440	1451.5	1111.5	1121.5	102%	100%	101%	101%
Kingston Wing	679	679	672	672	690	690	345	345	100%	100%	100%	100%
6A	1035	1024	1398	1461	690	719	570	599	99%	105%	104%	105%
6B	1069.5	1075.5	1302	1434.5	690	782	690	782	101%	110%	113%	113%
7A	893	887		1842.5	690	690	690	690	99%		100%	100%
EAU	1341.5	1341.5	1537.5	1586	1035	1052	690	707	100%	103%	102%	102%
8A	1047.5	1047.5	1302	1318.5	678.5	678.5	678.5	678.5	100%	101%	100%	100%
8B	1302	1308	1302	1306	672.5	672.5	690	678.5	100%	100%	100%	98%
9B	1069.5	1088.5	1302	1307	684	684	684	684	102%	100%	100%	100%
10	1006	994.5	345	351	1035	1035			99%	102%	100%	
ICU	2303	2286	150	150	2415	2426.5		11.5	99%	100%	100%	
CCU	1333	1333			855	855			100%		100%	
Freya	2760	2587.5	960	892.5	1890	1774.5	630	577.5	94%	93%	94%	92%
SCBU	900	866	450	364	285	285	285	216	96%	81%	100%	76%

When the data is broken down on a shift by shift basis, there were a total of 83 shifts which were not covered in the month of June.

- 25 HCA/Nursery Nurse shifts during the day
(16 due to sickness, 2 DNA, 1 unable to cover shift and 6 no reason has been documented)
- 13 HCA/Nursery Nurse shifts during the night
(11 due to sickness, 1 DNA and 1 no reason documented)
- 32 Registered Nurse/Midwife shifts during the day
(21 unable to cover shift, 1 agency DNA, 7 due to sickness and 3 no reason documented)
- 13 Registered Nurse/Midwife shifts during the night
(1 due sickness, 11 unable to cover shift and 1 compassionate leave)

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.
- 1 new staff nurse, 1 preceptorship nurse, 1 Sister and 1 clinical trials nurse were appointed in June 2014.
- 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 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 May 2014, which has been broken down by ward and specialty.

A total of 705 bank and agency staff was used in June 2014 to cover shifts on the ward, of this 407 were agency staff and 298 were booked from the YDH bank.

	Jasmine	Kingston	6A	6B	7A	EAU	8A	8B	9B	10	ICU	CCU	Freya	SCBU
HCA Agency	13	8	18	13	34	24	11	15	30	5	3			
Agency D Grade	6	31	30	57	18	20	19	23	21	1	3	4		
Bank Band 1	15		4	12	21	7	15	6	16	4	1			
Bank Band 2	4		2	9	17	5	6	5	24		1			
Bank Band 3						1								
Bank Band 5	3	11	8	25	14	2	11	11	4	3	12	11		
Bank Band 6								6	2					
Total	41	50	62	116	104	59	62	66	97	13	20	15		
Agency Total	19	39	48	70	52	44	30	38	51	6	6	4		
Bank Total	22	11	14	46	52	15	32	28	46	7	14	11		

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.