

TRUST BOARD**26th March 2015**

TITLE	Safer Staffing Levels
EXECUTIVE SUMMARY	This report provides a review of the safer staffing levels within the inpatient areas in Ashford and St. Peter's Hospitals NHS Foundation Trust for February 2015.
BOARD ASSURANCE (Risk) / IMPLICATIONS	The paper will report by exception the average fill rate and act as assurance to the Board meeting Expectation 2: processes are in place to enable staffing establishments to be met on a shift-to-shift basis and Expectation 7 of the National Quality Board's publication entitled: How to ensure the right people, with the right skill, are in the right place at the right time: a guide to nursing, midwifery and care setting capacity and capability.
LINK TO SO:	SO1: Best Outcomes
STAKEHOLDER / PATIENT IMPACT AND VIEWS	Safer staffing levels will result in a better staff experience for nurses and safer care and an improved experience for patients.
EQUALITY AND DIVERSITY ISSUES	None identified
LEGAL ISSUES:	Failure to monitor and manage staffing levels effectively can lead to poor and unsafe care with the potential legal and regulatory compliance issues.
The Trust Board is asked to:	Consider the extent of assurance given
Submitted by:	Heather Caudle Chief Nurse
Date:	26 th March 2015
Decision:	For Assurance

Safer Staffing Levels

1 Introduction

This report provides a review of the Safer Staffing levels within the inpatient areas in Ashford and St. Peter's Hospitals NHS Hospitals Foundation Trust (ASPH) for February 2015.

2 Background

ASPH follows an agreed methodology for reviewing nurse staffing levels on the wards. The Salford model and Royal College of Nursing (RCN) guidelines which was recommended by the Chief Nursing Officer for England, Jane Cummings, in a document entitled "How to ensure the right people with the right skills, are in the right place at the right time" dated of 19th November 2013.

The National Quality Board Safe Staffing Initiative has impacted on the ASPH Board involvement in managing staffing capacity and capability, agreeing on staffing, establishments and considering the impact of wider initiatives (such as cost improvement plans) on staffing, and whether there is accountability for decisions made.

On the rare occasions where suitable skilled staff cannot be deployed to fulfill a shift, redeployment of staff from other areas is effected and Ward Managers or Clinical Nurse Leaders will provide additional clinical support.

3 Safe staffing levels

By June 2014 it became a national requirement for all hospitals to publish information about staffing levels on their wards. This initiative is part of the NHS response to the Francis Report, which called for greater openness and transparency in the health service.

4 Establishment Monitoring

ASPH has increased the planned and actual staffing levels of all inpatient areas across the Trust. They provided assurance that either staffing levels were as they should be or, where staffing fell short of the planned establishment, the shortfall was managed so that it did not present a risk to quality and safety. The data is presented by ward and shows the contingency planning as well as mitigating actions in the face of staffing shortfalls.

The judgement and the RAG ratings as to whether the variance from the planned staffing level presents a risk were based on nursing ratios, the acuity and dependency calculations conducted over the past year; and professional judgement on the part of the Associate Director of Nursing / Associate Director of Midwifery. This resulted in an internal Trust RAG rating of the shortfall. Appendix 1 shows by ward the amount of shifts for which staffing levels were rated to be red, amber or green.

4.1 Division Data

Each division has published their data on a Trust electronic shared file and each continues to address the gaps through a range of interventions to preserve safety and quality on the wards.

Please find below the links to all the Divisions' planned and actual staffing.

5.3

Acute and Emergency Medicine Division: [T:\Ward Monitoring-Weekly Reporting\14-15 KPIs\AMES\Daily Tool](#)

Theatres, Anaesthetics, Surgery and Critical Care: [T:\Ward Monitoring-Weekly Reporting\14-15 KPIs\TASCC\Daily Tool](#)

Diagnostics, Therapeutics, Trauma and Orthopaedics: [T:\Ward Monitoring-Weekly Reporting\14-15 KPIs\DTTO\Daily Tool](#)

Women's Health and Paediatrics: [T:\Ward Monitoring-Weekly Reporting\14-15 KPIs\WHP\Daily Tool](#)

4.2 Exception Report

Both the establishment performance by shift, together with the planned versus actual staffing levels have been triangulated with the QEWS level by ward to give a composite exception rating of safer staffing level risk. In order to be judged an exception ward, at least two of the following factors must be present, comprising of item 1 with at least one other of the ratings listed below:

1. Less than 80% of shifts rated green for staffing levels (see appendix 1)
2. A QEWS level of either 0 or 1 (see appendix 1)
3. An average fill rate day – registered nurses / midwives of less than 95% or more than 120% during the day (see appendix 2)
4. An average fill rate day – care staff of less than 95% or more than 120% during the night (see appendix 2)
5. An average fill rate day – registered nurses / midwives of less than 95% or more than 120% during the day (see appendix 2)
6. An average fill rate day – care staff of less than 95% or more than 120% during the night (see appendix 2)

Appendix 1 Safer Staffing Fill Rate Indicator Return February 2015

Table 1: Staffing Level Risk Exception Matrix – February 2015

WARD	< 80% of shifts rated green	QEWS level 0 or 1	Day		Night	
			Average fill rate - registered nurses/ Midwives (<95% or >120%)	Average fill rate - care staff (<95% or >120%)	Average fill rate - registered nurses/ Midwives (<95% or >120%)	Average fill rate - care staff (<95% or >120%)

Acute and Emergency Medicine

A and E	-	-	-	-	-	-
Aspen	✓	✓	✓(-)	✓(+)	-	-
CCU & Birch	✓	-	✓(-)	-	✓(-)	-
Cedar	✓	-	✓(-)	-	-	-
Holly	✓	-	✓(-)	✓(+)	-	-
May	-	-	-	✓(-)	-	-
MAU	-	✓	✓(-)	-	✓(+)	✓(+)
MSSU	✓	✓	✓(-)	-	-	-
Maple		-	✓(-)	✓(-)	-	-
Fielding	-	-	-	✓(+)	✓(+)	✓(+)
WWW/Chaucer	-	-	✓(-)	✓(+)	-	✓(+)
Swift	-	-	✓(-)	-	-	✓(+)

Trauma and Orthopaedics

Dickens	✓	✓	✓(-)	✓(-)	-	-
Swan	✓	✓	✓(-)	-	✓(-)	✓(+)

Theatre, Anaesthetics, Surgery, Critical Care
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Kingfisher	✓	✓	✓(-)	-	✓(-)	✓(+)
Falcon	-	✓	-	-	-	✓(+)
SDU	-	-	✓(-)	-	✓(-)	-
Heron	✓	✓	✓(-)	✓(-)	-	-
SAU	✓	-	✓(-)	✓(-)	-	-
ITU	✓	-	✓(-)	✓(-)	✓(-)	-
MHDU	-	-	-	✓(-)	-	-

Women's Health and Paediatrics

Abbey Birth Centre	-		-	-	-	-
Ash	-	✓	-	-	-	-
NICU	✓	-	✓(-)	✓(-)	-	✓(-)
Labour Ward	-	-	-	-	-	-
Joan Booker	-	-	-	✓(-)	-	-

Key: N/A* Monthly planned and actual staff hours were zero

'/(+)* Planned staff hours were zero, but actual hours exceeded planned

There are 16 wards that have two or more staffing risk factors which is the same as last month.

4.3 Acute and Emergency Medicine

The Division has held several bespoke recruitment days for Respiratory , Acute Medicine and Care of the Elderly wards as well as attending the Trust recruitment day . 6 Registered Nurses (RN) were offered roles and 5 Health Care Assistants (HCA's).

The Medical Short Stay Unit (MSSU) has had 6 RN's resignations from January/February 2015 for varying reasons this is now having an impact, even with two recruitment days during this period. A concerted recruitment plan is under way and two places are being offered for the advanced medical practitioner course.

The Quality, Experience, Workforce and Safety (QEWS) is showing 0 for this reason but not the quality of care given to patients which is currently scoring a 2 on the dashboard. We will continue monthly local recruitment days so that potential new recruits can meet the staff and look at the ward environment. All students in their final placement are being encouraged to apply for permanent positions on these wards if successful in the final exams.

Swift Ward is no longer supported by the other division since the 1st of March 2015, which has impacted on the bank and agency requests. 1 RN from the Medical Assessment Unit (MAU) will be moved to further support them while recruitment continues for this ward .Despite this their best care audit came out as a 2, a credit to the strong leadership of the ward manager.

The Emergency Department (ED) also achieved a level 2 score for best care despite the continuing pressures in activity in the department. They have extra staff allocated to the busiest days of the week to support the substantive staff .

A reduction on weekend agency and bank staff has commenced in all Trust areas as agreed by the Associate Directors of Nursing (ADN's) to ensure robust rota- management by the Clinical Nurse Leaders (CNL) in collaboration with the Ward Managers.

4.4 Trauma and Orthopaedics

This reporting period has been a challenging time for Swan Ward reporting level 0 on the QEWS dashboard and level 1 for Dickens Ward.

Dickens Ward has had increased sickness levels this month including a senior member of the team on long term sickness. Two members of the team are on maternity leave. Dickens holds 1 Whole Time Equivalent (WTE) RN vacancy and 2 WTE HCA vacancies. To mitigate the shortfall the RN vacancy is expected to be filled with a member of staff completing their adaptation programme in April/ May 2015, the HCA posts are out to recruitment. Staffing for Dickens is flexed according to its workload and the lighter elective surgery days.

Swan Ward has continued to support Swift ward with 1 WTE until the end of February and continues to support other escalation areas when staffing allows. There are 5 WTE RN recruited waiting for start dates.

To reduce our reliance on agency at night we have suggested nights and weekends shifts are filled with our own permanent staff first and the day shift vacancies filled with bank/ agency to monitor the quality of care for our patients. This has been agreed with the other Divisions. The next rota for Health roster will start by filling each Saturday night with permanent or bank staff.

4.5 Theatres, Anaesthetics, Surgery and Critical Care

Kingfisher Ward, the Intensive Care Unit (ICU) and Theatre Operating Department Practitioners (ODP's) continue to have high numbers of vacancies. The recruitment process is on-going with a further recruitment event which took place on Saturday 14 March 2015 where 4 candidates for surgery were successfully recruited. Theatres have also recently held a recruitment event and were successful in recruiting two candidates to undertake anesthetic training and a further 5 registered nurses

Staffing has continued to be challenging over the past month due to vacancies, the extra pressure of providing staffing for escalation beds and extra theatre activity to meet the 18 week targets.

Falcon, Kingfisher and Heron Wards have achieved QEWS level 1 and the remaining surgical areas are level 2.

4.6 Women's Health and Paediatrics

JOAN BOOKER WARD

89% Shifts covered by trained and untrained staff, 9% Shifts was amber, 2% shifts were red, this was due to short notice sickness by maternity assistants, however, the ward was fully staffed with trained midwives during these two night duties.

There is always a senior band 7 midwife on duty on the labour ward 24 hours a day.

The Neonatal Intensive Care Unit (NICU): safe staffing levels are generally amber due to lack of trained nurses on shift. On the majority of shifts the trained band 6 or band 7 who are in charge are supernumerary and do not take a patient workload unless there are multiple unplanned admissions. This allows them to maintain overall management of the unit and assist where ever they are needed to supervise junior members of staff and maintain safety of the unit. The nursing rota on a shift by shift basis is complemented by a minimum of two bank nurses which resulted in amber status. A current review of the establishment is being undertaken by the Associate Director of Nursing (ADN) for Paediatrics.

Ash Ward: Currently there is work on-going by the Paediatric Clinical Nurse Leader and the ADN of Paediatrics to confirm nursing establishment based on Care Quality Commission (CQC) recommendations and the Royal College of Nursing guidelines. The Trust is planning to implement an assessment tool to calculate acuity and nursing dependency, which calculates safe nurse staffing requirements for paediatric wards, which will enable us to make more accurate workforce planning decisions in the future.

Ash Ward was green 93% throughout February and amber for 7%, on those occasions staff were redeployed from quieter area's where possible with the CNL working clinically as necessary to support.

A current advert had 24 applicants for Band 5 Staff nurses which is encouraging although the majority do not qualify until after the summer.

5 Statement of Assurance

Senior nursing and midwifery management at ASPH continue to monitor and report the inpatient ward staff level.

The specialist nurses have been engaged in participating in a rota to ensure that nursing short

falls are covered on the ward areas and the Emergency Department from December 2014. Whilst on-going capacity pressures and recruitment shortages continue, there is still a sustained vigilance over staffing levels and there are bespoke projects specifically responsive to staffing issues in critical areas.

Monitoring of patient acuity and dependency using the Safer Nursing Care Tool is to be repeated commencing 23rd February and reported to Board in April. This evidence based tool includes a staff multiplier which determines if nursing establishments reflect patient needs.

The Board can be assured of the process and outcome pertaining to monitoring, reviewing and reporting nurse safer staffing levels.

Appendix 2

SAFE STAFFING LEVELS DATA February 2015							
Division	Wards	Total Shifts	Red	Amber	Green	% Green	QEWS LEVEL
Acute and Emergency Medicine	ED	224	0	2	250	112	1
	Aspen	84	4	17	63	75	1
	CCU & Birch	84	18	29	37	44	2
	Cedar	84	3	16	65	77	2
	Holly	84	4	16	64	76	2
	May	84	1	15	68	81	2
	MAU	84	0	1	83	99	1
	MSSU	84	5	15	64	76	0
	Maple	84	1	8	75	89	2
	Fielding	84	0	3	81	96	2
	WWW/Chaucer	84	1	0	83	99	2
	Swift	84	1	10	73	87	2
T&O	Dickens	84	35	16	33	39	1
	Swan	84	8	16	60	71	0
TASCC	Kingfisher	84	15	30	39	46	1
	Falcon	84	0	4	80	95	0
	SDU	84	2	0	83	99	2
	Heron	84	3	16	65	77	1
	SAU	84	14	19	51	61	2
	ITU	84	27	27	30	36	2
	MH DU	84	7	0	77	92	2
Women's Health and Paediatrics	Abbey Birth Centre	56	0	0	56	100	
	Ash	56	0	4	52	93	1
	NICU	112	39	45	28	25	2
	Labour Ward	112	0	9	103	92	2
	Joan Booker	112	2	10	100	89	2

Appendix 3 Safer Staffing Fill Rate Indicator Return February 2015

<http://www.asph.nhs.uk/safer-staffing>

Hospital Site Details		Ward name	Main 2 Specialties on each ward		Day				Night				Day		Night	
			Specialty 1	Specialty 2	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	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)
Site code *The Site code is automatically populated when a Site name is selected	Hospital Site name															
RTK02	Ashford Hospital - RTK02	Chaucer/Words worth	314 - REHABILITATION		1428	1326.25	1435	2098.25	903	903	602	1053.5	92.90%	146.20%	100.00%	175.00%
RTK02	Ashford Hospital - RTK02	Dickens	110 - TRAUMA & ORTHOPAEDICS		1536.5	856.75	1071	613.25	602	602	301	344	55.80%	57.30%	100.00%	114.30%
RTK02	Ashford Hospital - RTK02	Fielding	314 - REHABILITATION		1071	1090.5	1071	1530.75	602	806.25	602	1010.5	101.80%	142.90%	133.90%	167.90%
RTK01	St Peter's Hospital - RTK01	Aspen	340 - RESPIRATORY MEDICINE		1785	1512	896	1103.25	1204	1182.5	602	612.75	84.70%	123.10%	98.20%	101.80%
RTK01	St Peter's Hospital - RTK01	Birch/CCU	300 - GENERAL MEDICINE	320 - CARDIOLOGY	2142	1868.25	714	688.5	1806	1687.75	301	333.25	87.20%	96.40%	93.50%	110.70%
RTK01	St Peter's Hospital - RTK01	Cedar	300 - GENERAL MEDICINE		1792	1562.75	1253	1339.5	1204	1182.5	602	612.75	87.20%	106.90%	98.20%	101.80%
RTK01	St Peter's Hospital - RTK01	Falcon	100 - GENERAL SURGERY		1610	1552	714	701.5	903	881.5	301	376.25	96.40%	98.20%	97.60%	125.00%
RTK01	St Peter's Hospital - RTK01	Heron	100 - GENERAL SURGERY		1047	945	714	676	602	602	301	333.25	90.30%	94.70%	100.00%	110.70%
RTK01	St Peter's Hospital - RTK01	Holly	430 - GERIATRIC MEDICINE		1610	1097.5	1428	1813.75	602	655.75	903	1064.25	68.20%	127.00%	108.90%	117.90%
RTK01	St Peter's Hospital - RTK01	Kingfisher	100 - GENERAL SURGERY		1967	1622.75	1071	1040.5	1204	763.25	301	731	82.50%	97.20%	63.40%	242.90%
RTK01	St Peter's Hospital - RTK01	Maple	300 - GENERAL MEDICINE		1428	1237.25	1428	1313.75	602	580.5	903	1042.75	86.60%	92.00%	96.40%	115.50%
RTK01	St Peter's Hospital - RTK01	MAU (incl AECU)	300 - GENERAL MEDICINE		2499	1982.5	1428	1428	1204	1548	903	1214.75	79.30%	100.00%	128.60%	134.50%
RTK01	St Peter's Hospital - RTK01	May	300 - GENERAL MEDICINE		1253	1277.75	889	757	602	602	602	634.25	102.00%	85.20%	100.00%	105.40%
RTK01	St Peter's Hospital - RTK01	MSSU	300 - GENERAL MEDICINE		2499	2008.5	1785	1823.5	1505	1472.75	1204	1279.25	80.40%	102.20%	97.90%	106.30%
RTK01	St Peter's Hospital - RTK01	SAU	100 - GENERAL SURGERY		1785	1638.75	1071	956.25	903	860	301	301	91.80%	89.30%	95.20%	100.00%
RTK01	St Peter's Hospital - RTK01	Swan	110 - TRAUMA & ORTHOPAEDICS		1785	1582.5	1253	1341.25	903	817	602	817	88.70%	107.00%	90.50%	135.70%
RTK01	St Peter's Hospital - RTK01	Ash	420 - PAEDIATRICS		1610	1683	0	0	1204	1419	0	0	104.50%	-	117.90%	-
RTK01	St Peter's Hospital - RTK01	Joan Booker	501 - OBSTETRICS		1288	1260	966	916.5	1288	1230.5	322	345	97.80%	94.90%	95.50%	107.10%
RTK01	St Peter's Hospital - RTK01	Labour	501 - OBSTETRICS		2576	2550	644	621.5	2576	2530	644	644	99.00%	96.50%	98.20%	100.00%
RTK01	St Peter's Hospital - RTK01	Abbey Birth Centre	501 - OBSTETRICS		644	644	0	0	602	602	0	0	100.00%	-	100.00%	-
RTK01	St Peter's Hospital - RTK01	ITU	192 - CRITICAL CARE MEDICINE		3570	3187.5	357	319.25	3010	2784.25	0	96.75	89.30%	89.40%	92.50%	-
RTK01	St Peter's Hospital - RTK01	MHDU	192 - CRITICAL CARE MEDICINE		714	746	357	318.75	602	634.25	301	311.75	104.50%	89.30%	105.40%	103.60%
RTK01	St Peter's Hospital - RTK01	SDU	100 - GENERAL SURGERY		1071	982	0	76.5	903	774	0	139.75	91.70%	-	85.70%	-
RTK01	St Peter's Hospital - RTK01	NICU	420 - PAEDIATRICS		3220	2884.375	966	494.5	3010	3010	903	397.75	89.60%	51.20%	100.00%	44.00%
RTK01	St Peter's Hospital - RTK01	Swift	300 - GENERAL MEDICINE		1428	1167.75	1785	1913	602	623.5	903	1354.5	81.80%	107.20%	103.60%	150.00%

