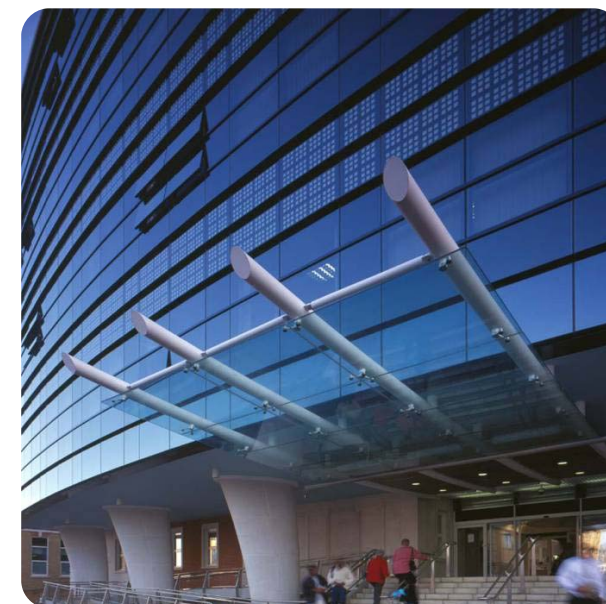
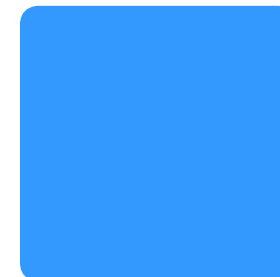


Monthly Nurse Staffing Levels Report Aug & Sept 2014

Geraldine Walters
Director of Nursing



KING'S HEALTH PARTNERS

Nurse Staffing Levels – Aug&Sept

Recent national guidance now requires Trusts to:

1. Report on staffing capacity and capability, using evidence based tools every six months. The first report was provided to the Trust Board at the May meeting and is now available on the Trust website.
 2. Provide information on planned and actual staffing on a shift by shift basis at ward level to the Board every month, uploading the information to NHS England on a monthly basis. The report attached is the third report which provides this information for all inpatient sites at King's College Hospital NHS Foundation Trust.
- KCH has successfully submitted the required data but in reviewing the data post submission there were mistakes. To assist us in this process KPMG have carried out monthly audits of the submitted data and are assisting in the process to improve accuracy. Errors are still being made but these are much fewer now and are usually due to changes in rota not being reflected on the report.
 - There are 2 charts attached, one for wards at PRUH and one for Denmark Hill. On each chart, the columns show the number of hours of registered nursing that have been planned and the number of hours actually available on each shift, and the number of hours of healthcare assistant time and those that were actually available during the day and during the night (ie the number of staff who were rostered for duty, and the number actually available to work on the shift, in hours).
 - The “actual” average nurse to patient ratio for each ward during the day and the night on each ward is shown in columns to the right of the sheet
 - The cells highlighted in Red are those shifts where the actual hours were more than 15% less than the planned hours. In these cases, local managers have provided detail on why this was the case or how this was managed in the “Action” column

Safer Staffing Numbers – August 2014 – Denmark Hill

Ward Name	Shift pattern	Planned RN/RMW Day	Actual RN/RMW Day	%	Planned HCA/MSW Day	Actual HCA/MSW Day	%	Planned RN/RMW Night	Actual RN/RMW Night	%	Planned HCA/MSW Night	Actual HCA/MSW Night	%	RN/RM W on Day shift	RN/RMW on Night shift	No. of Pts per nurse - Day Shift	No. of Pts per nurse - Night Shift	No. of Beds	Action taken by HON/Matron where 15% or more of nursing hours did not meet agreed staffing levels (Highlighted in red)
Adult Cystic Fibrosis Unit	3	1103	1238	112%	0	23	300%	713	794	111%	0	46	400%	3	2	3	4	9	No establishment for HCA's however when we have significant medical inliers we would employ bank nurses if 2 RN nurses are not sufficient.
Annie Zunz	3	2183	2280	104%	1395	1380	99%	1426	1679	118%	1070	1070	100%	5	5	6	6	28	
Brunel																			
Ward closed for August																			
Byron	3	1545	1403	91%	1253	1215	97%	725	736	102%	1070	840	78%	3	2	6	9	19	Byron ward has been operating with 16 beds as 3 beds closed presently. High vacancy factor across HCA establishment not fully recruited into yet.
Cheere Ward	2	1300	1196	92%	345	506	147%	736	736	100%	414	794	192%	3	2	4	7	14	
Christine Brown CCU	2	5704	5463	96%	357	546	153%	5704	5491	96%	357	472	132%	15	15	1	1	18	
Coptcoat Ward	2	1656	1231	74%	357	656	184%	1162	1035	89%	253	541	214%	3	3	4	5	15	
Cotton	3	2325	2213	95%	1328	1403	106%	1449	1415	98%	414	483	117%	5	4	5	7	26	
David Marsden	2	2496	1944	78%	1070	1921	180%	2496	1955	78%	1070	1863	174%	5	5	6	6	31	David Marsden has eleven band 5 vacancies plus two band 6. The ward has nine ONP nurses sitting in band 3 posts. This is why there is high untrained numbers per shift. Plus use of band 2 CSW for specials
Davidson	2	1771	1616	91%	713	822	115%	1415	1300	92%	610	817	134%	5	4	4	5	17	
Dawson	2	1656	1461	88%	690	679	98%	1472	1392	95%	713	817	115%	4	4	5	5	21	
Derek Mitchell Unit	2	1760	1535	87%	518	834	161%	1081	1070	99%	357	897	252%	4	3	3	5	15	Reasons over hours for HCA both day and night shift as follows; 1. use of special 2. Ms-understanding re: ward establishment - this was addressed with the ward manager, e roster template was set up to reflect correct establishment and band and agency usage is monitor weekly.
Donne	3	2490	2040	82%	1808	2273	126%	1518	1403	92%	1139	1599	140%	4	4	7	8	30	
ELF & LIBRA Ward	2	1783	1645	92%	713	690	97%	1472	1323	90%	713	805	113%	5	4	3	4	16	
Fisk Ward	2	2013	1898	94%	357	529	148%	1518	1415	93%	357	541	152%	5	4	3	4	16	
Frank Cooksey	3	1478	1455	98%	1530	1635	107%	978	1001	102%	1024	1104	108%	3	3	5	5	15	
Frank Stansil Critical Care	2	4991	5077	102%	345	276	80%	4991	4974	100%	345	345	100%	14	14	1	1	10	
Frederick Still (Newborn Unit)	2	4830	5566	115%	0	12	100%	4991	5543	111%	0	12	100%	16	16	2	2	34	
Guthrie Ward	2	2139	1921	90%	713	644	90%	1070	1070	100%	357	587	165%	5	3	4	7	21	One patient required HCA 1:1 nursing 24/7 over a 2 week period.
Howard Ward	2	1300	1231	95%	587	529	90%	1081	1058	98%	368	357	97%	3	3	5	5	16	
Jack Steinberg Critical Care	2	5704	5624	99%	357	276	77%	5704	5520	97%	357	334	94%	16	15	1	1	20	
Katherine Monk	3	2318	2205	95%	968	1118	116%	1426	1426	100%	403	564	140%	5	4	5	6	24	
Kinnier Wilson	2	1748	1760	101%	1058	1380	130%	1426	1346	94%	759	1127	148%	5	4	4	5	20	ONPs in post and awaiting PINs. Currently counted as HCAs until PINs arrive but are qualified nurses
Kinnier Wilson HDU	2	2139	2139	100%	345	368	107%	2139	2116	99%	58	69	120%	6	2	2	2	11	
Lion	2	1001	1001	100%	345	437	127%	1070	966	90%	35	184	533%	3	3	4	4	10	HCAs being used when RN shifts not being filled
Lister	2	2760	2404	87%	1403	1403	100%	2162	1771	82%	1104	1254	114%	7	5	4	5	25	
Liver ICU	2	6291	6693	106%	115	207	180%	6371	6716	105%	46	58	125%	19	19	1	1	19	
Lonsdale	3	2325	1958	84%	1395	1800	129%	1783	1737	97%	989	1162	117%	4	5	6	5	25	High vacancy factor and difficulty to fill bank bookings. We have 7 nurses interviewed and in the system awaiting start dates.
Marjorie Warren	2	2475	2295	93%	1860	1860	100%	1449	1403	97%	1093	1150	105%	6	4	5	8	30	
Mary Ray	3	2760	2078	75%	1395	1575	113%	1863	1403	75%	1070	1392	130%	4	4	7	8	30	The staffing ratio is 75% due to the number of vacant posts and unfilled NHSP shifts. You will notice that the CSW % are high as we have been flexing the skill mix and using CSW posts when RN not available.
Matthew Whiting	2	1978	2208	112%	1530	2105	138%	1518	1806	119%	782	1369	175%	6	5	4	5	26	
Murray Falconer	2	2300	2220	97%	771	1058	137%	2024	2036	101%	713	955	134%	6	6	5	5	30	
Oliver	3	3255	2828	87%	930	1020	110%	2864	1771	62%	713	725	102%	6	5	5	6	30	
Paediatric Short Stay	2	713	598	84%	345	322	93%	713	587	82%	357	322	90%	2	2	4	4	6	High band 5 vacancy. New starters this month. Nurses moved from paediatric wards to make safe
Princess Elizabeth	2	1277	1012	79%	345	311	90%	1070	989	92%	127	81	64%	3	3	4	4	11	High band 5 vacancy. New starters this month. Worked together with Lion ward to make safe
R D Lawrence	3	3255	2498	77%	945	1763	187%	1852	1794	97%	713	817	115%	5	5	5	6	28	The action that was taken was to escalate to the performance phone(which is held by the matrons) and move staff from one area to cover. This would be the same for RDL and Mary Ray
Rays Of Sunshine	2	2496	2047	82%	472	299	63%	2174	1817	84%	357	322	90%	6	5	3	4	19	High band 5 vacancy. New starters this month. Senior staff worked clinically to make safe
Recovery Ward	2	1173	1127	96%	46	35	75%	851	794	93%	58	69	120%	3	2	5	8	17	HCA only work Saturdays on CRU. Otherwise is a 1:1 nursing area.
Sam Oram	2	1415	1231	87%	656	748	114%	1070	966	90%	0	621	#DIV/0!	3	3	5	6	17	
Sam Oram CCU	3	1395	1373	98%	450	368	82%	1070	1058	99%	0	115	#DIV/0!	3	3	3	3	8	HCA numbers change depending on acuity and Sam Oram ward needs.
The Friends Stroke Unit	3	3255	3120	96%	1575	1613	102%	2473	2220	90%	1070	1116	104%	7	6	4	5	29	
Thomas Cook CCCC	2	3876	3094	80%	345	345	100%	3922	3002	77%	357	334	94%	9	8	2	2	15	High band 5 vacancy. New starters this month. Staff moved around all paediatric areas to make safe.
Todd	2	2013	1691	84%	943	943	100%	1794	1760	98%	725	713	98%	5	5	5	4	22	
Toni & Guy	2	2128	1530	72%	334	345	103%	1817	1403	77%	207	345	167%	4	4	3	4	15	High band 5 vacancy. Additional HCAs booked to cover unfilled RN shifts. Staff moved around all paediatric areas to make safe
Trundle	2	1725	1530	89%	564	851	151%	1116	955	86%	633	725	115%	4	3	4	6	16	
Twining	3	2790	2100	75%	1395	1358	97%	1806	1369	76%	1070	1081	101%	5	4	6	7	28	Working at Amber level on days and night so have reduced Rn by 1
V&A HDU Ward	2	1369	1530	112%	299	391	131%	1461	1403	96%	357	345	97%	4	4	2	3	10	
Victoria & Albert	2	1323	1265	96%	311	414	133%	1035	978	94%	150	161	108%	4	3	5	7	18	
Waddington	2	1070	1047	98%	357	368	103%	1070	1093	102%	69	173	250%	3	3	3	3	9	Identified over established 0.11% HCA in post was allocated to night. This is soon to be taken away and allocated to other haematology in patient ward with known establishment shortage and use of specials.
William Gilliat	2	3059	2944	96%	2128	1898	89%	2197	2139	97%	1783	1610	90%	8	6	6	8	50	



Safer Staffing Numbers –September 2014 – Denmark Hill

Ward Name	Shift pattern	Planned RN/RMW Day	Actual RN/RMW Day	%	Planned HCAMS/W Day	Actual HCAMS/W Day	%	Planned RNR/RMW Night	Actual RNR/RMW Night	%	Planned HCAMS/W Night	Actual HCAMS/W Night	%	RN/RM W on Day shift	RN/RMW on Night shift	No. of Pts per nurse - Day Shift	No. of Pts per nurse - Night Shift	No. of Beds	Action taken by HON/Matron where 15% or more of nursing hours did not meet agreed staffing levels (Highlighted in red)
Adult Cystic Fibrosis Unit	3	1223	878	72%	150	0	5%	679	690	102%	115	0	10%	2	2	5	5	9	
Annie Zunz	3	2205	1980	90%	1350	1215	90%	1392	1277	92%	1035	1081	104%	4	4	6	8	28	
Brunel	3	1311	1231	94%	529	391	74%	1047	978	93%	311	104	33%	3	3	7	6	18	
Byron	3	1485	1448	97%	1185	1365	115%	840	805	96%	656	863	132%	3	2	6	8	19	
Cheere Ward	2	1219	1058	87%	345	426	123%	702	702	100%	345	495	143%	3	2	5	7	14	
Christine Brown CCU	2	5520	5675	103%	345	546	158%	5520	5612	102%	345	380	110%	16	16	1	1	18	
Coptcoat Ward	2	1564	1185	76%	345	541	157%	1127	1012	90%	242	334	138%	3	3	4	5	15	
Cotton	3	2243	2100	94%	1410	1583	112%	1369	1323	97%	426	840	197%	5	4	6	7	26	
David Marsden	2	2415	1771	73%	1035	2041	197%	2415	1748	72%	1035	2070	200%	5	5	6	6	31	7 ONPs sit in RN vacancies but recorded on data as HCA. Some of the RN shifts (days & nights) are bank RMN as specials. Wherever possible we book HCA to cover some RN vacancies depending on skill mix to keep costs down. High RN sickness levels for September.
Davidson	2	1725	1576	91%	667	638	96%	1380	1357	98%	368	495	134%	5	4	4	4	17	
Dawson	2	1633	1403	86%	690	610	88%	1392	1334	96%	690	656	95%	4	4	5	5	21	
Derek Mitchell Unit	2	1725	1576	91%	357	575	161%	1058	1035	98%	345	529	153%	5	3	3	5	15	
Donne	3	2265	2033	90%	1800	2003	111%	1288	1173	91%	1035	1472	142%	5	3	7	9	30	
ELF & LIBRA Ward	2	1725	1587	92%	690	627	91%	1392	1328	95%	690	702	102%	5	4	3	4	16	
Fisk Ward	2	1978	1817	92%	345	368	107%	1426	1380	97%	345	391	113%	5	4	3	4	15	
Frank Cooksey	3	1388	1298	94%	1373	1335	97%	771	771	100%	840	782	93%	3	2	5	7	15	
Frank Stansil Critical Care	2	4830	4928	102%	345	334	97%	4830	4836	100%	345	345	100%	14	14	1	1	10	
Frederick Still (Newborn Unit)	2	4830	5624	116%	46	46	100%	4830	5566	115%	0	0	100%	16	16	2	2	34	
Guthrie Ward	2	2001	1863	93%	357	403	113%	1035	1058	102%	345	345	100%	5	3	4	7	21	Satisfactory staffing levels throughout September.
Howard Ward	2	1288	1231	96%	598	575	96%	1035	1047	101%	345	426	123%	4	3	4	5	16	
Jack Steinberg Critical Care	2	5520	5480	99%	345	316	92%	5520	5394	98%	345	173	50%	16	16	1	1	20	
Katherine Monk	3	3510	2730	78%	1763	1785	101%	2312	1840	80%	1185	1196	101%	6	5	4	5	24	
Kinnier Wilson	2	1426	1403	98%	851	1116	131%	1127	1058	94%	575	1012	176%	4	3	5	7	20	
Kinnier Wilson HDU	2	2070	2070	100%	345	357	103%	2070	2036	98%	288	46	16%	6	6	2	2	11	
Lion	2	1001	874	87%	322	426	132%	1035	966	93%	46	127	275%	3	3	4	4	10	Additional HCAs were used due to the shortages on RNs to maintain patient safety.
Lister	2	1771	1541	87%	1012	1070	106%	1139	1047	92%	748	966	129%	4	3	6	8	25	
Liver ICU	2	6141	6302	103%	276	207	75%	6463	6268	97%	81	35	43%	18	18	1	1	19	
Lonsdale	3	2250	1965	87%	1313	1710	130%	1725	1622	94%	817	1208	148%	4	5	6	5	25	
Marjorie Warren	2	2415	2325	96%	1793	1755	98%	1380	1311	95%	1035	1058	102%	7	4	4	8	30	
Mary Ray	3	2663	2243	84%	1350	1515	112%	1783	1472	83%	1035	1403	136%	5	4	6	7	30	
Matthew Whiting	2	1886	1863	99%	1472	1530	104%	1380	1495	108%	690	886	128%	5	4	5	6	26	
Murray Falconer	2	2392	2162	90%	748	1035	138%	2059	2013	98%	725	955	132%	6	6	5	5	30	
Oliver	3	3150	2768	88%	870	938	108%	2082	1714	82%	667	713	107%	6	5	5	6	30	
Paediatric Short Stay	2	679	621	92%	357	345	97%	690	667	97%	345	322	93%	2	2	3	3	6	
Princess Elizabeth	2	1219	920	75%	322	345	107%	1024	978	96%	265	115	43%	3	3	4	4	11	Additional HCAs were used due to the shortages on RNs to maintain patient safety.
R D Lawrence	3	3248	2813	87%	930	1215	131%	2151	1875	87%	713	828	116%	6	5	4	5	28	
Rays Of Sunshine	2	2404	1967	82%	334	299	90%	2105	1725	82%	345	288	83%	6	5	3	4	19	
Recovery Ward	2	1346	1288	96%	81	69	86%	1070	1070	100%	23	46	200%	4	3	5	5	17	
Sam Oram	2	1369	1173	86%	644	817	127%	1058	920	87%	58	725	1260%	3	3	5	6	17	
Sam Oram CCU	3	1350	1350	100%	435	338	78%	1035	1024	99%	0	138	#DIV/0!	3	3	3	3	8	
The Friends Stroke Unit	3	3143	2933	93%	1530	1695	111%	2415	2277	94%	1035	1231	119%	7	7	4	4	29	
Thomas Cook CCCC	2	3795	3381	89%	345	311	90%	3795	3462	91%	345	322	93%	10	10	2	1	15	
Todd	2	2001	1633	82%	1001	1104	110%	1771	1633	92%	736	736	100%	5	5	5	5	22	
Toni & Guy	2	1990	1346	68%	311	334	107%	1702	1300	78%	161	357	221%	4	4	4	4	15	
Trundle	2	1041	1024	98%	690	575	83%	794	679	86%	541	334	62%	3	2	5	8	16	
Twining	3	2700	2123	79%	1350	1373	102%	1783	1553	87%	1035	1058	102%	5	5	6	6	28	
V&A HDU Ward	2	1484	1518	102%	322	368	114%	1392	1380	99%	334	368	110%	4	4	2	3	10	
Victoria & Albert	2	1288	1288	100%	311	322	104%	1081	1035	96%	46	161	350%	4	3	5	6	18	
Waddington	2	1035	1058	102%	345	339	98%	1035	1024	99%	92	138	150%	3	3	3	3	9	
William Gilliatt	2	2956	3105	105%	1978	1788	90%	2243	2231	99%	1541	1530	99%	9	6	6	8	50	Satisfactory staffing levels throughout September.

Safer Staffing Numbers – August 2014 - PRUH

Division	Ward Name	Day Planned RN	Day Actual RN	%	Day Planned HCA	Day Actual HCA	%	Night Planned RN	Night Actual RN	%	Night Planned HCA	Night Actual HCA	%	RN/RMW on Day shift	RN/RMW on Night shift	No. of Pts per nurse - Day Shift	No. of Pts per nurse - Night Shift	No. of Beds	Action taken by HON/Matron where 15% or more of nursing hours did not meet agreed staffing levels (Highlighted in red)
Surgery	Boddington (ORP)	2105	1334	63%	1047	575	55%	1104	725	66%	391	334	85%	4	2	6	11	23	
Network	Chartwell Unit	1139	1162	102%	725	598	83%	1070	1081	101%	403	391	97%	3	3	4	4	12	
Childrens	Childrens Ward	1012	1231	122%	345	311	90%	1070	1254	117%	104	58	56%	3	4	3	3	12	
Network	Coronary Care Unit (CCU)	1403	1507	107%	0	58	500%	1070	1070	100%	345	391	113%	4	3	3	4	12	
TEAM	Emergency Assessment Unit (EAU)	2139	1984	93%	713	725	102%	1783	1645	92%	564	713	127%	6	5	5	6	28	
TEAM	Farnborough Ward	2082	1909	92%	1426	2622	184%	1472	1403	95%	736	2243	305%	5	4	5	6	25	
CCTD	Intensive Care Unit	3209	2795	87%	357	253	71%	3209	2852	89%	357	230	65%	8	8	1	1	10	
Womens	Maternity Unit (PRU)	1242	1380	111%	932	886	95%	1093	1070	98%	736	621	84%	4	3	8	10	30	There are currently 3 vacancies which are in the process of being filled. Overall staffing levels did not impact on patient care.
Network	Med 5 - H	2139	1978	92%	725	909	125%	2139	2093	98%	713	679	95%	6	6	3	2	14	
Network	Med 5 - S	1426	1311	92%	1047	1127	108%	1426	1369	96%	748	736	98%	4	4	7	7	26	
TEAM	Medical Ward 1	Ward closed																	
TEAM	Medical Ward 2	1242	1058	85%	886	1024	116%	1081	1081	100%	426	403	95%	3	3	7	7	20	
TEAM	Medical Ward 3	1277	1162	91%	1070	1139	106%	1081	1058	98%	380	460	121%	3	3	6	7	20	
TEAM	Medical Ward 4	1242	1219	98%	840	909	108%	1070	1070	100%	391	414	106%	3	3	6	7	20	
TEAM	Medical Ward 6	1392	1185	85%	713	840	118%	1081	1035	96%	391	541	138%	3	3	6	7	20	Ok
TEAM	Medical Ward 7	1415	1334	94%	1047	1070	102%	1426	1081	76%	391	725	185%	4	3	5	7	20	
Network	Medical Ward 8	1403	1346	96%	690	771	112%	1081	1104	102%	702	817	116%	4	3	5	6	20	Ok
TEAM	Medical Ward 9	2139	1932	90%	702	679	97%	1783	1737	97%	518	702	136%	5	5	5	6	28	
Childrens	Special Care Baby Unit	1070	1012	95%	46	115	250%	1047	1047	100%	23	46	200%	3	3	4	4	12	
TEAM	Surgical Ward 1	1426	1162	81%	1070	2116	198%	1081	1070	99%	380	1656	436%	3	3	6	7	20	
TEAM	Surgical Ward 2	1415	1173	83%	1047	2053	196%	1127	1041	92%	472	1662	352%	3	3	6	7	20	
Surgery	Surgical Ward 3	1553	1403	90%	690	725	105%	1093	1081	99%	368	368	100%	4	3	5	7	20	
Surgery	Surgical Ward 4	1196	1047	88%	713	748	105%	805	725	90%	725	794	110%	3	2	5	7	14	
Surgery	Surgical Ward 5	1886	1840	98%	1070	1323	124%	1438	1426	99%	725	1035	143%	5	4	5	7	28	
Surgery	Surgical Ward 6	1645	1472	90%	713	863	121%	1070	1047	98%	357	564	158%	4	3	5	7	20	
Surgery	Surgical Ward 7	1967	1794	91%	1783	2001	112%	1426	1426	100%	1449	1737	120%	5	4	6	7	28	
womens	Surgical Ward 8	1311	1279	98%	702	679	97%	1070	1058	99%	357	357	100%	4	3	4	5	16	

Safer Staffing Numbers – September 2014 - PRUH

Division	Ward Name	Day Planned RN	Day Actual RN	%	Day Planned HCA	Day Actual HCA	%	Night Planned RN	Night Actual RN	%	Night Planned HCA	Night Actual HCA	%	RN/RMW on Day shift	RN/RMW on Night shift	No. of Pts per nurse - Day Shift	No. of Pts per nurse - Night Shift	No. of Beds	Action taken by HON/Matron where 15% or more of nursing hours did not meet agreed staffing levels (Highlighted in red)
Surgery	Boddington (ORP)	2070	1507	73%	1035	679	66%	1081	759	70%	391	368	94%	4	2	5	10	23	
Network	Chartwell Unit	1254	1219	97%	725	748	103%	1392	1035	74%	483	541	112%	4	3	3	4	12	
Childrens	Childrens Ward	932	1047	112%	265	288	109%	955	1024	107%	184	58	31%	3	3	4	4	12	
Network	Coronary Care Unit (CCU)	1357	1484	109%	69	35	50%	1058	1047	99%	345	345	100%	4	3	3	4	12	
TEAM	Emergency Assessment Unit (EAU)	2082	1863	90%	690	748	108%	1725	1633	95%	541	713	132%	5	5	5	6	28	
TEAM	Farnborough Ward	1955	1863	95%	1380	2116	153%	1380	1380	100%	702	1622	231%	5	4	5	6	25	
CCTD	Intensive Care Unit	3105	3117	100%	357	242	68%	3105	2979	96%	345	138	40%	9	9	1	1	10	HCA percentages low - not essential to nursing care and ongoing recruitment campaigns to fill all HCA vacancies are in progress
Womens	Maternity Unit (PRU)	1369	1369	100%	1001	897	90%	1024	1012	99%	679	633	93%	4	3	8	10	30	
Network	Med 5 - H	2047	2036	99%	702	679	97%	2070	2024	98%	702	690	98%	6	6	2	2	14	
Network	Med 5 - S	1380	1346	98%	1001	1012	101%	1380	1357	98%	782	702	90%	4	4	7	7	26	
TEAM	Medical Ward 1	Ward closed																	
TEAM	Medical Ward 2	1219	1104	91%	897	1116	124%	1035	1024	99%	391	564	144%	3	3	6	7	20	
TEAM	Medical Ward 3	1254	1150	92%	897	1185	132%	1047	1012	97%	368	656	178%	3	3	6	7	20	
TEAM	Medical Ward 4	1127	1104	98%	897	955	106%	1035	1035	100%	345	414	120%	3	3	6	7	20	
TEAM	Medical Ward 6	1369	1196	87%	702	771	110%	1035	1024	99%	345	506	147%	3	3	6	7	20	
TEAM	Medical Ward 7	1323	1242	94%	989	1058	107%	1035	1024	99%	345	690	200%	4	3	6	7	20	
Network	Medical Ward 8	1392	1369	98%	690	805	117%	1058	1047	99%	690	828	120%	4	3	5	7	20	
TEAM	Medical Ward 9	2093	1909	91%	702	771	110%	1725	1679	97%	506	759	150%	6	5	5	6	28	
Childrens	Special Care Baby Unit	1024	932	91%	12	127	1100%	1024	966	94%	12	92	800%	3	3	4	4	12	
TEAM	Surgical Ward 1	1300	1162	89%	978	1840	188%	1024	1035	101%	368	1472	400%	3	3	6	7	20	Ward operating at safe levels
TEAM	Surgical Ward 2	1357	1133	83%	1035	1616	156%	1047	1041	99%	368	1553	422%	3	3	6	7	20	Ward operating at safe levels
Surgery	Surgical Ward 3	1622	1484	91%	713	851	119%	1035	1035	100%	391	437	112%	4	3	5	7	20	Ward operating at safe levels
Surgery	Surgical Ward 4	1185	1012	85%	725	851	117%	782	690	88%	702	759	108%	3	2	5	7	14	
Surgery	Surgical Ward 5	1932	1840	95%	1035	1300	126%	1380	1380	100%	690	897	130%	5	4	5	7	28	
Surgery	Surgical Ward 6	1610	1495	93%	679	909	134%	1093	1070	98%	529	633	120%	4	3	5	6	20	
Surgery	Surgical Ward 7	1909	1806	95%	1668	1990	119%	1449	1415	98%	1990	1840	92%	5	4	5	7	28	
womens	Surgical Ward 8	1288	1254	97%	690	673	98%	1035	1024	99%	334	345	103%	4	3	4	5	16	

Aggregated Figures – Aug & Sept

August 2014

Planned	% of actual
RN day DH	92%
HCA Day DH	120%
RN Night DH	94%
HCA Night DH	135%
RN day PRUH	93%
HCA Day PRUH	134%
RN Night PRUH	96%
HCA PRUH	144%

September 2014

Planned	% of actual
RN day DH	91%
HCA Day DH	107%
RN Night DH	94%
HCA Night DH	141%
RN day PRUH	94%
HCA Day PRUH	150%
RN Night PRUH	96%
HCA PRUH	168%

Interpretation

- Where actual levels of registered nurses or health care assistants are less than planned levels, this can be as a result of vacancies or sickness, which it has either not been possible to fill with temporary staff, or the staff in charge at the time have decided that they are able to manage the workload without the need to fill the gap. It is therefore reasonable that a gap of less than 15% is usually acceptable and manageable.
- Where gaps are greater than 15%, in some cases this is because beds were empty, or on assessment of the workload, the staffing levels were believed to be adequate, and this decision is supported by an acceptable, if not optimum, ratio of nurse to patients.
- Where actual levels of registered nurses are greater than planned levels, this is sometimes as a result of increased workload or acuity which requires staffing above the planned level or a requirement for RMN cover.
- In a number of instances, the actual number of Health Care assistants is greater than planned. There are a number of reasons why this may be the case.
 - If there are patients requiring constant observation, for example, because they are confused or at risk of falling, additional healthcare assistants are used to provide 1:1 care. There has been a high use on both Denmark Hill and the PRUH sites
 - If there are gaps in trained nurses, but Bank staff are not available, a decision to use additional health care assistants might be the next best option especially if this is as a result of late cancellations of bank or agency nurses or sickness.
 - Some skewing of the HCA figures also occurs in areas where trained nurses from overseas are undertaking a supernumary preparation period, and during that time they are not included in registered nurse numbers

Summary

- There is little evidence to define an optimum nurse staffing level. This is because in different clinical settings there are too many variables that affect quality and safety, including patient acuity, level of competence and experience of the staff, ward layout, patient turnover, level of wider organisational support (e.g. IT support, administrative assistance). There is some evidence to suggest that where a nurse to patient ratios is greater than 1:8, safety is compromised. However 1:8 should not be the gold standard or the target for all the reasons listed above and ratios should not be more than 1:8.
- The sheets demonstrate that ratios of nurses to patients are better than 1:8 in the majority of cases on both sites, even when there are gaps in staffing levels.
- Use of bank and agency at the PRUH has continued to be high due to inherited poor establishments and vacancies which are slow to fill.
- A staffing review is currently being carried out and will be repeated across all sites twice a year. This has commenced with a peer review of all acuity scores and consideration of nurses per bed to ensure effective staffing.