

**EXECUTIVE SUMMARY**

**REPORT TO THE BOARD OF DIRECTORS**

**HELD ON 27<sup>TH</sup> October 2015**

At Kings College NHS Foundation Trust we aim to provide safe, high quality care to our patients and our staffing levels are continually assessed to ensure we meet this aim.

For most wards, there will be a difference between the planned and actual staffing hours. In some cases, departments will have used more hours than they planned to use and in other cases they will have used less hours than they planned. The reasons for using more staff hours than planned could include needing to open and staff additional beds, or needing to care for patients who are either more unwell or who have greater care needs than those patients usually cared for on that ward. The reasons for using less staff hours than planned could include using fewer beds than planned, or caring for patients who are less unwell or with fewer care needs than those patients usually cared for on that ward. The planned staffing level is based on optimal staffing levels and where actual staff is below this on a shift, the Trust has a number of mechanisms to ensure the staffing on that shift remains at a safe and appropriate level.

The average fill rate for the Trust and individual hospital inpatient sites in **September 2015** were as follows:

<b>September 2015</b>				
<b>Site</b>	<b>DAY</b>		<b>NIGHT</b>	
	<b>% Average fill rate RN</b>	<b>% Average Fill rate HCA</b>	<b>% Average fill rate RN</b>	<b>% Average Fill rate HCA</b>
<b>Denmark Hill</b>	<b>91%</b>	<b>99%</b>	<b>92%</b>	<b>123%</b>
<b>PRUH</b>	<b>98%</b>	<b>95%</b>	<b>96%</b>	<b>105%</b>

**Appendices:**

- September 2015 Variance report by ward/department (Appendix I)
- September 2015 Unify Upload (Appendix II)



Nursing\_staff\_return(Sep15).zip

APPENDIX I

VARIANCE REPORT BY WARD / DIVISION

The following wards have been identified as having a variance of greater than 15% against either their day or night staffing for either Nursing, Midwifery and Care staff during **September 2015**. The Trust website lists the results for all the inpatient wards or departments and details whether there was a deficit or surplus between the planned and actual staffing.

PRUH/Orpington

Division	Ward	Day Planned RN	Day Actual RN	%	Day Planned HCA	Day Actual HCA	%	Night Planned RN	Night Actual RN	%	Night Planned HCA	Night Actual HCA	%	Review by HON/Matron/Ward where 15% or more of nursing hours did not meet agreed staffing levels (Highlighted in red)
Cardiac	Coronary Care Unit (CCU)	1334	1334	100%	23	23	100%	1081	1024	95%	0	35	300%	HCA's booked for specialising.

Division	Ward	Day Planned RN	Day Actual RN	%	Day Planned HCA	Day Actual HCA	%	Night Planned RN	Night Actual RN	%	Night Planned HCA	Night Actual HCA	%	Review by HON/Matron/Ward where 15% or more of nursing hours did not meet agreed staffing levels (Highlighted in red)
CCTD	Intensive Care Unit	3002	2933	98%	334	219	66%	3105	2726	88%	345	322	93%	Two staff on long term sickness however low occupancy and acuity did not therefore require backfill - patient care not effected.

Division	Ward	Day Planned RN	Day Actual RN	%	Day Planned HCA	Day Actual HCA	%	Night Planned RN	Night Actual RN	%	Night Planned HCA	Night Actual HCA	%	Review by HON/Matron/Ward where 15% or more of nursing hours did not meet agreed staffing levels (Highlighted in red)
Children's	Childrens Ward	1081	1162	107%	334	265	79%	1369	1104	81%	104	23	22%	Reduced activity no requirement to cover staff unavailability.
Children's	Special Care Baby Unit	966	978	101%	92	184	200%	989	978	99%	69	150	217%	Additional HCA's booked to cover milk bank.

Division	Ward	Day Planned RN	Day Actual RN	%	Day Planned HCA	Day Actual HCA	%	Night Planned RN	Night Actual RN	%	Night Planned HCA	Night Actual HCA	%	Review by HON/Matron/Ward where 15% or more of nursing hours did not meet agreed staffing levels (Highlighted in red)
Network	Acute Stroke Unit (PRUH)	1438	1369	95%	1070	1024	96%	1392	1104	79%	932	1035	111%	The ward was running short on RNs due to vacancies/skills however safety always ensured by moving staff around and escalation to Matron.
Network	Chartwell Unit	1035	1012	98%	679	518	76%	1035	1035	100%	403	403	100%	Staffing levels low due to staff sickness but Quality and safe patient care assured by senior members of the team working on the floor to cover the shortfall
Network	HASU - Hyper Acute Stroke Unit	2047	1875	92%	702	644	92%	2047	1909	93%	690	495	72%	The ward was running short on RNs due to vacancies/skills however safety always ensured by moving staff around and escalation to Matron.
Network	Ontario (ORP)	1024	1018	99%	1035	449	43%	702	702	100%	690	598	87%	We adjust staffing due to patient numbers and generally the reduced staffing is because we have a lower number of patients on the ward.

Division	Ward	Day Planned RN	Day Actual RN	%	Day Planned HCA	Day Actual HCA	%	Night Planned RN	Night Actual RN	%	Night Planned HCA	Night Actual HCA	%	Review by HON/Matron/Ward where 15% or more of nursing hours did not meet agreed staffing levels (Highlighted in red)
Surgery	Boddington (ORP)	2047	1564	76%	1024	748	73%	1047	955	91%	667	541	81%	We adjust staffing due to patient numbers and generally the reduced staffing is because we have a lower number of patients on the ward.

Division	Ward	Day Planned RN	Day Actual RN	%	Day Planned HCA	Day Actual HCA	%	Night Planned RN	Night Actual RN	%	Night Planned HCA	Night Actual HCA	%	Review by HON/Matron/Ward where 15% or more of nursing hours did not meet agreed staffing levels (Highlighted in red)
TEAM	Medical Ward 4	1311	1277	97%	1265	1047	83%	1035	1024	99%	1024	978	96%	Ward managed safely within available resource with close Matron supervision.

Division	Ward	Day Planned RN	Day Actual RN	%	Day Planned HCA	Day Actual HCA	%	Night Planned RN	Night Actual RN	%	Night Planned HCA	Night Actual HCA	%	Review by HON/Matron/Ward where 15% or more of nursing hours did not meet agreed staffing levels (Highlighted in red)
women's	Surgical Ward 8	1288	1254	97%	713	575	81%	1047	1012	97%	357	276	77%	Staffing reduced in month due to low occupancy and acuity. Safe staffing maintained.

## Denmark Hill

Division	Ward Name	Planned RN/RMW Day	Actual RN/RMW Day	% Average fill rate RN - Day	Planned HCA/MSW Day	Actual HCA/MSW Day	% Average Fill rate HCA - Day	Planned RN/RMW Night	Actual RN/RMW Night	% Average fill rate RN - Night	Planned HCA/MSW Night	Actual HCA/MSW Night	% Average Fill rate HCA - Night	Review by HON/Matron/Ward where 15% or more of nursing hours did not meet agreed staffing levels (Highlighted in red)
Cardiac	Coronary Care Unit (Sam Oram)	1035	1035	100%	316	316	100%	1035	1035	100%	23	12	50%	Staff moved to support Sam Oram as staffing levels were adequate on this ward.
Cardiac	Cotton	1771	1610	91%	1070	1093	102%	1426	1288	90%	403	598	149%	Unfilled RN shifts backfilled with HCA, plus 1:1 specialising for patients.
Cardiac	Recovery Ward	1288	1300	101%	69	46	67%	1012	1139	113%	12	12	100%	HCA moved to HDU on amber shift
Cardiac	Sam Oram	1346	1185	88%	587	748	127%	1035	989	96%	357	541	152%	Unfilled RN shifts backfilled with HCA, plus 1:1 specialising for patients.
Cardiac	Victoria & Albert	1323	1277	97%	322	426	132%	1047	1012	97%	23	92	400%	Unfilled RN shifts backfilled with HCA, plus 1:1 specialising for patients.

Division	Ward Name	Planned RN/RMW Day	Actual RN/RMW Day	% Average fill rate RN - Day	Planned HCA/MSW Day	Actual HCA/MSW Day	% Average Fill rate HCA - Day	Planned RN/RMW Night	Actual RN/RMW Night	% Average fill rate RN - Night	Planned HCA/MSW Night	Actual HCA/MSW Night	% Average Fill rate HCA - Night	Review by HON/Matron/Ward where 15% or more of nursing hours did not meet agreed staffing levels (Highlighted in red)
Children's	Lion	1012	966	95%	322	242	75%	1035	1001	97%	69	35	50%	Reduced activity no requirement to cover staff shortages.
Children's	Paediatric Short Stay	690	667	97%	345	288	83%	667	633	95%	334	276	83%	Sickness and Vacancies within the wards but where shifts couldn't be filled - daily review of Paeds acuity requirements meant that we moved staff around accordingly to ensure that patient care was not compromised.
Children's	Princess Elizabeth	1070	1047	98%	345	253	73%	1058	932	88%	115	104	90%	Sickness and Vacancies within the wards but where shifts couldn't be filled - daily review of Paeds acuity requirements meant that we moved staff around accordingly to ensure that patient care was not compromised.
Children's	Rays Of Sunshine	2415	1921	80%	345	161	47%	2070	1771	86%	334	184	55%	Sickness and Vacancies within the wards but where shifts couldn't be filled - daily review of Paeds acuity requirements meant that we moved staff around accordingly to ensure that patient care was not compromised.
Children's	Thomas Cook CCCC	3933	3393	86%	345	311	90%	4037	3209	79%	345	276	80%	Sickness and Vacancies within the wards but where shifts couldn't be filled - daily review of Paeds acuity requirements meant that we moved staff around accordingly to ensure that patient care was not compromised.
Children's	Toni & Guy	2036	1507	74%	334	334	100%	1760	1369	78%	127	196	155%	Sickness and Vacancies within the wards but where shifts couldn't be filled - daily review of Paeds acuity requirements meant that we moved staff around accordingly to ensure that patient care was not compromised.

Division	Ward Name	Planned RN/RMW Day	Actual RN/RMW Day	% Average fill rate RN - Day	Planned HCA/MSW Day	Actual HCA/MSW Day	% Average Fill rate HCA - Day	Planned RN/RMW Night	Actual RN/RMW Night	% Average fill rate RN - Night	Planned HCA/MSW Night	Actual HCA/MSW Night	% Average Fill rate HCA - Night	Review by HON/Matron/Ward where 15% or more of nursing hours did not meet agreed staffing levels (Highlighted in red)
Haematology	Davidson	1725	1489	86%	690	656	95%	1380	1254	91%	345	506	147%	HCA usage more than 120% for night shift due to specials and support to cover RN shortfall, making shift amber. RN diluted across the haematology unit to make an amber shift across.
Haematology	Derek Mitchell Unit	1725	1489	86%	368	633	172%	1058	1035	98%	345	794	230%	HCA usage more than 147% in a day and 230% for night shift due to specials (3 patients required special on this month days/night) and support to cover RN shortfall, making shift amber. RN diluted across the haematology unit to make an amber shift across.
Haematology	ELF & LIBRA Ward	1702	1403	82%	667	621	93%	1415	1173	83%	403	598	149%	HCA usage for night shift was to support to cover RN shortfall, making shift amber. RN less than 83% either covered by other haematology wards and supported with additional HCA to make shift amber.
Haematology	Waddington	1035	949	92%	345	311	90%	1024	943	92%	0	58	500%	HCA usage 500% on night due to covering RN shortfall as RN moved to other haematology unit for support, creating an amber shift across 4 haematology wards.

Division	Ward Name	Planned RN/RMW Day	Actual RN/RMW Day	% Average fill rate RN - Day	Planned HCA/MSW Day	Actual HCA/MSW Day	% Average Fill rate HCA - Day	Planned RN/RMW Night	Actual RN/RMW Night	% Average fill rate RN - Night	Planned HCA/MSW Night	Actual HCA/MSW Night	% Average Fill rate HCA - Night	Review by HON/Matron/Ward where 15% or more of nursing hours did not meet agreed staffing levels (Highlighted in red)
Liver and Renal	Dawson	1610	1392	86%	667	794	119%	1967	1311	67%	690	759	110%	Unable to fill the RN shifts but used additional HCAs to support this - patient care was not affected.
Liver and Renal	Fisk Ward	1380	1162	84%	391	518	132%	1380	1242	90%	368	449	122%	Unable to fill the RN shifts but used additional HCAs to support this - patient care was not affected.
Liver and Renal	Liver ICU	5957	6302	106%	104	46	44%	6153	6222	101%	69	35	50%	Low level of HCA is related to activity / dependency levels.

Division	Ward Name	Planned RN/RMW Day	Actual RN/RMW Day	% Average fill rate RN - Day	Planned HCA/MSW Day	Actual HCA/MSW Day	% Average Fill rate HCA - Day	Planned RN/RMW Night	Actual RN/RMW Night	% Average fill rate RN - Night	Planned HCA/MSW Night	Actual HCA/MSW Night	% Average Fill rate HCA - Night	Review by HON/Matron/Ward where 15% or more of nursing hours did not meet agreed staffing levels (Highlighted in red)
Neuro	David Marsden	2254	1978	88%	966	1696	176%	2254	1863	83%	966	1725	179%	Unable to fill the RN shifts but used additional HCAs to support this - patient care was not affected.
Neuro	Kinnier Wilson	1725	1656	96%	1035	1150	111%	1392	1173	84%	690	966	140%	Unable to fill the RN shifts but used additional HCAs to support this - patient care was not affected.
Neuro	Kinnier Wilson HDU	2001	1978	99%	276	81	29%	2059	1978	96%	161	92	57%	Low level of HCA is related to activity / dependency levels.

Division	Ward Name	Planned RN/RMW Day	Actual RN/RMW Day	% Average fill rate RN - Day	Planned HCA/MSW Day	Actual HCA/MSW Day	% Average Fill rate HCA - Day	Planned RN/RMW Night	Actual RN/RMW Night	% Average fill rate RN - Night	Planned HCA/MSW Night	Actual HCA/MSW Night	% Average Fill rate HCA - Night	Review by HON/Matron/Ward where 15% or more of nursing hours did not meet agreed staffing levels (Highlighted in red)
Private Patients	Guthrie Ward	2059	1748	85%	345	311	90%	1070	1058	99%	345	345	100%	There are two vacancies currently within the department which have been filled with bank where required but acuity lower this month which means patient care was not compromised.

Division	Ward Name	Planned RN/RMW Day	Actual RN/RMW Day	% Average fill rate RN - Day	Planned HC/MSW Day	Actual HC/MSW Day	% Average Fill rate HCA - Day	Planned RN/RMW Night	Actual RN/RMW Night	% Average fill rate RN - Night	Planned HC/MSW Night	Actual HC/MSW Night	% Average Fill rate HCA - Night	Review by HON/Matron/Ward where 15% or more of nursing hours did not meet agreed staffing levels (Highlighted in red)
Surgery	Coptcoat Ward	1541	1104	72%	334	299	90%	1104	874	79%	242	322	133%	Surgery had opened the Twining ward intermittently this month and combined with current vacancies and sickness the wards were also trying to cover this over flow. However all the wards in surgery had PDNs allocated to be clinical based to support the staffing issues and wards were reviewing this on a daily basis to ensure patient care was not compromised.
Surgery	Katherine Monk	2737	2220	81%	1357	1265	93%	2185	1875	86%	1116	1288	115%	Surgery had opened the Twining ward intermittently this month and combined with current vacancies and sickness the wards were also trying to cover this over flow. However all the wards in surgery had PDNs allocated to be clinical based to support the staffing issues and wards were reviewing this on a daily basis to ensure patient care was not compromised.
Surgery	Lister	2415	1806	75%	690	828	120%	1484	1139	77%	690	817	118%	Surgery had opened the Twining ward intermittently this month and combined with current vacancies and sickness the wards were also trying to cover this over flow. However all the wards in surgery had PDNs allocated to be clinical based to support the staffing issues and wards were reviewing this on a daily basis to ensure patient care was not compromised.
Surgery	Matthew Whiting	2036	1507	74%	1380	1622	118%	1380	1185	86%	690	1139	165%	Surgery had opened the Twining ward intermittently this month and combined with current vacancies and sickness the wards were also trying to cover this over flow. However all the wards in surgery had PDNs allocated to be clinical based to support the staffing issues and wards were reviewing this on a daily basis to ensure patient care was not compromised.
Surgery	Trundle	1254	1012	81%	679	638	94%	863	794	92%	656	575	88%	Surgery had opened the Twining ward intermittently this month and combined with current vacancies and sickness the wards were also trying to cover this over flow. However all the wards in surgery had PDNs allocated to be clinical based to support the staffing issues and wards were reviewing this on a daily basis to ensure patient care was not compromised.

Division	Ward Name	Planned RN/RMW Day	Actual RN/RMW Day	% Average fill rate RN - Day	Planned HC/MSW Day	Actual HC/MSW Day	% Average Fill rate HCA - Day	Planned RN/RMW Night	Actual RN/RMW Night	% Average fill rate RN - Night	Planned HC/MSW Night	Actual HC/MSW Night	% Average Fill rate HCA - Night	Review by HON/Matron/Ward where 15% or more of nursing hours did not meet agreed staffing levels (Highlighted in red)
TEAM	Byron	2139	1645	77%	1070	1058	99%	1783	1415	79%	1070	1093	102%	Vacancy factors unable to fill all shifts -Ward Escalated to duty matron and staff moved or matron assited
TEAM	Lonsdale	1978	1518	77%	1035	966	93%	1725	1426	83%	690	748	108%	Vacancy factors unable to fill all shifts -Ward Escalated to duty matron and staff moved or matron assited
TEAM	Marjorie Warren	1990	1932	97%	1047	1357	130%	1415	1357	96%	1035	1231	119%	Acuity related to high number 1-1 skill relating to HCAs
TEAM	Mary Ray	2059	1668	81%	1035	1058	102%	1656	1415	85%	1035	1093	106%	Vacancy factors unable to fill all shifts -Ward Escalated to duty matron and staff moved or matron assited
TEAM	Oliver	2415	1978	82%	1035	1081	104%	2047	1645	80%	702	840	120%	Vacancy factors unable to fill all shifts -Ward Escalated to duty matron and staff moved or matron assited
TEAM	R D Lawrence	2415	1875	78%	713	955	134%	2082	1633	78%	690	736	107%	Vacancy factors unable to fill all shifts -Ward Escalated to duty matron and staff moved or matron assited

Division	Ward Name	Planned RN/RMW Day	Actual RN/RMW Day	% Average fill rate RN - Day	Planned HC/MSW Day	Actual HC/MSW Day	% Average Fill rate HCA - Day	Planned RN/RMW Night	Actual RN/RMW Night	% Average fill rate RN - Nigh	Planned HC/MSW Night	Actual HC/MSW Night	% Average Fill rate HCA - Night	Review by HON/Matron/Ward where 15% or more of nursing hours did not meet agreed staffing levels (Highlighted in red)
Women's	Brunel	1346	1288	96%	644	483	75%	1035	1035	100%	368	334	91%	Vacancy factor which is currently being recruited to during day shift for HCA however patient care was not affected.