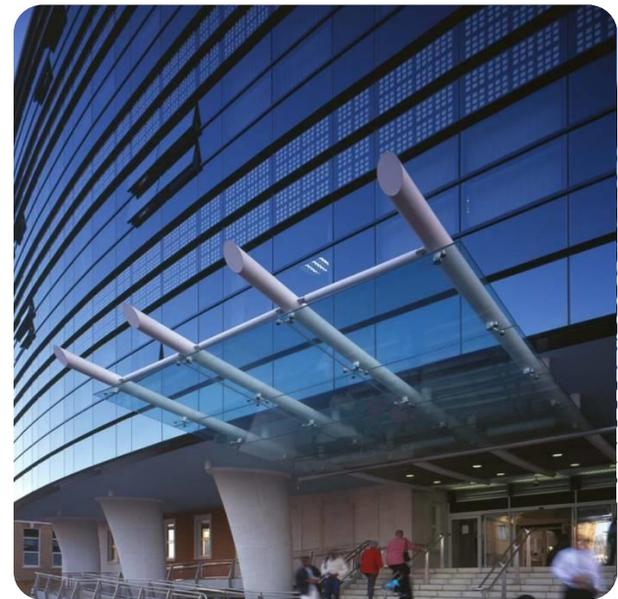


# Monthly Nurse Safer Staffing Report March/ April 2018

Trust Board May 2018

Dr Shelley Dolan  
Chief Nurse /Chief Operating Officer



KING'S HEALTH PARTNERS

## Introduction

Following the investigation into Mid Staffordshire NHS Trust, the resultant Francis report, NHS England (NHSE) and NHS Improvement (NHSi) requested that all Trust Boards receive monthly reports on the levels of planned and actual nursing and care staff.

This report provides evidence to the Board on the Nursing and Midwifery and care staff levels across the Trust March/ April 2018 and provides details of the actual hours of Nursing, Midwifery and Health Care Assistant (HCA) on day and night shifts versus planned staffing levels. Care Hours Per Patient Day (CHPPD) are also being collected as mandated by NHS England (2016) and are benchmarked with other London and Shelford Trusts when the data is available through the Model Hospital (NHSi).

This report includes data relating to nurse staffing levels, areas where safe staffing levels were not met and CHPPD., in addition information is provided regarding current recruitment initiatives that are supporting the reduction in the nursing and midwifery vacancy rate

## Background

The international evidence demonstrates that the six critical issues for safe staffing and quality patient care and experience are the following:

1. Expert clinical leadership at Sister /Charge Nurse and Matron level
2. Appropriate skill mix for the acuity and dependency of the patient group
3. Appropriate establishment for the size / complexity of the unit
4. Ability to recruit the numbers required to fill the establishment
5. Good retention rates , ensuring staff are experienced in the clinical speciality and context / environment
6. Ability to flex at short notice to fill with temporary staff when there are unplanned vacancies / or to use staff from other areas.

## Red Shifts

A red shift occurs when there is a shortfall in the expected numbers of staff to manage the acuity and dependency of the patients of a ward / department. There is a daily trust wide red shift alert issued to senior nursing staff; this highlights the location of wards and departments with red shifts which in turn enables senior nursing staff to support these wards.

In March 2018 there were a total of 167 red shifts across both sites, which was the highest number of red shifts seen in Q4. In April 2018 the number of red shifts reduced significantly to a total of 90 across the trust. 41 were recorded at the Denmark Hill Site and 49 at the Princess Royal University Hospital (PRUH); 73% of these red shifts occurred on day shifts. The trend of red shifts will continue to be monitored on a monthly basis, utilising a newly developed heat map that will be reviewed at the monthly safer care forums. This information will be reviewed alongside harms and other safety metrics to ensure there is adequate oversight of any gaps in staffing that may impact negatively on care.

## 'Hotspot' areas for nursing/midwifery staffing in March / April 2018

The aggregate nursing and midwifery vacancy rate has continued to fall, however a number of "hotspot" wards / units with higher vacancy rates remain.

The nursing hotspot areas are outlined below, these areas remain largely the same to previous months despite various campaigns to address the vacancies, however it is worth noting that Neurosciences and Theatres have seen slight decreases in vacancy rate in this period.

**DH:** Post Acute Medicine , Neurosciences, Theatres and Emergency Department

**PRUH:** Acute and Emergency Care (Band6 ), Medicine, Theatres.

The number of staff required per shift is calculated using an evidence based tool, dependent on the acuity level of the patients. This is further informed by professional judgement, taking into consideration issues such as ward size and layout, patient dependency, staff experience, incidence of harm and patient satisfaction and is in line with NICE guidance. This provides the optimum planned number of staff per shift.

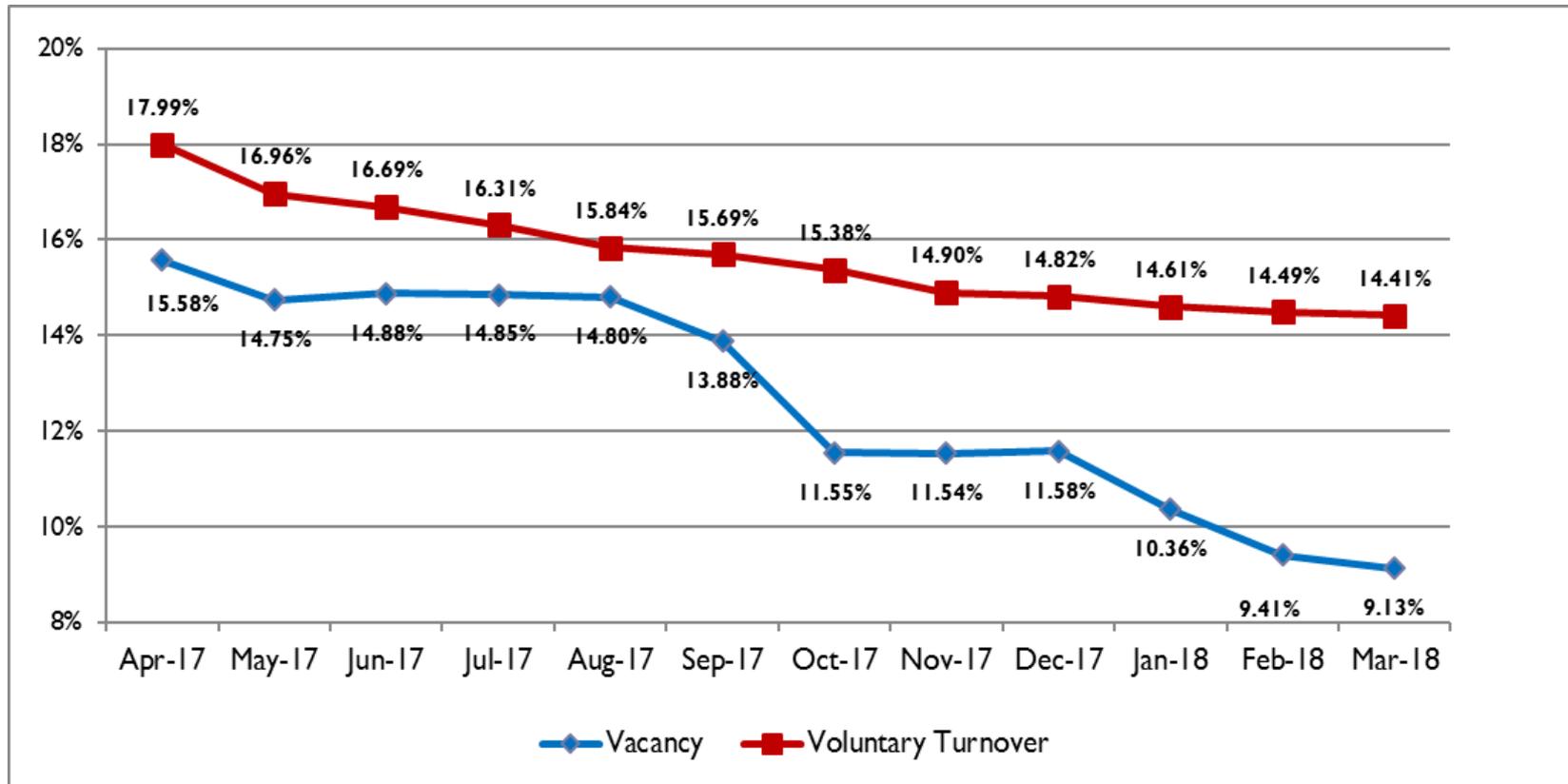
For each of the 79 clinical inpatient areas in, the actual number of staff as a percentage of the planned number is recorded on a monthly basis.

The table below represents the high level summary of the planned and actual ward staffing levels reported for March 2018.

Site	%Fill Rates Day & Night				Care Hours Per Patient Day (CHPPD)		
	Average fill rate- RN/Midwives (%) Day	Average fill rate- RN/Midwives (%) Night	Average fill rate - Care staff (%) Day	Average fill rate - Care staff (%) Night	Reg. midwi ves/ nurses	Care Staff	Total CHPPD
DH	93%	99%	122%	138%	8.8	3.5	12.6
PRUH & South Sites	96%	98%	100%	119%	5.3	3.6	8.8

Some clinical areas were unable to achieve the planned staffing levels due to vacancies and sickness, staffing levels are however maintained through the relocation of staff, use of bank staff and where necessary agency staff.

- The graph below outlines the annual vacancy and turnover across the Nursing and Midwifery workforce, with a continued downward trend seen in both.



Graph 1 . Nursing &amp; Midwifery Turnover / Vacancy 2017 /18

Mar-18			
Sub-Division/Care Group	N&M and Support Vacancy FTE	Vacancy % NM	Voluntary Turnover % NM
<b>Networked Care Operational Team</b>	<b>15.53</b>	<b>93.95%</b>	
Networked Care Operational Team	15.53	93.95%	
<b>Sub Division A</b>	<b>-23.12</b>	<b>0.00%</b>	15.19%
Cardiovascular Sciences	10.99	5.08%	14.99%
Critical Care, Radiology and MEP	-66.28	0.00%	17.16%
Sub Div A Operational Team	-2.00	0.00%	
Variety Childrens Hospital	34.16	8.95%	12.77%
<b>Sub Division B</b>	<b>65.80</b>	<b>6.80%</b>	13.68%
Cancer	3.80	21.35%	15.09%
Haematology and Precision Medicine	13.07	7.32%	12.37%
Liver and Renal	7.03	1.84%	12.47%
Neurosciences	43.90	11.32%	15.56%
Sub Div B Operational Team	-2.00	0	36.36%
<b>Networked Grand Total</b>	<b>58.21</b>	<b>2.87%</b>	<b>14.49%</b>

Overall there is a slight reduction in vacancy and turnover across Networked care in March 2018 in comparison to the previous month

Mar-18			
Sub-Division/Care Group	N&M and Vacancy FTE NM	Vacancy % NM	Voluntary Turnover % NM
<b>Planned Care</b>	<b>72.44</b>	<b>7.14%</b>	<b>13.39%</b>
Dental	-0.60	0.00%	
Planned Care Operational Team	3.40	37.78%	
Planned surgery and Ophthalmology	-9.99	0.00%	15.04%
Theatres and Anaesthetics	65.90	17.86%	14.77%
Womens Health	13.72	3.84%	11.42%
<b>Urgent and planned care operational team</b>	<b>0.00</b>	<b>0.00%</b>	
Urgent and planned care operational team	0.00	0.00%	
<b>Urgent Care</b>	<b>85.67</b>	<b>10.61%</b>	<b>16.62%</b>
Acute and Emergency	30.48	8.83%	15.11%
Pharmacy			
Post-Acute and Planned - Urgent Care	53.97	12.14%	18.15%
Therapies	1.22	8.41%	12.70%
Urgent Care Operational Team	0.00	0.00%	
<b>UPACS Grand Total</b>	<b>158.11</b>	<b>8.68%</b>	<b>14.74%</b>

Overall there is a very slight reduction in vacancy and turnover across UPACs in March 2018 in comparison to the previous month

Mar-18			
Sub-Division/Care Group	N&M and Support Vacancy FTE NM	Vacancy % NM	Voluntary Turnover % NM
Acute and Emergency Care	40.85	17.99%	19.41%
Post-Acute Medicine	79.56	12.42%	14.66%
PRUH Operational Team	3.27	7.52%	9.20%
Surgery, theatres, Anaesthetics and Endoscopy	63.38	12.69%	9.57%
Womens and Childrens and core services	5.07	1.30%	11.67%
PRUH Grand Total	192.14	10.68%	12.99%

The vacancy rate has increased slightly in the PRUH and South Sites division in comparison to the February 2018 figure. The turnover rate has however reduced slightly in March 2018

## Denmark Hill Site

- Recruitment via Sterling Cross and ID Medical recruitment agencies continue, greater success has been seen via Sterling Cross in medicine and this contract continues. The contract for ED has however been concluded due to poor results.
- Eight Internationally educated nurses started in April 2018, with further cohorts scheduled in May 2018
- Within medicine there are higher numbers of external starters than those leaving the trust, which suggests that leavers are moving to other areas of the Trust rather than exiting the Trust, however this is increasing the vacancy rate in this specific area. Work is being undertaken to address this as part of a wider programme to retain band 5 staff and in particular newly qualified nurses across the Trust
- Individual team leaders for specific theatre specialities are now responsible for recruitment in their areas (Band 7), which is a shift in the staff responsible for recruitment within this speciality
- Staff attended a recruitment campaign for theatre nurses in April 2018 in Ireland
- Revised rolling adverts continue on NHS Jobs for B5 and B6 – both generic and focussed - New adverts written and in use to include the Neurosciences foundation course amongst other benefits

## PRUH

- A full year rolling Guardian campaign is being planned for the whole of the PRUH site, this is due to start from May 2018. This will include content pieces and promoted jobs/banners. An initial prominent advert will feature in a Guardian NHS 70<sup>th</sup> anniversary supplement.

[https://uploads.guim.co.uk/2018/05/23/Finalset\\_PDF\\_NHSsmaller.pdf](https://uploads.guim.co.uk/2018/05/23/Finalset_PDF_NHSsmaller.pdf)

- Band 6 vacancy rate remains high at around 40% across Acute and Emergency Care at PRUH (30 WTE vacancies) with more detailed planning is underway, including utilisation of print and online specialist sections of the RCN publications
- A review of adverts and more detailed planning underway for B6 recruitment which continues to be the most challenging area. Advert going in the Emergency Nursing section of the RCN Bulletin and hard copy. Advert to run for 2 months.
- Post-Acute Medicine at the PRUH is challenged across B2, B5 and B6. Significant recruitment undertaken but with continued turnover and recruitment lead times, further measures are being reviewed.
- Additional internationally educated nurses commenced in post in May 2018

## Australia

- Of the 42 offers made and confirmed by candidates, 7 have started between January 2018 and March 2018, the remaining confirmed new starters will start employment over the next 6 months. Unfortunately a number have pushed back start dates due to personal circumstances etc.
- Current offers accepted: Brisbane - 18 out of 22; Melbourne 9 out of 14; Sydney 15 out of 22.
- The Trust will be returning to Australia in June 2018, with job fairs booked for Melbourne, Sydney, and Brisbane through Health Sector Jobs. Staff have been identified to attend, ensuring that there is appropriate representation across key hot spots within the trust.
- As part of the above recruitment campaign, an additional event will take place in Auckland, New Zealand. King's will be the only English trust attending this event.

## Other countries

- Multiple other recruitment events are planned for forthcoming months, including India, Philippines, Spain and Ireland
- Work is also being undertaken as part of the international recruitment to develop a recruitment microsite for the Australian recruitment campaign; this will then be adapted for wider use locally and nationally.

- Following receipt of the NHSi desktop review of nursing establishments, work has been completed within each division to reduce headcount, both substantive and temporary staffing. This has been completed at pace, with the overall process due for completion at the end of June 2018. Following these reductions, monitoring safer care metrics will be essential to ensure that these reductions do not impact on safety, this will be monitored via the monthly safer care forums.
- The additional training recommended by NHSi in relation to acuity and dependency scoring for adult in-patient areas has now been completed and a plan developed for wider roll out across the Trust. A date is set for the same training to be rolled out across paediatrics.
- The E- Roster steering group continues, which is increasing the scrutiny of rota management and enabling certain aspects of the e-roster module to be managed more effectively. The E-roster policy is being revised, and support to this is being provided by NHSi.
- The new nursing and midwifery control process that was instituted from the 30<sup>th</sup> April 2018 has been revised further with all accountability for temporary spend sign off now sitting with Directors of Nursing, this change was instigated on 22<sup>nd</sup> May 2018. The spend will be audited weekly and any spend that still occurs above budget rapidly scrutinised and managed.
- Work is underway to review the current preceptorship programme, to ensure that newly qualified nurses are supported and developed in practice and do not exit the organisation within the first year of registration.
- Following review of the current programme for internationally educated nurses, it is planned to reduce the current programme from 12 weeks to 8 weeks and ensure that the supervisory period is managed effectively and consistently across the trust.

**The Board of Directors are asked to note the information contained in this briefing: the use of the red flag system to highlight concerns raised and the continued focus on recruitment, retention and innovation to support effective workforce utilisation.**