

Board of Directors: 12.07.18

Agenda Item: Bo.7.18.35

NURSE STAFFING DATA PUBLICATION REPORT – MAY 2018

Presented by:	Karen Dawber Chief Nurse	Author:	Jo Hilton, Assistant Chief Nurse
Previously considered by:	Quality Committee – 27.06.18 (Agenda item Q.6.18.11)		

Key points						Purpose:
1. Note the average fill rates for Bradford Royal Infirmary Site: 2. Note the average fill rates for St Luke's and the Community Hospital sites.						To receive
Date	Hospital	Day		Night		
		Average fill rate-registered nurse/midwife %	Average fill rate- care staff %	Average fill rate-registered nurse/midwife %	Average fill rate- care staff %	
May-18	BRI	87.3%	105.1%	93.2%	117.5%	
May-18	SLH + CH	85.2%	105.3%	103.4%	100.7%	
3. Note mitigation taken.						To receive

Executive Summary:

This report provides an update on the mandatory nurse staffing data for May 2018, in line with the requirements outlined in both the Hard Truths (2013) and the subsequent National Quality Board Report (2013). All NHS trusts are now required to provide monthly retrospective data via UNIFY to enable NHS England to publish Trust reports on NHS Choices. Included in this month's report is data from the NHS Improvement Model Hospital Portal showing national comparisons of the Care Hours Per Patient Day measure introduced in May 2016.

Financial implications:

N/a

Regulatory Relevance:

Monitor:	Quality Governance Framework
Equality	Not Applicable

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Impact / Implications:	<p>Is there likely to be any impact on any of the protected characteristics? (Age, Disability, Gender, Gender Reassignment, Pregnancy and Maternity, Race, Religion or Belief, Sexual Orientation, Health Inequalities, Human Rights)</p> <p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If yes, what is the mitigation against this?</p>
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Other:	CQC – Domains of Safe and Well Led
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Strategic Objective: <i>Reference to Strategic Objective(s) this paper relates to</i>	To provide outstanding care for patients
	To deliver our financial plan and key performance targets
	To be in the top 20% of NHS employers
	To be a continually learning organisation
	To collaborate effectively with local and regional partners

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1. Introduction

This paper reports on the nurse staffing data for May 2018, identifying the actual staffing levels in place against what was planned. It identifies areas of discrepancy between the two, and provides an exception report on actions taken as a result. This information relates to the staffing levels on all inpatient wards including adult, paediatric and maternity wards.

2. Results for May 2018

Table 1 below outlines the average fill rates for registered nurses/midwives and care staff over both day and night shifts in May 2018, by hospital site. It should be noted that community hospitals (CH) appear in the figures for St Luke's Hospital (SLH) as required by the submission of the Unify tool.

Date	Hospital	Day		Night	
		Average fill rate-registered nurse/midwife %	Average fill rate-care staff %	Average fill rate-registered nurse/midwife %	Average fill rate-care staff %
May-18	BRI	87.3%	105.1%	93.2%	117.5%
May-18	SLH + CH	85.2%	105.3%	103.4%	100.7%

Table 1

The percentage fill rates for day shifts for registered nurses for October 2017 to May 2018 are shown in figure 1 below.

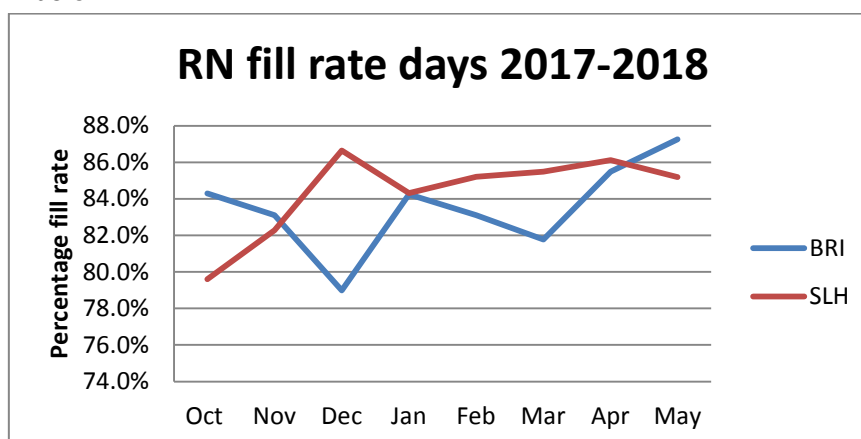


Figure 1

The percentage fill rates for night shifts for registered nurses for October 2017 to May 2018 are

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Shown in figure 2 below.

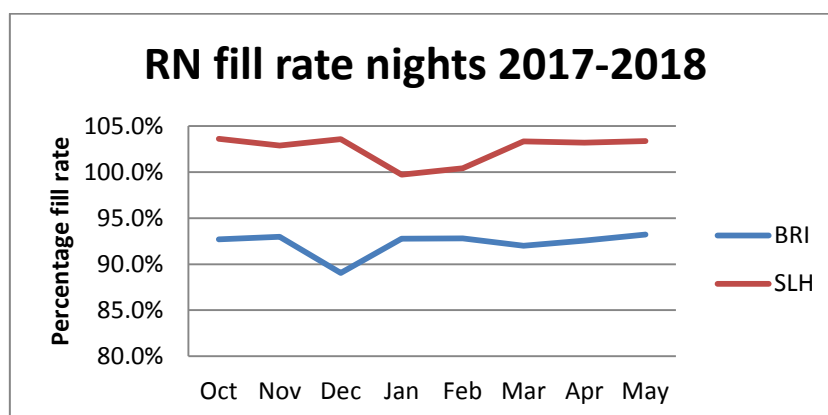


Figure 2

Appendix 1 is a summary of inpatient wards in the Trust, including the data submitted to UNIFY regarding staffing and information about patient experience and harms.

From the graphs an increase has been seen in Registered Nurse fill rates for days and a moderate increase in fill rates for nights with an overall improved position for the trust.

3. Trends and Themes

As part of the escalation process staff are asked to record any staffing concerns through Datix. These are monitored daily at the Matrons safety huddles. During May 2018, there have been 13 Datix incidents reported related to nursing and midwifery staffing. A summary of the previous months' Datix reports related to nurse and midwifery staffing is below, in table 2:

Month	Number of incident reports
December 2016	25
January 2017	20
February 2017	9
March 2017	9
April 2017	19
May 2017	24
June 2017	16
July 2017	19
August 2017	9
September 2017	33
October 2017	21
November 2017	16
December 2017	23
January 2018	16
February 2018	25

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March 2018	44
April 2018	20
May 2018	13

Table 2

During May there is a significant decrease in the number of reported incidents from the previous three months. At the time of producing the report 12 of the incidents were recorded as no harm and 1 with low harm. The incident reported as low harm is from ward 31 where a registered nurse has been moved to support the accident and emergency department and replaced with a health care assistant (the report details that this decision was supported by the chief nurse). A patient required one to one care on ward 31 and this was delivered, therefore no evidence of harm was detailed in the Datix report. All reported incidents this month are where, at the time of the report, the nurse in charge feels the skill mix is not suitable for the patient acuity level or the number of staff on duty is less than the planned number. Each incident is investigated with feedback given to individuals and actions taken to address concerns where appropriate.

For all of these incidents actions have been taken to mitigate harm with resource available from across the Trust.

From the incidents reported, nurses are expressing levels of concern about the standard and timeliness of patient care they are able to deliver and the suitability of staff available to work in the areas, either from agency or from other wards in the trust that do not have the same knowledge of a specialism.

During May there has been an increase in the use of the Safecare tool to support decision making related to patient acuity and dependency. Support has been provided from the Chief Nurse team to the Matrons in their daily staffing huddles in preparation for full use of the tool during June 2018. Data entry from the ward areas has been validated and reviewed twice a day by the matron and head of nursing.

During May the wards have commenced the transition to their new planned numbers as a result of the establishment review. The roster templates have been changed from the 27th May and therefore June reporting will be from the new agreed planned numbers per shift. In addition the areas will fully utilise Safecare in and out of hours to support decisions regarding staff redeployment. For May's report amendments have been made to the planned figures due to bed closures on ward 28 related to staffing.

There were no occasions where there were less than 2 registered nurses on a shift and no occasions where a shift was deemed unsafe, although a significant amount of senior nursing time (heads of nursing, matrons and clinical site team members) both in and out of hours, was consumed in maintaining this position.

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4. Exception report

The fill rates by ward, as shown in appendix, 1 have been RAG rated. The RAG rating for each ward has been reviewed for the 3 months (March 2018 to May 2018), to identify any areas where there have been 3 consecutive months rated as red (<80% fill rate) or where the fill rate is less than 70% in the current month for registered nurses. Mitigation of actions taken in these areas is included below. The report also includes the patient experience and harm data per inpatient ward displayed with the staffing fill rate information. The ward sisters, matrons and heads of nursing continue to review patient safety and experience on a daily basis related to the staffing on wards and movement of staff to maintain safety.

There are 2 inpatient areas with registered nurse / midwife fill rates <70% in May 2018 (appendix 1). There are 4 inpatient areas that have been <80% (red) for 3 consecutive months March 2018 to May 2018. There is a significant decrease in the number of wards reporting less than 70% and 80% registered nurse fill rate over the 3 consecutive months for May's report. These areas are:

Less than 70% fill rate in the month:

- Ward 28 - The fill rates for registered nurses are reported as fewer than 80% for 3 consecutive months. During May ward 28 had a period of bed closures to maintain safety as result of staffing availability. As part of the annual strategic staffing establishment reviews being undertaken by the chief nurse, the matron and head of nursing have recommended that the skill mix be changed to 2 registered nurses, and 2 health care assistants going forward, as this has proven to be an effective use of available resources. This change will be evident in June's reporting.
- Ward 31 – The planned staffing on the night shift is 3 Registered Nurses (RN) and 3 Health Care Assistants (HCA), however, the 3rd RN isn't always available, therefore the majority of nights on Ward 31 are 2 RN and 4 HCA. The RN unfilled shifts are covered with additional HCA cover.

Less than 80% fill rate for 3 consecutive months:

- Ward 26 has been included this month for 3 consecutive months of reduced fill rates. This is primarily as a result of supporting other wards departments. A decision is taken by the matron, nurse in charge or site matron out of hours to move staff from the most suitable location to support other areas that require assistance in terms of maintaining safe staffing across the Trust. Ward 26 and ward 11 often support their colleagues in DADS (Division of Anaesthesia, Surgery and Diagnostics) and other divisions and therefore the result is a lower fill rate. This is closely monitored through the heads of nursing, matrons and Datix recording system. This will be further reviewed in line with the full implementation of the safecare tool and review of patient acuity and dependency to make informed decisions throughout the day. The movement of staff has been supported by additional HCA being

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deployed to the ward to back fill where registered nurses are moved, which can be seen from the fill rates.

- Ward 8 – The reduction in fill rates for registered nurses is primarily as a result of supporting other wards departments, as detailed above. This is being monitored closely to ensure the team dynamic and retention rates for the ward are not adversely affected from moving staff to support other areas. Ward 8 has submitted one Datix report related to staffing skill mix during May that was assessed as no harm.

Ward 3 consistently reports less than 80% fill rate for nurses both day and night over the last 3 months. Ward 3 has challenges recruiting staff and consequently difficulties in maintaining the planned numbers of registered nurses. The ward has not previously seen any increase in pressure ulcers and their ward accreditation rating is green. This ward is part of the nursing associate pilot. This month ward 3 has higher than 70% fill rate on days compared to previous months and whilst they have consistently had less than 80% fill rate their fill rates are improving. Other new roles are being explored to support this area as during the recent recruitment activities there is still a lack of nurses requesting to work in care of the elderly areas.

- Ward F6, a change of skill mix of registered nurses and healthcare assistants has taken place; there has been an increase in sickness of registered staff, which has been replaced with a healthcare assistant and reduces the registered nurse numbers from 3 to 2. There have been no incidents reported as a result of this. Absence management processes are in place.

5. Conclusion

This report provides details of the planned versus actual staffing levels for registered nurses / midwives and care staff for May 2018. Robust monitoring remains in place with a daily overview of the staffing in each area to maintain safety and increased use of the Safecare tool to support decision making in relation to staffing.

During May there has been a transition to the new planned staffing establishments with changes made to the roster templates that will be seen in the June report.

Where areas have identified a risk regarding staffing, mitigation is put in place and monitored, more detail is included in this paper for further openness and transparency. Overall there has been an improvement in the fill rates resulting in less areas experiencing less than 70% fill rates in the month and a reduction in areas reporting less than 80% fill rates for the previous 3 months.

Activities continue to manage the recruitment of new nurses, retention of existing nurses and efficiency of deployment of the existing and temporary nursing workforce.

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Appendix 1 May 2018 Heat Map

Ward Name	Patient feedback			Harms								Absence and Turnover			Staffing								Ward Accreditation Score
				Falls with harm			Pressure Ulcers			Infection control					Day		Night		Care Hours Per Patient Day (CHPPD)				
	Compliments	Complaints	FFT recommended (%)	No harm	Low	Moderate	Category 2	Category 3	Category 4	MRSA	C.Diff	Cumulative % Abs Rate (FTE)	Labour Turnover Rate	Headcount %	Labour Turnover Rate	FTE %	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Cumulative count over the month of patients at 23:59 each day	Registered midwives/ nurses	
AMU	0	0	100	0	0	0	0	0	0	0	0	7.5	16.1	16.2	77.7	94.8	91.5	107.2	514	9	9	18	Feb-18
ICU	0	1	-	0	0	0	1	1	0	0	0	7.3	8.8	8.6	95.2	104.7	94.8	-	300	31	3	34	
WARD 03	0	0	89	4	1	0	0	0	0	0	0	5.3	9.9	9.2	76.3	87.6	77.5	99.5	361	7	9	16	Feb-18
WARD 06	1	0	100	6	0	0	0	0	0	0	0	6.0	17.6	17.7	79.0	126.7	94.6	120.5	872	5	6	11	Nov-17
WARD 07	0	0	100	1	2	0	0	0	0	0	0	4.6	0.0	0.0	99.7	95.4	100.0	108.8	357	4	3	7	Jan-18
WARD 08	0	0	95	0	0	0	0	0	0	0	0	2.9	9.5	10.0	78.6	106.5	90.6	149.0	663	4	2	6	May-17
WARD 09	1	0	100	2	0	0	1	0	0	0	0	11.5	11.8	9.3	85.7	101.6	103.3	102.1	742	3	3	6	Dec-17
WARD 11	0	1	96	0	0	0	0	0	0	0	0	3.8	6.7	6.9	80.8	114.8	88.7	151.8	660	4	2	6	Mar-18
WARD 12	0	0	100	0	0	0	0	0	0	0	0	6.1	29.8	27.4	93.4	120.0	105.7	156.7	385	6	2	9	Mar-18
WARD 14	22	0	96	2	1	0	0	0	0	0	0	6.9	11.1	11.2	98.3	145.6	100.4	145.2	448	5	3	7	Jun-17
WARD 15	0	0	100	3	3	0	0	0	0	0	0	0.1	0.0	0.0	85.0	101.7	98.4	129.3	449	4	5	8	Dec-17
WARD 18	0	0	100	2	0	0	0	0	0	0	0	10.2	16.0	16.5	89.8	78.5	91.2	108.2	460	6	2	8	Mar-17
WARD 20	0	0	98	2	0	0	0	0	0	0	0	3.3	10.7	10.9	84.4	111.8	96.8	119.6	403	9	3	12	Mar-18
WARD 21	14	1	88	0	0	0	0	0	0	0	0	5.3	22.2	20.9	85.4	115.8	95.9	126.6	577	5	2	7	Apr-17
WARD 22	0	0	95	0	0	0	1	0	0	0	0	6.8	14.9	14.9	84.2	121.2	95.5	104.4	618	6	3	10	Mar-18

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WARD 23	0	0	100	5	2	1	1	0	0	0	1	6.4	9.4	9.5	87.9	104.1	90.6	109.7	806	5	3	9	Feb-18
WARD 24	0	0	100	2	0	0	0	1	0	0	0	6.8	10.0	9.8	97.9%	99.0%	100.0%	101.9%	292	5	4	9	Dec-17
WARD 25	0	0	100	0	0	0	0	0	0	0	0	6.5	0.0	0.0	101.0	117.1	100.1	-	246	6	2	8	Jun-17
WARD 26	0	0	89	5	2	1	2	0	0	0	0	6.4	20.0	21.2	79.7%	164.5%	87.2%	138.4%	722	3	4	7	Mar-17
WARD 27	4	0	100	1	0	0	0	0	0	0	0	7.2	23.1	24.6	92.5	150.5	89.3	164.0	564	5	3	8	Aug-17
WARD 28	0	0	100	0	0	0	0	0	0	0	0	2.2	19.6	16.9	65.9%	79.5%	70.7%	63.8%	205	8	4	12	Nov-17
WARD 29	1	0	87	5	6	0	3	0	0	0	0	5.4	2.7	1.7	90.6	140.6	93.7	163.6	882	3	5	8	May-17
Paediatrics	0	0	100	0	0	0	0	0	0	0	0	8.0	22.5	21.5	83.5	73.3	95.2	58.9	851	10	2	11	Nov-17
WARD 31	0	0	74	8	1	0	0	2	0	0	0	5.3	2.8	2.7	89.3	113.2	69.9	136.6	566	4	6	10	Mar-18
WARD 33	0	0	100	0	1	0	1	1	0	0	0	4.0	5.0	3.4	90.0	116.4	101.9	94.0	295	5	4	9	Jun-17
BIRTHING CENTRE	0	0	100	0	0	0	0	0	0	0	0	3.1	18.2	22.3	90.2	85.7	87.5	-	106	18	6	24	
LABOUR WARD	0	0	100	0	0	0	0	0	0	0	0	4.7	6.3	7.0	98.2	75.1	101.5	100.0	291	17	4	21	Jul-17
NNU	0	0	100	0	0	0	0	0	0	0	0	4.2	14.0	13.3	93.2	13.6	94.9	-	712	11	0	12	
WARD M3	0	0	100	1	0	0	0	0	0	0	0	4.7	6.3	4.1	82.1	80.5	90.4	103.4	576	4	2	6	Jan-17
WARD M4	0	0	100	0	0	0	0	0	0	0	0	4.0	4.5	1.2	95.9	78.2	92.5	100.6	825	4	2	5	Jan-17
Westbourne Green	0	0	100	4	2	0	0	0	0	0	0	6.9	17.2	16.5	87.1	116.4	106.9	107.3	427	4	5	8	Feb-17
WWP	0	0	100	7	0	1	0	0	0	0	0	8.1	4.5	4.8	87.0	105.4	108.2	94.3	496	3	3	6	Feb-18
WARD F5	0	0	100	0	0	0	0	0	0	0	0	5.5	12.5	13.3	99.5	95.6	98.4	99.9	849	2	4	5	Feb-18
WARD F6	1	0	100	4	2	0	3	0	0	0	0	10.4	13.3	13.0	72.9	109.3	100.0	99.8	614	2	5	7	Jan-18

Key:				
Complaints, Compliments, Falls, Pressure ulcers, MRSA and C Difficile:	0 – Green >1 – Amber >2 - Red	Staffing:	>95 - green 80-95 - amber <80 - red	

***The ward names have been changed to reflect the reconfiguration in February 2018**