

Enclosure 5
REPORT TO TRUST BOARD

Date of Meeting:	26 th November 2015
Title of Report:	Nurse Staffing Performance on a shift-by-shift basis
Presented by:	Maria Nelligan, Executive Director of Nursing & Quality
Author of Report: Name: Date: Email:	Carol Sylvester, Deputy Director of Nursing & Quality 13 th November 2015 Carol.Sylvester@northstaffs.nhs.uk
Committee Approval/Received prior to Trust Board:	<ul style="list-style-type: none"> • Quality Committee • Finance and Performance Committee • Audit Committee • People and Culture Development Committee • Charitable Funds Committee • Business Development and Investment Committee •
Purpose / Intent of Report:	For discussion and approval
Executive Summary:	<p>This paper outlines the monthly performance of the Trust in relation to planned vs actual nurse staffing levels during the data collection period (1-31 October 2015) in line with the National Quality Board expectation that:</p> <p><i>“The Board:</i></p> <ul style="list-style-type: none"> • <i>Receives an update containing details and summary of planned and actual staffing on a shift-by-shift basis.</i> • <i>Is advised about those wards where staffing falls short of what is required to provide quality care, the reasons for the gap, the impact and the actions being taken to address the gap.</i> • <i>Evaluates risks associated with staffing issues.</i> • <i>Seeks assurances regarding contingency planning, mitigating actions and incident reporting.</i> • <i>Ensures that the Executive Team is supported to take decisive action to protect patient safety and experience.</i> • <i>Publishes the report in a form accessible to patients and the public on their Trust website (which could be supplemented by a dedicated patient friendly ‘safe staffing’ area on a Trust website)”.</i>

	<p>The performance relating to the fill rate (planned numbers of staff deployed vs actual numbers) on the wards for October was 102.9% being a total fill rate of 102.15% for registered nurses and 103.65% for HCSWs. The position reflects that ward managers are effectively deploying additional staff to meet increasing patient needs as necessary.</p> <p>Revision of the methodology for reporting planned shifts has been undertaken as planned and introduced for November reporting.</p>
<p>Which Strategy Priority does this relate to:</p> <p>How does this impact on patients or the public?</p>	<ul style="list-style-type: none"> • Customer Focus Strategy • Clinical Strategy • Governance Strategy • Workforce Strategy • Financial Strategy
Relationship with Annual Objectives:	Supports the delivery of the Trust's Annual Objectives and the delivery of high quality care.
Risk / Legal Implications:	Delivery of safe nurse staffing levels is a key requirement to ensuring that the Trust complies with National Quality Board standards.
Resource Implications:	Recruitment to vacant posts in progress.
Equality and Diversity Implications:	None
Relationship with the Board Assurance Framework	<ol style="list-style-type: none"> 1. Focusing on quality and safety 2. Consistently meeting standards 3. Protecting our core services 4. Growing our specialised services 5. Innovating in the delivery of care 6. Developing academic partnerships and education and training initiatives 7. Being an employer of choice 8. Hosting a successful CQC inspection 9. Becoming digital by choice 10. Reviewing and rationalising our estate 11. Devolving accountability through local decision making that is clinically led assuring governance arrangements. 12. Delivering our financial plan
Recommendations:	To receive the report for assurance and information.

In patient safer staffing metrics-October 2015

RAG rating >90% GREEN <90% AMBER <80% RED

Ward	Performance (% planned vs actual)				Bed Occupancy % (including	Sickness %	Mandatory Training %	PDR %	Incident Total	SI's	Complaints	Ward Manager Narrative
	Day %		Night %									
	Reg`d	Care	Reg`d	Care								
Ward One	112.8%	103.7%	125.8%	164.1%	109 ↑	6.42↓	75 ↓	48 ↓	41↓	0 ↔	0↓	Bed occupancy has increased in October in comparison with September. High level of acuity predominantly due to patients requiring high levels of observation is reflected in the overfill figures for registered and care staff on both day and night shifts.
Ward Two	127.3%	89.7%	135.5%	135.5%	104↓	16.93 ↑	71 ↓	71 ↓	25↑	0 ↔	0 ↔	Occupancy reduced from September but over occupancy has continued. Recruitment to vacant posts in posts progressing to commencement. Substantive recruitment to ward 4 establishment will release staff on secondment to return to ward 2.

Ward Three	122.5%	94.6%	140.4%	125.8%	104↔	3.83 ↓	84 ↑	92 ↑	18↑	0 ↔	0 ↔	Over occupancy has continued in October. Incident forms completed for bed pressures and utilising leave beds for admission. Over fill of shifts reflects periods of high acuity particularly relating to observation levels. Recruitment to additional posts created by safe staffing funding underway. Incidents increased from 10 in Sept to 18 in October however no specific trends emerging.
Ward Four	123.6%	59.1%	71.1%	114%	97%↑	2.12 ↑	93 ↓	87 ↑	11↓	0 ↔	0↓	Meeting on 4/11/15 to set establishments, recruitment plans to take place afterwards. High level of bank and agency cancellation under review. Under fill on night duty reflects rostering of one registered nurse rather than the planned two. Under fill of day care staff back filled by use of registered staff. Drill down of incident data presented at Sept CQRM and found no correlation between increase in falls and under filled shifts in August and September.
Ward Five	109.3%	103.2%	101.5%	107.3%	99% ↑	6.42↑	84 ↓	90 ↓	20↑	0 ↔	0↓	Ward Manager reports a stable month of occupancy, activity and shift fill rate. Increase in 3 incidents from September, no themes. Small increase in sickness rate in October but a recent downward trend.
Ward Six	101%	93.4%	71.4%	95.4%	97% ↑	9.39↑	91 ↔	100 ↔	22↑	0 ↔	0 ↔	Small increase in occupancy from September with 3 functional diagnoses admitted to ward 3 due to bed unavailability on ward 7. A total of 40 shifts lost to sickness –no specific themes. Recruitment to 2 vacant Band 5 posts completed and awaiting start date. Increase in incident rate from 9 in Sept to 22 incidents in Oct-no incident clusters or themes. Shortfall in night duty registered covered by site movement from other wards as per escalation procedure
Ward Seven	96.4%	99.5%	100%	108%.4	99%↑	1.65↑	94 ↑	92 ↓	19 ↔	0 ↔	0 ↔	Increase in occupancy from September report. Increase in activity from observation level increases. 15.00 hours vacant band 5 post currently outstanding to recruitment.

EMC	108.3%	69.5%	100.4%	101.6%	90%↑	0.60↑	88 ↓	91 ↓	4↓	0 ↔	0 ↔	Although occupancy increased from September, activity less than with 100% occupancy therefore care staff sickness shifts not back filled other than excess hours undertaken by registered nurse in line with professional judgement used by ward manager.
A&T	85.7%	120.7%	85.1%	88.4%	80↔	0.27↑	95 ↑	96 ↑	8↓	0 ↔	1↑	Under occupancy continues with level of activity not requiring any backfill of shifts lost to sickness. No indicators of impact of under fill on quality or safety with reducing incident rate, no complaints, and no serious incidents.
Telford	80.2%	104.7%	127.8%	142.5%	62↓	3.30↑	97 ↑	94 ↓	30↑	0 ↔	0 ↔	As above and additionally to note under occupancy. Overfill on night duty on Telford utilised to support admitted patient with high level of need requiring 2 staff to undertake assigned observation level. Increase in incident reporting rate of 30, an increase from 18 incidents from September. Incidents attributed to acute presentation of service user.
Summers View	95.7%	100%	100%	100%	98↑	0.0↔	87 ↓	89 ↑	7↔	1↑	0 ↔	No significant changes to September reporting other than new serious incident reported in October. Root Cause Analysis investigation underway.
F` House	111.3%	78.8%	100%	100%	106% ↑	6.97↑	97 ↑	90 ↓	1↔	0 ↔	0 ↔	Slight increase in occupancy but no impact on patient experience or quality of service. Under fill of day care staff backfilled with use of registered nurse excess hours.
Darwin	84.0%	72.6%	81.3%	153.7%	61% ↑	3.20↑	88 ↓	91 ↓	15↑	0 ↔	0 ↔	Unit continues with reduced occupancy and no requirement to backfill under fill of registered and care staff on day shifts. Care staff used to supplement under fill on night shifts to ensure 3 staff on duty to meet required staffing level. Small increase in incident rate reported with no themes emerging.
D`Square	104.5%	96.1%	86.9%	86.9%	72% ↑	3.36↑	95 ↔	95 ↑	0↓	0 ↔	0 ↔	Raised use of RN and under fill in care staff related to back fill for care staff sickness. Unit closed overnight form 5/10/15-9/10/15 leading to reduction in actual staffing on night shifts.

***Please note that some sickness data not available from payroll systems until following month**

Overall Fill Rate October 2015

Registered Staff –Day 104.6%

Care Staff-Day-91.6%

Registered Staff-Night-99.7%

Care Staff-Night-116.7%

Unify return October 2015

[illegible]