NORTH STAFFORDSHIRE COMBINED HEALTHCARE NHS TRUST

REPORT TO THE TRUST BOARD MEETING (OPEN)

Date of Meeting:	31 July 2014
Title of Report:	Nurse Staffing Performance on a shift-by-shift basis
Presented by:	Karen Wilson, Executive Director of Nursing & Quality
Author of Report: Date: E-mail:	11 July 2014
Purpose / Intent of Report:	• For Assurance
Executive Summary:	This paper outlines the performance of the Trust in relation to the National Quality Board expectation *"The Board:* *• Receives an update containing details and summary of planned and actual staffing on a shift-by-shift basis* *• 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* *• Evaluates risks associated with staffing issues* *• Seeks assurances regarding contingency planning, mitigating actions and incident reporting* *• Ensures that the Executive Team is supported to take decisive action to protect patient safety and experience* *• 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)".* The paper describes the escalation process in place to manage nurse staffing levels. It also outlines that results of the planned vs actual nurse staffing levels during the data collection period (1 June – 30 June 2014): • The Trust deployed 99% of the nursing staff which it had planned to do, this is broken down into a fill rate of 99% for planned registered nurse shifts and 99% of planned HCSW shifts. This is likely to reflect that – where possible – ward managers are effectively deploying additional staff to meet increasing patient needs as necessary. • 77.2% (n=695/900) of shifts have been staffed to at least the planned level. The Board is asked to: • Note the contents of the report • Approve the approach taken • Support autonomy being given to: 1. Ward managers to effectively manage staffing resource variation, dependent upon the demands of patient acuity and needs 2. Matrons being accountable for ensuring that patient safety is managed through the deployment of the available nursing resource

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Which Strategy Priority does this relate to? How does this impact on patients or the public?	• 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 Policy direction
Resource Implications:	None

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NURSE STAFFING LEVELS ON A SHIFT BY SHIFT BASIS
REPORT FOR TRUST BOARD

Purpose

This paper provides the data which details the Trusts performance is the deployment of nursing staff to each of the Trusts in-patient areas to meet the needs of our patients. This report meets the requirements of the National Quality Board (2013) recommendations which are described within "How to ensure the right people, with the right skills, are in the right place at the right time. A guide to nursing, midwifery and care staffing capacity and capability" and expectations for NHS Trusts further refined in March 2014 in "Hard Truths Commitments Regarding the Publishing of Staffing Data - Timetable of Actions" a document prepared by NHS England and the Care Quality Commission. This document states:

"The Board:
• Receives an update containing details and summary of planned and actual staffing on a shift-by-shift basis
• 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
• Evaluates risks associated with staffing issues
• Seeks assurances regarding contingency planning, mitigating actions and incident reporting
• Ensures that the Executive Team is supported to take decisive action to protect patient safety and experience
• 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)".

Trust Process for monitoring performance in nurse staffing levels

The Trust monitors the performance of each wards planned and actual nurse staffing levels. Planned nurse staffing levels are recorded centrally by the Bank Nurse Coordinator on a weekly basis. Actual deployment is recorded retrospectively on each day by the Duty Senior Nurse. This process allows the Trust to monitor performance on a daily basis; this is circulated to the Senior Management Team on a daily basis and allows for escalation as necessary to ensure staffing levels are maintained to the appropriate levels.

Escalation Process

The Trust has a clear process for ensuring that patient needs are met by having an escalation process in place where under staffing is identified. This is described below:

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Rating	Description	Actions to address	Authorisation
Green	All nursing staff deployed as planned by number and skill mix	None required	N/A
Amber	All nursing staff deployed as planned, but skill mix inadequate	a. Ward Manager to work as part of shift establishment. b. Duty Senior Nurse to reallocate registered nurse from elsewhere within the Trust to address skill mix deficit	Ward Manager Duty Senior Nurse
Red	Fewer than planned numbers of nursing staff on duty.	c. Ward manager to work as part of shift establishment d. Duty Senior Nurse to move nursing staff from another ward from across the Trust e. Bank staff to be brought in to cover shift deficit. f. If actions c, d and e do not cover deficit then overtime to be authorised to ensure appropriate cover is maintained. g. If action f. does not ensure that the deficit is met then agency nursing staff are brought in to cover the ward.	Ward Manager Duty Senior Nurse Bank coordinator Matrons Matrons

Current Performance

During the current data collection period (1 June – 30 June 2014), 77.2% (n=695/900) of shifts have been staffed to at least the planned level.

The performance relating to the fill rate (actual numbers of staff deployed vs numbers planned) on the wards is 99%, this being a total fill rate of 99% for registered nurses and 99% for HCSWs. This is likely to demonstrate that – where possible – the wards are utilising additional nursing resources via the use of bank staff to meet fluctuating patient acuity by deploying additional staff where appropriate.

 This performance can be seen in more detail at Appendix A.

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Recommendations to the Board

The Board is asked to:

- Note the contents of the report
- Approve the approach taken
- Support autonomy being given to:
1. Ward managers to effectively manage staffing resource variation, dependent upon the demands of patient acuity and needs
2. Matrons being accountable for ensuring that patient safety is managed through the deployment of the available nursing resource

Ward	Performance (% planned vs actual) staffing numbers		Number of shifts below planned numbers	Reasons for variance in performance
	Registered Nurses	**Healthcare Support Workers**		
Ward 1	115	108	9	Patient need / sickness
Ward 2	99	101	16	Patient need / sickness
Ward 3	108	112	17	Patient need / sickness
Ward 4	108	101	9	Patient need / sickness
Ward 5	95	91	45	Patient need / sickness / shortage of bank staff
Ward 6	97	96	24	Patient need / sickness
Ward 7	102	108	9	Patient need / sickness
Assessment & Treatment	101	101	0	Patient need / sickness
Telford Unit	96	101	6	Patient need / sickness
Edward Myers	94	87	11	Patient need / sickness
Darwin Centre	103	102	6	Patient need / sickness / cross-cover for paediatrics
Summers View	99	88	28	Patient need / sickness
Florence House	93	84	25	Patient need / sickness
Dragon Square	100	100	0	Patient need / sickness
Chebsey Close	80	99	0	Patient need / sickness
TRUST AVERAGE/ TOTAL	**99**	**99**	**205**	