

Board briefing of Nursing and Midwifery Staffing Levels

April 2015

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Board briefing of Nursing & Midwifery staffing Levels for April 2015

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Dame Eileen Sills DBE, Chief Nurse and Director of Patient Experience

Executive Summary

Purpose:

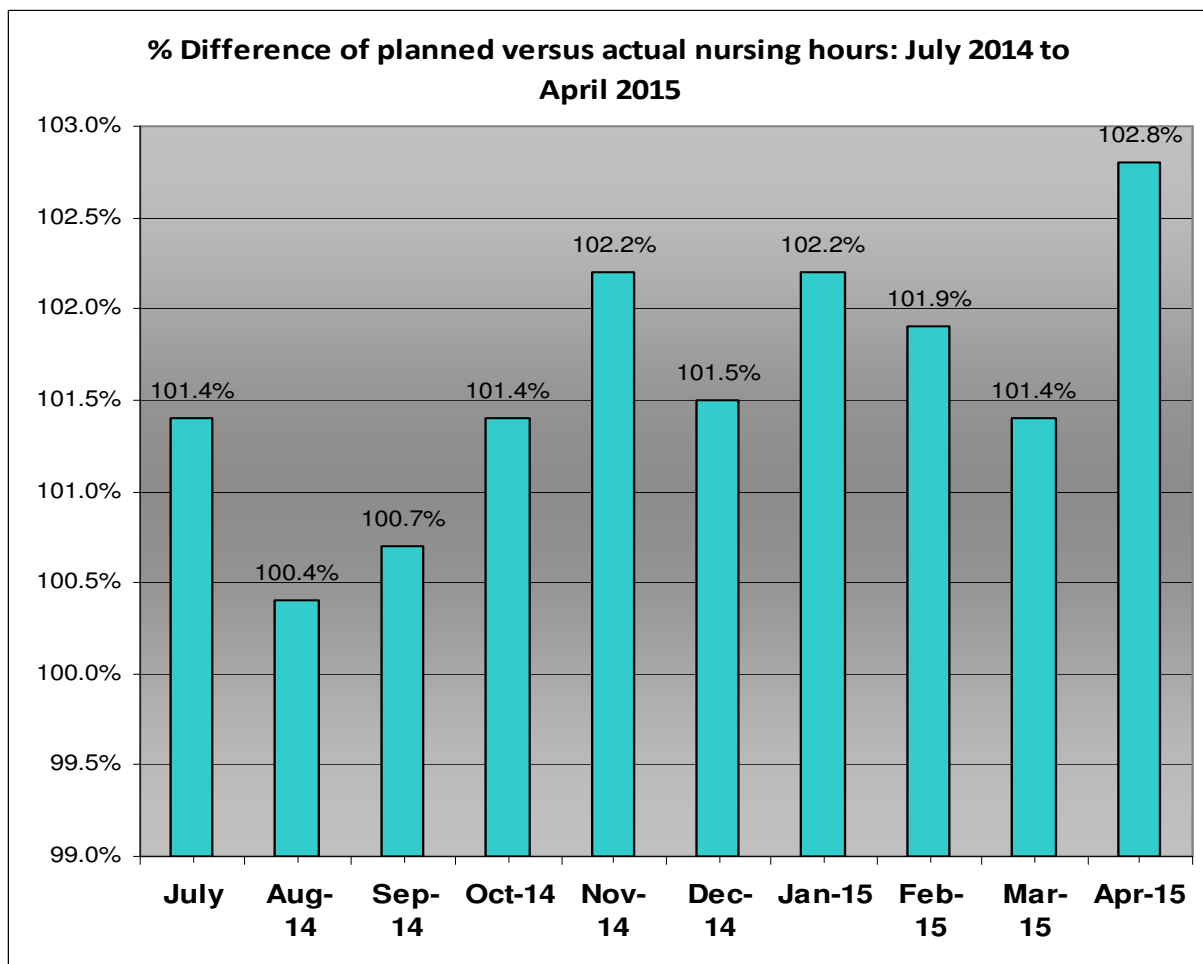
- Regular monthly report on nursing, midwifery and health visitors staffing levels.

Key Points:

1.0 General points:

- **Planned versus actual nursing hours for April 2015 was 2.8% above planned. This was an increase of 1.4% from the previous month.**
- In total there were 25 areas where staffing fell below planned hours. This was a decrease of three areas from the 28 areas reported last month.
- 29 areas used more nursing hours than planned. This was an increase from 24 who reported last month. There was one area where actual hours matched their planned (Howard).
- Of those 29 areas, 8 used more than 10% above plan; a decrease of two wards from the last report.
- There was 1 area (Doulton HDU) where actual nursing hours fell below planned by more than 10%. The previous month's reporting period showed there were 3 areas that fell below 10%.
- The ten month data (July 2014 – April 2015) of planned vs. actual nursing hours within inpatient bedded areas, is relatively stable between 100.4% (August 2014) – 102.8 % (April 2015) Figure 1. The month of April 2015 of 102.8 % being an increase to the 101.4% reported in March 2015.

Figure 1.



- **Appendix 1** shows at ward level the three month (February – April 2015) graph of planned vs. actual hours use.

- **Appendix 2** shows at Directorate level the three month (February – April 2015) graph of planned vs. actual hours use.

Acute Medicine: Appendices 1 and 2 show that the Directorate of Acute Medicine remains the highest users of actual hours over planned. For the third month in a row, Albert ward continued to have the largest percentage variance of actual nursing hours used over planned of 1824.50 hours (32.7%). The largest proportion, 628.50 hours, were delivered by nursing assistants within the day shift period.

The directorate currently faces challenges in recruitment and retention which is reflective of a national picture. Mitigation for this includes the use of continental travel nurses (registered), regular temporary staff and a rolling recruitment campaign supported by the Trust team. Quarter 4 has seen a continuation of patients presenting with greater physical and mental health needs. This has required a continued reliance on specials to safeguard our vulnerable patients and specialist mental health nurses to protect patient safety and provide therapeutic support. The Directorate at its monthly local PRMs review with the teams the need for specials and are satisfied that currently this is the most appropriate way of providing care for this group of patients. However, the Directorate is re-visiting work that has been done bi-annually to review cost effectiveness of providing

specialist/RMN care using this model.

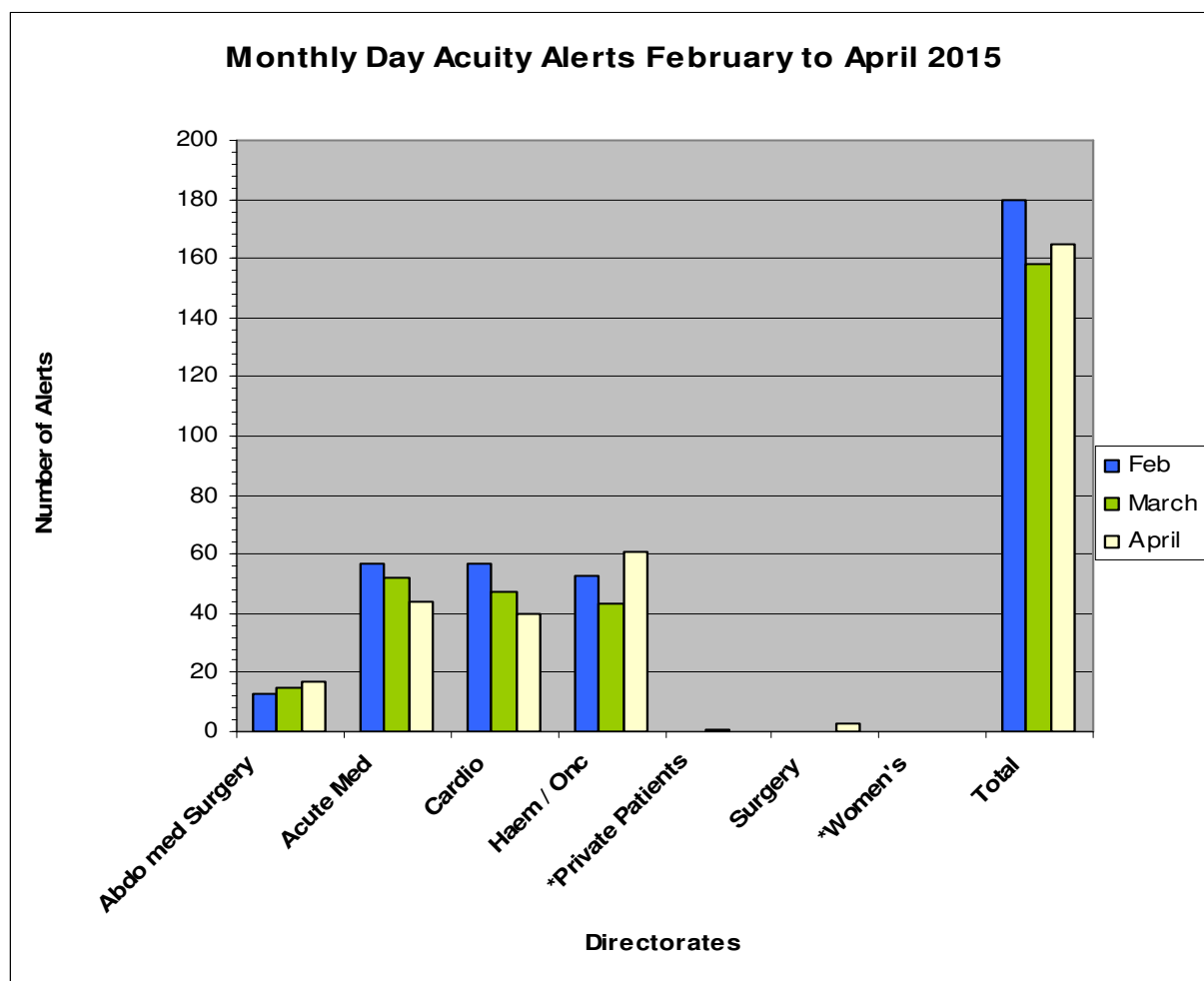
Women's: *Gynaecology ward* used higher actual nursing hours (9.7%, 422.3 hours) than planned. This can be attributed to there being a number of patients requiring 'specials' during April. As the planned number of Nursing Assistants is 1 on each shift, any increase makes a large 'percentage' difference. *Antenatal Ward* staffing fell below planned hours (-6.1%, -97 hours), feedback has been received of low numbers of actual staff but no red flags and no concerns were raised.

Evelina Children's: *Beach Ward* staffing fell below planned hours (-9.0%, -453 hours). The ward does currently have vacancies but during April no red flags were raised and the senior nursing team ensured that staffing levels were safe.

Other workforce metrics:

- **Red Flags:** There were 93 red flags raised over the month of April, an increase of 11 from the previous month. The Heads of Nursing have stated that no red flags raised had any detrimental effect on patient care being delivered or the safety of patients.
- The highest proportion of red flags reported were from PICU for the third month running (23), a decrease from the previous month of 33. Red flags being raised in this area were due primarily to a sustained increase in patient activity within the area. When red flags were raised, off ward nurses assisted with the delivery of clinical care alongside ward based staff from other areas where patient dependency/activity was deemed to be lower.
- Community inpatient bedded areas and Howard ward reported for the third month running. PCCP also reported no red flags this month.
- Any red flag alerts triggered in the month of April 2015 were responded to with a senior nurse review at the time of being raised with any mitigating actions immediately put in place to ensure patient safety.
- **Patient acuity alerts:** During day shifts in the month of April 165 acuity alerts were triggered across the inpatient ward areas. This was an increase of 7 from the month of March (Figure 2). The larger numbers of acuity alerts triggered were evenly spread across the Directorates of Acute Medicine, Haematology/Oncology and Cardiovascular.
- Night shift acuity alerts have not been reported so far in the workforce board paper, as consistent daily recording of patient level acuity remains an area where improvement is required. Directorates have this as an action for their ward areas to improve the data recording across all inpatient areas.

Figure 2.



Recruitment position:

- The current position is that the nursing and midwifery establishment is 5614.95 wte. Of that number there are 670.39wte vacancies (11.94%) with 227.60wte in the pipeline waiting to commence work. This leaves 442.79wte yet to be appointed to. The Trust continues to work hard to achieve high levels of recruitment through every mechanism available and to focus on retention of staff at all levels.
- Appendix 3 shows the current Trust Nursing and Midwifery workforce position with a projected three month vacancy position based on historical leavers' data of around 571.79 wte (10.06%). This is an increase of 0.04% projected from March reported figures. As reported in last month's paper, work is currently underway in reviewing the data quality of our leavers' information as there could be the potential of a small underreporting %. This issue is related to staff that leave the organisation in their substantive contract but remain on the bank where they are not classed as a leaver when data is analysed. Solutions to improve the accuracy of this data are currently being considered within HR services.
- **Areas of high vacancies:** Adult Local Services and PCCP Theatres remains the main Trust workforce risk areas, as reported in previous months' papers. Temporary staffing continues to support these areas in order to remain safely staffed.
- Other directorates have a number of vacancies and Temporary staff are assisting through use of both bank and agency usage. The Trust are currently

focussing a piece of work under the Fit For the Future programme looking at effective use of temporary staffing both in clinical and non-clinical posts. This is with an aim in reducing the Trust's overall financial spend on temporary staffing from bank and agency usage whilst maintaining patient safety.

Other Recruitment updates:

- In April a Trust Recruitment Open Day was held and we successfully showcased our career opportunities across all areas of the Trust.
- The Trust Newly Qualified Nurse campaign for both Children's and Adult qualifying nurses is underway and we have had successful campaigns resulting in high levels of applications for positions across the Trust.
- A 1st quarter assessment/exam centre was held for band 2 and 3 Nursing Assistants, this included assessment using Barbara's story and questions formulated from our patient forum group. The Trust has successfully recruited from this assessment centre.
- The Trust continues to be represented at major job fairs across the UK and successfully completed recruitment in Scotland of Band 5 nursing staff.

Implications:

- This report provides the Board with an overview of the nursing and midwifery workforce during the month of April. It is a requirement on all senior nursing and midwifery staff to manage their respective clinical areas with safe, effective staffing at all times. They must ensure that deviations are reported through the Red Flag system and are acted upon to protect patient care. It is also their responsibility to consider the appropriate and efficient management of staff.

Recommendations:

- The Board of Directors is asked to note the information contained in this summary report.

Appendices:

- Appendix 1 – Ward Level % Planned Vs Actual Trends February 2015 – April 2015
- Appendix 2 - Directorate level % Planned Vs Actual January February 2015 – April 2015
- Appendix 3 – Trust Level Recruitment & Vacancy levels (24th April 2015)
- Appendix 4 - Planned vs. Actual nursing hours Trust collated - April 2015 (UNIFY)
- Appendix 5 - Trust collated workforce clinical indicator summary – April 2015
- Appendix 6 - Non-inpatient monthly staffing report collated – April 2015