

December 2014

Monthly Report of Nursing and Midwifery Staffing Levels November 2014

Status: A Paper for Information

History:

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November 2014

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Monthly Report of Nursing & Midwifery Staffing Levels November 2014

Executive Summary

Purpose:

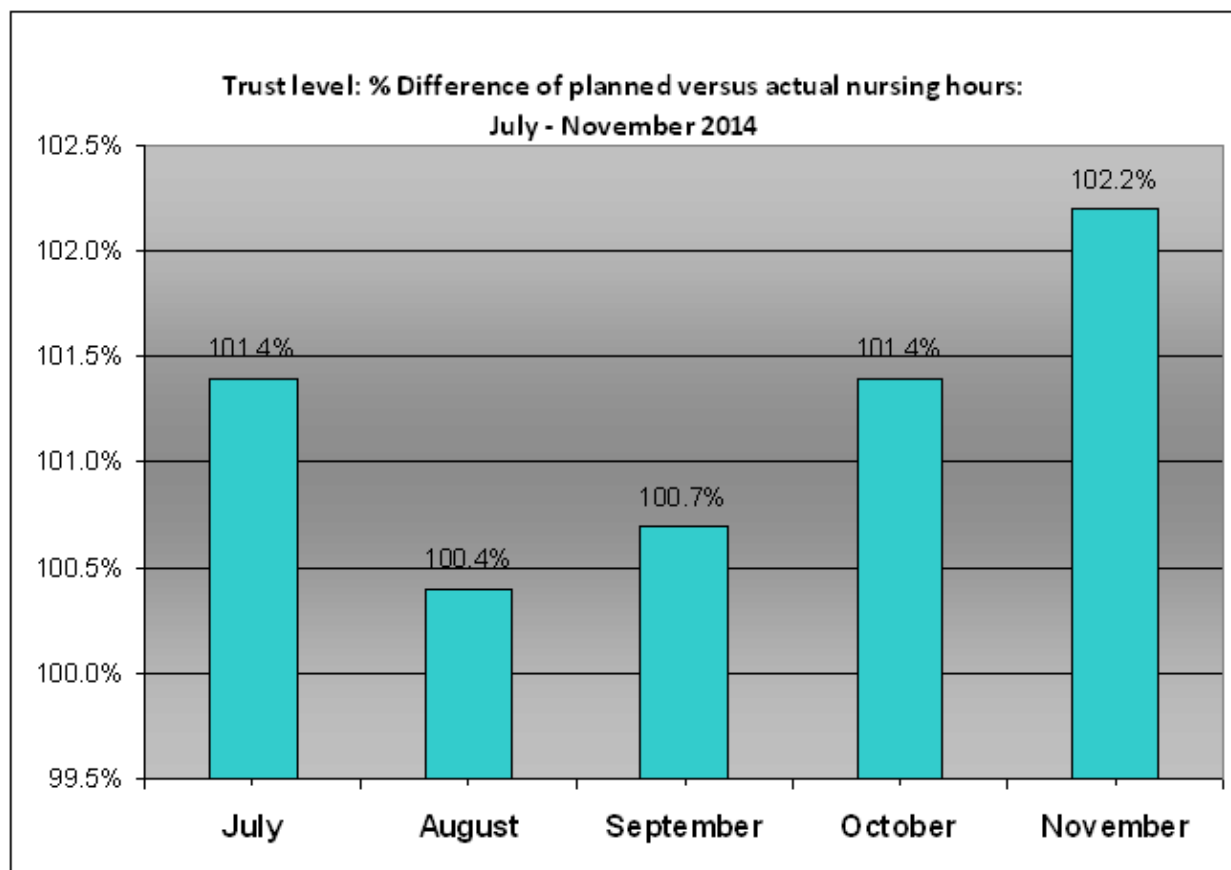
- Regular monthly report on nursing, midwifery and health visitors staffing levels.

Key Points:

1.0 General points:

- **Planned versus actual nursing hours for November 2014 was 2.2 % above planned.**
- In total there were 24 areas where staffing fell below planned hours. This was a decrease by 9 areas, from the 34 areas reported last month.
- In total there were 28 areas where actual nursing hours used were above planned. This was an increase from the 19 reported last month. 2 areas, actual hours matched exactly their planned.
- 7 areas used more than 10% actual nursing hours above planned, this was the same as last month. No area's reported that their actual hours fell below planned by more than 10%. This is the first month this has been reported. This represents the success of recent recruitment campaigns and appropriate parallel use of temporary staffing to assist with vacancy gaps within our inpatient bedded areas.
- The five month trend (July – November 2014) of planned vs. actual nursing hours within our inpatient bedded areas, shows a stable trend of between 100.4 – 102.2 % with the month of November being the highest since recording commenced. Figure 1 shows month on month an incremental rise in actual nursing hours used over planned. This is a combination of increased activity and patient dependency needs, requiring higher levels of nursing resource to safely staff our inpatient bedded areas.

Figure 1.



- **Appendix 1** shows at ward level the three month (September - November 2014) graph of planned vs. actual hours use.

- **Appendix 2** shows at Directorate level the three month (September - November 2014) graph of planned vs. actual hours use.

- It can be seen from Appendices 1 and 2, that **Acute Medicine directorate** continued in the month of November to remain the higher users of actual hours over planned. This has been the consistent trend over the last five months, this month the directorate reported four areas using 10% or more actual nursing hours over planned. The directorate has continued to have a significant number of patients that have required 1:1 specialising needs to safely staff their inpatient bedded areas. There was a change in where this demand was required across the ward areas from the previous month. This can be seen in Mark ward and Sarah Swift wards see Appendix 2, (Acute Medicine directorate graph).

- **Evelina London Children's Hospital**, previous workforce briefing papers outlined a significant difference between actual nursing hours used, under planned. This was due to a combination of vacancies and lower activity levels due to seasonal healthcare needs in this group of patients. Whereas the month of November's data, shows the actual nursing hours are more closely matched to planned. This fully supports the clinical picture of increasing patients nursing dependency needs and increased activity as the winter season unfolds, along with new starters commencing employment.

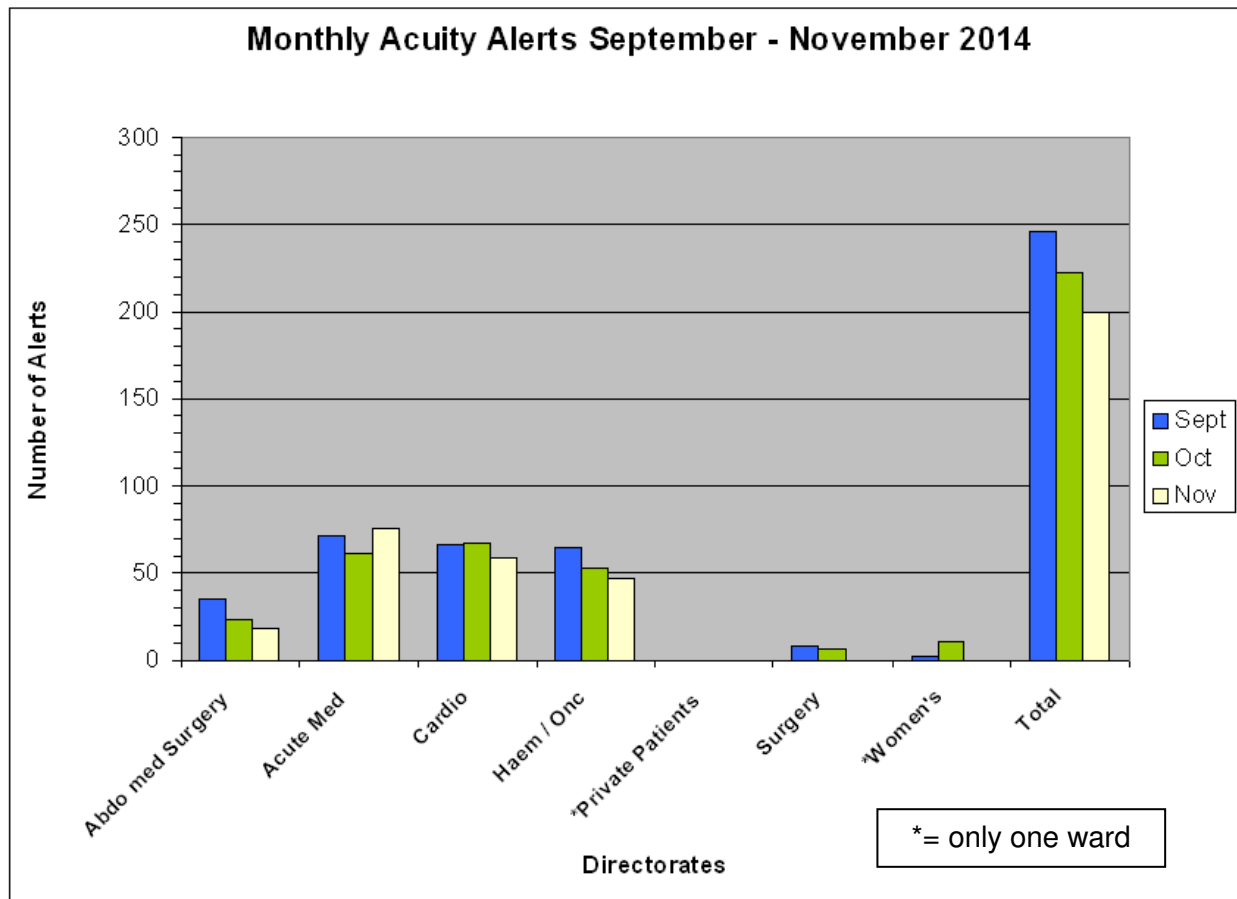
- **Cardiovascular:** Stephen ward, reported a 12% actual nursing hours used over planned. This was due to an establishment review mid month where an increased actual hours required was identified as being needed. This was due to service changes within the ward over recent months. December's reporting period, will reflect these increased hours within the planned nursing hours moving forward.
- **Women's Services:** *Gynaecology ward*, higher actual nursing hours (10.1%) than planned was reported due to the introduction of Medcharting and commencement of three newly qualified nurses who required additional supervision in practice. *Postnatal ward* recorded higher levels of actual nursing hours than planned (4.9%) due to the 1:1 specialling of vulnerable women under midwifery services.
- **Surgical Directorate:** *George Perkins Ward*, higher actual nursing hours (14.1%) than planned was reported due to 1:1 specialling needs for a number of patients. One patient requiring continuous RMN support. This is a marked increase in actual hours above planned for this months reporting against the month of October for this ward area.
- **District Nursing:** This remains the Trusts greatest concern, although there has been positive recruitment of 34 wte in the summer the directorate has also had a number of leavers. Therefore the current vacancy levels remains at 53.5wte Registered nurses and 10.39 wte Non-Registered nurses. Although an action plan is in place, the Chief Nurse has requested an urgent review of the workforce plans, which includes the need to look at the role of the nurse and whether a new nursing model is required. This work will be undertaken in the first quarter of 2015, reporting to the Board in April 2015. The management team are managing the risk with daily conference calls to coordinate staffing based on acuity and demand and a weekly forward look to plan work effectively. Agency posts are also covering vacancies.

Other Areas:

- **Patient Acuity System:** Replacement of the Trust's patient acuity system was completed at the beginning of November with the live launch of iPAMS. Both day and night shift acuity, at individual patient level, is being recorded across our general adult inpatient ward bedded areas.
- **Red Flags:** There were 70 red flags raised over the month of November, a significant increase of 34 from the previous month. The increase in reported red flags was due to re-educating clinical directorates in the use of the escalation process and the increased patient care needs as the Trust moves into the winter season. Staff were reassured throughout November that raising a red flag is the opposite of not being able to cope, and advised that it should be seen as a tool to use pro-actively. Staff were educated that the process assists in identifying a challenging episode to manage on the ward and allows for further support to be given externally by senior nurses.
- All Red Flag alerts were responded to with a senior nurse review at the time of being raised and any mitigating actions immediately put in place to ensure patient safety.

- **Patient acuity alerts:** 200 acuity alerts were triggered in the Trust over the month of November for the day shift across the inpatient ward areas. This was a decrease of 22 from the month of November (Figure 2). To note, there were a number of areas that had days missing where acuity was not measured due to the transition from the old acuity system to the new. These gaps affected the correlation of lower numbers of email acuity alerts triggered for the day shift. Work is in progress with clinical areas of the importance of per shift acuity measurement to rectify this for future months reporting, (Figure 2).

Figure 2.



- All acuity email alerts triggered were responded to appropriately by a senior nurse and staffing levels adjusted where required to ensure safe staffing levels.
- **Recruitment position remains positive.** At the time of this paper being prepared there are currently 417.15 wte Nursing and Midwifery vacancies being actively recruited. An increase of 19.15wte from the month of October's reporting. This equates to around 7.5% of the total Trust's Nursing & Midwifery establishment (5571.70 wte).
- *Pipeline external nursing staff recruited (221.5wte), but waiting to commence employment are included in the Trust employed numbers.* This is an extremely positive position for the second month due to successful recruitment campaigns. Appendix 3 shows the current Trust Nursing and Midwifery workforce position with a projected three month vacancy position based on historical leaver's data

of around 9.48% a slight increase of 0.2% projected from October's reported figures.

- Following the November/December Chief Nurse workforce reviews it is anticipated there will be a number of additional nursing posts following business planning. This will provide further challenges to the Trust on successfully recruiting increased numbers of qualified nurses at a challenging time nationally where vacancy rates are high across the UK. Work is currently in progress reviewing UK and EU recruitment in order to fulfil the Trust's vacancy gaps alongside making the Trust an attractive place of employment for potential/existing employees.
- **November Workforce workshop:** Workforce senior operations team and Human Resource departments met with Trust Nursing & Midwifery Committee members at a workforce all day. Reducing the temporary staffing financial spend and the increase of nurse to patient contact time being the day's focus. Continuing to develop the outputs of the day over December and January will ensure there are measurable plans in place moving forward into 2015.
- **Expansion of 1:1 specials team:** Recruitment into the 1:1 specials team is in progress with an aim to have a significant number of these positions recruited to by mid January 2015. To support the expansion of the team, all procedures and documentation related to the service is currently being reviewed.
- **6/12 Chief Nurse workforce reviews:** Are near to completion for most of the nursing clinical directorates. The final reviews outstanding are planned for completion in January 2015. There were a number of directorates where activity and general service changes were presented requiring enhanced staffing levels. In some clinical areas these enhanced staffing levels have been put in place from immediate effect, with others being put forward for business planning. The full bi-annual report will be published in January 2015.

Implications:

- The Trust is continuing to remain busy, requiring high levels of nursing hours to deliver safe effective patient care. Stabilising the nursing workforce in clinical areas is a priority as we move into 2015.

Recommendations:

- The Board of Directors is asked to note the information contained in this summary report and the actions we have in place, alongside the excellent progress we have made to date.

Appendices:

- Appendix 1 – Ward Level % Planned Vs Actual, September –November 2014
- Appendix 2 - Directorate level % Planned Vs Actual nursing hours September – November 2014
- Appendix 3 – Trust Level Recruitment & Vacancy levels (26th November 2014)
- Appendix 4 - Planned vs. Actual nursing hours Trust collated - November 2014 (UNIFY upload)
- Appendix 5 - Trust collated workforce clinical indicator summary – November 2014
- Appendix 6 - Non-inpatient monthly staffing report collated –November 2014