NHS
Guy's and St Thomas'
NHS Foundation Trust

GUY'S AND ST THOMAS' NHS FOUNDATION TRUST
TRUST RISK AND ASSURANCE COMMITTEE
THURSDAY 14 SEPTEMBER 2023

Title:	**Quarter 1 Board report for Nursing and Midwifery staffing**
Responsible executive:	**Avey Bhatia, Chief Nurse**
Paper author:	**Sue Cox, Associate Chief Nurse & Director of Nursing for Workforce and Education** **Rob Lewis, Head of Nursing for Nursing Workforce and Education**
Purpose of paper:	To assure the Board and the public regarding Nursing and Midwifery safe staffing levels
Main strategic priority:	Support and empower our workforce
Key issues summary:	• Significant focus on recruitment and retention programmes of work are prioritised to build and protect staffing levels to provide safe, effective and resilient care for current and future demand. This work supports the ongoing reduction in nursing and midwifery vacancy rate which remained above the Trust target of <10% • PDR and Mandatory Training compliance is below the Trust target of 95% and was affected by the ongoing staffing and operational pressures. A key part of the approach to addressing this is to ensure that the education, training and development of our staff is relevant to the current climate • Ongoing work is in progress to combine the data from Legacy RBHH and Legacy GSTT into one data set for the combined Trust which now incorporates the key workforce metrics with RBH agency and pipeline data included from January 2023 onwards. • Ongoing Industrial action significantly impacted on both elective and emergency care affecting patient and staff activity, and requiring detailed staff planning and provision to ensure patient safety.
Paper previously presented at:	• To be presented to NMEC in September for noting, unable to be presented earlier due to data availability and meeting schedule.
Recommendation(s):	The COMMITTEE is asked to: 1. Note the content of the paper

GUY'S AND ST THOMAS' NHS FOUNDATION TRUST

TRUST RISK AND ASSURANCE COMMITTEE

THURSDAY 14 SEPTEMBER 2023

NURSING AND MIDWIFERY WORKFORCE QUARTERLY BOARD REPORT

PRESENTED BY GEMMA CRAIG

Risks or issues associated with this paper:	• This report provides the Trust Board with an overview of the Nursing and Midwifery workforce, including Royal Brompton and Harefield Hospitals (RBHH), for Quarter 1 (April-June 2023). Ongoing work has progressed to combine the data from Legacy RBHH and Legacy GSTT into one data set for the combined Trust which now incorporates the key workforce metrics with RBH agency and pipeline data included from January 2023 onwards. • Significant focus on recruitment and retention programmes of work are prioritised to build and protect staffing levels to provide safe, effective and resilient care for current and future demand. This work supports the ongoing reduction in nursing and midwifery vacancy rate which continued to show improvement towards the Trust target of <10% as recruitment and retention initiatives and programmes of work matured. • PDR and mandatory training compliance are below the Trust target of 95% and was affected by the ongoing staffing pressures and variation of mandatory training and PDR reporting requirements across legacy organisations, with work progressing to align processes. A key part of the approach to addressing this is to ensure that the recruitment, education, training and development of our staff is relevant to the current climate.
Assurances provided in this paper:	• Overview of the Nursing and Midwifery workforce in line with the National Quality Board (NQB) Standards and Expectations for safe staffing (2016)

Review and approved by:	Gemma Craig, Deputy Chief Nurse
Responsible committee:	N/A

1. Introduction

This report provides the Trust Board with an overview of the Nursing and Midwifery workforce, including Royal Brompton and Harefield Hospitals (RBHH), for Quarter 1 (April– June 2023) and is set out in line with the National Quality Board (NQB) Standards and Expectations for Safe Staffing published in 2016. It provides assurance that arrangements are in place to safely staff our services with the right number of Nurses and Midwives with the right skills, at the right time and demonstrates that the Trust meets these expectations. Legacy organisations have separate reporting and data analysis. Ongoing work is in progress to combine the data from Legacy RBHH and Legacy GSTT into one data set for the combined Trust. Where systems are able, data has been combined for a number of fields and are presented as combined Trust, with RBHH or legacy GSTT (excluding RBHH) detail included, and legacy GSTT only where limited data is available. Agency and recruitment pipeline data for RBHH sites has been included within this report from January 2023 providing combined Trust data for the key workforce performance indicators. Healthroster data for RBHH remain unavailable and work is ongoing to include in future reports.

2. Key Headlines

2.1 The objectives under each of the expectations were successfully maintained throughout Q1 despite ongoing staffing challenges. Initiatives were maintained and progressed for the recruitment and retention, with vacancy rates increasing due to an increase in establishment, and remaining above the Trust target. Sickness reduced in Q1 by 0.3% from Q4. The focus on career development and wellbeing of existing staff and those joining through local and international recruitment campaigns remain a key priority. Recruitment for our final year nursing students continued with 170 host and 78 non-host newly qualified nurses offered posts within the Trust. A previously agreed blended approach for International Recruitment through ongoing work with CapitalNurse Consortium and external agencies continued to provide significant progress with our 2023 IR recruitment plans across the Trust.

2.2 The Nursing and Midwifery vacancy rate for the combined Trust ended Q1 above the Trust target of <10% at 11.0% increasing by 0.7% during this period which reflected increase in establishment by 104.8 compared to end of Q4. There is ongoing progress made with the International Recruitment programme and local recruitment initiatives including the programme of activity to support recruitment of our newly qualified nurses. The overall Nursing and Midwifery Annual Turnover for the combined Trust remained same 14.0% as in March 2023. Q1 ended with a 4.9% overall combined Trust vacancy rate inclusive of external applicants within the pipeline across both RBHH and legacy GSTT sites. Benchmarked Model Hospital data for April 2023 Annual Turnover percentage is detailed in table 1, with Trust data including RBHH.

	Registered Nurse Annual Turnover	Nursing Support Annual Turnover
GSTT	15.8%	9.0%
Region	14.1%	9.0%
National	12.6%	10.0%

Table 1

Local recruitment drives, final year student recruitment, and focused work with individual Directorates continue to mature. International recruitment pipeline increased throughout Q1 with 54 nurses commencing across the combined Trust since April 2023 and at the time of writing 34 nurses arrived in July 2023, with a further 105 in the pipeline. The business case to support the international recruitment plan for 2023/34 to recruit 150 additional nurses between 1 April – 30 November 2023 was approved at the Trust Executive Committee in February 2023. A focus on retention initiatives is a key priority with a review of our retention activities across the organisation in progress against the NHSEI retention self-assessment, with key objective to share best practice and identify areas of further focus.

2.3 Temporary staffing requirements continued throughout Q1 reflecting the continued high sickness levels of range (5.8% to 5.9%), continued vacancies, and the reliance on temporary staffing required to ensure all areas are safely staffed. Despite this, the agency spends (which represents invoices paid in month) fluctuated throughout Q1 across both legacy organisations and was 3.9% of the total Nursing staff pay bill for the combined Trust (June 2023). This is a 0.3% reduction compared to March 2023. Bank usage for legacy GSTT decreased by 71.6 WTE in month usage from April to June 2023. Data on bank staffing usage for RBHH is currently unavailable for inclusion within this report. The overall nursing and midwifery fill rates for the combined Trust fluctuated during Q1 (87.6% to 90.6%) ending Q1 at 87.8%. Ongoing work is progressing to review all rosters and planned hours requirements with significant progress made during Q1. A summary of the 'Planned v Actual' hours during this period can be seen in table 2 followed by average fill rates across Q1 detailed in table 3. Agency spend continued to be required to meet the ongoing enhanced care and RMN requirements across the organisation. Measures are in place to monitor and reduce agency spend within the individual Directorates and through the Workforce Team recruitment and retention initiatives.

Combined Trust	Apr-23	May-23	Jun-23
Planned Hours	538,720	552,593	539,904
Actual Hours	471,855	500,550	474,119
Difference	66,865	52,043	65,785

Table 2

Period (Q1)	Day Average fill rate - Registered (%)	Day Average fill rate - Non-registered (%)	Night Average fill rate - Registered (%)	Night Average fill rate - Non-registered (%)	Average Trust Level Fill rate %
Apr-23	86.9%	109.0%	87.5%	136.9%	105.1%
May-23	89.6%	106.8%	92.2%	131.4%	105.0%
Jun-23	89.4%	100.8%	90.5%	126.2%	101.7%

Table 3

2.4 Sickness rates for the combined Trust fluctuated between 5.8% – 5.9% throughout Q1. Temporary staffing and deployment of staff were used to maintain safe staffing across all areas.

2.5 Activity fluctuated throughout Q1 across legacy GSTT as identified in table 4 below (RBHH data unavailable). In June 2023 legacy GSTT site had 41,895 bed days, representing an increase of 2,254, bed days from the same period in 2022. Throughout Q1 Level 1b (Acutely dependent) for patients in non-critical care beds, continued to be the most prevalent acuity score across the Trust which is consistent with the past few years.

Count of bed days							Proportion of bed days				
	Level 0	Level 1a	Level 1b	Level 2	Level 3	Grand Total		Level 0	Level 1a	Level 1b	Level 2	Level 3
June 2023	6,658	12,457	21,361	1,307	112	41,895		15.4%	30.7%	50.3%	3.1%	0.5%
May 2023	6,715	13,437	22,008	1,338	225	43,723		15.9%	29.7%	51.0%	3.1%	0.3%
April 2023	6,350	12,117	21,697	1,247	273	41,684		15.2%	29.1%	52.1%	3.0%	0.7%

Table 4 legacy GSTT bed days data

2.6 The combined Trust average 'Care hours per patient day' (CHPPD) was 11.8 for Q1 with a peer (Shelford Group) comparison of 9.5 and national comparison of 8.5 benchmarked on Model Hospital March 2023 data. This demonstrates the Trust on average had higher staffing levels providing a greater number of patient care hours when compared to peers.

2.7 Personal Development Reviews (PDR) compliance remained fluctuated during Q1 decreasing from 73.1% (April 2023), 73.1% (May 2023) and ending Q1 at 72.3% (June 2023) and is below Trust target of 95%. The ongoing reduced RBHH PDR rate (66.0% to 61.0% April – June 2023) is in part due to RBHH requirements for quarterly PDR meetings via the Learn Now system / LMS. Work is in progress to align PDR requirements across the organisation. Completion of PDRs were affected by the ongoing staffing pressures and remains a challenge with maintaining safe staffing a priority.

2.8 Mandatory Training performance for the combined Trust increased throughout Q1 from 86.0% (April 2023) to 89.8% (June 2023). Directorate and ET&D plans continue in order to maintain and improve compliance further.

3. Summary

The Board of Directors are asked to note the information contained in this report. Detailed quarterly Nursing and Midwifery Board Report for April - June 2023 is within the appendix.

4. APPENDIX

Nursing and Midwifery Board report for April- June 2023.

GUY'S AND ST THOMAS' NHS FOUNDATION TRUST
BOARD BRIEFING OF NURSING AND MIDWIFERY STAFFING LEVELS FOR APRIL-JUNE 2023
TUESDAY 14 SEPTEMBER 2021

Title:	**Board Briefing of Nursing and Midwifery Staffing Levels for April - June 2023**
Responsible Director:	**Gemma Craig, Deputy Chief Nurse**
Contact:	**Sue Cox, Associate Chief Nurse & Director of Nursing for Workforce and Education** **Rob Lewis, Head of Nursing for Nursing Workforce and Education**

1. **Introduction**

    This briefing provides the Trust Board with an overview of the Nursing and Midwifery workforce, including Royal Brompton and Harefield Hospitals, for Quarter 1 (April - June 2023) and is set out in line with the National Quality Board (NQB) Standards and Expectations for Safe Staffing published in 2016. It provides assurance that arrangements are in place to safely staff our services with the right number of Nurses and Midwives with the right skills, at the right time.

    Ongoing work is in progress to combine the data from Legacy RBHH and Legacy GSTT into one data set for the Combined Trust. Agency and recruitment pipeline data for RBHH sites has been included within this report from January 2023 providing combined Trust data for the key workforce performance indicators.

2. **Key highlights**

    Table 1 and 2 outline the key performance workforce indicators for Nursing and Midwifery mapped against the Trust target with comparison to the previous month's performance.

    The data for Quarter 1 is highlighted as Legacy GSTT (LGSTT), Legacy RBHH (LRBHH), and Combined Trust.

Key Performance Indicator	Target	April 2023 Performance	May 2023 Performance	June 2023 Performance	Context and actions

Vacancy rate	10%	Combined trust 10.0% LGSTT:11.2% LRBHH: 5.5%	Combined trust 10.4% LGSTT:11.7% LRBHH: 5.1%	Combined trust 11.0% LGSTT:12.4% LRBHH: 5.1%	For the combined trust there were 330 new starters, and 235 leavers throughout Q1. If the current external applicants for June 2023 were added to the staff in post figure, the overall vacancy rate would be 4.9%. The Recruitment Team are working on reducing this with the individual Directorates concerned. The increase in vacancy rate relates to an increase in establishment by 104.8 WTE for the given quarter.
Agency spend	3.3%	Combined trust 3.2% LGSTT: 3.7% LRBHH: 1.5%	Combined trust 4.0% LGSTT: 4.6% LRBHH: 1.9%	Combined trust 3.9% LGSTT: 4.3% LRBHH: 2.2%	Agency spend rate decreased by 0.3% in Q1 at June 2023 compared to Q4 as at March 2023 (4.2%) but it remained above Trust target. Measures are in place to monitor and reduce agency spend within the individual Directorates and through the Workforce Team recruitment and retention initiatives.
Annual turnover	12.0%	Combined trust:14.1% LGSTT: 14.5% LRBHH:12.7%	Combined trust:14.4% LGSTT: 14.9% LRBHH:12.4%	Combined trust:14.0% LGSTT: 14.5% LRBHH:12.1%	In month turnover rate did fluctuate throughout Q1 with the combined trust average of 0.73%, it was 0.6% (April 2023) and 0.7% (June 2023). Annual turnover rate remains above Trust target. There is ongoing work from the Retention Team to reduce turnover rate.
Sickness rate	3.0%	Combined trust 5.9% LGSTT: 6.2% LRBHH: 5.0%	Combined trust 5.8% LGSTT: 6.0% LRBHH: 5.0%	Combined trust 5.8% LGSTT: 6.0% LRBHH: 5.0%	Sickness rate has reduced by 0.3% from Q4 (6.1% Mar 2023). This remains above the Trust target and is addressed within the individual Directorates and monitored through monthly directorate Performance Review Meetings.
Personal Development Review (PDR)	95%	Combined trust:73.0% LGSTT: 75.1% LRBHH:66.0%	Combined trust:73.1% LGSTT: 76.1% LRBHH:63.7%	Combined trust: 72.3% LGSTT: 76.0% LRBHH:61.0%	Completion of PDRs were affected by ongoing staffing pressures related to ongoing Industrial Action and variation of PDR reporting requirements across legacy organisations, with work progressing to align processes. Directorate plans have been formulated to address this.
Mandatory training	95%	Combined trust 86.0% LGSTT: 84.7% LRBHH:93.1%	Combined trust 88.9% LGSTT: 87.2% LRBHH:93.4%	Combined trust 89.8% LGSTT: 88.4% LRBHH:93.6%	Mandatory Training has improved by 2.0% from Q4 (87.8% Mar 2023). This is below the Trust target with ongoing collaborative work with ET&D and individual Directorate plans formulated to improve compliance.

Table 1

KPI (Combined Trust)	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23
Agency spend							4.9%	4.2%	4.2%	3.2%	4.0%	3.9%
Sickness	6.4%	6.6%	6.5%	6.7%	6.6%	6.4%	6.1%	6.0%	6.1%	5.9%	5.8%	5.8%
Voluntary Turnover	15.2%	15.8%	15.8%	15.4%	15.0%	14.6%	13.7%	13.7%	14.0%	14.1%	14.4%	14.0%
Vacancies	11.8%	11.8%	11.9%	10.4%	9.9%	10.8%	10.4%	10.4%	10.3%	10.0%	10.4%	11.0%

| PDR Compliance | 74.2% | 73.1% | 75.3% | 69.6% | 70.8% | 71.6% | 72.1% | 72.9% | 72.3% | 73.0% | 73.1% | 72.3% |
| Mandatory Training | 87.9% | 89.8% | 88.6% | 84.6% | 85.0% | 85.2% | 85.8% | 86.5% | 87.8% | 86.0% | 88.9% | 89.8% |

Table 2

3.   EXPECTATION 1 – RIGHT STAFF

3.1   Evidence Based Workforce Planning

3.1.1   Having the right establishment, and the right staff in post, is essential to ensuring the safe and effective delivery of patient care. The Trust meets this expectation by undertaking twice yearly establishment reviews against which an increase in establishment is substantiated through business planning. Below is a summary of the key Nursing and Midwifery workforce metrics used to monitor performance against this expectation.

Staffing measures	June 2022	June 2023	Difference	Change
Nursing Establishment WTE	7203.66	7467.51	263.85	▲
Nursing Staff in Post WTE	6273.42	6540.44	267.02	▲
Vacancies WTE	930.24	927.07	-3.17	▼
Vacancy rate	12.9%	12.4%	-0.5%	▼
Annual turnover	16.3%	14.5%	-1.8%	▼
Red Flags raised	171.0	71.0	-100.0	▼
Agency % of Pay bill	4.2%	4.3%	0.1%	▲
Actual v Planned Hrs used	85.9%	87.5%	1.6%	▲

Table 2a – Legacy GSTT Nursing and Midwifery Workforce metrics

Staffing measures	June 2022	June 2023	Difference	Change
Nursing Establishment WTE	1773.3	1823.4	50.1	▲
Nursing Staff in Post WTE	1705.41	1729.56	24.14	▲
Vacancies WTE	67.9	93.9	26.0	▲
Vacancy rate	3.8%	5.1%	1.3%	▲
Annual turnover	11.9%	12.1%	0.2%	▲
Red Flags raised				
Agency % of Pay bill	1.93%	2.17%	0.24%	▲
Actual v Planned Hrs used	82.9%	88.7%	5.8%	▲

Table 2b – Legacy   RBHH Nursing and Midwifery Workforce Metrics

Staffing measures	June 2022	June 2023	Difference	Change
Nursing Establishment WTE	8977.0	9290.9	313.9	▲
Nursing Staff in Post WTE	7978.8	8270.0	291.2	▲
Vacancies WTE	998.1	1020.9	22.8	▲
Vacancy rate	11.1%	11.0%	-0.1%	▼
Average Annual turnover	15.3%	14.0%	-1.3%	▼
Red Flags raised				
Agency % of Pay bill	3.05%	3.88%	0.83%	▲
Actual v Planned Hrs used	85.0%	87.8%	2.8%	▲

Table 2c – Combined Trust Nursing and Midwifery Workforce Metrics

3.1.2   There was a 1.1% increase in establishment and a 0.4% increase in staff in post across the combined Trust during Q1. Legacy GSTT seeing a 1.4% growth in establishment WTE and 0.3% growth in staff in post WTE in June 2023 compared to March 2023 whilst legacy RBHH establishment WTE remained same and had a 0.6% increase in staff in post. The actual hours used against planned hours and associated fill rates during April, May and June 2023 are outlined in table 3 below. The overall fill rates for the combined Trust was 87.8% in June 2023, an increase of 0.2% in comparison to April 2023. Figures 1 and 2 show that performance against this expectation remains stable.

Period	Trust Level	Total Planned Hour	Total Actual Hour	Overall Fill rate%
Apr-23	Legacy GSTT	394259.8	349737.3	88.7%
Apr-23	Legacy RBHH	144460.5	122118.2	84.5%
Apr-23	Combined Trust	538720.3	471855.5	87.6%
May-23	Legacy GSTT	408132.4	370966.8	90.9%
May-23	Legacy RBHH	144460.5	129583.6	89.7%
May-23	Combined Trust	552592.9	500550.4	90.6%
Jun-23	Legacy GSTT	395443.6	346050.3	87.5%
Jun-23	Legacy RBHH	144460.5	128068.5	88.7%
Jun-23	Combined Trust	539904.1	474118.8	87.8%

Table 3
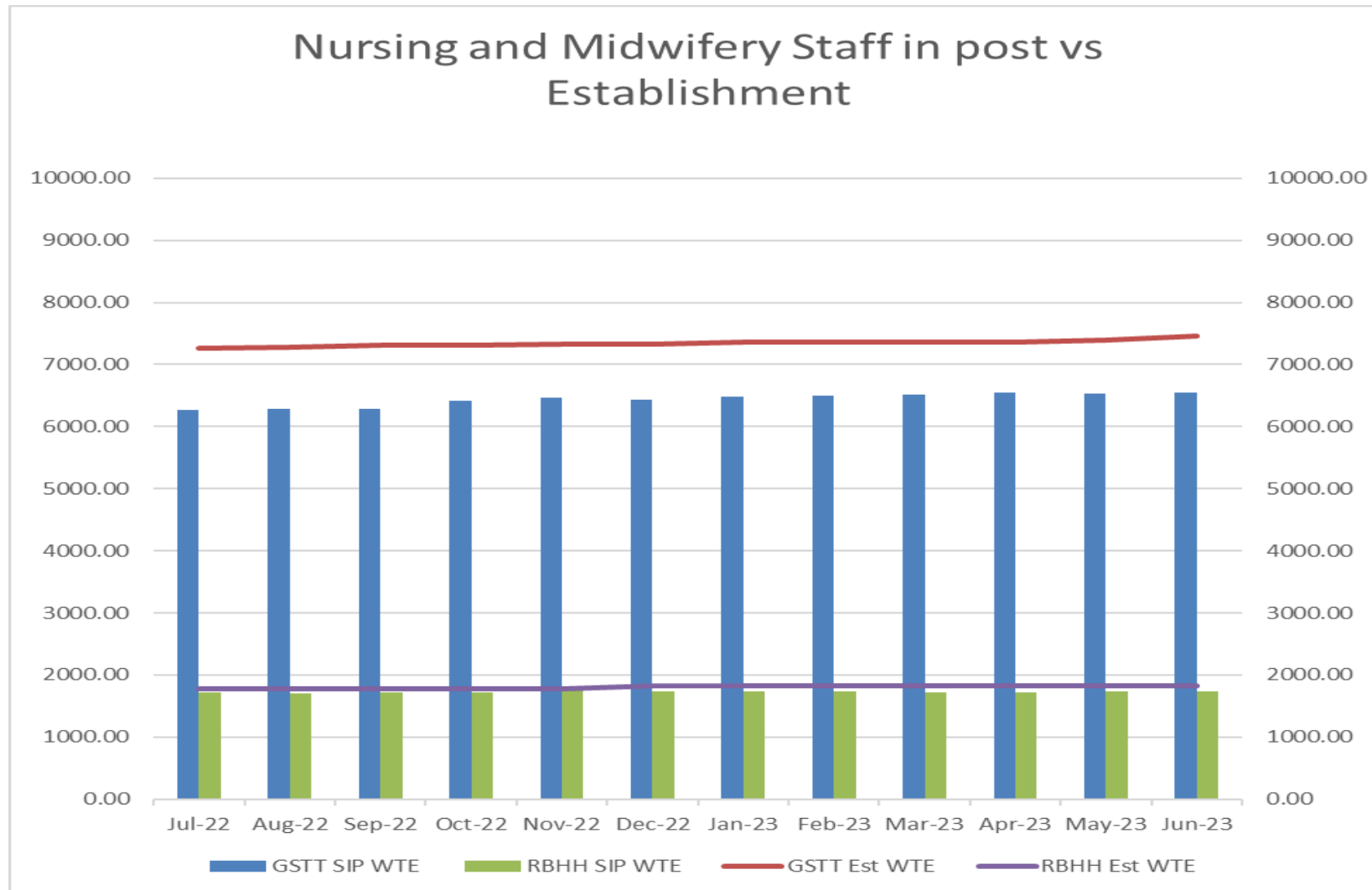
Figure 1
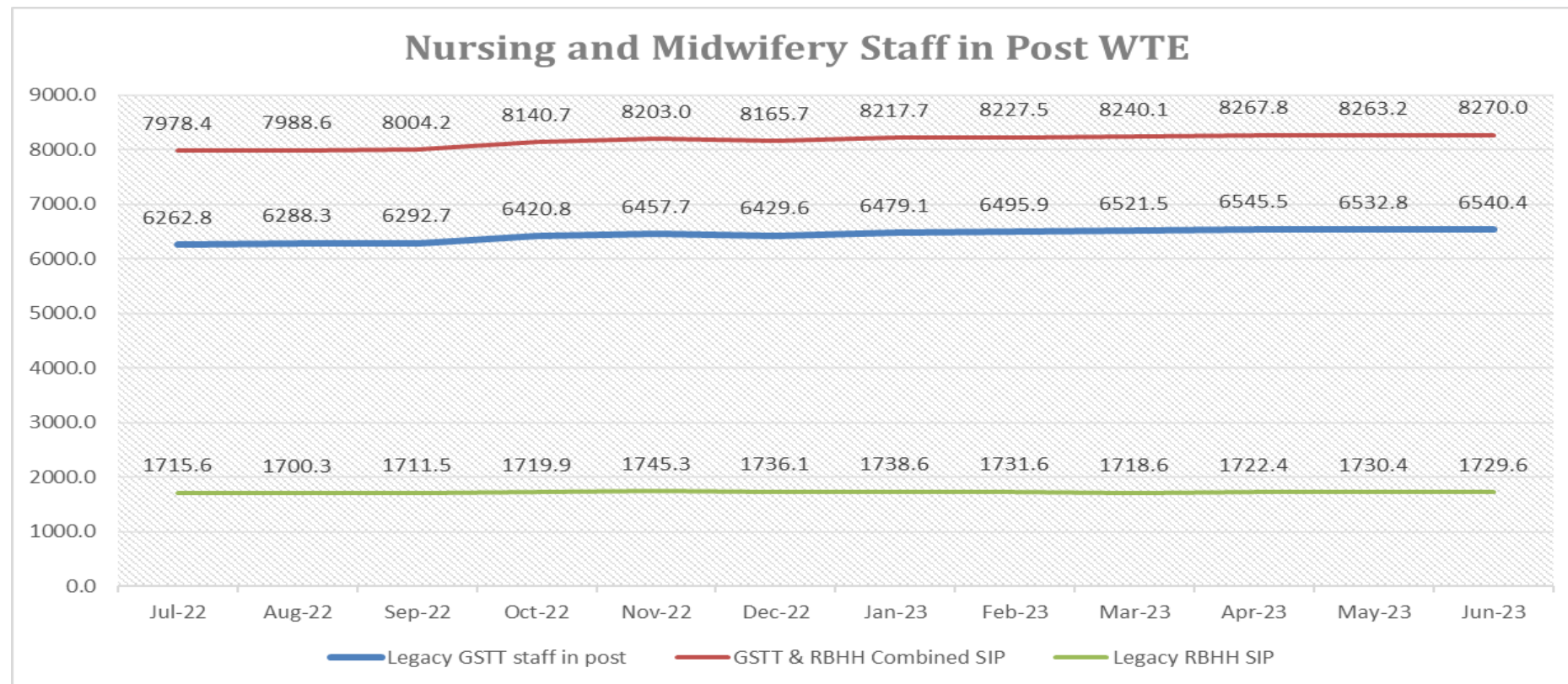
Figure 2

3.2 Recruitment and Retention

3.2.1 Figures 3, 4 and 5 display the trends in three key Nursing and Midwifery workforce metrics where performance ratings are categorised in line with the Trust's targets. The Trust faces some challenges with all three, with a similar picture across the sector, region and nationally.

3.2.2 The Trust continues to drive improvement through local and national initiatives. The recruitment process for final placement nursing students qualifying in 2023 commenced in March 2023. Letters from the Chief Nurse have been sent to all host student in both adult and paediatric pathways, offering posts across the organisation. 170 host students completed their preference forms and returned to

the central team for allocation to directorates. A face to face assessment centre for non-host final placement nursing students applying for positions in GSTT were completed in May 2023, with 78 offers made. Allocation of both host and non-host students is in progress with the Directorates and Clinical Groups.

International recruitment continued throughout Q1 using the Capital Nurse Consortium and external agencies (Resource Finder, Charkos (previously Aryavrat), Pulse and Cromwell). During Q1 (April - June 2023), 54 nurses have commenced across the Trust, LRBHH (n=19), Theatres Anaesthetics and Perioperative Directorate (n=3), Evelina London Children's Hospital Theatres (n=4), Paediatric Intensive care and Neonatal care (PICU and NICU)) (n=4), LGSTT General Adult Nursing (n=18), Community (n=4), Midwifery (n=1), and Cardiovascular (n=1). At the time of writing 34 nurses arrived in July 2023, with a further 105 in the pipeline. The international recruitment plan for 2023/34 for 250 internal nurses to be recruited between 1 April – 30 November 2023 was presented and approved at the Trust Executive Committee in February 2023. This comprised of carry over 100 planned international recruits from the 2022/23 plan that were unable to be arrive prior to 1 April 2023 and an agreed business case to support recruitment of 150 additional nurses with match funding from NHSE.

3.2.3   Retention activities were maintained throughout Q1 with a focus on career development and wellbeing. Career and Wellbeing trolley visits remained a focus, reaching out to staff within Westminster Consulting Rooms, Gracefield Gardens, Ophthalmology theatres, Evelina, Mary Sheridan centre, and Pulross. Career Clinics continued throughout, including the use of the Career interactive game offering, support and guidance for all Nursing and Midwifery staff. There is ongoing work to understand retention initiatives across the organisation, using the NHSE retention self-assessment, with Clinical Groups returning information relating to Flexible working, Professional development and careers. Programmes of work have commenced on flexible working/ self-rostering practice in collaboration with Timewise Consultancy, Critical care, Acute and General Medicine, and RBHH.

3.2.4   The sickness absence rate for the combined Trust decreased by 0.1% to 5.8% throughout Q1. Directorates with top sickness rates were Clinical Imaging & Med Physics (10.6% - 10.9`%), Inpatient Services (8.3% - 9.0%), Evelina Community Services (8.3% - 8.5%) and Specialist Ambulatory Services at 7.4%. Clinical Imaging & Med Physics and Inpatient Services have small nursing establishments therefore report higher percentage rates. Where indicated temporary staffing is used to meet the minimum staffing safety requirements.
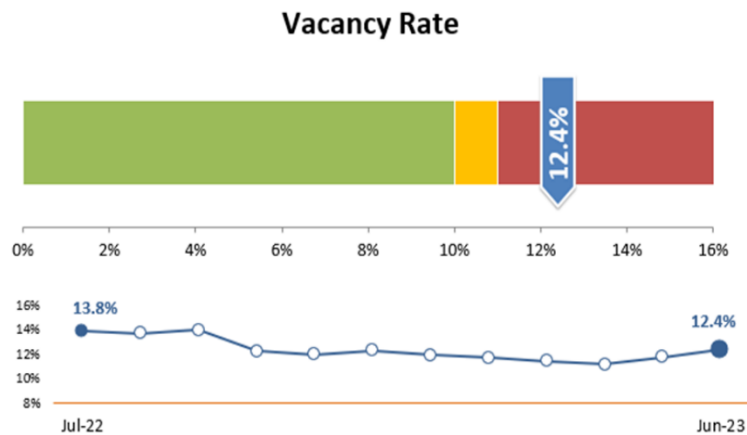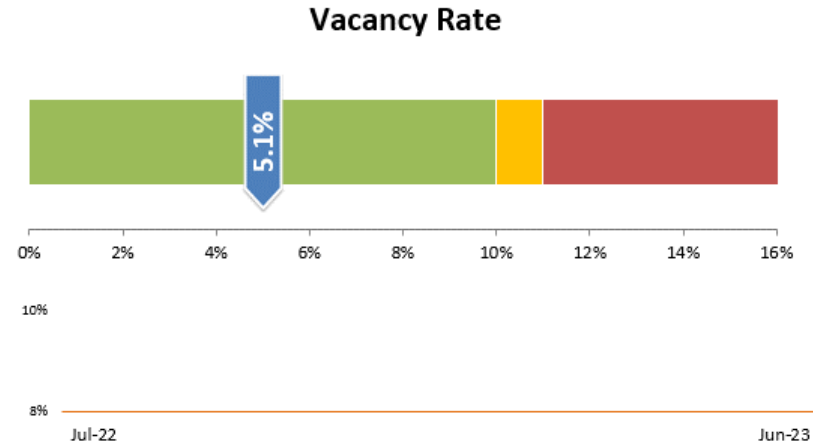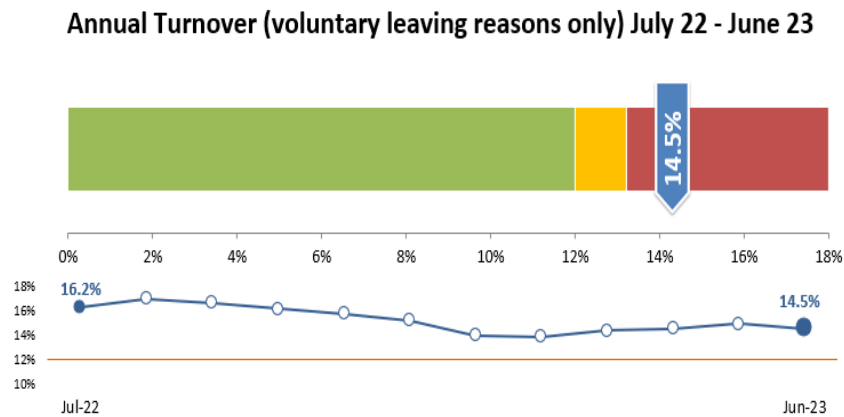
Vacancy Rate

Figure 3a Legacy GSTT

Vacancy Rate

Figure 3b Legacy RBHH

Annual Turnover (voluntary leaving reasons only) July 22 - June 23

Figure 4a Legacy GSTT

Annual Turnover (voluntary leaving reasons only) July 22 - June 23
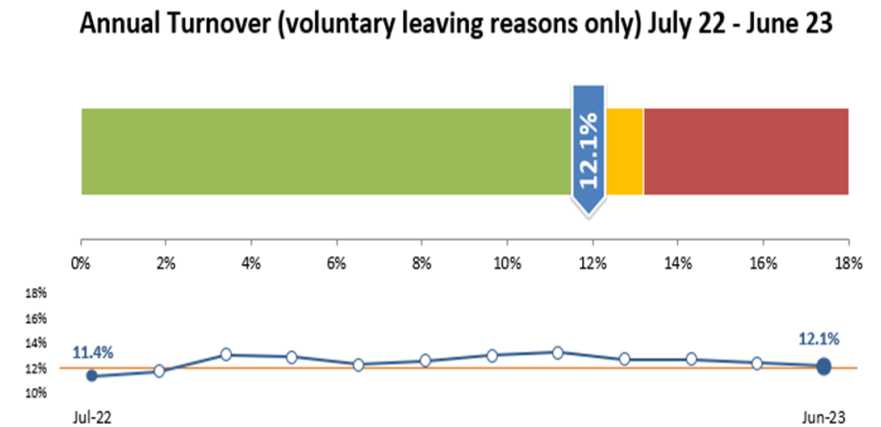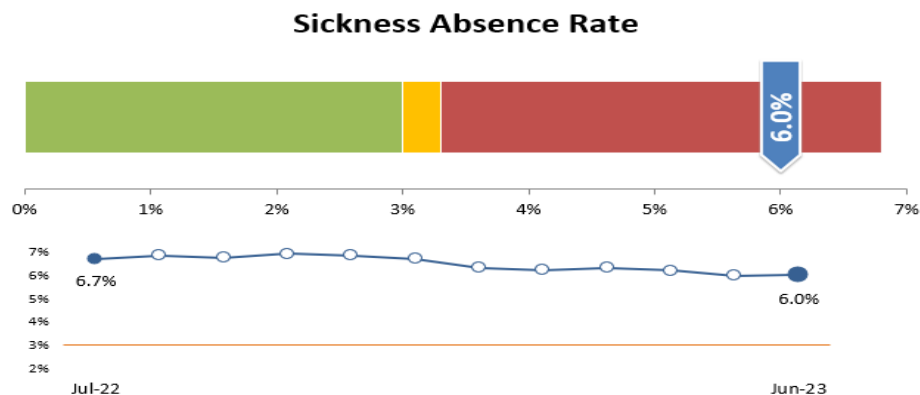

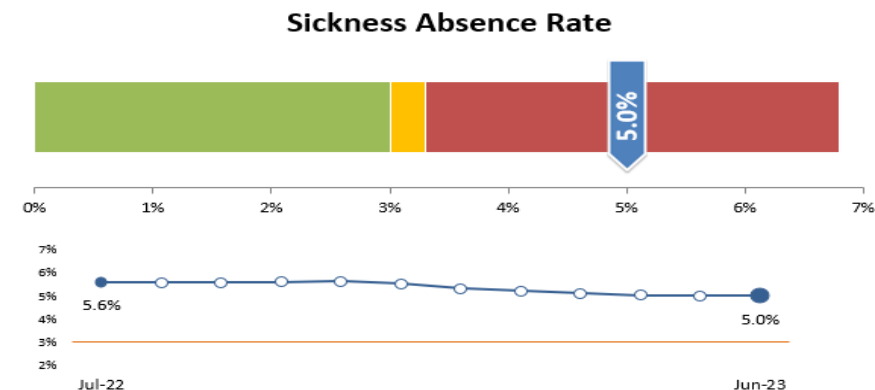***Figure 4b Legacy RBHH***

Figure 5a Legacy GSTT

Figure 5b Legacy RBHH

3.3 Activity and Acuity

3.3.1 The number of bed days fluctuated during Q1 for legacy GSTT as depicted in table 4 below (RBHH data unavailable for inclusion within this report). In June 2023 the Legacy GSTT site had 41,895 bed days, representing an increase of 2,254 bed days from the same period in 2022. Level 1b (heavily dependent or acutely unwell) for patients in non-critical care beds, continues to be the most prevalent acuity score across the Trust which is consistent with the past few years.

	Count of bed days						Proportion of bed days				
	Level 0	Level 1a	Level 1b	Level 2	Level 3	Grand Total		Level 0	Level 1a	Level 1b	Level 2	Level 3
June 2023	6,658	12,457	21,361	1,307	112	41,895		15.4%	30.7%	50.3%	3.1%	0.5%
May 2023	6,715	13,437	22,008	1,338	225	43,723		15.9%	29.7%	51.0%	3.1%	0.3%
April 2023	6,350	12,117	21,697	1,247	273	41,684		15.2%	29.1%	52.1%	3.0%	0.7%

Legacy GSTT Table 4

3.3.2 Table 5 provides the combined Trust average fill rate by department / ward which fluctuated during Q1 with registered staff having a lower average fill rates in comparison to unregistered staff with overall average fill rates between 101.7% - 105.1%. The average Registered Nurse fill rates for Q1 (June 2023 - 88.6%) increased by 5.9% compared to Q4 (March 2023 - 82.7%). These fill rates are not representative of staffing levels.

Period (Q1)	Day Average fill rate - Registered (%)	Day Average fill rate - Non-registered (%)	Night Average fill rate - Registered (%)	Night Average fill rate - Non-registered (%)	Average Trust Level Fill rate %
Apr-23	86.9%	109.0%	87.5%	136.9%	105.1%
May-23	89.6%	106.8%	92.2%	131.4%	105.0%
Jun-23	89.4%	100.8%	90.5%	126.2%	101.7%

Table 5

3.3.3   The combined trust average 'Care hours per patient day' (CHPPD) was in the range (11.6 to 12.0) throughout Q1 with 11.6 in June 2023. This figure is reported monthly to NHSI as required and is a national metric based on the number of hours of Nursing and Midwifery care used, divided by the number of patients in beds at 12 midnight for the month. The peer (Shelford Group) average, benchmarked on Model Hospital was 9.5 in March 2023. This demonstrates the Trust had, on average, higher staffing levels providing a greater number of patient care hours when compared to peers.

	Trust CHPPD	Shelford Group CHPPD
April 23	12.0	9.5 March 2023
May 23	11.7	
June 23	11.6	

Table 6

4.   EXPECTATION 2 – RIGHT SKILLS

4.1   Mandatory Training, Development and Education

4.1.1   The Nursing and Midwifery mandatory training compliance rate for combined Trust increased throughout Q1 from 86.0% (April 2023) to 89.8% (June 2023). Legacy RBHH mandatory training compliance rate increased by 0.5% ending Q1 at 93.6%, with legacy GSTT increasing by 3.7% (88.4%, June 2023) and 1.9% increase when compared to June 2022. Figure 6 demonstrates the breakdown of Directorate compliance. All establishments have an uplift built in, to support staff with undertaking their mandatory training and development whilst maintaining safe staffing levels.
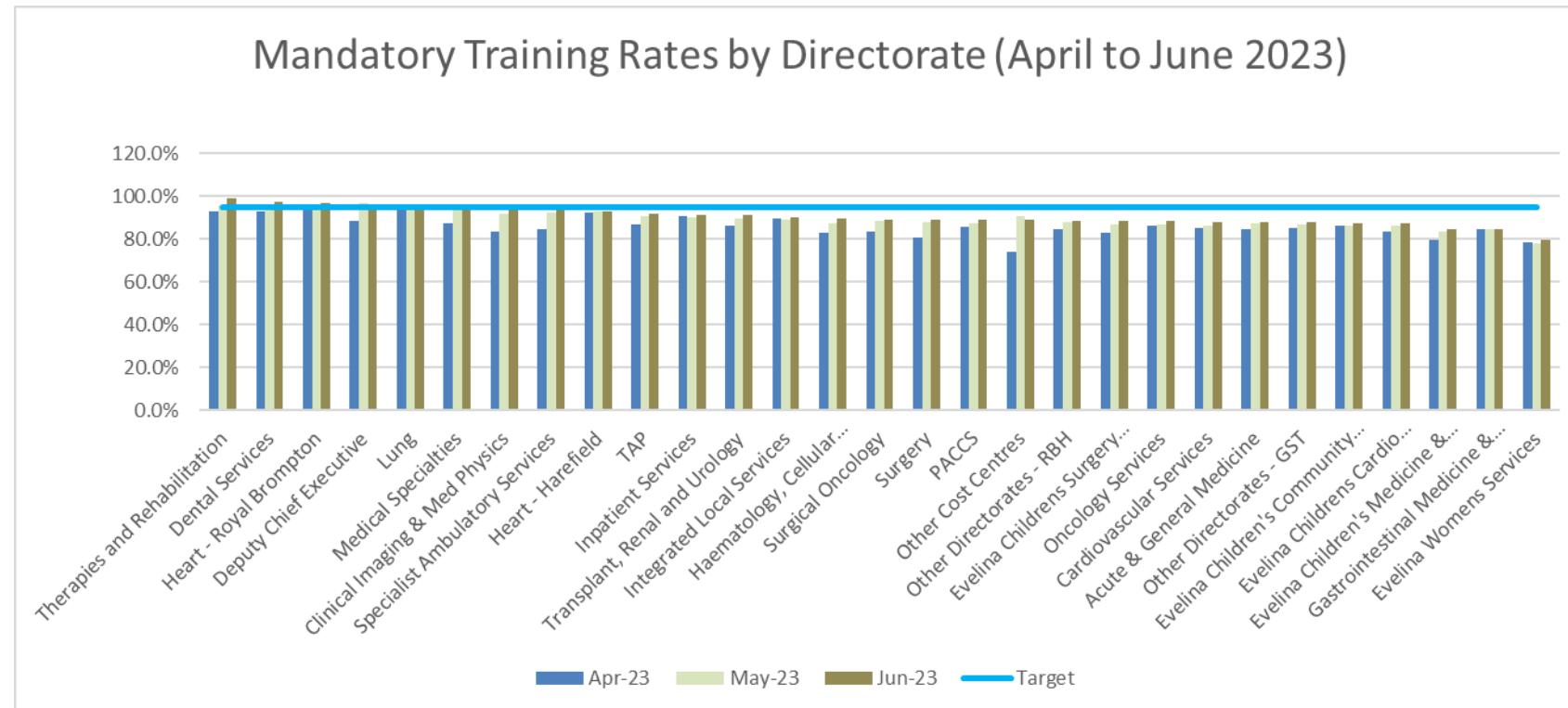
Figure 6 Combined Trust Mandatory Training Rates by Directorate

4.1.2　The Nursing & Midwifery PDR rate for combined Trust fluctuated during Q1 decreasing from 73.1% to 72.3% and ending Q1 at 72.3% (June 2023). Legacy GSTT PDR rate increased by 0.9% between April – June 2023 and 0.3% higher than same period in 2022. Legacy RBHH PDR rate decreased from 66.0% to 61.0% (April – June 2023) and is in part due to RBHH requirements for quarterly PDR meetings via the Learn Now system / LMS. Work is in progress to align PDR requirements across the organisation. Completion of PDRs are affected by the ongoing staffing and operational pressures across the Trust impacting on Directorates plans to improve compliance. Figure 7 demonstrates the breakdown of PDR compliance by Directorate.
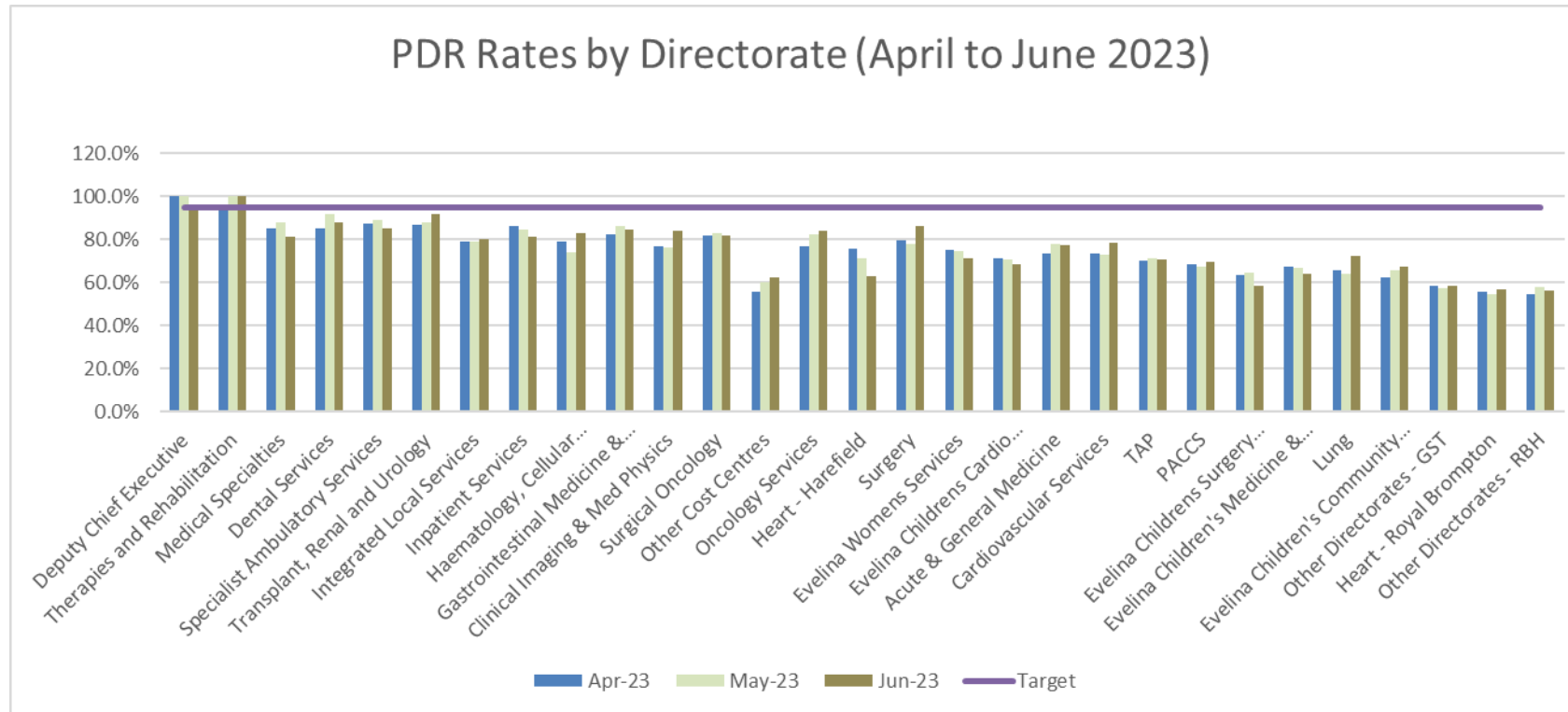
Figure 7 Combined Trust PDR rates by directorate

5.   EXPECTATION 3: RIGHT PLACE AND TIME

The Trust meets this expectation because it uses tools to support efficient and effective decision-making   around the deployment of staff to meet patient needs.

5.1   Efficient Deployment and Flexibility

5.1.1   Safe Care® is used across all adult and children inpatient areas to support the real time visibility of staffing levels across the Trust. The data collected highlights and supports decision making relating to the deployment and redistribution of staff to meet patient needs in other areas. RBHH do not currently have access to Safe Care® and ongoing work is in progress to align Healthroster systems and

standardisation of staffing level reporting to include all inpatient areas and extension to outpatient areas where appropriate. Local reporting processes and staffing oversight agreed within the Trust wide Nursing and Midwifery Safe Staffing Policy (2022) will remain in place for those areas not on Safe Care® and are not included within this report.

5.1.2   The number of Red Flags across legacy GSTT decreased month on month during Q1 from 114 (April 2023), 114 (May 2023) and 71 (June 2023) shown in Figure 8 and were raised due to short notice staffing absence and enhanced care requirements. All risks were appropriately mitigated. 20 Red flags remained open as of 30 June 2023, with no evident cause and was addressed with the individual teams. Staff are encouraged to raise red flags where there may be concerns relating to safe staffing levels, which triggers a review by the Senior Sister/Matron or Head of Nursing to resolve any immediate staffing concerns.
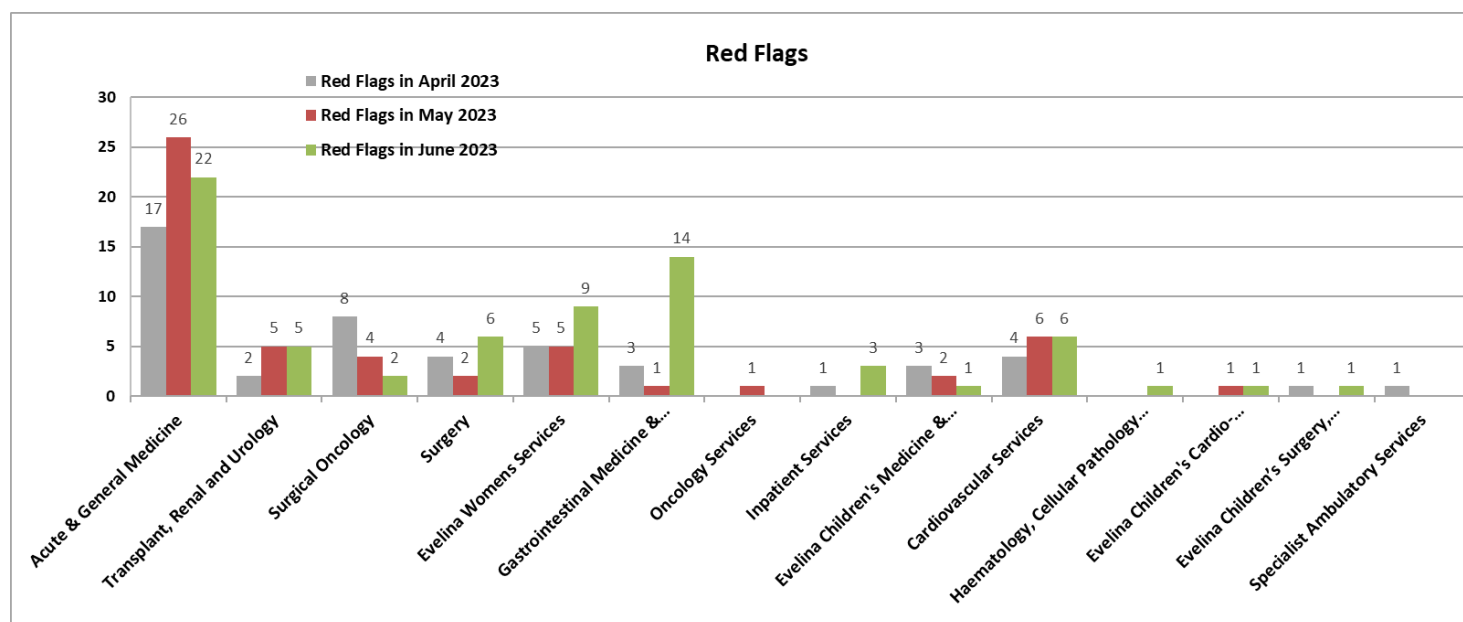

Figure 8 Legacy GSTT Red flags by Directorate

5.2   Efficient Employment, Minimising Agency Use

Roster reviews take place to support individual Directorates as required across legacy GSTT. Performance continues to be addressed with the individual areas who have not met the Key Performance Indicators (KPI). Annual Roster Assurance Reviews are held with all Directorates within legacy GSTT providing stronger assurance around the systematic approach to providing guidance and support in maintaining a fair, safe and cost-effective roster. These have recommenced since November 2022 following a pause due to the IT critical incident and staff turnover within

key teams. Ongoing work with HR leads across legacy organisations to support Allocate healthroster review and rollout at RBHH for all Trust staff incorporating full utilisation of functionalities to enable inclusion of these KPIs within future reports.

All nursing areas	11th July to 7th August 2022	8th August to 4th September 2022	5th September to 2nd October 2022	3rd October to 30th October 2022	31st October to 27th November 2022	28th November to 25th December 2022	26th December to 22nd January 2023	23rd January to 19th February 2023	20th February to 19 March 2023	20th March to 16th April 2023	17th April to 14th May 2023	15th May to 11th June 2023
Planned Hours	812,914	831,186	806,400	777,358	825,723	817,659	812,247	821,090	843,158	839,947	851,417	839,001
Actual Hours	631,468	620,725	643,819	629,190	673,873	635,232	620,713	631,351	665,779	639,953	679,189	678,959
Actual CHPPD	15.1	11.5	11.1	10.9	11.2	10.8	10.9	11.0	11.8	11.7	11.7	11.0
Required CHPPD	7.0	7.6	7.5	7.5	7.7	7.4	7.4	7.5	7.4	7.3	7.3	7.4
Additional Duties (No of shifts over budget)	4,119	3,963	4,324	4,254	4,569	4,325	4,190	4,309	3,986	3,949	4,282	3,670
Overall Owed Hours (Net Hours)	179,501	192,688	144,055	144,152	151,567	133,265	131,520	121,843	110,499	99,739	117,155	85,402
Annual Leave % - Target 11-17%	14.4%	18.2%	14.3%	12.2%	10.8%	13.1%	19.9%	14.5%	17.1%	21.0%	13.9%	13.4%
Total Unavailability % - Headroom/uplift Allowance - Target 24%	27.6%	30.0%	27.9%	25.9%	24.3%	29.0%	33.4%	30.1%	30.1%	33.9%	27.5%	26.9%
Roster Approval (Full) Lead Time Days - Target 42 days	39	38	37	38	38	36	39	35	36	39	38	39

Table 7 Legacy GSTT KPIs and other key metrics relating to the efficient deployment of staff at Trust level for the specified roster period from July 2022 onward

Having efficient rosters will support the measures taken to reduce agency spend across rostered areas. The agency spends (which represents invoices paid in month) fluctuates throughout Q1 across both legacy organisations and was 3.9% of the total Nursing staff pay bill for the combined Trust (June 2023). Legacy RBHH agency spend went up by 0.7% ending Q1 at 2.2%, with legacy GSTT increasing by 0.6% ending Q1 at 4.3% and was 4.2% same period last year (Figures 9a &9b). Measures are in place to monitor and reduce agency spend and reflects sickness, vacancies and enhanced care requirements where bank could not meet demand.
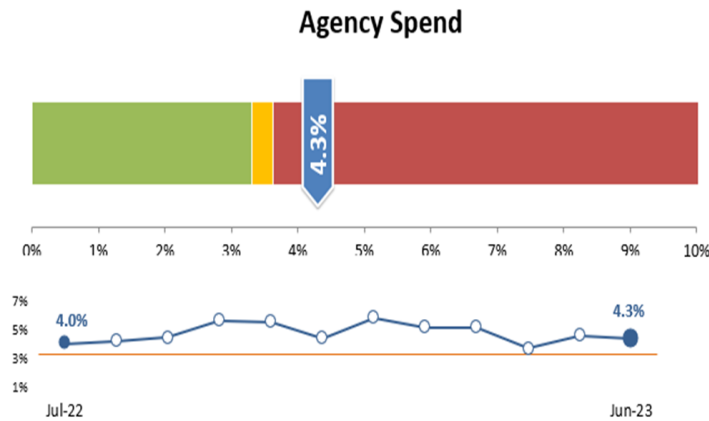
Figure 9a *Legacy GSTT* **Agency spend**
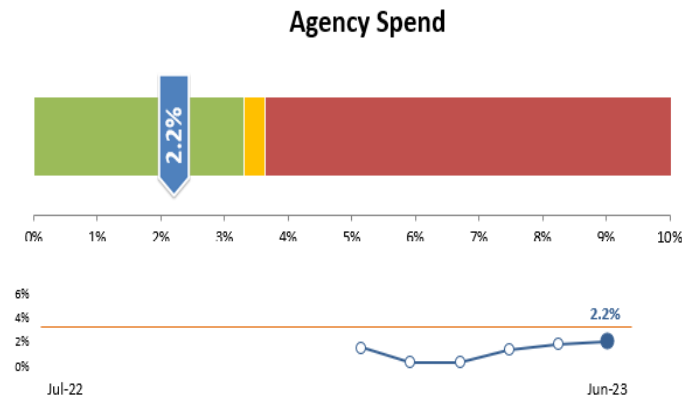(12 month rolling period July 2022 – June 2023)

Figure 9b *Legacy RBHH* **Agency spend**
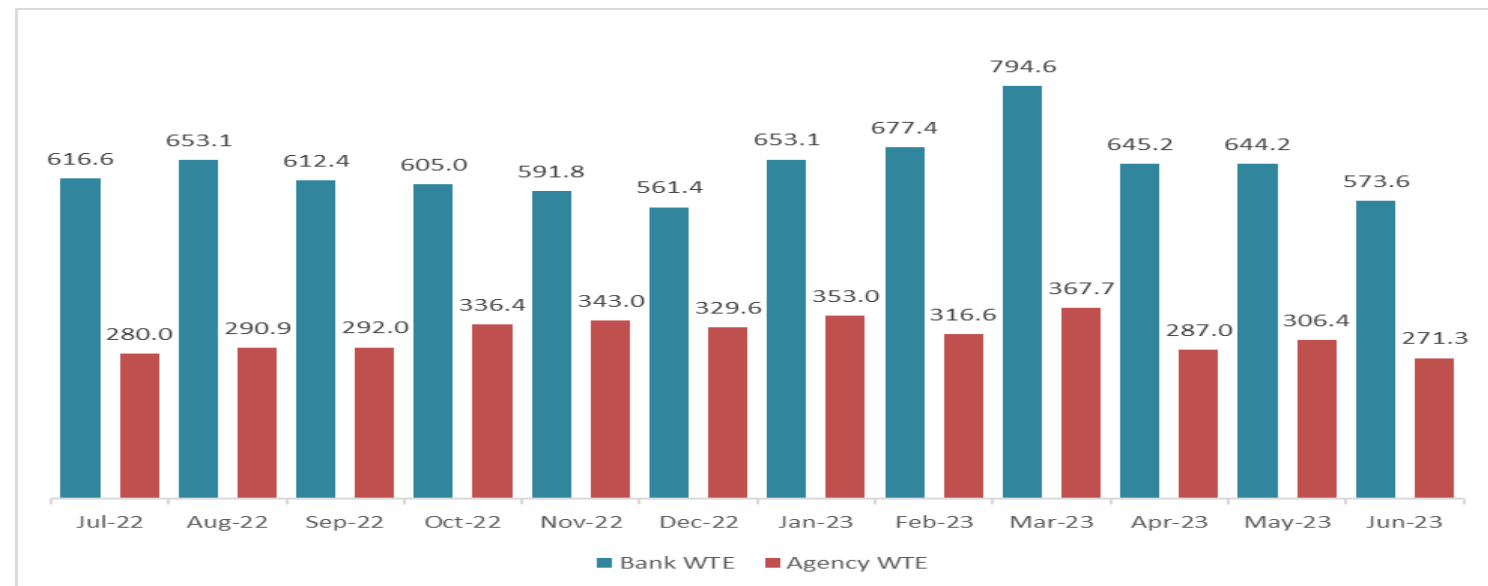(January 2023 – June 2023 due to availability of data)

Figure 10 Legacy GSTT Actual usage of temporary staffing
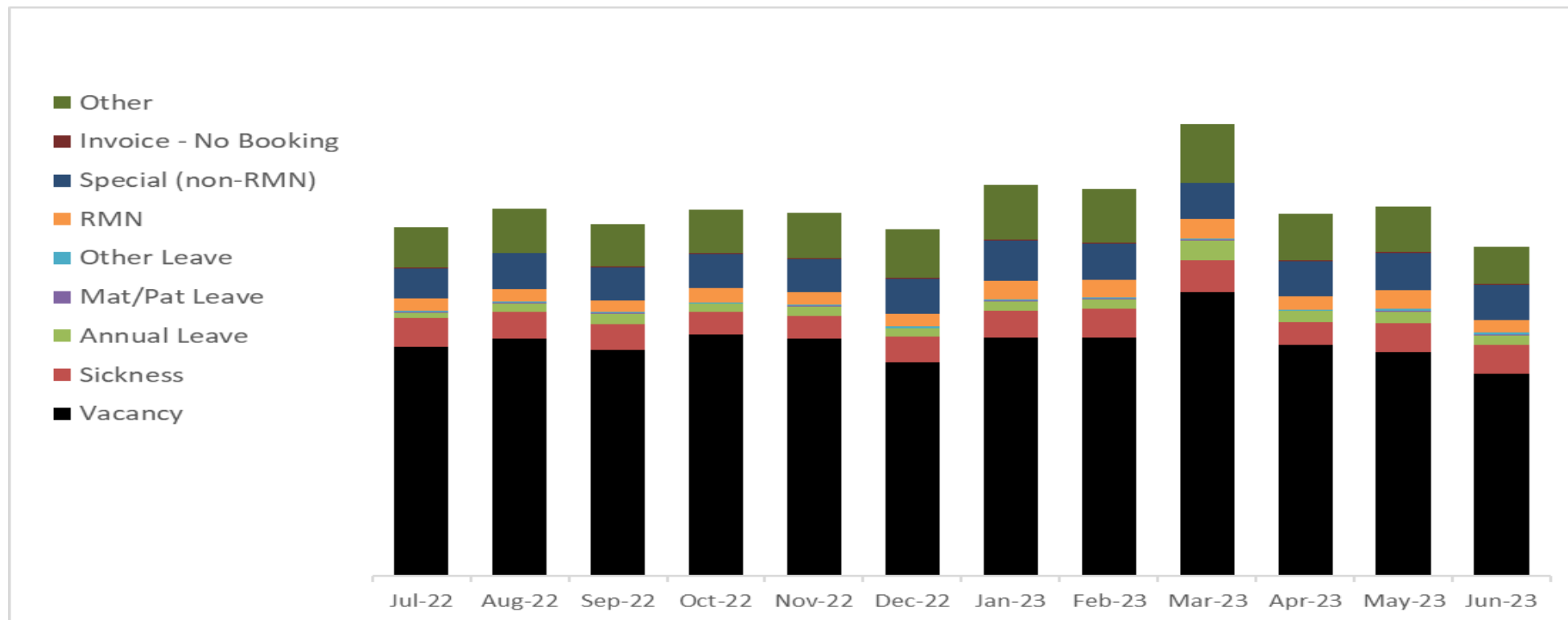
Figure 11 Legacy GSTT Temporary staffing usage, including the reasons

6.   Request to the Board of Directors

The Board of Directors are asked to note the information contained in this briefing for Quarter 1 (April – June 2023).