Guy's and St Thomas' NHS Foundation Trust

Appendix: Quarterly Board Briefing of Nursing and Midwifery Staffing Levels for July - September 2023

1. Introduction

This briefing provides the Trust Board with an overview of the Nursing and Midwifery workforce for Quarter 2 (July - September 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, with work in progress to align Healthroster systems and standardisation of staffing level reporting to include all inpatient areas and extension to outpatient areas where appropriate.

2. Key highlights

2.1 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 2 is highlighted as Legacy GSTT (LGSTT), Legacy RBHH (LRBHH), and Combined Trust.

Key Performance Indicator	Target	July 2023 Performance	August 2023 Performance	September 2023 Performance	Context and actions
Vacancy rate	10%	Combined trust 11.5% LGSTT:13.1% LRBHH: 4.8%	Combined trust 11.5% LGSTT:13.4% LRBHH: 4.0%	Combined trust 11.8% LGSTT:13.4% LRBHH: 5.4%	For the combined trust there were 311 new starters, and 290 leavers throughout Q2. If the current external applicants for September 2023 were added to the staff in post figure, the overall vacancy rate would be 6.2%. 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 45.0 WTE and decrease in staff in post by 36.1 WTE for the given quarter.

Agency spend	3.3%	Combined trust 3.9% LGSTT: 4.5% LRBHH: 1.7%	Combined trust 3.5% LGSTT: 4.4% LRBHH: -0.2%	Combined trust 3.2% LGSTT: 3.6% LRBHH: 1.3%	Agency spend rate decreased by 0.7% in Q2 as at September 2023 compared to Q1 as at June 2023, ending Q2 within target. The negative agency spend rate for LRBHH in August resulted from agency spend refund payment within Theatre Services. Measures are in place to monitor and reduce agency spend within the individual Directorates and through the central Workforce Team recruitment and retention initiatives.
Annual turnover	12.0%	Combined trust:13.8% LGSTT: 14.2% LRBHH:12.3%	Combined trust:12.9% LGSTT: 13.0% LRBHH:12.2%	Combined trust:12.4% LGSTT: 12.6% LRBHH:12.0%	In month turnover rate fluctuated throughout Q2 from 0.9% (July 2023), 1.0% (August) and 0.8% (September 2023). Annual turnover rate decreased from July to September 2023 but remains above Trust target. There is ongoing work within the Directorate and from central Retention Team to reduce this.
Sickness rate	3.0%	Combined trust 5.7% LGSTT: 5.9% LRBHH: 4.9%	Combined trust 5.7% LGSTT: 5.8% LRBHH: 5.0%	Combined trust 5.7% LGSTT: 5.8% LRBHH: 5.0%	Sickness rate remained constant and above the Trust target. This is addressed within the individual Directorates and monitored through monthly directorate Performance Review Meetings.
Personal Development Review (PDR)	95%	Combined trust:71.3% LGSTT: 75.9% LRBHH:58.3%	Combined trust:71.8% LGSTT: 76.1% LRBHH:57.4%	Combined trust: 68.8% LGSTT: 75.8% LRBHH:48.7%	Completion of PDRs were affected by ongoing staffing pressures, operational impact of the Apollo readiness preparations 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 90.1% LGSTT: 88.6% LRBHH:94.5%	Combined trust (No data) LGSTT: 88.4% LRBHH: (No data)	Combined trust 89.7% LGSTT: 88.2% LRBHH:94.0%	Mandatory Training has reduced by 0.1% from Q1 (June 2023). This is below the Trust target with ongoing collaborative work with ET&D and individual Directorate plans formulated to improve compliance. LRBHH data was not available in August due to an ESR organisational structure change.

Table 1

KPI (Combined Trust)	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23
Agency spend				4.9%	4.2%	4.2%	3.2%	4.0%	3.9%	3.9%	3.5%	3.2%
Sickness	6.7%	6.6%	6.4%	6.1%	6.0%	6.1%	5.9%	5.8%	5.7%	5.7%	5.7%	5.7%
Voluntary Turnover	15.4%	15.0%	14.6%	13.7%	13.7%	14.0%	14.1%	14.4%	14.0%	13.8%	12.9%	12.4%
Vacancies	10.4%	9.9%	10.8%	10.4%	10.4%	10.3%	10.0%	10.4%	11.0%	11.5%	11.5%	11.8%
PDR Compliance	69.6%	70.8%	71.6%	72.1%	72.9%	72.3%	73.0%	73.1%	72.3%	71.3%	71.8%	68.8%
Mandatory Training	84.6%	85.0%	85.2%	85.8%	86.5%	87.8%	86.0%	88.9%	89.8%	90.1%		89.7%

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 any 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	September 2022	September 2023	Difference	Change
Nursing Establishment WTE	7312.08	7507.66	195.58	▲
Nursing Staff in Post WTE	6292.69	6503.47	210.78	▲
Vacancies WTE	1019.39	1004.19	-15.20	▼
Vacancy rate	13.9%	13.4%	-0.5%	▼
Annual turnover	16.6%	12.6%	-4.0%	▼
Red Flags raised	199.0	96.0	-103.0	▼
Agency % of Pay bill	4.4%	3.6%	-0.8%	▼
Actual v Planned Hrs used	86.7%	84.0%	-2.7%	▼

Table 2a – Legacy GSTT Nursing and Midwifery Workforce metrics

Staffing measures	September 2022	September 2023	Difference	Change
Nursing Establishment WTE	1773.3	1828.3	55.0	▲
Nursing Staff in Post WTE	1711.51	1730.39	18.88	▲
Vacancies WTE	61.8	97.9	36.1	▲
Vacancy rate	3.5%	5.4%	1.9%	▲
Annual turnover	13.1%	12.0%	-1.1%	▼
Red Flags raised				
Agency % of Pay bill		1.3%		
Actual v Planned Hrs used	81.3%	85.3%	4.0%	▲

Table 2b – Legacy RBHH Nursing and Midwifery Workforce Metrics

Staffing measures	September 2022	September 2023	Difference	Change
Nursing Establishment WTE	9085.4	9336.0	250.6	▲
Nursing Staff in Post WTE	8004.2	8233.9	229.7	▲
Vacancies WTE	1081.2	1102.1	20.9	▲
Vacancy rate	11.9%	11.8%	-0.1%	▼
Average Annual turnover	15.8%	12.4%	-3.4%	▼
Red Flags raised				
Agency % of Pay bill		3.2%		
Actual v Planned Hrs used	85.3%	84.3%	-1.0%	▼

Table 2c – Combined Trust Nursing and Midwifery Workforce Metrics

3.1.2 There was a 2.8% increase in Nursing and Midwifery budgeted establishment (increase by 250.6 WTE) and a 2.9% increase in staff in post (increase by 229.7 WTE) across the combined Trust compared to same period last year (2022). Legacy GSTT saw a 0.5% growth in budgeted establishment WTE and 0.6% reduction in staff in post WTE in September 2023 compared to June 2023, whilst legacy RBHH budgeted establishment WTE increased by 0.3% and saw a slight increase in staff in post by 0.05%. Figures 1 and 2 show that performance against this expectation remains stable. The actual hours used against planned hours and associated fill rates during July, August and September 2023 are outlined in table 3 below. The overall fill rates for the combined Trust was 84.3% in September 2023, a decrease of 3.5% in comparison to June 2023.

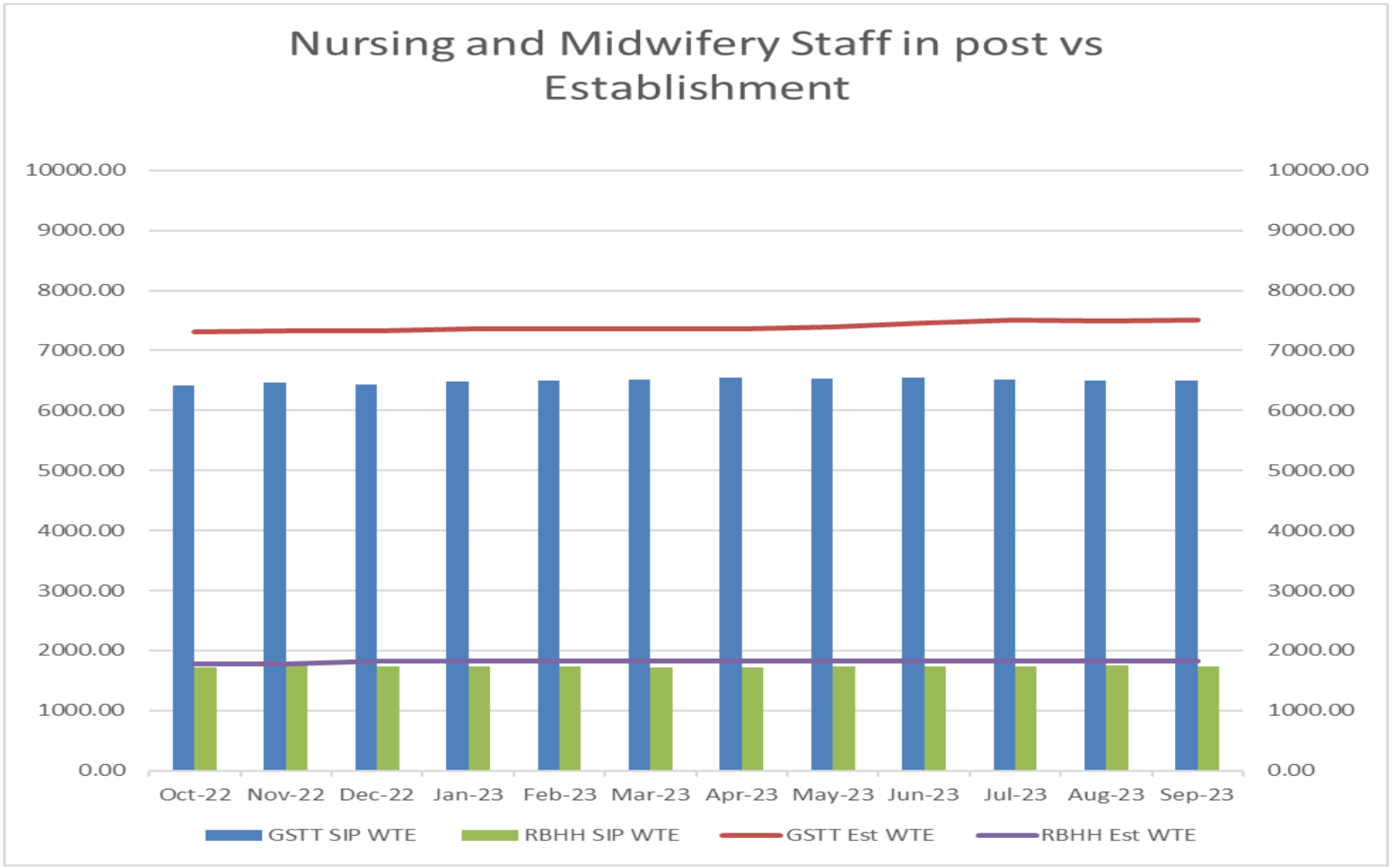
Nursing and Midwifery Staff in post vs Establishment
10000.00
9000.00
8000.00
7000.00
6000.00
5000.00
4000.00
3000.00
2000.00
1000.00
0.00
Oct-22
Nov-22
Dec-22
Jan-23
Feb-23
Mar-23
Apr-23
May-23
Jun-23
Jul-23
Aug-23
Sep-23
GSTT SIP WTE
RBHH SIP WTE
GSTT Est WTE
RBHH Est WTE

Figure 1

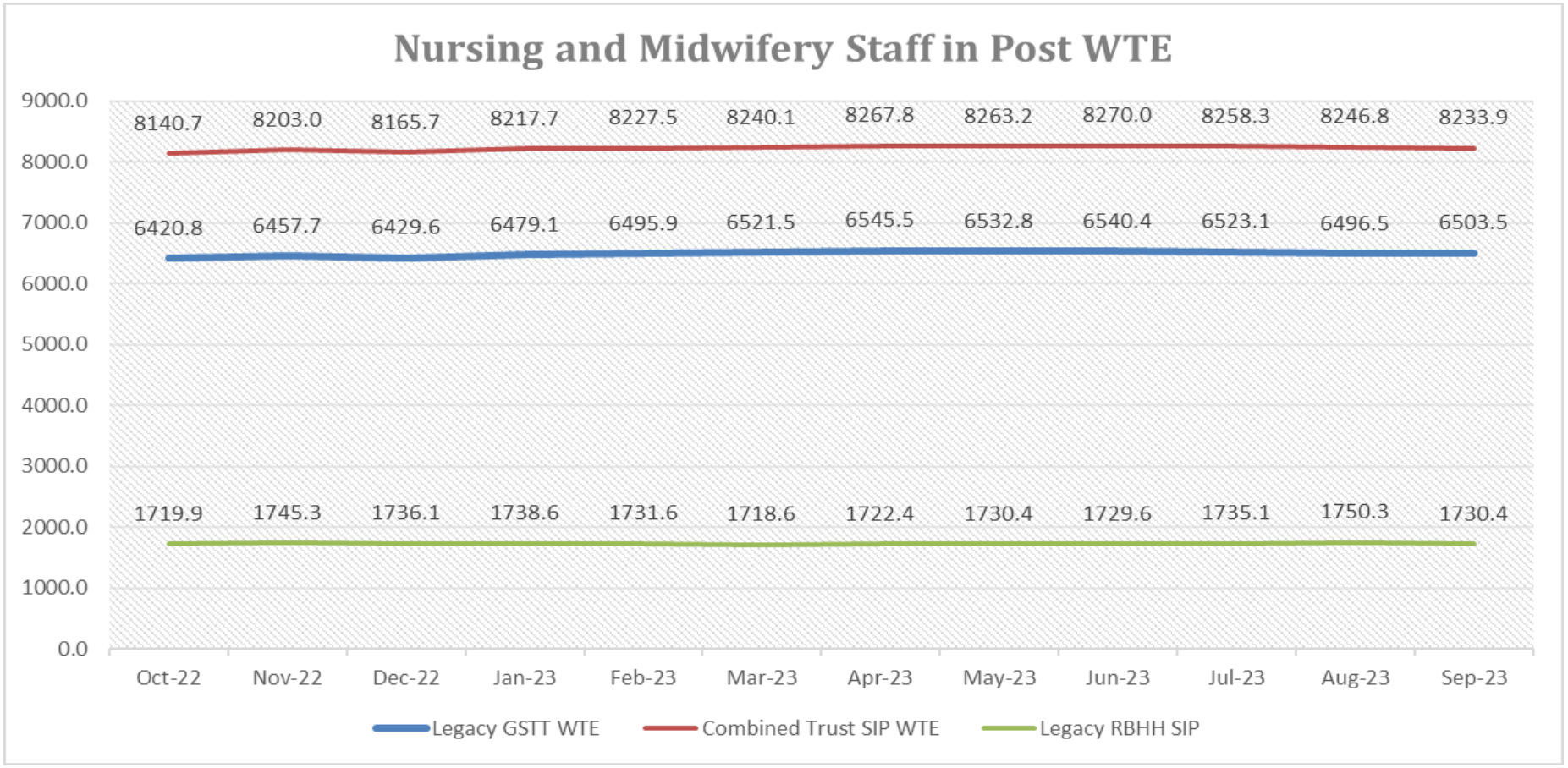
Nursing and Midwifery Staff in Post WTE
9000.0
8000.0
7000.0
6000.0
5000.0
4000.0
3000.0
2000.0
1000.0
0.0
8140.7 8203.0 8165.7 8217.7 8227.5 8240.1 8267.8 8263.2 8270.0 8258.3 8246.8 8233.9
6420.8 6457.7 6429.6 6479.1 6495.9 6521.5 6545.5 6532.8 6540.4 6523.1 6496.5 6503.5
1719.9 1745.3 1736.1 1738.6 1731.6 1718.6 1722.4 1730.4 1729.6 1735.1 1750.3 1730.4
Oct-22 Nov-22 Dec-22 Jan-23 Feb-23 Mar-23 Apr-23 May-23 Jun-23 Jul-23 Aug-23 Sep-23
Legacy GSTT WTE
Combined Trust SIP WTE
Legacy RBHH SIP

Figure 2

Period	Trust Level	Total Planned Hour	Total Actual Hour	Overall Fill rate%
Jul-23	Legacy GSTT	401475.6	344729.4	85.9%
Jul-23	Legacy RBHH	144460.5	126038.1	87.2%
Jul-23	Combined Trust	545936.1	470767.5	86.2%
Aug-23	Legacy GSTT	403556.9	339036.4	84.0%
Aug-23	Legacy RBHH	144460.5	122618.5	84.9%
Aug-23	Combined Trust	548017.4	461654.9	84.2%
Sep-23	Legacy GSTT	390381.7	327944.0	84.0%
Sep-23	Legacy RBHH	144460.5	123157.7	85.3%
Sep-23	Combined Trust	534842.2	451101.6	84.3%

Table 3

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. A total of 240 host and non-host final year nursing students was successfully recruited with these newly qualified nurses commencing within the clinical teams from September 2023 onwards following receipt of NMC registration. Work continues to support the allocation and onboarding of all applicants/newly qualified nurses within the Directorates and clinical areas.

International recruitment continued throughout Q2 using the Capital Nurse Consortium and external agencies (Resource Finder, Charkos (previously Aryavrat), Pulse and Cromwell). During Q2 (July- September 2023), 83 nurses and midwives have commenced across the Trust, LRBHH (n=33), Theatres Anaesthetics and Perioperative Directorate (n=7), Evelina London Children's Hospital Theatres (n=6), Paediatric Intensive care and Neonatal care (PICU and NICU)) (n=3), LGSTT General Adult Nursing (n=30), Community (n=2), Midwifery (n=1), and Cardiovascular (n=1). A total of 136 nurses and midwives have started with the trust since April 2023 (Q1 + Q2), and at the time of writing a further 81 in the pipeline. The

international recruitment plan for 2023/34 for 250 international nurses to be recruited between 1 April – 30 November 2023 with associated NHSE match funding was approved at the Trust Executive Committee in February 2023. This deadline was extended by NHSE to January 2024 to enable further recruitment and onboarding to support achievement of the 2023/24 target.

3.2.3 Retention activities were maintained throughout Q2 with a focus on career development and wellbeing. Career and Wellbeing trolley visits remained a focus, reaching out to staff within Howard ward, Evelina, Surgery, Specialist Ambulatory Services, Mary Sheridan, Pullross, Private Patients, Gracefield Gardens, Opthalmology, and Transplant, Renal and Urology. A wide range of staff (n=104) were supported by the trolley with both wellbeing and career conversations. This programme of work was acknowledged as a finalist within the Nursing Times Workforce Awards (November 2023). There is ongoing work to understand retention initiatives across the organisation, using the NHSE retention self-assessment tool, with Clinical groups returning information relating to Flexible working and Professional development and careers. Further work is ongoing to assess Excellence in care. Programmes of work continue to progress on flexible working/ self-directed rostering practice in collaboration with Timewise Consultancy, Critical care, Acute and General Medicine, Inpatient services, and Cedar ward.

3.2.4 The sickness absence rate for the combined Trust remained constant at 5.7% throughout Q2. Directorates as at September 2023 with top sickness rates were Clinical Imaging & Med Physics (9.4%), Inpatient Services (8.9%), Evelina Community Services (8.4%) and Specialist Ambulatory Services (8.2%). 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.

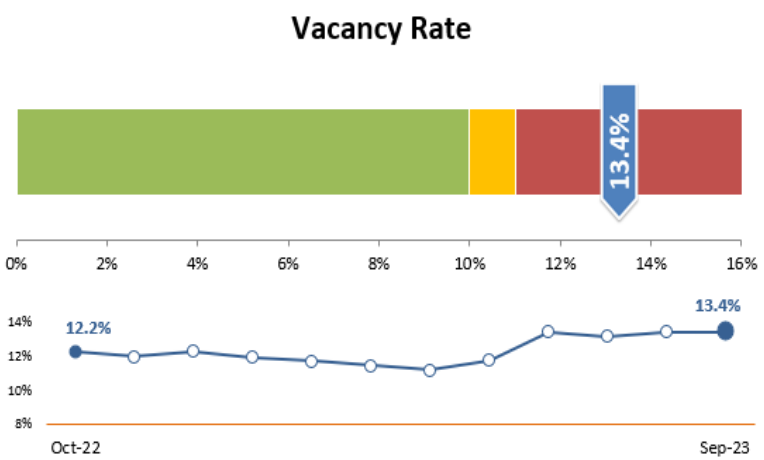

Figure 3a Legacy GSTT

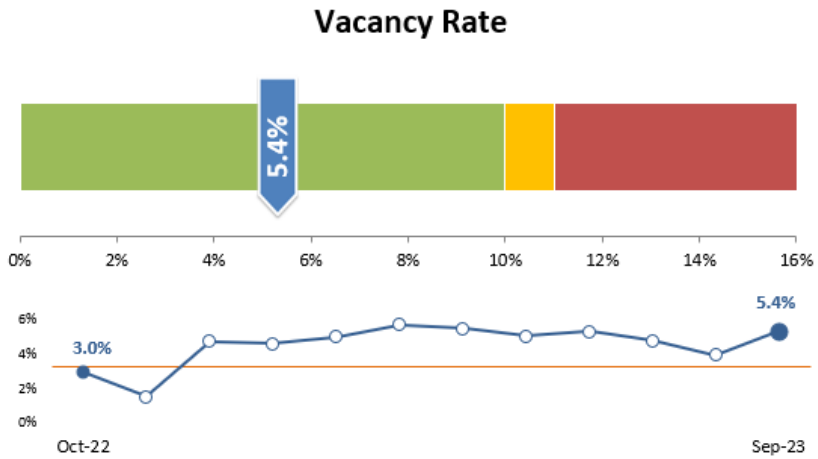

Figure 3b Legacy RBHH

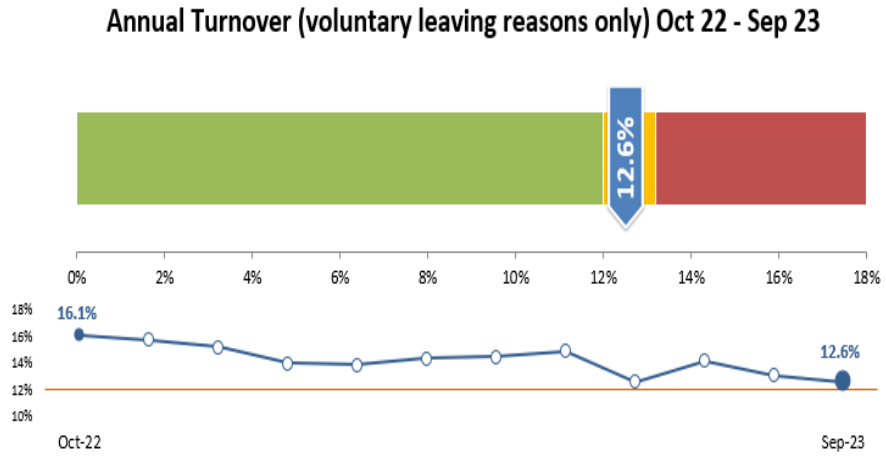

Figure 4a Legacy GSTT

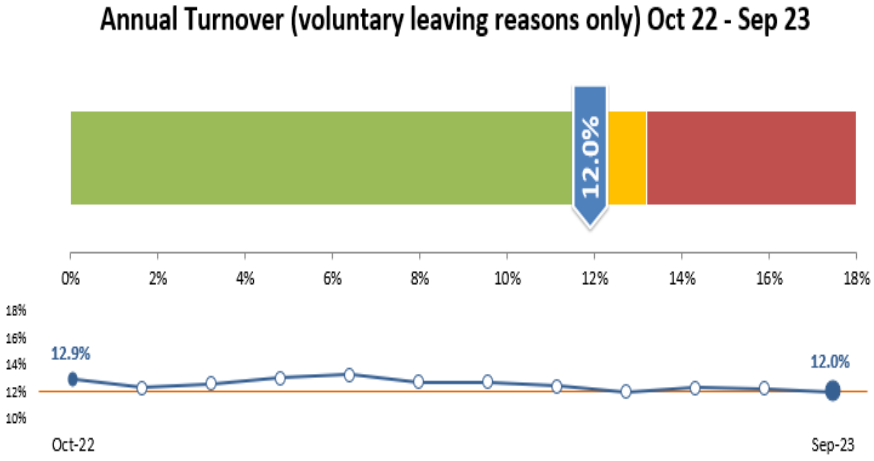

Figure 4b Legacy RBHH

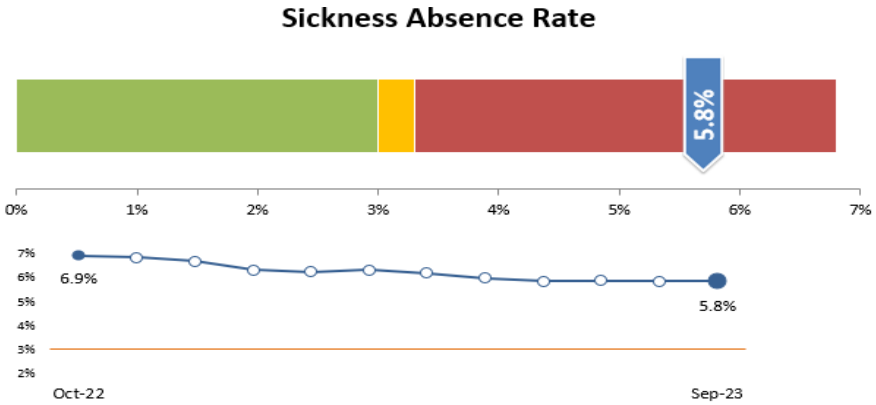

Figure 5a Legacy GSTT

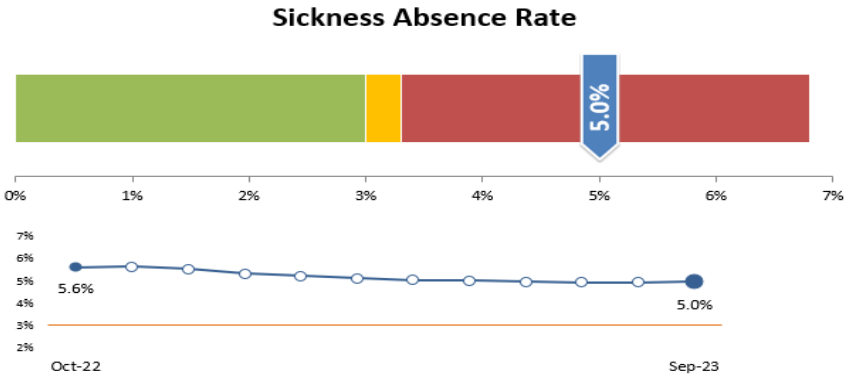

Figure 5b Legacy RBHH

3.3 Activity and Acuity

3.3.1 The number of bed days fluctuated during Q2 for legacy GSTT as depicted in table 4 below (RBHH data is unavailable for inclusion within this report). In September 2023 the Legacy GSTT site had 43,143 bed days, representing an increase of 1,233 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
September 2023	6,855	13,095	21,309	1,628	256	43,143	15.9%	30.4%	49.4%	3.8%	0.6%
August 2023	6,415	13,631	19,944	1,485	165	41,640	0.4%	30.7%	49.6%	3.6%	0.3%
July 2023	6,871	13,279	21,469	1,565	112	43,296	15.9%	30.7%	49.6%	3.6%	0.3%

Legacy GSTT Table 4

3.3.2 Table 5 provides the combined trust average by department/ward fill rates which fluctuated during Q2 with registered staff having lower average fill rates in comparison to unregistered staff with overall average fill rates between 104% - 109%. The average Registered Nurse fill rates for Q2 (September 2023: 87.0%) decreased by 2.4% compared to Q1 (June 2023: 89.4%). These fill rates are not representative of staffing levels.

Period (Q2)	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 %
Jul-23	86%	100%	89%	118%	98%
Aug-23	85%	94%	89%	114%	95%
Sep-23	86%	99%	89%	116%	98%

Table 5

3.3.3 The combined trust average 'Care hours per patient day' (CHPPD) fluctuated between 11.3 and 11.7 Q2 with 11.4 in September 2023. This figure is reported monthly to NHSEI 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 9.9 in August 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
Sep-23	11.4	9.9
Aug-23	11.7	Aug 23
Jul-23	11.3	

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 decreased from July 2023 to September 2023 by

0.4% for Q2, 90.1% (July 2023) to 89.7% (September 2023). Legacy RBHH mandatory training compliance rate decreased by 0.5% ending Q1 at 94.0%, with legacy GSTT decreasing by 0.2% (88.2%, September 2023) and 0.7% increase when compared to September 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. There were no mandatory training rate figures for Legacy RBHH areas for August 2023 due to ESR structure integration.

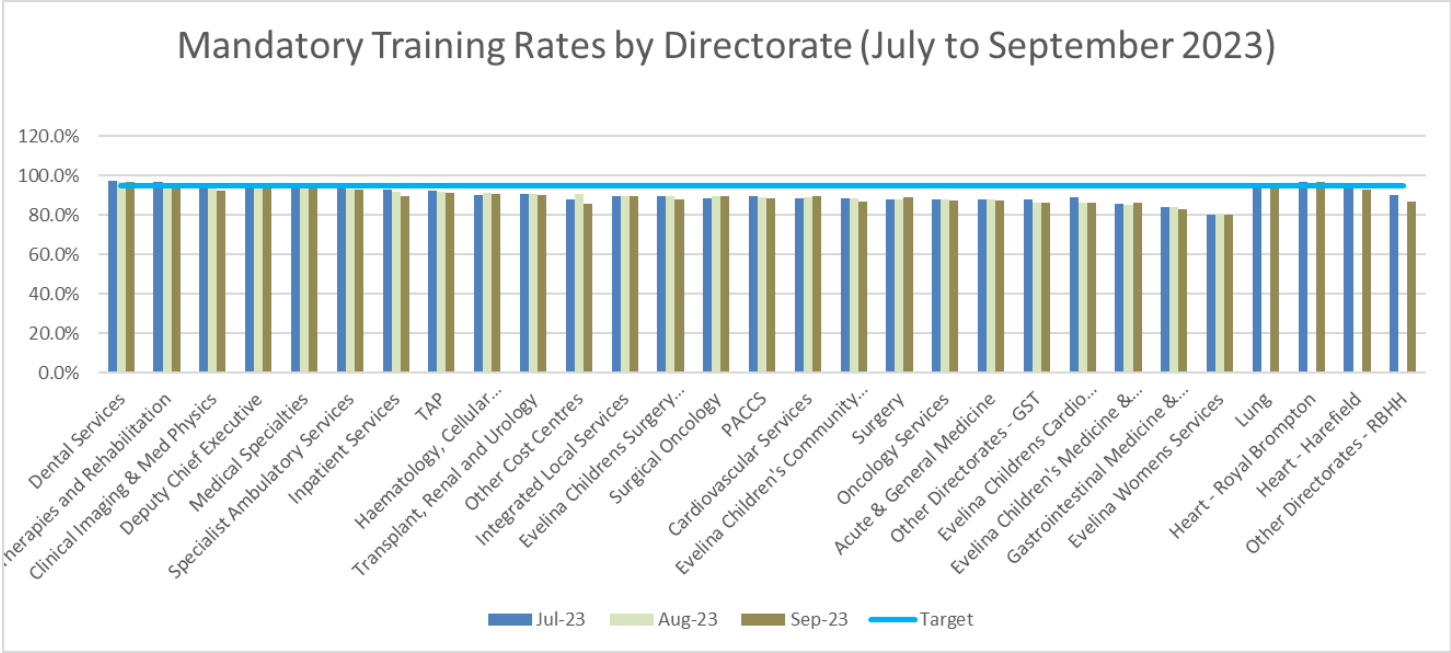

Figure 6 Combined Trust Mandatory Training Rates by Directorate

4.1.2 The Nursing & Midwifery PDR rate for combined Trust fluctuated during Q2 decreasing from 71.8% to 68.8% and, ending Q2 at 68.8% (September 2023). Legacy GSTT PDR rate decreased by 0.3% between July – September 2023 and 2.5% higher than same period in 2022. Legacy RBHH PDR rate decreased from 58.3% to 48.7% (July – September 2023) and is in part due to RBHH requirements for quarterly PDR meetings via the Learn Now system / LMS and changes to reporting process. Work is in progress to align PDR requirements across the organisation. Completion of PDRs are affected by the ongoing staffing pressures and operational pressures which has increased given the organisational focus on the Apollo readiness ahead of Go Live on 5 October 2023 impacting on Directorates plans to improve compliance. Figure 7 demonstrates the breakdown of PDR compliance by Directorate.

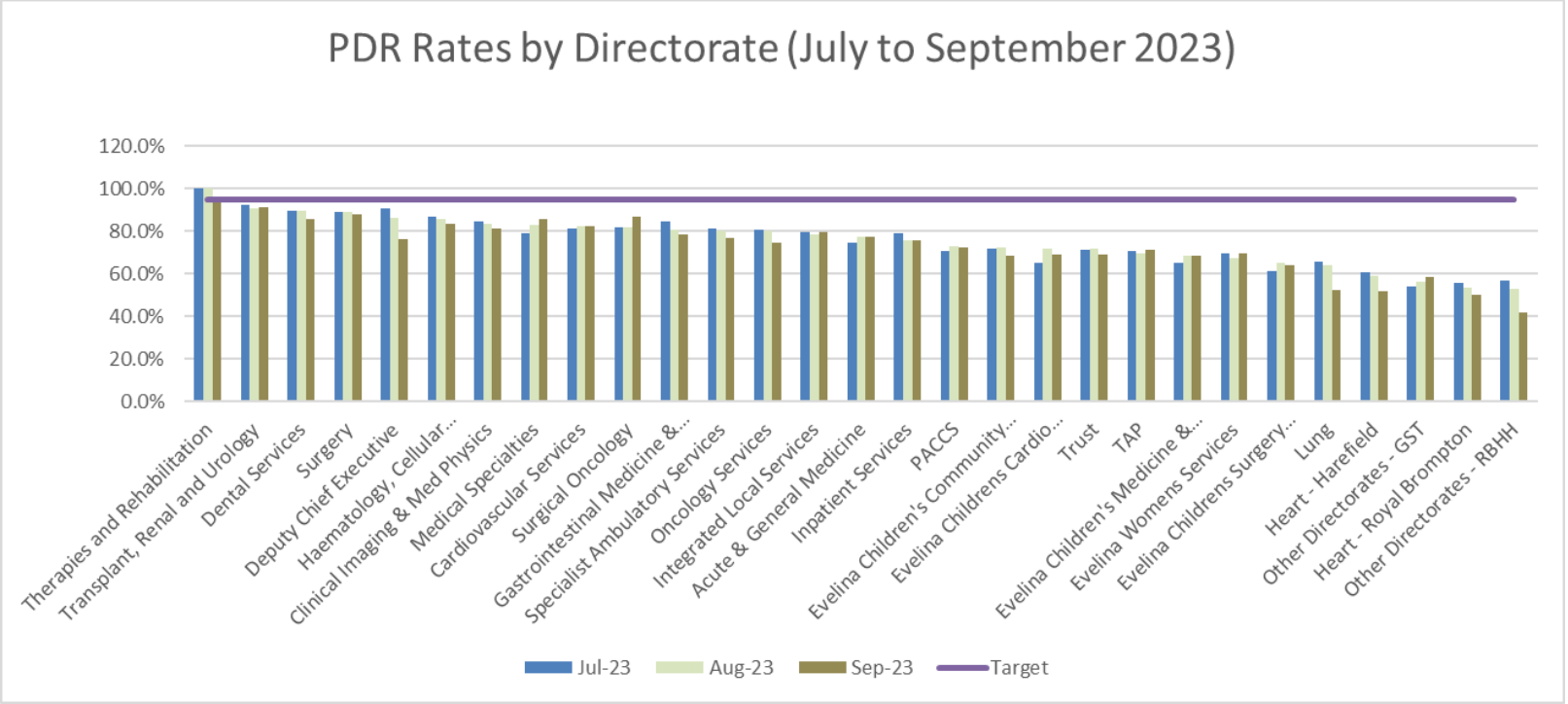

Figure 7 Combined Trust PDR rates by directorate

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 fluctuated during Q2 from 102 (July 2023), 172 (August 2023) and 96 (September 2023) shown in Figure 8, and were raised due to short notice staffing absence and enhanced care requirements. All risks were appropriately mitigated, 36 Red flags remained open as of 30 September 2023, with no evident cause. This 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/Charge Nurse, Matron or Head of Nursing to resolve any immediate staffing concerns.

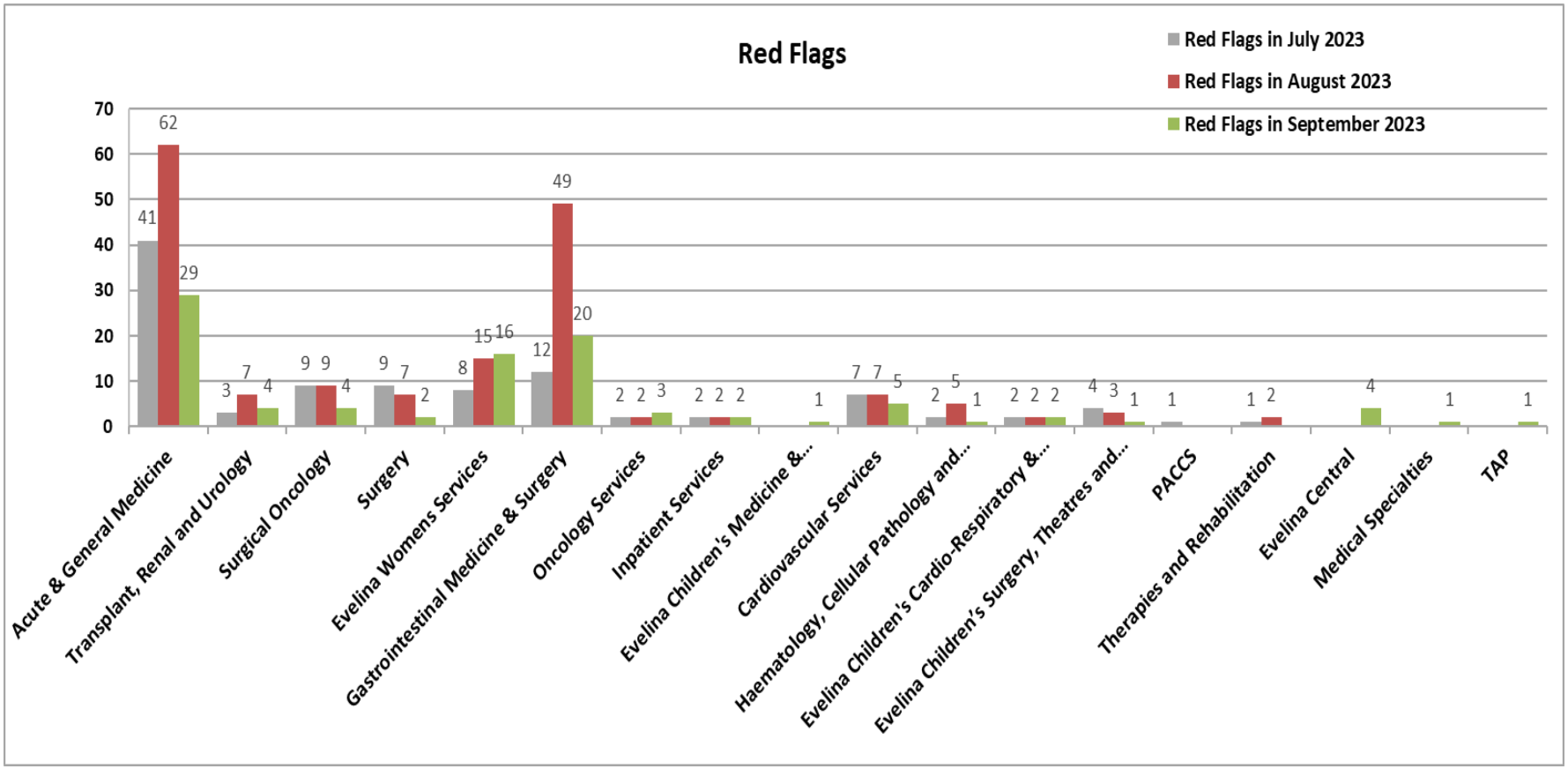

Figure 8 Legacy GSTT Red flags by Directorate

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. There is 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	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	12TH June to 9TH July 2023	10th July to 6th August 2023	7th August to 3rd September 2023	4th September 2023 to 1st October 2023
Planned Hours	806,400	777,358	825,723	817,659	812,247	821,090	843,158	839,947	851,417	839,001	853,550	830,458	837,499	842,880
Actual Hours	643,819	629,190	673,873	635,232	620,713	631,351	665,779	639,953	679,189	678,959	681,498	648,921	626,027	655,705
Actual CHPPD	11.1	10.9	11.2	10.8	10.9	11.0	11.8	11.7	11.7	11.0	11.1	12.9	8.7	10.9
Required CHPPD	7.5	7.5	7.7	7.4	7.4	7.5	7.4	7.3	7.3	7.4	7.4	7.4	6.5	7.4
Additional Duties (No of shifts over budget)	4,324	4,254	4,569	4,325	4,190	4,309	3,986	3,949	4,282	3,670	2,828	2,493	2,383	2,352
Overall Owed Hours (Net Hours)	144,055	144,152	151,567	133,265	131,520	121,843	110,499	99,739	117,155	85,402	83,594	87,681	81,463	89,004
Annual Leave % - Target 11-17%	14.3%	12.2%	10.8%	13.1%	19.9%	14.5%	17.1%	21.0%	13.9%	13.4%	12.3%	13.7%	18.6%	13.3%
Total Unavailability % - Headroom/uplift Allowance - Target 24%	27.9%	25.9%	24.3%	29.0%	33.4%	30.1%	30.1%	33.9%	27.5%	26.9%	25.8%	27.1%	31.9%	27.7%
Roster Approval (Full) Lead Time Days - Target 42 days	37	38	38	36	39	35	36	39	38	39	39	40	39	40

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 September 2022 onward

Having efficient rosters will support the measures taken to reduce agency spend across rostered areas. The agency spend (which represents invoices paid in month) decreased month on month for the combined Trust throughout Q2 and was 3.2% of the total Nursing staff pay bill as at September 2023. Legacy RBHH agency spend decreased by 0.8% ending Q2 at 1.3%, with legacy GSTT decreasing by 0.7%, ending Q2 at 3.6% and was 4.4% 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.

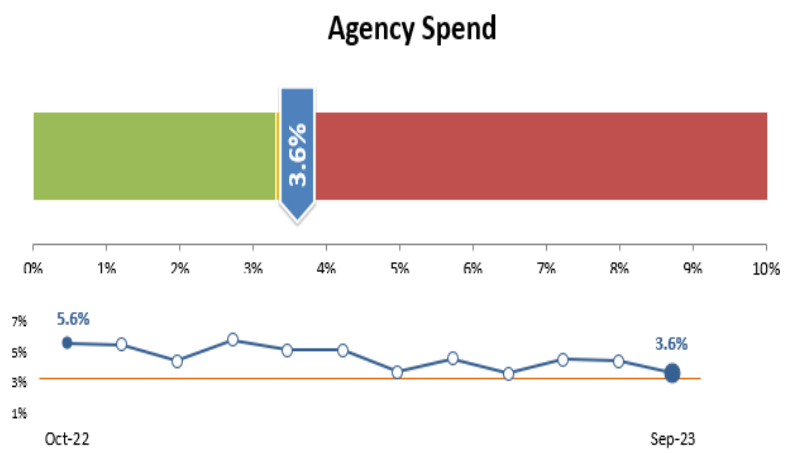

Figure 9a *Legacy GSTT* Agency spend
(12 month rolling period October 2022 – September 2023)

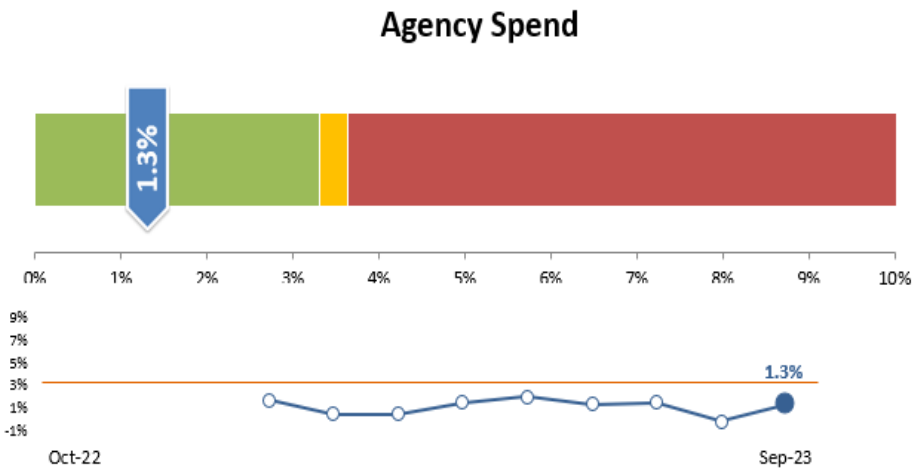

Figure 9b *Legacy RBHH* Agency spend
(January 2023 – September 2023 due to availability of data)

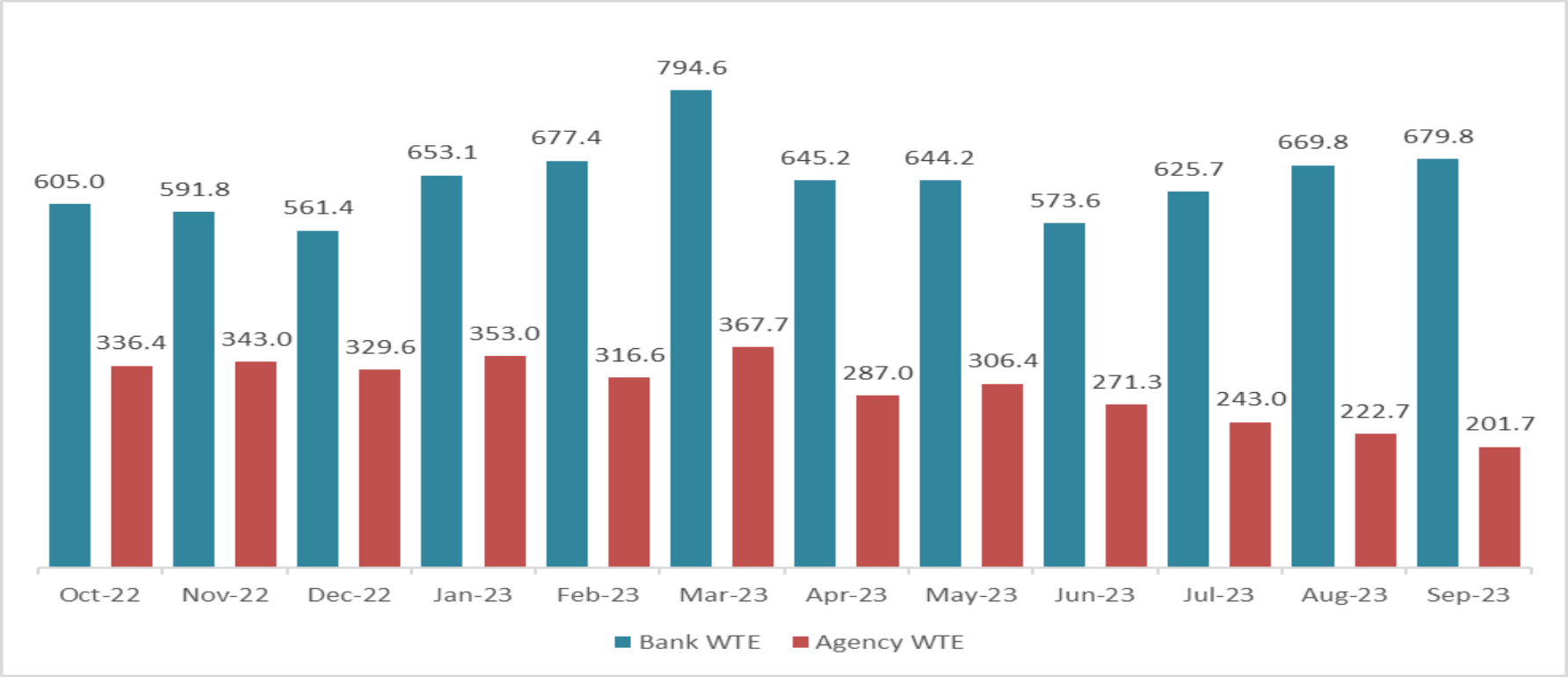

Figure 10 Legacy GSTT Actual usage of temporary staffing

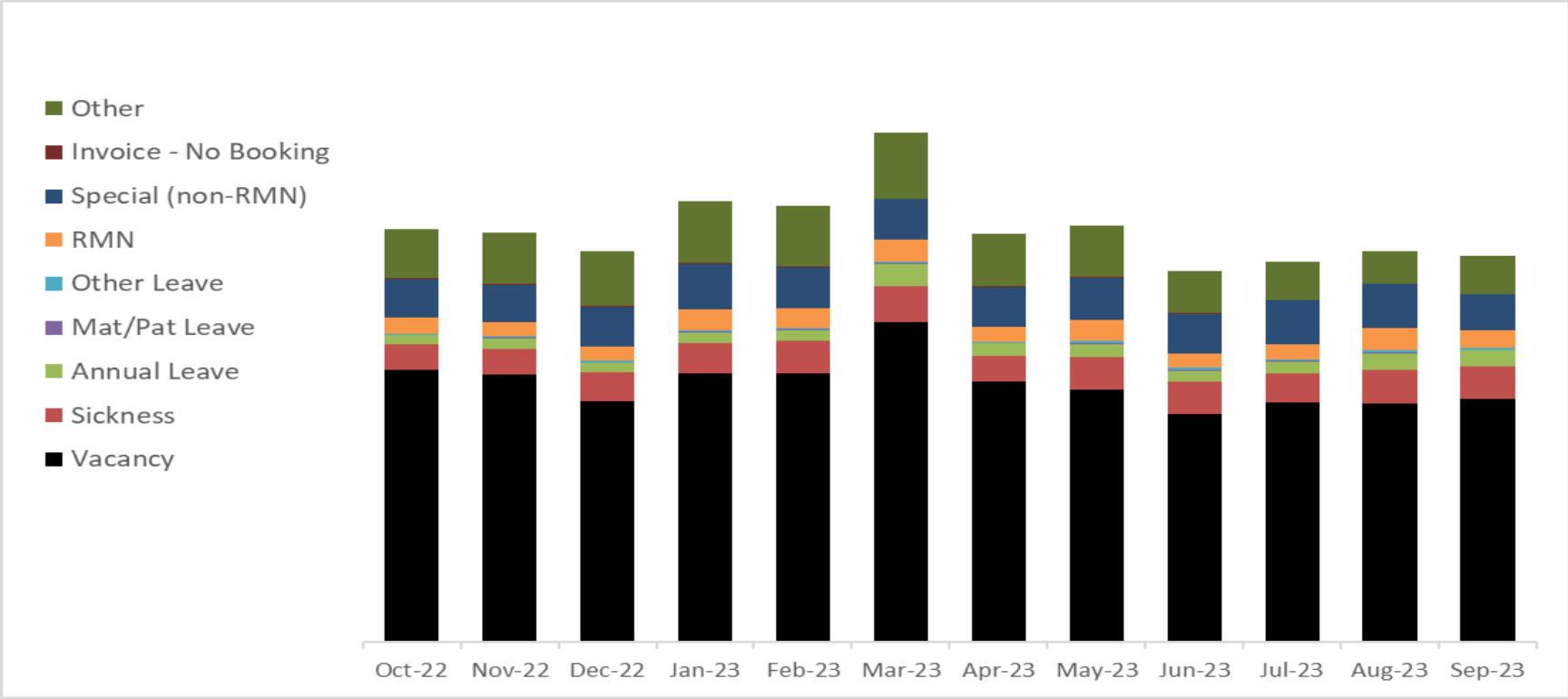

Figure 11 Legacy GSTT Temporary staffing usage, including the reasons

6. Request to the Board of Directors

6.1 The Board of Directors are asked to note the information contained in this briefing for Quarter 2 (July – September 2023).