

**REPORT TO THE BOARD OF
BARNSELY HOSPITAL NHSFT**

REF:

14/08/P-08

SUBJECT: MONTHLY UPDATE ON NURSING AND MIDWIFERY STAFFING

DATE: AUGUST 2014

PURPOSE:		<i>Tick as applicable</i>		<i>Tick as applicable</i>
	<i>For decision/approval</i>		<i>Assurance</i>	✓
	<i>For review</i>	✓	<i>Governance</i>	✓
	<i>For information</i>		<i>Strategy</i>	

PREPARED BY: Alison Bielby, Deputy Director of Nursing

SPONSORED BY: Heather McNair, Director of Nursing and Quality

PRESENTED BY: Alison Bielby, Deputy Director of Nursing and Quality

STRATEGIC CONTEXT *2-3 sentences*

The Trust Board is required to receive monthly information regarding the nursing and midwifery (trained and untrained) staffing levels across in patient areas of the Trust as per the guidance received from NHS England and the Care Quality Commission.

QUESTION(S) ADDRESSED IN THIS REPORT

1. Is the Trust meeting the requirements set out by NHS England and the Care Quality Commission to review nursing and midwifery staffing levels on a monthly basis?
2. What are current nursing and midwifery staffing shortfalls across the Trust and how are these being managed?

CONCLUSION AND RECOMMENDATION(S)

The paper fulfils national requirements to review staffing levels across the Trust. The paper also demonstrates planned versus actual staffing levels and mitigating action where required, for Board's information.

Recommendations

The Board is asked to note the report and support on-going mitigations being put in place to manage any staffing shortfalls.

REFERENCE/CHECKLIST			
<ul style="list-style-type: none"> Which business plan objective(s) does this report relate to? 		Aim 1: Patients will experience safer care	
<ul style="list-style-type: none"> Has this report considered the following stakeholders? 		<input checked="" type="checkbox"/> Patients <input checked="" type="checkbox"/> Staff <input type="checkbox"/> Governors	<input type="checkbox"/> BCCG <input type="checkbox"/> BMBC <input type="checkbox"/> Monitor <input type="checkbox"/> Other Please state:
<ul style="list-style-type: none"> Has this report reviewed the Trust's compliance with: 		<input checked="" type="checkbox"/> Regulators (eg Monitor / CQC) <input type="checkbox"/> Legal requirements (Acts, HSE, NHS Constitution etc) <input type="checkbox"/> Equality, Diversity & Human Rights <input type="checkbox"/> The Trust's sustainability strategy	
<ul style="list-style-type: none"> Is this report supported by a communications plan? 	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Not applicable <input type="checkbox"/> To be developed	<ul style="list-style-type: none"> Has this report (in draft or during development) been reviewed by any Board or Executive committees within the Trust? 	<input type="checkbox"/> CGC <input type="checkbox"/> NCGRC <input type="checkbox"/> Audit Committee <input type="checkbox"/> Finance Committee <input type="checkbox"/> ET
<ul style="list-style-type: none"> Where applicable, briefly identify risk issues (including any reputation) and cross reference to risk register and governance committees 			
<ul style="list-style-type: none"> Where applicable, state resource requirements: 		Finance:	
		Other:	
<p>NHS Constitution: In determining this matter, the Board should have regard to the Core principles contained in the Constitution of:</p> <ul style="list-style-type: none"> Equality of treatment and access to services High Standards of excellence and professionalism Service user preferences Cross community working Best Value Accountability through local influence and scrutiny <p>The Board will also have regard to the Trust's core vision statement: "Barnsley Hospital: Providing the best healthcare for all"</p>			

Subject:	Monthly update on Nursing and Midwifery	Ref:	14/08/P-06
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1 INTRODUCTION

Barnsley Hospital NHS Foundation Trust (BHNFT) aims to provide safe, high quality care to patients, as part of the enabling this nurse staffing levels within clinical areas are continually monitored.

As reported last month the Trust is required to update the Board on a monthly basis regarding the nurse staffing levels, identifying any areas where staffing has fallen below the expected levels and the steps taken to manage this.

2. BACKGROUND

BHNFT is committed to ensuring that levels of nursing staff, match the acuity and dependency needs of patients in order to provide safe and effective care. Nurse staffing includes:

- Registered Nurses
- Registered Midwives
- Unregistered health care/midwifery care assistants
- Unregistered nursing/midwifery auxiliaries.

The Trust uses an e-rostering system with duty rosters created eight weeks in advance to ensure the levels and skill mix of the nursing staff on duty are appropriate for providing safe and effective care.

This allows for contingency plans to be made where the roster identifies that the planned staffing falls short of the minimum requirement, for example where there are vacant nursing posts or staff appointed have not started in post. These contingency plans can include: moving staff from a shift which is above the minimum required level, moving staff from another ward/area which is above the minimum required level, or the use of flexible/temporary staffing from the Trust's internal bank or via an external nursing agency.

Safe staffing levels are also monitored and managed on a daily basis by the ward Sister and Matron for that clinical area. A daily staffing situation report is currently being developed to be implemented from 1 August 2014 underpinned by an updated escalation process.

Shortfalls as a consequence of short term sickness or other unplanned leave for which cover cannot be found internally by the movement of staff or the use of the in house nurse bank staff are escalated to the Heads of Nursing for authorisation of temporary staffing via a nursing agency.

Details of the planned shift by shift versus the actual shift by shift staffing for the adult in-patient ward areas during June 2014 is found at appendix 1. *(to be added)*

3. STAFFING REPORT

The planned trust wide staffing hours for registered nurses/midwives and non-registered or care staff for days and nights in hours is summarised below.

Day				Night			
Registered midwives/nurses		Care Staff		Registered midwives/nurses		Care Staff	
Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours
38612.25	31595.55	23169.75	22360.54	21666.5	21626.75	8352	9184.75

The average fill rates Trust-wide were as follows

Day		Night	
Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)
81.8%	96.5%	99.8%	110.0%

When compared with last month the average fill rate for registered nurses/midwives shows a slight decrease during the day (0.4%) but an increase for nights (1.9%). The average fill rate for care staff increased for both days (2.7%) and nights (5.8%)

For most wards there will be a difference between the planned and actual staffing hours. Some areas will have used more hours than planned and some will have used less. The most common reason for using more staff than planned is usually related to the care needs of patients being higher than normal for that area. Using less staff than planned could be due to caring for patients who are less unwell or who have fewer care needs than those patients normally cared for on the ward.

The planned staffing level is based on optimal staffing levels and where actual staff is below this per shift the Trust has mechanisms in place to ensure that staffing on the shift remains safe. The majority of staffing shortfalls during June were due to either short term sickness or small numbers of vacant posts.

4. DATA QUALITY

The data for this report has been extracted from the e-rostering system as this system should be updated and accurate. In order to confirm the accuracy of the data over the coming months a series of audits and checks will be run to validate data accuracy. Until these checks have been completed these early data need to be viewed with caution.

5. VARIANCE REPORT

For purposes of this report any deficit between planned and actual staff of greater than 20% is reported together with the reasons for the variance and any actions taken to address the cause, if appropriate.

WARD	DAY		NIGHT		COMMENTS /ACTION TAKEN	FURTHER ACTION REQUIRED	IDENTIFIED HARMS
	Average fill rate registered nurse/midwife	Average fill rate care staff	Average fill rate registered nurse/midwife	Average fill rate care staff			
19	69.8%	104%	100%	100.9%	An assessment of appropriate nurse and care staff levels is made on a shift by shift basis. Care staff numbers have been increased to support the registered nurses	The ward has a number of registered nurse vacancies, in the on-going bed base changes these vacancies will be filled by current Trust staff.	In June there were 6 in patient falls of which 5 resulted in no harm to the patient. All patients were appropriately assessed and actions being taken. The ward has had 4 grade 2 pressure ulcers this month the matron is currently taking a review of these to identify trends. Care staff were used to ensure enough staff on the ward when there was a reduced level of qualified staff.
20	63.1%	97.7%	100%	108.3%	An assessment of appropriate nurse and care staff levels is made on a shift by shift basis.	The ward has a number of registered nurse vacancies, in the on-going bed base changes these vacancies will be filled by current Trust staff.	In June there were 5 patient falls on the ward, 1 deemed to cause low harm and the remaining 4 no harm. There were 6 patients who suffered a grade 2 pressure ulcer. These are currently being reviewed however all assessments had been undertaken appropriately for both the falls and tissue viability and care staff were used when qualified staff numbers fell below expected levels.

AMU	77.6%	90.8%	97.6%	106.7%	<p>The Acute Medical Unit (AMU) continues to have a large number of vacancies.</p> <p>The unit is being supported with staff from other medical wards and the use of bank and agency.</p> <p>This situation is monitored on a day by day basis by the Matron and the Head of Nursing to ensure that the quality of care delivered is maintained.</p>	<p>Although many of the posts have been appointed to there are a number of individuals who are student nurses who will not qualify until September 2014 and therefore the posts will continue to be filled using internal bank staffing or external staffing via a nursing agency.</p>	<p>AMU had a decrease in incidents reported this month by 16. There were 6 reported incidents of grade 2 pressure ulcers and 1 grade 3 pressure ulcer. The matron has conducted a review of the pressure ulcers and has identified a lack of assessments on admission; this has been addressed with the staff involved and also through education and training. Monitoring is on-going. The grade 3 pressure ulcer is going through the RCA process.</p> <p>There were 4 falls which resulted in no harm however all assessments were in place and actions being taken.</p>
23	71.8%	103.0%	96.7%	150.0%	<p>The ward currently has 2 vacant band 5 posts and 2 full time staff on long term sick. Where they were unable to cover registered nurse shifts additional care staff were utilised to support the team.</p>	<p>Recruitment on going</p>	<p>There were 9 falls on the unit which resulted in no harm; all assessments and actions were in place to try to prevent these. There were 2 grade 2 pressure ulcers reported but all care was in place.</p>
27	75.4%	76.5%	96.7%	115.0%	<p>The ward current has 2 vacant band 5 posts and some short term sickness this month which has impacted on the fill rate but this has been assessed on a daily basis.</p>	<p>This ward will be closed on the 1 August 2014 as part of the Trust internal reconfiguration of beds. Staff will fill other current vacant posts.</p>	<p>There were 7 falls on the ward which resulted in no harm for the patients involved. All assessments and care plans were in place and being actioned.</p> <p>There were 4 patients who suffered a grade 2 pressure ulcer. One patient suffered a grade 3 pressure ulcer which</p>

							has gone through the RCA process and found to be due to non-concordance of the patient involved.
31	65.7%	118.5%	100.0%	111.8%	The ward currently has 2 registered nurses on long term sick both being supported by OH and HR. Two registered nurses awaiting start dates, these are anticipated to be August 2014 and 1 registered nurse on maternity leave	Continued monitoring	There were no incidents reported with regard to pressure ulcers or falls this month on the ward.
34	74.6%	135.9%	96.8%	153.3%	The ward has a high level of staff vacancies. The staffing levels are monitored on a daily basis and where registered nurses have not been able to be supplied through bank and agency extra care staff have been deployed to support patients.	From the 30 June 2014 there will be 15 beds closed on ward 33 and the staff will be redeployed to support ward 34.	There were 4 falls reported on the ward with no harm suffered by the patient – staffing levels were as expected. There were two grade 2 pressure ulcers reported in June one of these occurred when staffing levels were less than optimal.
ITU	76.5%	64.3%	117.8%	N/A	The occupancy and level of acuity of patients on the unit means that not all staff planned are always required on the unit	Continued monitoring	No incidents reported related to pressure ulcers or falls.

6. CONCLUSION

The wards display staffing levels of planned and actuals on a daily shift by shift basis. This is closely monitored by the Matrons and the Heads of Nursing and shortfalls are escalated appropriately. Harms are closely monitored and triangulated to staffing levels.

Fill rate indicator return

Appendix 1

Staffing: Nursing, midwifery and care staff

Org: RFF

Barnsley Hospital NHS Foundation Trust

Period: June_2014-15

Please provide the URL to the page on your trust website where your staffing information is available

<http://www.barnsleyhospital.nhs.uk/transparency/safe-staffing/>

#REF!

Validation alerts (see control panel)

Ward name	Main 2 Specialties on each ward		Day				Night				Day		Night	
			Registered midwives/nurses		Care Staff		Registered midwives/nurses		Care Staff		Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)
			Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours				
14	502 - GYNAECOLOGY		802.5	727.5	450	382.5	834	834	207	207	90.7%	85.0%	100.0%	100.0%
17	320 - CARDIOLOGY		1507.5	1330.76	1131.5	1005.5	690	690	345	345	88.3%	88.9%	100.0%	100.0%
18	340 - RESPIRATORY MEDICINE		1665	1344.5	1125	1000	690	690	345	345	80.8%	88.9%	100.0%	100.0%
19	430 - GERIATRIC MEDICINE		1957.5	1366.95	1575	1637.54	690	690	690	696.5	69.8%	104.0%	100.0%	100.9%
20	430 - GERIATRIC MEDICINE		1916.5	1209.5	1590	1553.75	690	690	690	747.5	63.1%	97.7%	100.0%	108.3%
AMU	300 - GENERAL MEDICINE		4147.5	3217.75	3037.5	2758.5	2415	2357.5	1380	1472	77.6%	90.8%	97.6%	106.7%
23	300 - GENERAL MEDICINE		1740	1248.92	1575	1621.75	690	667	345	517.5	71.8%	103.0%	96.7%	150.0%
24	370 - MEDICAL ONCOLOGY		1148.5	1034.77	832.5	774.42	690	690	0	23	90.1%	93.0%	100.0%	#DIV/0!
27	300 - GENERAL MEDICINE		1845	1390.5	2220	1699.1	690	667	690	793.5	75.4%	76.5%	96.7%	115.0%
28	301 - GASTROENTEROLOGY		1712.5	1449.68	1350	1285	690	693	345	401.5	84.7%	95.2%	100.4%	116.4%
31	100 - GENERAL SURGERY	101 - UROLOGY	1927.5	1267	1080	1280.25	690	690	690	771.25	65.7%	118.5%	100.0%	111.8%
32	100 - GENERAL SURGERY	120 - ENT	1462.5	1351.03	870	957.75	667	667	333.5	322	92.4%	110.1%	100.0%	96.6%
33	110 - TRAUMA & ORTHOPAEDICS		1743	1408.93	1350	1627.48	690	690	690	793.5	80.8%	120.6%	100.0%	115.0%
34	110 - TRAUMA & ORTHOPAEDICS		1672.5	1248.5	1267.5	1722.25	701	678.5	345	529	74.6%	135.9%	96.8%	153.3%
ITU	192 - CRITICAL CARE MEDICINE		3622.5	2772.75	540	347	2257.5	2659.25	0	0	76.5%	64.3%	117.8%	#DIV/0!
SHDU	192 - CRITICAL CARE MEDICINE		750	757.25	412.5	336.5	660	660	0	0	101.0%	81.6%	100.0%	#DIV/0!
CCU	320 - CARDIOLOGY		1507.5	1263.76	360	294.5	1035	1046.5	0	0	83.8%	81.8%	101.1%	#DIV/0!
12	501 - OBSTETRICS		2178.25	2117	822.25	797.75	1440	1407	456	420	97.2%	97.0%	97.7%	92.1%
Labour Suite	501 - OBSTETRICS		2283	2242	394	394	2124	2040	360	360	98.2%	100.0%	96.0%	100.0%
37	171 - PAEDIATRIC SURGERY		1482.5	1397.5	635	465	1265	1196	80.5	80.5	94.3%	73.2%	94.5%	100.0%
15	171 - PAEDIATRIC SURGERY		1540.5	1449	552	420	1368	1224	360	360	94.1%	76.1%	89.5%	100.0%
			TOTAL	38612.25	31595.55	23169.75	22360.54	21666.5	21626.75	8353	9184.75			

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