

**TRUST BOARD MEETING - PUBLIC**
**To be held on Wednesday 1<sup>st</sup> August 2018**

<b>Title of Report:</b>	Report on Safe Nursing and Midwifery Staffing	
<b>Sponsoring Director:</b>	Daljit Athwal – Interim Executive Director of Nursing	
<b>Author(s):</b>	Dilly Wilkinson – Deputy Director of Nursing	
<b>Background Paper(s):</b>	<ul style="list-style-type: none"> <li>• National Quality Board - Supporting NHS providers to deliver the right staff, with the right skills, in the right place at the right time: safe, sustainable and productive staffing.</li> <li>• National Institute for Health and Care Excellence Safe Staffing Guidance.</li> <li>• The Francis Report in to the Mid Staffordshire Inquiry.</li> <li>• Department of Health Hard Truths report.</li> <li>• Nursing and Midwifery Council Guidance.</li> <li>• NHS Improvement Safe Staffing Guidance and Resources.</li> <li>• Carter Productivity and Efficiency Report.</li> </ul>	
<b>Assurance Framework Link(s):</b>	2.2.1; 2.2.2; 2.3.1; 4.1.4; 4.2.2; 5.1.1	
<b>CQC Link(s):</b>	9; 10; 12; 18	
<b>Corporate Objective(s) supported by this paper:- (please tick)</b>	Patient Care/Experience ✓	Service Development/ Stakeholders ✓
	Service Delivery ✓	Achieving targets ✓
	Workforce ✓	
<b>Legal Implication(s):</b>	Legal claims reduced as quality and safety improved.	
<b>Resource Implication(s):</b>	Use of Bank and Agency staff due to ongoing recruitment and retention challenges.	
<b>Impact on Health Inequalities including Equality &amp; Human Rights:</b>	Affects all patients and staff equally.	
<b>Patient and/or Public Involvement:</b>	Patient Forum visits and audits and patient feedback.	
<b>Purpose of Report:</b>	To provide the Trust Board with an update on nursing and midwifery staffing at George Eliot Hospital NHS Trust for June 2018.	
<b>Report Summary:</b>	<ul style="list-style-type: none"> <li>• The Trust's fill rate for the June Safe Staffing return was 100.48%.</li> <li>• The average Care Hours Per Patient Day (CHPPD) rate was 9.3 and this is same as May.</li> <li>• There have been no red shifts or red flag events reported in June 2018.</li> </ul>	

	<ul style="list-style-type: none"> <li>• Total vacancies, including those where posts have been offered, but not started are:             <ul style="list-style-type: none"> <li>○ RN/Midwife/Registered Practitioner=79.87 WTE (a decrease on the previous month)</li> <li>○ HCA=17.6 WTE (a decrease on the previous month)</li> </ul> </li> <li>• Total actual vacancies being recruited to are:             <ul style="list-style-type: none"> <li>○ RN/Midwife/Registered Practitioner=22.75 WTE (a decrease on the previous month).</li> <li>○ HCA=9.72 WTE (a decrease on the previous month).</li> </ul> </li> <li>• A variety of recruitment and retention activities are on-going. In month we have held one regular recruitment day and an Open Day.</li> <li>• As part of the Trust’s International Recruitment, we now have 8 staff deployed:             <ul style="list-style-type: none"> <li>• 2 newly deployed (one ITU and one Adam Bede)</li> <li>• 3 have their NMC registration and are working substantively.</li> <li>• 3 expected end of July (flights to be confirmed)</li> <li>• 5 further candidates are expected to start in late September</li> </ul> </li> </ul>
<p><b>Recommendation(s):</b></p>	<p>The Trust Board is asked to accept the June 2018 safe nursing and midwifery staffing report and note ongoing escalation and recruitment actions in place.</p>
<p><b>Acronyms and Abbreviations</b></p>	<p>CHPPD    Care Hours Per Patient Day          RN        Registered Nurse          HCA        Healthcare Assistant          WTE        Whole time equivalent          NMC        Nursing and Midwifery Council          OSCE      Objective Structured Clinical Examination          AMU        Acute Medical Unit          A&amp;E        Accident and Emergency Department          ITU        Intensive Care Unit</p>

## Safe Nursing and Midwifery Staffing Report

### 1.0 Context

This report provides the update on nursing and midwifery staffing levels for June 2018. It also provides current nursing and midwifery Band 5, 6 and 7 and healthcare assistant (HCA) vacancies and recruitment and retention activity.

### 2.0 Unify national data reporting

The safe nursing and midwifery staffing submission, including the Care Hours Per Patient Day (CHPPD) data, is submitted in line with national reporting requirements. Please refer to Appendix 1 for a breakdown of the data for each ward and the Trust as a whole.

The overall Trust fill rate for June's Safe Staffing return was 100.48% and remained very similar to the previous month. For registered nurses (RNs), the organisational average fill rate was 95.3% on days and 99.1% on nights. For care staff, the organisational average fill rate was 104.6% on days and 105% on nights.

The wards with notable average fill rates against agreed establishments during June included:

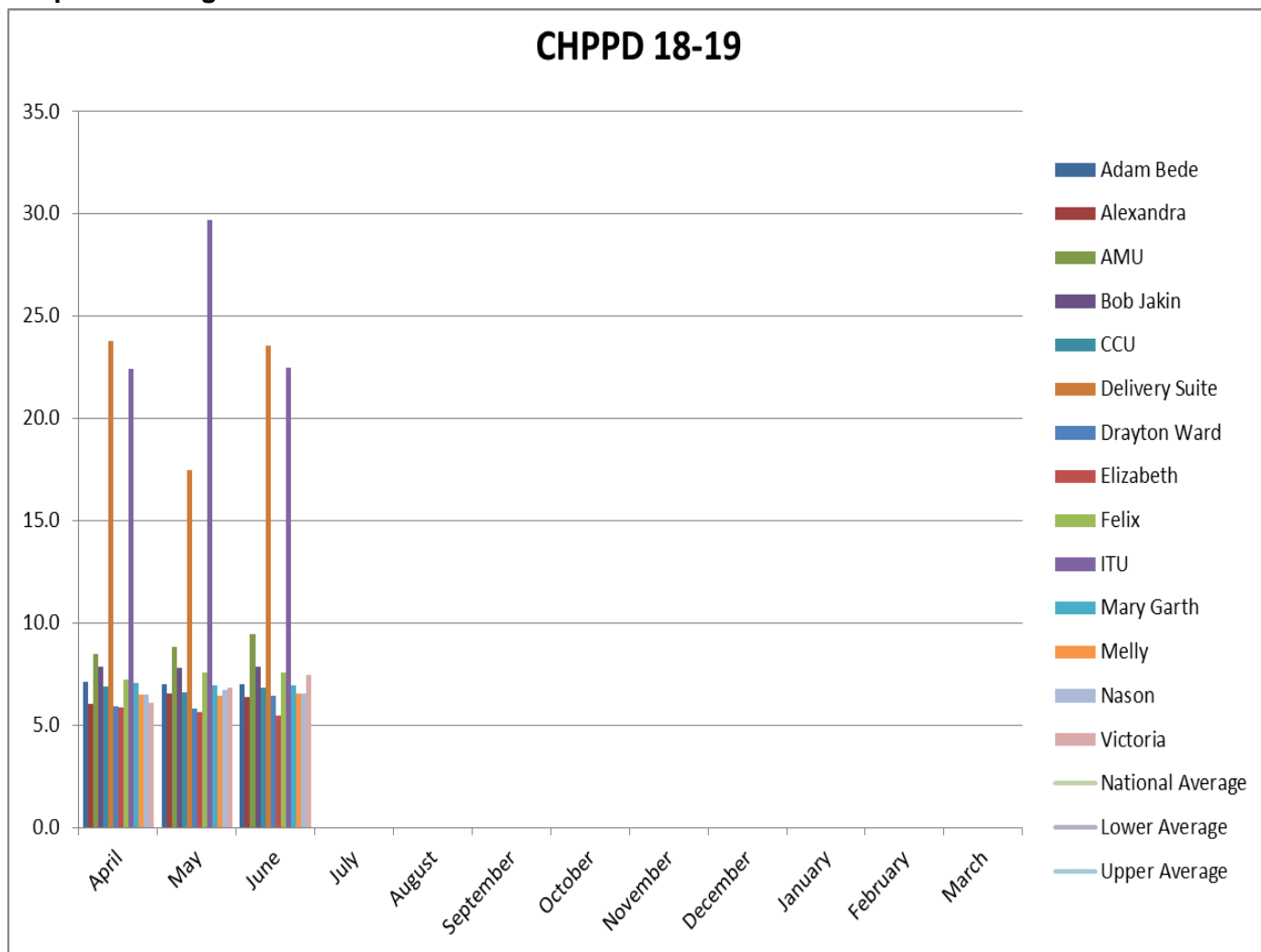
- **Acute Medical Unit** – average fill rate of 108.3% for RNs and 114.4% for care staff on days and 115% RNs and 119.3% care staff on nights. These high percentages reflect the additional staffing required whilst the extra bay remains open.
- **Intensive Care Unit** – ITU has day shift fill rate of 74.3% and night shift fill rate of 79.3%. This is not a concern as the staff are flexibly rostered depending on the number and acuity of patients in the unit. There have been no periods of reduced staffing.

In line with the Carter Review (2017), the Trust has continued to report the care hours provided by RNs and HCAs to each patient per day. The aim of this is to enable national benchmarking and drive reductions in variation and associated inefficiencies. The Carter Review stated that the average CHPPD in the pilot sites was 9.1 hours of care provided by RNs and HCAs per patient day with a variation of 6.33 to 15.48 hours.

During June, the CHPPD indicator ranged between 5.5 – 23.5 and represented an average of 9.3 which is the same as May. As previously reported ITU and Delivery Suite continued to have a higher number of care hours per patient day when compared to other wards due to delivering one to one care in those areas.

The graphs below illustrate the average CHPPD data for June 2018

**Graph 1: Average CHPPD data – GEH wards**



**3.0 Red shifts and red flag events**

In June there have been no red shifts and no red flag events reported. This was preceded by a significant reduction in red shifts and red flags in April and May. This was thought to be due to better staff allocation and active staff management. As in previous months the data has been reviewed and has been established as correct.

Appendix 2 provides the definition of red shifts and red flag events and Appendix 3 shows a breakdown of the wards and shifts affected, actions taken and trends year to date.

**4.0 Vacancies**

The latest vacancy data (July 2018) for RNs/midwives and HCAs is outlined in tables 1, 2, 3, 4, 5 and 6 in Appendix 4 of this report. This includes Band 5, 6 and 7 RN/midwife and HCA vacancies.

Vacancies are described in two ways defined as follows;

- ‘Total vacancies, including those where posts have been offered’ which means actual vacancy plus those who are appointed and have not yet started therefore are not available to be rostered on the ward
- ‘Actual vacancy’ which means posts that are available to be appointed to thus true vacancies.

It is significant to monitor the 'Total vacancies including those where posts have been offered' as this reflects the actual staffing available to the ward manager for use on the roster and when combined with sickness and maternity leave can be used to identify areas of significant concern.

Total vacancies, including those where posts have been offered, but the staff have not started are:

- RN/Midwife/Registered Practitioner=79.87WTE (decrease of 11.82 on the previous month)
- HCA=17.6 WTE (a decrease of 8.53 on the previous month)

Total actual vacancies are:

- n=22.75 WTE for RNs which represents a decrease of 11.53 WTE when compared to n=34.28 WTE vacancies reported in June 2018.
- n=9.72 WTE for HCA which represents a reduction of 7.86 on the n=17.58 WTE vacancies reported in June 2018.

The 3 clinical areas holding the highest number of continued vacancies include:

**Registered Nurses:**

- A&E
- AMU
- Alexandra Ward

**HCA's:**

- Bob Jakin
- Melly
- AMU

In July we have seen a reduction in RN vacancies by 11.58 WTE. The Trust has continued to progress its recruitment, retention and talent management strategies in order to fill vacancies and retain staff within the organisation. Monthly and bespoke recruitment events have recruited both HCAs and RNs.

Recruitment activity has continued in June which includes:

- Skype interviews – 5 candidates interviewed and 3 offered posts.
- Recruitment Day 6 interviewed and 4 offered
- Open Day – 6 applicants for generic posts and 10 for sexual health vacancies.

## 5.0 International Recruitment

The Trust continues to focus on staff recruited through International Recruitment. It has had more success with the campaign where interviews have been undertaken via Skype. In July we have 2 internationally recruited staff ready for deployment one to ITU and one to Adam Bede.

Candidates are invited to travel to the country only when they are ready to start work and in line with the Trust induction programme. They are supported in their initial integration into the area through the International recruitment team. They are supported with finding initial accommodation, given a basic household kit which includes bedding, towels, cooking utensils etc. and also supported with integration into the organisation and making new social contacts. They are given a bespoke programme of education and support to prepare them for their OSCE required prior to NMC registration.

Our first 3 international recruits all of whom now have their NMC registration attended the Team Eliot Award Ceremony as guests of the Director of Nursing.

## 6.0 Conclusion

The Trust Board is asked to note and support the on-going daily efforts to maintain safe nursing and midwifery staffing levels and progress the recruitment and retention of the nursing and midwifery workforce across the Trust.

**Appendix 1**

**Safe Nursing Staffing data submitted nationally and published on NHS Choices – June 2018 (submitted July 2018)**

Only complete sites your organisation is accountable for

Ward name	Main 2 Specialties on each ward		Day				Night				Day		Night		Care Hours Per Patient Day (CHPPD)			
			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 (%)	Cumulative count over the month of patients at 23:59 each day	Registered midwives/ nurses	Care Staff	Overall
			Total monthly planned staff	Total monthly actual staff	Total monthly planned staff	Total monthly actual staff	Total monthly planned staff	Total monthly actual staff	Total monthly planned staff	Total monthly actual staff								
Adam Bede	300 - GENERAL MEDICINE		1350	1305	900	990	720	720	720	756	96.7%	110.0%	100.0%	105.0%	538	3.8	3.2	7.0
Alexandra	100 - GENERAL SURGERY	300 - GENERAL MEDICINE	2250	2190	1575	1605	1440	1440	720	744	97.3%	101.9%	100.0%	103.3%	938	3.9	2.5	6.4
AMU	300 - GENERAL MEDICINE		3600	3900	2700	3090	2160	2484	1800	2148	108.3%	114.4%	115.0%	119.3%	1230	5.2	4.3	9.4
Bob Jakin	300 - GENERAL MEDICINE		1125	1125	1350	1335	720	732	1080	1032	100.0%	98.9%	101.7%	95.6%	537	3.5	4.4	7.9
CCU	300 - GENERAL MEDICINE		1350	1312.5	0	0	1080	1056	0	0	97.2%	-	97.8%	-	346	6.8	0.0	6.8
Delivery Suite	501 - OBSTETRICS		1800	1785	225	217.5	1440	1428	360	360	99.2%	96.7%	99.2%	100.0%	161	20.0	3.6	23.5
Drayton Ward	501 - OBSTETRICS		1575	1560	450	435	1080	1056	360	360	99.0%	96.7%	97.8%	100.0%	530	4.9	1.5	6.4
Elizabeth	300 - GENERAL MEDICINE		1575	1455	1125	1252.5	1080	1056	720	684	92.4%	111.3%	97.8%	95.0%	814	3.1	2.4	5.5
Felix	300 - GENERAL MEDICINE		1575	1410	1125	1207.5	720	720	720	816	89.5%	107.3%	100.0%	113.3%	549	3.9	3.7	7.6
ITU	300 - GENERAL MEDICINE		2250	1672.5	0	0	1800	1428	0	0	74.3%	-	79.3%	-	138	22.5	0.0	22.5
Mary Garth	300 - GENERAL MEDICINE		1350	1237.5	900	1042.5	720	720	720	732	91.7%	115.8%	100.0%	101.7%	536	3.7	3.3	7.0
Melly	300 - GENERAL MEDICINE		1575	1552.5	1575	1612.5	1080	1068	720	816	98.6%	102.4%	98.9%	113.3%	773	3.4	3.1	6.5
Nason	110 - TRAUMA & ORTHOPAEDICS	300 - GENERAL MEDICINE	1800	1695	1575	1597.5	1080	1080	720	780	94.2%	101.4%	100.0%	108.3%	786	3.5	3.0	6.6
Victoria	100 - GENERAL SURGERY	110 - TRAUMA & ORTHOPAEDICS	1350	1297.5	675	667.5	1080	1080	0	0	96.1%	98.9%	100.0%	-	408	5.8	1.6	7.5

**In June 2018, the overall Trust fill rate was 100.48% and the average CHPPD rate was 9.3**

**Appendix 2****Red shift and red flag event definitions****Red shift**

Red shifts are defined as shifts where the nurse and midwifery staffing levels were below the agreed establishment level despite mitigations put in place.

**Red flag events**

NICE guidance for safe nursing staffing describes red flag events as follows:

- Unplanned omission in providing patient medications.
- Delay of more than 30 minutes in providing pain relief.
- Patient vital signs not assessed or recorded as outlined in the care plan.
- Regular checks on patients to ensure that their fundamental care needs are met as outlined in the care plan. This is often referred to as 'intentional rounding' and involves checks on aspects of care such as the following:
  - Pain: asking patients to describe their level of pain level using the local pain assessment tool.
  - Personal needs: such as scheduling patient visits to the toilet or bathroom to avoid risk of falls and providing hydration.
  - Placement: making sure that the items a patient needs are within easy reach.
  - Positioning: making sure that the patient is comfortable and the risk of pressure ulcers is assessed and minimised.
- Less than 2 registered nurses present on a ward during any shift.
- A shortfall of more than 8 hours or 25% (whichever is reached first) of registered nurse time available compared with the actual requirement for the shift. For example, if a shift requires 40 hours of registered nurse time, a red flag event would occur if less than 32 hours of registered nurse time is available for that shift. If a shift requires 15 hours of registered nurse time, a red flag event would occur if 11 hours or less of registered nurse time is available for that shift (which is the loss of more than 25% of the required registered nurse time).

**Appendix 3****Red shift and red flag events**

<b>Date and shift</b>	<b>Ward</b>	<b>Reasons and actions taken</b>	<b>Patient harm</b>	<b>Red flag</b>
<b>3.4.18 L</b>	A&E	1 RN No agency cover for escalation nurse. Department very busy with patients in the corridor. Matron support given.	None reported	Shortfall of 8 hours registered nurse time
<b>7.4.18 N</b>	A&E	1 RN No agency cover. Night co-ordinator support given as needed.	None reported	Shortfall of 8 hours registered nurse time
<b>26.5.18 N</b>	Nason	1RN No Bank or agency cover. Night co-ordinator support given.	None reported	Shortfall of 8 hours registered nurse time
<b>26.5.18 N</b>	Melly	1RN No Bank or agency cover. Night co-ordinator support given.	None reported	Shortfall of 8 hours registered nurse time
<b>28.5.18 N</b>	Melly	1RN No Bank or agency cover. Night co-ordinator support given.	None reported	Shortfall of 8 hours registered nurse time
<b>June 2018</b>		No red flag events reported	None reported	



Appendix 4

Current (real time) Band 5, 6 and 7 registered nurse/midwife and HCA vacancies as of July 2018

Table 1 – Band 5, 6 and 7 registered nurse vacancies on adult inpatient wards

Ward	Grade	Budget	Actual includes offered post	Active Vacancies	Offered posts	Running Total of Vacancies including Offered posts
Adam Bede	7	1	1	0.00	0.00	0.00
	6	1	1	0.00	0.00	0.00
	5	13.86	15.65	1.79	(3.00)	(1.21)
CCU	7	1	1	0.00	0.00	0.00
	6	3.36	3.05	(0.31)	0.00	(0.31)
	5	14.66	15.08	0.42	(3.56)	(3.14)
Elizabeth	7	1	1	0.00	0.00	0.00
	6	2	2	0.00	0.00	0.00
	5	17.02	16.29	(0.73)	(5.00)	(5.73)
Mary Garth	7	1	1	0.00	0.00	0.00
	6	1	1	0.00	0.00	0.00
	5	13.86	14.76	0.90	(2.80)	(1.90)
AMU	7	2	2	0.00	0.00	0.00
	6	9.2	12.08	2.88	0.00	2.88
	5	29.2	33.16	3.96	(11.48)	(7.52)
Alexandra	7	1	1	0.00	0.00	0.00
	6	2	2	0.00	0.00	0.00
	5	24.95	19.21	(5.74)	(2.96)	(8.70)
Nason	7	1	1	0.00	0.00	0.00
	6	2	2	0.00	0.00	0.00
	5	18.9	14.8	(4.10)	(3.00)	(7.10)
Victoria	7	1	0	(1.00)	0.00	(1.00)
	6	1	1	0.00	0.00	0.00
	5	16.5	14.84	(1.66)	(2.00)	(3.66)
Bob Jakin	7	1	1	0.00	0.00	0.00
	6	1	0.8	(0.20)	0.00	(0.20)
	5	12.18	11.68	(0.50)	(1.00)	(1.50)
Felix Holt	7	1	2	1.00	0.00	1.00
	6	4.8	3.76	(1.04)	0.00	(1.04)
	5	11.74	10.6	(1.14)	(0.96)	(2.10)
Melly	7	1	1	0.00	0.00	0.00
	6	1	1	0.00	0.00	0.00
	5	18.33	19.25	0.92	(4.00)	(3.08)
<b>Total</b>		<b>230.65</b>	<b>227.01</b>			
<b>Totals</b>				<b>(4.55)</b>	<b>(39.76)</b>	<b>(44.31)</b>

Table 2 – Health Care Assistant vacancies on adult inpatient wards

Ward	Grade	Budget	Actual includes offered post	Active Vacancies	Offered posts	Running Total of Vacancies including Offered posts
Adam Bede	3	0	0	0	0.00	0.00
	2	12.1	12.4	0.30	(1.60)	(1.30)
Elizabeth	3	0.8	0.8	0.00	0.00	0.00
	2	12.98	13.82	0.84	(1.00)	(0.16)
Mary Garth	3	1	0	(1.00)	0.00	(1.00)
	2	12.1	11.72	(0.38)	0.00	(0.38)
AMU	3	1	1	0.00	0.00	0.00
	2	29.8	29.44	(0.36)	(3.00)	(3.36)
Alexandra	3	2.44	3.4	0.96	0.00	0.96
	2	14.7	13.6	(1.10)	(0.60)	(1.70)
Nason	3	1.9	1	(0.90)	0.00	(0.90)
	2	16.14	17.46	1.32	(2.02)	(0.70)
Victoria	3	2.4	1.6	(0.80)	0.00	(0.80)
	2	2.64	2.4	(0.24)	0.00	(0.24)
Bob Jakin	3	0.8	0	(0.80)	0.00	(0.80)
	2	17.34	15.16	(2.18)	0.00	(2.18)
Felix Holt	3	1.93	1.93	0.00	0.00	0.00
	2	11.85	10.4	(1.45)	0.00	(1.45)
Melly	3	3.23	2.23	(1.00)	0.00	(1.00)
	2	15.31	12.72	(2.59)	0.00	(2.59)
<b>Total</b>		<b>161.66</b>	<b>151.08</b>			
<b>Totals</b>				<b>-9.38</b>	<b>(8.22)</b>	<b>(17.60)</b>

Appendix 4 continued

**Table 3 – Band 5, 6 and 7 registered nurse vacancies in other clinical areas, including A&E, Theatres, ITU, Maternity and SCBU**

Ward/clinical area	Grade	Budget	Actual includes offered post	Active Vacancies	Offered posts	Running Total of Vacancies including Offered posts
A&E	7	8.8	8.8	0.00	0.00	0.00
	6	11.8	13.1	1.30	0.00	1.30
	5	40.12	33.49	(6.63)	(8.64)	(15.27)
ITU	7	11.15	10.83	(0.32)	(1.00)	(1.32)
	6	7.72	7.68	(0.04)	(1.00)	(1.04)
	5	16.96	15.28	(1.68)	0.00	(1.68)
Maternity	7	18.6	14.2	(4.40)	(1.00)	(5.40)
	6(inc 5)	63.41	60.41	(3.00)	0.00	(3.00)
SCBU	7	1	1	0.00	0.00	0.00
	6	10.1	8.68	(1.42)	(1.00)	(2.42)
	5	10.92	10.92	0.00	0.00	0.00
Theatres	7	3.57	3.57	0.00	0.00	0.00
	6	15.87	15.54	(0.33)	0.00	(0.33)
	5	51.02	48.62	(2.40)	(4.00)	(6.40)
<b>Total</b>		<b>265.92</b>	<b>252.12</b>	<b>(18.92)</b>	<b>(16.64)</b>	<b>(35.56)</b>

**Table 4 – Health Care Assistant vacancies in other clinical areas, including A&E, Theatres, ITU, Maternity and SCBU**

Ward/clinical area	Grade	Budget	Actual includes offered post	Active Vacancies	Offered posts	Running Total of Vacancies including Offered posts
A&E	3	4.4	4.84	0.44	0.00	0.44
	2	8.06	7.88	(0.18)	(0.64)	(0.82)
Maternity	3(inc 2)	14.93	14.93	0.00	0.00	0.00
SCBU	2	2.76	2.16	(0.60)	0.00	(0.60)
Theatres	4	3	3	0.00	0.00	0.00
	3	1.43	1.43	0.00	0.00	0.00
	2	27.36	27.36	0.00	0.00	0.00
<b>Total</b>				<b>(0.34)</b>	<b>(0.64)</b>	<b>(0.98)</b>

**Table 5 – Running total of vacancies including those where posts have been offered, but not yet commenced.**

Month	Total number of RN/Midwife/Registered Practitioner vacancies	Total number of HCA vacancies	Notes – as applicable
March 2018	84.93	21.97	A decrease on the previous month for both RNs and HCAs.
April 2018	80.87	29.63	A decrease in RN vacancies and an increase in HCA vacancies
May 2018	84.7	30.25	An increase on the previous month for both RNs and HCAs
June 2018	91.69	26.18	An increase of 6.99WTE of RNs and a reduction of 4.07 of HCA vacancies.
July 2018	79.87	17.6	A decrease of 11.82WTE of RNs and a reduction of 8.58WTE of HCAs

**Table 6 – Running total of actual vacancies**

<b>Month</b>	<b>Total number of RN/Midwife/Registered Practitioner vacancies</b>	<b>Total number of HCA vacancies</b>	<b>Notes – as applicable</b>
March 2018	40.93	19.47	
April 2018	39.63	21.39	A decrease in RN vacancies and a slight increase in HCA vacancies.
May 2018	20.94	22.01	
June 2018	34.28	17.58	An increase of 13.34 WTE in RN vacancies and a reduction of 4.43WTE in HCA vacancies
July 2018	22.75	9.72	A decrease of 11.53WTE in RN and an decrease of 7.86 WTE in HCAs