

## BOARD OF DIRECTORS MEETING (Open)

Date: 13 September 2017

Item Ref: 7 ii a

<b>TITLE OF PAPER</b>	Safer Staffing Report: Monthly Return 1 <sup>st</sup> - 30 <sup>th</sup> June 2017
<b>TO BE PRESENTED BY</b>	Liz Lightbown, Executive Director of Nursing, Professions and Care Standards
<b>ACTION REQUIRED</b>	Members are asked to receive and note the monthly report, acknowledging the current issues relating to staffing establishments and safer staffing levels. Members are asked to note publication of this report on the Trust website, in compliance with the National Quality Board (NQB) 2013 requirements on safe staffing.
<b>OUTCOME</b>	Board Members are assured the Trust is meeting the National Quality Board (NQB) requirements on publishing monthly staffing data
<b>TIMETABLE FOR DECISION</b>	September 2017 Meeting
<b>LINKS TO OTHER KEY REPORTS/ DECISIONS</b>	<ul style="list-style-type: none"> <li>▫ 4 August 2015 Letter from Chief Nursing Officer – Next steps in guidance for safe staffing</li> <li>▫ NQB (NHS England) Staffing Capacity and Capability (2013)</li> <li>▫ Monthly reports submitted to the Executive Directors Group and Board of Directors</li> <li>▫ 13 October 2015 Letter from Monitor - Safe Staffing and Efficiency</li> <li>▫ 21 December 2016 Letter from NHS Improvement - Safe, Sustainable and Productive Staffing improvement resources – for review</li> <li>▫ Good Practice Guide: Rostering – June 2016</li> <li>▫ 30<sup>th</sup> June 2017 letter from NHS Improvement Safe, Sustainable and Productive Staffing improvement resources – for review</li> </ul>
<b>LINKS TO OTHER RELEVANT FRAMEWORKS BAF, RISK, OUTCOMES</b>	Strategic Objectives A1 01 Quality & Safety; A1 02 Quality & Safety; & A2 02 People. BAF Risk 1.4: Compliance with CQC Registration / Regulation Requirements.  NHS Outcomes Framework
<b>IMPLICATIONS FOR SERVICE DELIVERY &amp; FINANCIAL IMPACT</b>	N/A
<b>CONSIDERATION OF LEGAL ISSUES</b>	N/A
<b>Authors of Report</b>	Liz Lightbown & Giz Sangha
<b>Designation</b>	Deputy Chief Nurse/Acting Clinical Director Acute & Inpatient Care
<b>Date of Report</b>	1 September 2017

## SUMMARY REPORT

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**Report to: BOARD OF DIRECTORS MEETING**

**Date: 13 September 2017**

**Subject: Safer Staffing Report, Monthly Return: 1<sup>st</sup> – 30<sup>th</sup> June 2017**

**Presented by: Liz Lightbown, Executive Director of Nursing, Professions & Care Standards**

**Author: Liz Lightbown & Giz Sangha, Deputy Chief Nurse/Interim Clinical Director, Acute & In-patient Care**

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### 1. Purpose

<i>For Approval</i>	<i>For a collective decision</i>	<i>To report progress</i>	<i>To seek input from</i>	<i>For information</i>	<i>Other (please state below)</i>
		✓			

### 2. Summary

The 1<sup>st</sup> – 30<sup>th</sup> June 2017 report was published on the Trust's website on the 17<sup>th</sup> June 2017 and reported to Unify, in compliance with the National Quality Board (NQB) 2013 and NHS England reporting requirements. See Appendices 1 & 2.

#### **Planned Staffing Levels (Nursing)**

Staffing levels are determined by a combination of funded establishment, commissioning specifications, professional judgement, Service User need, current / available budgets, Meridian productivity work (Acute), Health Education England Learning Disability Competency Framework and relevant NQB resources.

#### **Executive Summary**

The Trust has twelve in-patient wards. In June, on day shifts: six wards had registered nurse fill rates above 90%: Dovedale; Bungalow 1a; Bungalow 2; Forest Lodge Assessment; Forest Lodge Rehabilitation; Stanage Ward; and three wards had fill rates above 100%: Bungalow 1; G1; & Assessment & Treatment Service (Learning Disability at Firshill Rise).

Three wards had registered nurse fill rates below 80 %: Endcliffe (Psychiatric Intensive Care Unit); Burbage; & Maple (75.0%-78.8%). This was due to unforeseen short term sickness against planned day shifts.

On night shifts, all wards had registered nurse fill rates above 82.8%.

June has seen some improvement in registered nurse fill rates with experienced clinical support workers being used to enhance staffing where there are lower registered nurse fill rates (across the acute wards). Deployment of staff to areas of higher acuity remains a daily challenge on all shifts. The Clinical Nurse Managers proactively manage this per shift to support active and timely movement of staff resources and work closely with the Assistant Clinical Director and Roster lead.

A deep dive of the three Rehabilitation Wards (bungalows 1a, 1 & 2) planned registered nurse establishment, actual fill rates per shift, and care hours per patient day (CHPPD) has commenced in light of their Cost Improvement Plans Quality Impact Assessments submitted to the clinical executive scrutiny panel (which were not approved / supported) and further to their 'Requires Improvement' CQC rating and regulatory breach on staffing.

### **Escalation and Assurance**

Ward Managers are required to keep their rosters up-to-date in real time and publish their rotas eight weeks in advance.

Processes are in place to enable staffing establishments to be managed on a shift-by-shift basis. The clinical nurse managers review service user flow daily at the beginning and end of the day and a daily bed management/gatekeeping function managed by senior nurses has been established. Where required staff are moved to wards with lower staffing and / or higher clinical activity.

Staff report low staffing concerns (via the Safeguard incident reporting system) and these are escalated to the Deputy Chief Nurse for oversight, action and follow up.

Other professional groups, working on the Wards as part of the Multi-disciplinary Team (MDT) (Doctors, Allied Health Professionals and Psychologists) attend wards daily and contribute towards safer staffing levels.

### **Assurance Statement**

Effectively staffing the wards remains a constant round the clock challenge. Shift by shift redeployment action is undertaken by senior nurses as required to ensure sufficient resilience and the wards are safely staffed and able to meet service user demand. The Executive Director of Nursing, Professions & Care Standards & Deputy Chief Nurse can provide assurance that this is happening, however it is very tight and pressured.

### **E-Rostering Project**

The Health roster is in place for all 12 in-patient wards. The Safecare Module training and rollout was completed in June/July 2017. Test runs during July/August have indicated ATS in particular requires additional support to effectively apply the e roster requirements and this is planned for September.

### **Bank / Agency Use**

Data is collated and Agency and Bank use is reported into the Agency and Off-payroll Group, which reports into the Vacancy Control Panel (VCP). The intention is to incorporate the relevant in patient data into this report.

### **Nurse Led Safer Staffing Group**

The Safer Staffing Group meets monthly to oversee/review staffing requirements, the Fill Rates & Performance Dashboard are attached for reference at Appendices 1 & 2.

## **Recruitment & Retention**

A rolling programme of recruitment overseen by the Deputy Director of Nursing, in collaboration with Human Resources, has commenced with several appointments being made. Key actions underway include: offers of employment to second/third year nursing students on completion of their professional registration / DBS checks; three focus groups for staff who are over 50 to discuss what they would need to work beyond retirement age; and identification of staff who may be thinking about leaving and understanding what is required of us to encourage them to stay. There has been good take-up of the groups and this information will be used confidentially to inform recruitment plans.

### **3. Next Steps**

- 3.1 Work to commence on incorporating (relevant) Bank & Agency data into the safer staffing report.

### **4. Actions**

- 4.1 Members are asked to receive and note the June 2017 monthly report.
- 4.2 Members are asked to note publication of this report on the Trust website in compliance with the National Quality Board (NQB) 2013 requirements on safe staffing.
- 4.3 To note, this report does not appear on the NHS Choices website. This issue has been flagged internally and to the relevant external Unify provider. Awaiting a resolution.

### **5. Monitoring Arrangements**

- 5.1 Via the Monthly Safer Staffing Group chaired by the Deputy Chief Nurse.
- 5.2 Monthly reports are submitted to the Executive Directors Group and Board of Directors.

### **6. Contact Details**

For further information please contact:

Giz Sangha, Deputy Chief Nurse  
Giz.Sangha@shsc.nhs.uk

Liz Lightbown, Executive Director of Nursing, Professions & Care Standards  
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Ward Name	Fill Rates			
	Day		Night	
	Average fill rate registered nurses/midwives	Average fill rate care staff	Average fill rate registered nurses/midwives	Average fill rate care staff
<b>ACUTE</b>				
Burbage	78.0%	151.9%	82.8%	213.2%
Dovedale	92.7%	142.9%	86.7%	196.7%
Maple	78.8%	138.9%	97.8%	192.5%
Stanage	91.6%	173.2%	100.0%	260.0%
<b>PICU</b>				
Endcliffe Ward	75.0%	197.8%	90.0%	254.1%
<b>REHABILITATION</b>				
Bungalow 1	114.7%	94.9%	100.0%	96.7%
Bungalow 1a	97.3%	95.0%	100.0%	105.0%
Bungalow 2	98.3%	98.6%	100.2%	128.5%
<b>FORENSIC</b>				
Forest Lodge Assessment	97.3%	108.4%	102.4%	102.0%
Forest Lodge Rehabilitation	95.4%	94.7%	100.0%	100.0%
<b>DEMENTIA</b>				
G1	113.6%	102.1%	99.5%	114.1%
<b>LEARNING DISABILITIES</b>				
Firshill Rise	141.5%	148.3%	100.0%	295.3%

# Safer Staffing Performance Dashboard

## Appendix 2



Wards	Staffing	May % Fill Rate	May % Fill Rate	June % Fill Rate	June % Fill Rate	Beds	% Occupancy	Admission	Transfers	Discharges	Staff mix	Position To Date
		Day Shift	Night Shift	Day Shift	Nights							
Maple	Registered	81	95	79	98	17 +1	(111)92	(18)15	(1)0	17	E=6(4 reg) L=6(4reg) N=4(3reg)	
	Unregistered	153	268	139	193	<p>In June there was a decrease in registered nurse availability due to having 2.0 WTE nurses on Maternity leave, 0.8 WTE nurse on LTS and 1.0 WTE nurse moving to Endcliffe ward (from 12/06/17) and 0.8 WTE nurse leaving the trust (from 12/06/17). Maple's AFE is 19.70, current staff in post is 17 but only 14.20 available to work. Unavailability for registered nurses was 34.9% total, broken down as 12.8% AL, 0.2% other leave, 8.8% parenting leave, 5.2% sickness, 3.6% study leave and 4.3% work days (supernumary). The higher than normal supernumary days were due to the deputy ward manager covering ward manager annual leave. There were 13 unfilled registered shifts for the Place of Safety and 14 unfilled general registered shifts. These shortfalls were covered by experienced unregistered staff hence having higher numbers of unregistered staff on duty to maintain safety. Some vacancies have been successfully recruited into and new starters commencing at the end of Sept 2017</p>						
Endcliffe	Registered	75	95	75	90	10	(92)71	(2)3	(5)2	(1)3	E=6(3 reg) L=6(3reg) N=4(2reg)	
	Unregistered	161	190	198	254	<p>Registered nurse shifts below 80% due to vacancies / short term sick leave. Staff have been deployed from other wards to cover high acuity shifts. Some shortfalls were covered by experienced unregistered staff hence having higher numbers of unregistered staff on duty to maintain safety. The ward manager and deputy ward managers also worked into the staffing numbers to support staff.</p>						

Wards	Staffing	May % Fill rate	May % Fill Rate	June % Fill Rate	June % Fill Rate	Beds	% Occupancy	Admission	Transfers	Discharges	Staff mix	Position To Date
		Day Shift	Night Shift	Day Shift	Nights							
Dovedale	Registered	93	92	93	87	18	(104)101	(5)6	(3)0	(3)5	E=5(3 reg) L=5(3reg) N=3(2reg)	
	Unregistered	125	120	143	197	Registered nurse shortfalls covered using agency staff for short term sickness.						
Forest Close Bungalow 1A	Registered	101	100	97	100	14	(100)96	(0)1	1	2	E=5(2 reg) L=5(2reg) N=3(1reg)	
	Unregistered	95	106	95	105	Forest Close bungalow 1a retaining safe staffing levels						



Wards	Staffing	May % Fill rate	May % Fill Rate	June % Fill Rate	June % Fill Rate	Beds	% Occupancy	Admission	Transfers	Discharges	Staff mix	Position To Date
		Day Shift	Night Shift	Day Shift	Nights							
Forest Close Bungalow 1	Registered	88	103	115	100	8	(95)100	0	0	0	E=3(1 reg) L=3(1reg) N=2(1reg)	
	Unregistered	93	106	95	97	Registered nurse shortfall related to short term sickness. Staff deployed internally to cover and ensure safety.						
Forest Close Bungalow 2	Registered	116	100	98	100	8	100	0	(-1)0	0	E=3(1 reg) L=3(1reg) N=2(1reg)	
	Unregistered	94	100	99	128	Forest Close bungalow 2 retaining safe staffing levels						

Wards	Staffing	May % Fill rate	May % Fill Rate	June % Fill Rate	June % Fill Rate	Beds	% Occupancy	Admission	Transfers	Discharges	Staff mix	Position To Date
		Day Shift	Night Shift	Day Shift	Nights							
Forrest Lodge Assessment	Registered	109	100	98	102	11	(74)88	(2)3	0	(-1)0	E=3(2 reg) L=3(2reg) N=3(1reg)	
	Unregistered	116	127	108	102	Forest Lodge assessment retaining safe staffing levels						
Forrest Lodge Rehabilitation	Registered	94	97	95	100	11	100	0	0	1	E=4(2 reg) L=4(2reg) N=2(1reg)	
	Unregistered	92	100	95	100	Forest Lodge rehabilitation retaining safe staffing levels						

Wards	Staffing	May % Fill rate	May % Fill Rate	June % Fill Rate	June % Fill Rate	Position To Date						
		Day Shift	Night Shift	Day Shift	Nights	Beds	% Occupancy	Admission	Transfers	Discharges	Staff mix	
		April	April	May	May							
Firshill Rise	Registered	89	100	142	100	8	(82)85	0	0	0	E=5(1 reg) L=3(1reg) N=3(1reg) * unreg 9 - 5 Reg altered as of 15 th May 2017 to 1 per shift with aspiration of 2	
	Unregistered	161	283	148	295	Registered nurse day shortfall related to vacancy, covered using experienced unregistered staff. Firshill Rise is part of the workforce monthly rolling recruitment plan. This is an improved position than of previous reports						
G1	Registered	120	94	114	100	16	(92)101	5	0	(9)4	E=6(3 reg) L=6(3reg) N=3(2reg)	
	Unregistered	94	108	102	114	G1 is retaining safe staffing levels and an improvement on previous monthly reports.						