

Safe Staffing Report – December 2016

1.0 INTRODUCTION

This report provides a monthly summary of Safe Staffing on all in-patient wards across the Trust. It includes exception reports related to staffing levels, related incidents and red flags which are then triangulated with a range of quality indicators.

2.0 SAFER STAFFING EXCEPTION REPORT

The safe staffing exception report (Appendix1), provides the established versus actual fill rates on a ward by ward basis. Fill rates are RAG rated with supporting narrative by exception, and a number of related factors are displayed alongside the fill rates to provide an overall picture of safe staffing.

- Sickness rate and Vacancy rate are the two main factors that affect fill rates.
- A monthly point prevalence sample audit of Care Indicators demonstrates how consistently a range of aspects of patient care is being delivered: Nutrition and Hydration; Medicine Safety; Infection Control and Environment; Care and Welfare of Service Users; Temporary Induction of Staff; Right Patient Right Ward; Pain Management; Hourly Rounding; Clinical Observations; Always Events; Tissue Viability; Falls; and Catheter care. The performance is shown as the number of indicators that have been achieved out of the total of 13 indicators. This audit has been temporarily suspended and will be reinstated for January's report.
- Datix incident submissions related to staffing and Red Flags are monitored on a daily basis to act as an early warning system and inform future planning.
- Nurse Sensitive Indicators demonstrate the outcome for patients by measuring harm.
 - Cases of Clostridium Difficile (CDT);
 - Pressure Ulcers Grade 1&2 / Grade 3&4;
 - *Falls resulting in physical harm / not resulting in physical harm;
 - *Medication administration errors resulting in harm / not resulting in harm.(*All incidents displayed by: those that resulted in moderate and severe harm / resulted in minor or no harm)
- The impact of Nurse staffing on Patients' Experience is demonstrated by two specific questions from the monthly Real Time Patient Experience Survey. The NICE guidance on safe staffing in hospitals suggests using a number of questions in the form of a patient experience survey. For some of the NICE questions the trust has an equivalent question, or proxy question within the monthly Real Time Patient Experience survey or Always Events Survey, with the two questions matching most closely featuring in this report.

Care Hours Per Patient Day (CHPPD) are also featured alongside the fill rates for each ward / department. The use of CHPPD as a benchmark within and against other organisations is still under development by NHS Improvement and subsequent reports will be amended accordingly.

There are a number of wards that have not been able to maintain full rates during the month of December, and this is clearly associated with higher rates of sickness/absence, vacancies or a combination of both. The average fill rate across all areas has remained static for the last 2 years, with an average of 88.5% for Registered Nurses and Midwives and 99.8% for Care Support Workers.

Safe Staffing for each ward is assessed on a daily basis by the relevant Divisional Matrons and, during the evenings and at weekends the Duty Matron has responsibility for ensuring safe staffing of all ward areas across the Trust.

There have been 55 incidents reported under the nursing red flags criteria; 42 of these relate to a shortfall of more than 8 hours or 25% of registered nurses. The majority of these have been reported by Aspull ward and reflect the decision taken to reduce registered nurses on nights from 3 to 2. On review of occurrence of the reporting of nursing red flags, these are more likely to occur on Mondays, Thursdays and Fridays. This is likely to be related to staff movement to cover shifts at the weekends and in response to short term sickness.

Investigation into the falls resulting in harm on Astley Ward concluded that staffing levels and skill mix were safe at the time and did not contribute directly to the incidents. Similarly the investigation into the medication incident reported on Aspull indicated that this was not related to staffing levels. Consequently all areas have been rated 'green' indicating that safe staffing was maintained throughout the month. This information will be shared with Trust Board prior to upload onto NHS Choices.

The consultation for the standardisation of hours and nursing establishment review is scheduled to commence on 23 January 2016. In addition to supporting the transfer of staff internally to reflect nursing acuity and dependency, the standardisation of hours will release efficiency savings relating to reduction of handover time, more effective allocation of annual leave and a reduction in temporary staffing. Once concluded it is envisaged that there will be significant efficiency savings which will be reflected as a saving on NHSP spend.

Concerns have been raised in January with respect to staffing levels and skill mix on Winstanley Ward as a consequence of increasing needs of patients and the provision of the Non-Invasive Ventilation (NIV) service in the area. Within the clinical area there are few vacancies, however there have been high levels of maternity leave and recruitment of newly qualified staff which has diluted knowledge and skills. Service provision and staffing levels will be reviewed and reassessed in January and in the interim additional staff have been authorised to support the clinical area. Whilst the previously mentioned staffing review will assist the service it is felt this requires additional scrutiny to further enhance the nursing support to patients and this is being progressed by the Head of Nursing and Deputy Director of Nursing.

In addition an risk related to staffing on the MAU and Lowton was escalated to the Quality and Safety Committee on 11 January 2017. This risk assessment describes the ongoing recruitment issues within the clinical area which are influenced by acuity and dependency of patients, and the overall clinical activity levels within these areas. Alternative models of nursing support are being explored, including the use of Trainee Nursing Associates within these areas.

5.0 SUMMARY

During the month of December the wards were considered safe with low levels of harm and positive patient experience across all areas indicating that safe staffing has been maintained. Staffing levels and skill mix is managed and reviewed on a continuous shift by shift basis with staffing levels clearly displayed at the entrance to all wards.

6.0 RECOMMENDATIONS

The Board is asked to receive the paper for information and discussion.

Allison Edis; Deputy Director of Nursing

SAFE STAFFING EXCEPTION REPORT – December 2016

Division of Medicine – Scheduled Care

Ward	Average Fill Rates (%) & CHPPD						Staff Availability		Care Delivery	Staff Experience	Nurse Sensitive Indicators				Patient Experience % (Number surveyed)	
	RN / RM		CHPPD	CSW		CHPPD	Sickness (%)	Vacancies (%)	Nursing Care Indicators (Numbers achieved)	Datix Incidents - related to staffing/Red Flags	CDT	Falls (Harm / No Harm)	PU (Grade 1&2 / Grade 3 & 4)	Drug Admin Errors (Harm / No Harm)	Do you think the hospital staff did everything they could do to control your pain?	Have you been given the care you felt you required when you needed it most?
Day shift (%)	Night shift (%)	Day shift (%)		Night shift (%)												
Acute Stroke Unit	100.80%	100.00%	3.08	92.22%	109.78%	3.90	2.68%	12.66%	/	1	0	0 / 5	0 / 0	0/0	100%	100%
Astley	98.06%	70.07%	3.20	104.05%	141.12%	3.17	5.58%	4.73%	/	1	1	1 / 7	0 / 0	0 / 0	100%	100%
Coronary Care Unit	87.28%	99.80%	7.72	81.94%		2.34	0.27%	0.00%	/	0	0	0 / 1	0 / 0	0 / 1	75%	100%
Ince	87.85%	69.89%	2.97	95.43%	141.13%	3.02	2.38%	4.20%	/	1	0	0 / 6	0 / 0	0 / 1	93%	100%
Pemberton	82.06%	100.00%	5.12	139.82%	108.65%	4.81	4.03%	1.47%	/	1	0	0 / 2	0 / 0	0 / 2		
Shevington	89.38%	98.46%	2.71	91.95%	132.01%	3.48	1.77%	19.18%	/	0	0	0 / 5	0 / 0	0/0	100%	100%
Standish	101.37%	102.20%	3.02	116.72%	146.92%	3.98	3.24%	3.54%	/	0	1	0 / 7	0 / 0	0 / 3	100%	100%
Taylor Unit	97.10%	100.00%	4.60	66.50%	100.00%	4.40	6.81%	2.49%	/	0	0	0 / 3	0 / 0	0/0	100%	100%
Winstanley	70.70%	107.70%	2.50	100.50%	168.90%	3.70	6.10%	9.03%	/	1	0	0 / 4	0 / 0	0 / 0	100%	100%

Division of Medicine – Unscheduled Care

	Average Fill Rates (%) & CHPPD						Staff Availability		Care Delivery	Staff Experience	Nurse Sensitive Indicators					Patient Experience % (Number surveyed)	
	RN / RM			CSW													
Ward	Day shift (%)	Night shift (%)	CHPPD	Day shift (%)	Night shift (%)	CHPPD	Sickness (%)	Vacancies (%)	Nursing Care Indicators (Numbers achieved)	Datix Incidents - related to staffing/Red Flags	CDT	Falls (Harm / No Harm)	PU (Grade 1&2 / Grade 3 & 4)	Drug Admin Errors (Harm / No Harm)	Do you think the hospital staff did everything they could do to control your pain?	Have you been given the care you felt you required when you needed it most?	
A&E Emg Care	76.92%	89.81%		92.61%	133.63%		3.85%	4.69%		0	0	0 / 4		0 / 0			
A&E Paeds	106.94%	98.17%					0.24%	0.00%		0	0	0 / 0		0 / 0			
CDW	91.83%	100.00%		95.70%	93.84%		0.80%	5.11%	/	0	0	0 / 2	0 / 0	0 / 0	100%	100%	
Lowton	84.95%	91.69%		109.21%	134.38%		2.51%	0.00%	/	4	1	0 / 2	0 / 0	0 / 3	92%	83%	
MAU	81.41%	93.84%		111.30%	141.20%		4.32%	11.70%	/	5	0	0 / 4	0 / 0	0 / 0	100%	100%	

Division of Surgery

	Average Fill Rates (%) & CHPPD						Staff Availability		Care Delivery	Staff Experience	Nurse Sensitive Indicators					Patient Experience % (Number surveyed)	
	RN / RM			CSW													
Ward	Day shift (%)	Night shift (%)	CHPPD	Day shift (%)	Night shift (%)	CHPPD	Sickness (%)	Vacancies (%)	Nursing Care Indicators (Numbers achieved)	Datix Incidents - related to staffing/Red Flags	CDT	Falls (Harm / No Harm)	PU (Grade 1&2 / Grade 3 & 4)	Drug Admin Errors (Harm / No Harm)	Do you think the hospital staff did everything they could do to control your pain?	Have you been given the care you felt you required when you needed it most?	
ICU/HDU	70.86%	86.38%	27.99	71.72%	-	3.25	9.90%	0.00%	/	0	0	0 / 0	0 / 0	0 / 2			
Orrell	77.29%	101.32%	5.32	78.67%	101.47%	3.99	6.16%	13.67%	/	0	0	0 / 1	0 / 0	0 / 1	100%	100%	
Langtree	69.58%	99.27%	2.53	95.77%	100.07%	2.59	5.81%	8.20%	/	0	1	0 / 2	0 / 0	0 / 0	88%	100%	
Swinley	80.78%	100.00%	2.83	80.82%	96.77%	2.44	4.37%	7.18%	/	0	0	0 / 5	0 / 0	0 / 0	100%	100%	
Maternity Unit	93.78%	100.11%	11.68	90.56%	86.16%	3.50	5.19%	3.87%	/	0	0	0 / 0	0 / 0	0 / 1	100%	100%	
Neonatal Unit	93.05%	100.89%	8.80	44.09%	-	0.85	6.97%	0.00%	/	0	0	0 / 0	0 / 0	0 / 2	100%	100%	
Rainbow	101.50%	92.12%	9.33	82.97%	41.94%	2.74	14.14%	0.00%	/	0	0	0 / 0	0 / 0	0 / 0	100%	100%	

Rainbow ward: During the month of December safe staffing has been maintained within the framework set out in the Standard Operational Procedures for the safe running of Rainbow ward and Escalation procedure.

Division of Specialist Services

Ward	Average Fill Rates (%) & CHPPD						Staff Availability		Care Delivery	Staff Experience	Nurse Sensitive Indicators				Patient Experience % (Number surveyed)	
	RN / RM			CSW												
	Day shift (%)	Night shift (%)	CHPPD	Day shift (%)	Night shift (%)	CHPPD	Sickness (%)	Vacancies (%)	Nursing Care Indicators (Numbers achieved)	Datix Incidents - related to staffing/Red Flags	CDT	Falls (Harm / No Harm)	PU (Grade 1&2 / Grade 3 & 4)	Drug Admin Errors (Harm / No Harm)	Do you think the hospital staff did everything they could do to control your pain?	Have you been given the care you felt you required when you needed it most?
Aspull	86.87%	72.73%	2.99	104.38%	161.66%	3.86	4.73%	9.76%	/	36	0	0/2	0/0	1/0	100%	67%
Ward A	80.51%	87.19%	3.99	86.24%	89.12%	4.08	5.04%	0.02%	/	1	0	0/0	0/0	0/0	100%	100%
Ward B	89.70%	90.66%	4.02	92.89%	101.19%	3.80	6.82%	0.00%	/	1	0	0/5	0/0	0/1	100%	100%
JCW	0.00%	0.00%	0.00	0.00%	0.00%	0.00	0.00%	0.00%	/	0	0	/	/	0/0		