



## Safe Staffing Report – February 2017

### 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.
- The monthly point prevalence sample audit of Care Indicators was suspended in September 2016. The Trust is currently developing a ward accreditation system which will support the collection of quality indicators alongside real time patient safety flags. It is envisaged that this work will be completed within the forthcoming financial year and be fully operational by the end of March 2018.
- 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.

The Trust is currently identifying other Trusts within the Model Hospital to allow benchmarking of nursing data which will include CHPPD, nurse sensitive indicators, and attendance and vacancy rates. When this comparative data is available it will be shared with the Trust Board/

There are a number of wards that have not been able to maintain full rates during the month of February, 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 36 incidents reported under the nursing red flags criteria; 33 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 (n26) 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 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 Winstanley and Aspull Wards concluded that staffing levels and skill mix were safe at the time and did not contribute directly to the incidents; similarly there were no red flag incidents reported for the time period that the fall occurred. Similarly the investigation into the medication incident reported on Rainbow 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 end on 8 March 2017 with the final outcome being shared with staff on 24 March 2017. 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.

The risk related to staffing on the MAU and Lowton was reduced at REMC in February 2016. It should be noted that the number of red flag incidents reported within these areas has also reduced.

## **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 – February 2017

## 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	101.11%	92.69%	3.00	108.33%	144.26%	4.80	4.29%	6.03%	/	0	0	0 / 3	0 / 0	0 / 1	100%	67%
Astley	94.33%	67.08%	3.00	101.71%	180.84%	3.30	7.57%	3.22%	/	0	0	0 / 6	0 / 0	0 / 0	100%	100%
Coronary Care Unit	94.80%	100.00%	7.20	111.19%	0.00%	2.90	5.62%	0.00%	/	1	0	0 / 0	0 / 0	0 / 0	100%	100%
Ince	78.85%	70.13%	2.90	91.26%	145.29%	3.20	4.69%	3.99%	/	0	0	0 / 2	0 / 0	0 / 0	100%	71%
Pemberton	75.21%	98.21%	4.90	160.56%	147.36%	6.00	4.75%	7.50%	/	1	0	0 / 1	0 / 0	0 / 1		
Shevington	93.63%	101.79%	2.80	102.59%	130.19%	3.70	1.35%	11.05%	/	0	0	0 / 11	0 / 0	0 / 1	100%	100%
Standish	91.63%	98.05%	2.80	112.00%	136.99%	3.80	3.21%	7.85%	/	0	0	0 / 4	0 / 0	0 / 2	100%	100%
Taylor Unit	94.57%	100.32%	3.50	78.33%	100.00%	3.90	3.67%	4.44%	/	0	0	0 / 2	0 / 0	0 / 0	100%	100%
Winstanley	81.81%	137.09%	3.00	97.56%	167.86%	3.60	11.27%	9.57%	/	1	0	1 / 3	0 / 0	0 / 1	100%	100%

## Division of Medicine – Unscheduled Care

Ward	Average Fill Rates (%) & CHPPD						Staff Availability		Care Delivery	Staff Experience	Nurse Sensitive Indicators				Patient Experience % (Number surveyed)	
	RN / RM			CSW			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	81.00%	95.60%		113.39%	135.42%		5.03%	0.00%		2	0	0 / 0	0 / 2			
A&E Paeds	91.55%	107.62%					0.00%	0.00%		0	0	0 / 0	0 / 0			
CDW	81.00%	95.60%		113.39%	135.42%		1.17%	10.62%	/	0	0	0 / 4	0 / 2	100%	100%	
Lowton	82.47%	101.52%		99.01%	150.78%		5.12%	0.00%	/	0	0	0 / 0	0 / 2	100%	75%	
MAJ	88.13%	100.00%		109.84%	144.64%		2.47%	9.60%	/	0	0	0 / 9	0 / 2	100%	50%	

## Division of Surgery

Ward	Average Fill Rates (%) & CHPPD						Staff Availability		Care Delivery	Staff Experience	Nurse Sensitive Indicators					Patient Experience % (Number surveyed)	
	RN / RM			CSW							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)
ICU/HDU	69.25%	88.43%	23.90	69.17%	0.00%	2.70	6.49%	0.00%	/	0	0	0 / 1	0 / 0	0 / 1			
Orrell	56.59%	100.00%	4.00	74.66%	102.03%	3.60	3.45%	17.12%	/	0	0	0 / 0	0 / 0	0 / 0	88%	88%	
Langtree	77.32%	100.22%	2.60	92.14%	102.27%	2.40	5.32%	1.30%	/	0	0	0 / 2	0 / 0	0 / 0	91%	100%	
Swinley	81.67%	100.00%	2.80	81.43%	105.36%	2.50	4.80%	1.50%	/	0	0	0 / 1	0 / 0	0 / 0	100%	88%	
Maternity Unit	91.32%	98.18%	11.00	87.69%	100.49%	3.50	9.16%	8.04%	/	0	0	0 / 0	0 / 0	0 / 0	100%	100%	
Neonatal Unit	103.61%	110.03%	8.30	68.57%	0.00%	1.20	0.21%	0.00%	/	0	0	0 / 0	0 / 0	0 / 2	100%	100%	
Rainbow	95.65%	98.21%	10.60	88.76%	53.33%	3.60	6.34%	0.00%	/	0	0	0 / 1	0 / 0	1 / 0	100%	100%	

Rainbow ward: During the month of February 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							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)
Aspull	94.48%	69.83%	3.10	87.90%	189.61%	3.70	5.65%	7.89%	/	26	0	1 / 4	0 / 0	0 / 1	100%	100%	
Ward A	84.36%	95.67%	3.90	105.77%	105.45%	4.50	3.47%	2.10%	/	2	0	0 / 2	0 / 0	0 / 1	100%	100%	
Ward B	92.96%	87.23%	3.60	86.30%	99.32%	3.30	6.73%	2.10%	/	5	0	0 / 4	0 / 0	0 / 0	100%	100%	
JCW	0.00%	0.00%	0.00	0.00%	0.00%	0.00	0.00%	0.00%	/	0	0	0 / 0	0 / 0	0 / 1			