

Safe Staffing Report – July and August 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.

There are a number of wards that have not been able to maintain fill rates throughout the months of July and August, and this is clearly associated with higher rates of sickness/absence, vacancies or a combination of both. Active recruitment to the vacancies remain ongoing. The average fill rate across all areas has fallen for the first time in 2 years for Registered Nurses and Midwives with an average of 82.43%. Fill rates for Care Support Workers remains unchanged at an average of 99.8%.

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.

Throughout August it has been a challenge to maintain agreed safe staffing levels within the acute wards on the Royal Albert site. This has resulted as a consequence of planned and unplanned leave throughout the summer period, short term sickness and vacancies.

The current vacancy situation for Band 5 and Band 2 nurses is provided below:

	Current Vacancies	In recruitment	Outstanding vacancies
Band 5	55.84 WTE	35 WTE	20.84 WTE
Band 2	47.83 WTE	37 WTE (inc. 7 apprentices)	10.86 WTE

Following the nursing establishment review additional unregistered posts were created to support the delivery of frontline care and to improve patient safety and responsiveness to needs. Labour turnover also increased during the summer and this added to the vacancy situation and availability of staff. This was further compounded by reduced availability of NHSP staffing throughout the summer holiday period. Vacant NHSP posts were placed with agencies, however the uptake of these posts was poor. Following discussion by the Executive Team, an LPV has been developed which provides financial incentives to cover vacant shifts on acute ward. This will be trialled until the end of November 2017.

As a consequence of this the Trust is currently formalising a Nurse Staffing Escalation Process linked to the OPEL plan which will provide support and guidance on appropriate escalation measures to preserve patient safety.

There have been 119 incidents reported under the nursing red flags criteria for the combined 2 reports. The largest number recorded was by Pemberton Ward (N17) in August and are attributed to vacancies, maternity leave and short term sickness.

The breakdown of red flag incidents reported by category is demonstrated in the table below.

Red Flag Category	No. of Incidents
Shortfall of more than 8 hours or 25% of registered nurses in a shift	85
Delay of 30 minutes or more for the administration of pain relief	0
Delay or omission of intentional rounding	3
Less than 2 registered nurses on shift	14
Vital signs not assessed or recorded as planned	14
Unplanned omission of medication	3
Total	119

Although there is an increase in the number of red flags raised, it has been noted on operational updates that there have been gaps in registered nurse staffing levels that have not been reported by clinical areas via the Datix system, and therefore it is known that there is under reporting in this area. This has been raised with the Divisional Heads of Nursing for action within individual ward areas.

It has been identified that Maternity Red Flags are not included on Datix reporting and these were added in July 2017. For the 2 month reporting period 3 midwifery red flags were raised in relation to 2 occasions when 1 midwife is not available to provide continuous 1:1 care in established labour and 1 incidence delayed or cancelled time critical activity (on this occasion a delay in a planned induction).

On Standish ward in August there was one fall with harm and one reported severe medication incident. There is a correlation between these incidents and red flags raised by

the clinical area at the time of the incident. The severe medication incident is subject to internal and external investigation at the time of the report.

Rainbow Ward achieved 100% compliance with the presence of an APLS qualified nurse on every shift throughout July and August 2017. There continues to be a programme of education to support the clinical area to place 2 APLS trained nurses on duty on each shift.

5.0 SUMMARY

During the month of August 2017 the wards experienced significant staffing pressures that required assessment of risk and agreed safe working solutions to be implemented on a daily basis. It is anticipated that these pressures will alleviate with the commencement of staff throughout September and October and the incentives agreed by the Executive team, and Senior Nurses continue to work with colleagues in recruitment to expedite the recruitment process where safe and practicable and look for mechanisms to improve retention of staff.

6.0 RECOMMENDATIONS

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

Allison Edis; Deputy Director of Nursing

Appendix
SAFE STAFFING EXCEPTION REPORT – July 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			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?
Acute Stroke Unit	83.13%	97.72%	2.96	106.94%	99.06%	4.62	2.25%	10.07%	/	0	0	0/3	0/0	0/3	100%	100%
Astley	99.28%	92.74%	2.68	98.68%	100.64%	4.11	1.97%	21.79%	/	1	2	0/0	0/0	0/1	100%	100%
Coronary Care Unit	100.40%	96.51%	8.08	121.10%	-	3.07	5.74%	6.44%	/	3	0	0/4	0/0	0/0	100%	100%
Ince	82.41%	59.54%	2.34	80.97%	96.91%	3.20	5.43%	17.98%	/	1	1	0/3	0/0	0/0	100%	95%
Pemberton	77.95%	99.26%	4.48	126.33%	121.17%	5.13	2.65%	9.38%	/	2	0	0/3	1/0	0/2	ND%	ND%
Shevington	109.90%	79.23%	3.02	109.80%	115.35%	3.99	1.55%	16.09%	/	0	0	0/7	0/0	0/1	85%	92%
Standish	84.95%	95.70%	4.58	104.52%	106.25%	8.18	5.58%	18.68%	/	1	0	0/2	0/0	0/2	ND%	ND%
Taylor Unit	107.80%	97.78%	4.81	146.47%	103.49%	5.19	0.14%	13.05%	/	0	0	0/0	0/0	0/0	100%	100%
Winstanley	66.13%	66.08%	3.34	95.87%	98.25%	4.65	10.61%	26.78%	/	0	1	0/1	0/0	0/0	100%	100%

Standish Ward; no data was provided for patient feedback within July 2017.

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	83.1%	95.2%		75.3%	130.9%		3.02%	0.00%		2	0	0 / 3		0 / 0		
A&E Paeds	74.5%	99.1%					0.00%	36.65%		0	0	0 / 0		0 / 0		
CDW	93.8%	94.4%		51.0%	94.8%		0.00%	24.98%	/	0	0	0 / 1	0 / 0	0 / 0	100%	100%
Lowton	88.3%	88.0%		89.8%	88.5%		9.15%	14.66%	/	4	0	0 / 1	0 / 0	0 / 1	89%	100%
MAU	86.3%	91.2%		104.3%	101.7%		2.54%	21.64%	/	2	0	0 / 3	0 / 0	0 / 5	100%	100%

Division of Surgery

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?
ICU/HDU	46.35%	86.66%	25.02	62.43%	-	1.94	2.92%	-1.16%	/	0	1	0/0	2/0	0/2	0%	0%
Orrell	77.83%	64.11%	4.11	90.75%	97.78%	4.07	4.46%	15.03%	/	1	1	0/1	0/0	0/0	100%	88%
Langtree	76.76%	88.10%	2.37	130.94%	110.38%	3.01	4.44%	1.07%	/	1	1	0/4	0/0	0/2	100%	100%
Swinley	98.87%	92.54%	2.92	105.91%	106.92%	2.83	4.62%	0.21%	/	0	0	0/1	0/0	0/1	100%	100%
Maternity Unit	98.91%	91.11%	9.59	78.53%	86.00%	3.05	7.71%	19.05%	/	1	0	0/0	0/0	0/1	100%	100%
Neonatal Unit	99.19%	96.03%	9.86	128.23%	-	1.73	0.20%	-5.75%	/	0	0	0/0	0/0	0/1	ND%	ND%
Rainbow	84.14%	75.59%	9.23	100.24%	53.36%	3.31	3.97%	13.82%	/	0	0	0/0	0/0	0/1	80%	90%

Rainbow ward: During the month of July 2017 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

	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)
Ward	Day shift (%)	Night shift (%)	CHPPD	Day shift (%)	Night shift (%)	CHPPD										
Aspull	81.68%	75.31%	3.00	107.19%	117.79%	3.95	8.87%	11.53%	/	16	0	0 / 1	2 / 0	0 / 1	100%	75%
Ward A	104.17%	91.22%	2.85	108.59%	68.95%	3.91	3.04%	4.08%	/	0	0	0 / 0	0 / 0	/	100%	100%
Ward B	121.23%	128.70%	3.74	119.89%	100.95%	3.33	1.93%	-3.76%	/	8	0	0 / 0	0 / 0	/	100%	100%
JCW	0.00%	0.00%	0.00	0.00%	0.00%	0.00	0.00%	0.00%	/		0	/	/	/		

SAFE STAFFING EXCEPTION REPORT – August 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			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?
	Day shift (%)	Night shift (%)	CHPPD	Day shift (%)	Night shift (%)	CHPPD										
Acute Stroke Unit	79.23%	101.55%	2.94	101.13%	102.89%	4.61	3.60%	15.32%	/	1	1	0/5	0/0	0/1	100%	100%
Astley	105.86%	100.00%	2.82	109.52%	90.83%	4.12	4.59%	19.60%	/	0	0	0/2	0/0	0/0	100%	100%
Coronary Care Unit	99.33%	96.73%	7.87	86.69%	-	2.31	9.09%	6.10%	/	8	0	0/2	0/0	0/3	100%	100%
Ince	88.49%	85.64%	2.47	71.05%	98.88%	2.93	9.88%	18.36%	/	2	0	0/3	1/0	0/0	100%	100%
Pemberton	57.26%	104.77%	3.94	147.92%	147.18%	6.10	6.08%	13.07%	/	17	0	0/2	0/0	0/0	100%	100%
Shevington	105.57%	71.68%	2.82	98.08%	118.25%	3.73	0.43%	16.09%	/	0	1	0/4	0/0	0/0	83%	92%
Standish	71.20%	92.81%	2.10	97.92%	99.46%	3.90	9.57%	21.41%	/	2	0	1/7	1/0	1/0	86%	100%
Taylor Unit	103.49%	96.98%	5.13	130.80%	112.90%	5.22	2.69%	13.05%	/	0	0	0/3	0/0	0/0	100%	100%
Winstanley	72.46%	63.49%	2.16	109.77%	78.58%	3.87	10.06%	28.18%	/	1	0	0/3	0/0	0/0	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	84.0%	98.7%		96.3%	120.4%		0.76%	0.00%		0	0	0 / 0	0 / 2			
A&E Paeds	71.0%	89.2%					10.37%	36.65%		0	0	0 / 0	0 / 0			
CDW	94.3%	99.9%		59.2%	96.2%		0.00%	24.98%	/	0	0	0 / 1	0 / 1	80%	80%	
Lowton	70.1%	89.7%		121.3%	112.0%		9.20%	12.41%	/	4	0	0 / 8	0 / 4	89%	89%	
MAU	74.2%	78.6%		102.4%	111.2%		0.64%	23.16%	/	15	0	0 / 3	0 / 2	100%	100%	

Division of Surgery

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?
ICU/HDU	42.05%	81.39%	31.31	93.28%	-	3.92	4.22%	0.00%	/	0	0	0 / 1	0 / 0	0 / 0	100%	100%
Orrell	89.12%	66.62%	4.54	100.01%	109.68%	4.54	3.17%	15.12%	/	0	0	0 / 0	0 / 0	0 / 0	100%	100%
Langtree	75.67%	77.22%	2.39	103.67%	107.46%	2.75	8.35%	1.07%	/	0	0	0 / 2	0 / 0	0 / 1	100%	100%
Swinley	95.47%	99.80%	2.86	102.42%	99.87%	2.60	9.89%	0.32%	/	0	2	0 / 2	0 / 0	0 / 0	100%	90%
Maternity Unit	98.96%	96.75%	12.53	73.80%	91.15%	3.82	3.49%	22.63%	/	2	0	0 / 0	0 / 0	0 / 2	80%	0%
Neonatal Unit	97.33%	98.42%	8.44	109.68%	-	1.64	2.98%	0.00%	/	0	0	0 / 0	0 / 0	0 / 0	100%	100%
Rainbow	92.70%	77.26%	9.64	93.41%	59.61%	3.23	3.41%	10.21%	/	0	0	0 / 0	0 / 0	0 / 2	100%	100%

Rainbow ward: During the month of July 2017 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

	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?
Aspull	75.04%	73.01%	2.64	95.90%	116.13%	3.47	6.26%	10.20%	/	13	1	0/0	0/0	0/0	100%	100%
Ward A	101.90%	91.40%	4.01	96.01%	89.00%	3.76	1.83%	7.09%	/	3	0	0/0	0/0	0/0	100%	100%
Ward B	110.98%	108.00%	3.41	107.69%	95.69%	3.63	4.32%	0.00%	/	2	0	0/0	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		