The Publication of Nurse staffing Data – June 2017

Introduction
In accordance with National Quality Board requirements to provide assurance on safe staffing the Trust has published monthly reports detailing planned and actual staffing on a shift by shift basis for the previous month and presented monthly to the Board since May 2014. The data is reported externally via Unify and is also published on the Trust website and to the relevant hospital webpage on NHS choices.

Planned and actual staffing
% fill of planned and actual hours is required to be identified by registered nurse and care staff, by day and by night, and by individual hospital site. Reported data is derived from the Healthroster system and fill rates in June are over 105% at QEQM, over 103% at WHH and over 90% at K&C, shown in Figure 1.

Figure 1. % hours filled planned against actual by site during June-17

Hospital site	% Hours filled - planned against actual June-17					Care Hours Per Patient Day (CHPPD) June-17			
	DAY		NIGHT			Cumulative count over the month of patients at 23:59 each day	Registered midwives/ nurses	Care Staff	Overall
	Average fill rate - registered nurses/ midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/ midwives (%)	Average fill rate - care staff (%)	Overall % hours filled				
Kent & Canterbury	77.2%	102.9%	88.4%	125.7%	**90.5%**	5846	5.0	3.3	**8.3**
Queen Elizabeth the Queen Mother	91.3%	120.4%	103.4%	132.8%	**105.9%**	9156	5.4	3.9	**9.3**
William Harvey	100.7%	106.1%	105.7%	106.9%	**103.4%**	10241	6.7	3.4	**10.1**

It should be possible to fill 100% of hours if:
- There are no vacant posts;
- All vacant planned shifts are covered by overtime or NHS-P shifts;
- Annual leave, sickness and study leave is managed within an overall average of 22%.

Figure 2 shows the improvement in fill rates over time which has been supported by work to ensure that roster templates closely reflect the budgeted establishments and include shifts necessary for additional beds. Fill rate has fallen at K&C due to staff moves to other sites. All agency hours worked have been included in this report since Apr-16.

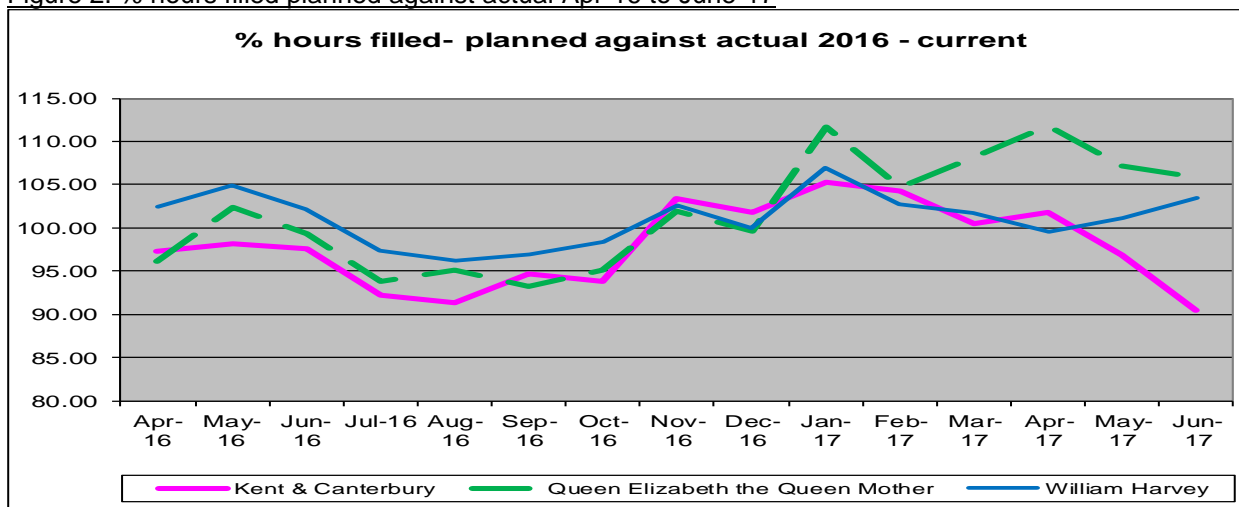Figure 2. % hours filled planned against actual Apr-16 to June-17

Figure 3 shows total monthly hours actual against planned and % fill during June by ward. Work has been undertaken to explore the reasons for the gap, the impact and the actions being taken to address the gap. Some wards achieve higher than 100% due to additional shifts worked through NHS-P during times of increased demand and contingency bed use.

No national RAG rating tolerances have been determined, but wards achieving under 80% have been RAG rated Red, in Figure 3. The main root cause of <80% fill rates are provided and detail on annual leave, sickness and parenting rates by ward. The RAG rating for these elements are provided below. Detail on key quality indicators are included by ward within the heat map report.

Annual Leave	<11.0%
	>17.0%
Sickness	>2.5%
Parenting	>3.0%

Figure 3. Total monthly hours actual against planned and % fill and CHPPD by ward during June-17

	DAY		NIGHT		Unavailability %						Care Hours Per Patient Day (CHPPD)			
					A/L		Sickness		Parenting					
UCLTC	Average fill rate - registered nurses/ midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/ midwives (%)	Average fill rate - care staff (%)	Registered	Unregistered	Registered	Unregistered	Registered	Unregistered	Cumulative count over the month of patients at 23:59 each day	Registered midwives / nurses	Care Staff	Overall
WH Cambridge J2 Ward	122%	111%	102%	108%	12.80%	16.10%	4.40%	8.20%	0.00%	0.00%	967	5.0	2.9	7.9
WH Cambridge K Ward	92%	172%	92%	106%	8.50%	10.40%	7.20%	12.50%	0.00%	0.00%	654	4.0	3.3	7.4
WH Cambridge M2 Ward	105%	105%	109%	116%	13.60%	12.80%	5.60%	11.60%	0.00%	5.30%	547	3.8	2.5	6.3
KC Taylor CCU	50%	N/A	72%	N/A	8.80%	0%	0.50%	0.00%	0.00%	0.00%	104	8.6	0.0	8.6
QE Coronary Care Unit	89%	116%	102%	99%	6.60%	6.50%	3.00%	9.30%	0.00%	0.00%	310	6.0	3.2	9.2
WH Coronary Care Unit	71%	56%	67%	48%	8.90%	20.00%	2.90%	0.00%	0.00%	0.00%	125	14.9	2.4	17.3
QE Minster	78%	106%	97%	98%	16.60%	8.10%	0.50%	3.10%	0.00%	0.00%	664	2.7	3.1	5.8
WH Oxford Ward	111%	108%	103%	113%	14.30%	7.70%	5.50%	0.90%	1.10%	0.00%	386	5.0	2.9	8.0
QE Sandwich Bay Ward	128%	190%	158%	246%	10.40%	16.00%	5.90%	10.00%	9.10%	0.00%	525	4.9	4.6	9.5
QE St Margarets Ward	113%	185%	131%	225%	9.10%	8.70%	8.20%	7.50%	0.00%	0.00%	687	3.2	5.3	8.6
QE Deal Ward	107%	137%	140%	164%	7.60%	10.20%	0.50%	0.00%	22.70%	0.00%	629	4.3	4.5	8.8
KC Harvey Neurorehab	68%	118%	98%	203%	9.70%	13.40%	2.40%	5.20%	0.00%	0.00%	546	2.6	3.8	6.4
KC Invicta Ward	76%	96%	97%	166%	6.80%	8.30%	8.20%	13.60%	0.00%	0.00%	541	3.1	3.2	6.4
WH Cambridge L Rehab Ward	94%	111%	115%	164%	8.70%	8.50%	8.90%	10.20%	0.00%	0.00%	741	3.3	3.6	6.9
KC Treble Ward	63%	118%	97%	178%	3.00%	11.40%	7.40%	1.10%	5.70%	0.00%	498	3.1	3.9	7.0
KC Mount McMaster	91%	99%	95%	181%	11.90%	17.70%	5.20%	7.60%	0.00%	2.10%	592	3.1	2.9	6.0
QE Fordwich	77%	194%	77%	222%	13.80%	10.90%	5.20%	4.00%	3.00%	3.10%	535	5.0	5.9	11.0
KC Kingston	67%	137%	99%	170%	10.40%	17%	14.70%	2.30%	0.00%	0.00%	641	3.2	3.9	7.1
WH Richard Stevens Stroke Unit	85%	162%	103%	129%	9.00%	13.20%	1.90%	6.30%	5.00%	0.00%	626	4.5	4.0	8.5
KC Harbledown Ward	75%	124%	98%	118%	7.60%	15.40%	5.40%	4.00%	0.00%	0.00%	619	3.1	3.5	6.6
QE St Augustine Contingency Ward	95%	149%	100%	186%	11%	11%	1.00%	1.70%	0.00%	4.40%	807	2.5	3.4	5.9
QE CDU	103%	148%	153%	206%	8.60%	8.00%	1.20%	3.70%	0.00%	4.70%	573	8.0	5.6	13.5
WH CDU/Bethersden	100%	104%	110%	103%	10.70%	11.60%	4.20%	5.90%	0.60%	0.00%	582	10.4	5.2	15.6
KC ECC	60%	77%	64%	68%	6.90%	15.70%	7.40%	5.40%	0.60%	0.00%	116	29.1	11.7	40.7
Surgical Services														
WH Rotary Suite	86%	125%	100%	100%	12.50%	10.60%	4.10%	0.40%	0.00%	0.30%	391	5.1	3.7	8.9
QE Cheerful Sparrow Female	81%	101%	91%	90%	9.70%	9%	10.40%	12.90%	0.00%	0.00%	621	3.4	3.0	6.3
KC Clarke Ward	87%	94%	83%	85%	20.70%	13.30%	3.60%	13.20%	0.00%	0.00%	834	3.2	2.5	5.7
QE Cheerful Sparrow Male	73%	92%	93%	97%	22.30%	11.90%	2.30%	13.50%	5.50%	0.00%	564	3.7	3.3	6.9
KC Kent Ward	91%	108%	99%	88%	18.10%	13.30%	2.90%	2.60%	0.40%	7.80%	424	5.1	2.9	8.0
WH Kings B	91%	99%	107%	110%	9.30%	10.60%	1.30%	3.20%	0.00%	7.40%	691	3.0	2.6	5.6
WH Kings A2	97%	114%	102%	194%	14.20%	11.90%	8.80%	4.90%	0.00%	0.00%	515	3.5	3.4	6.8
WH Kings C	87%	135%	100%	99%	20.40%	10.40%	0.50%	10.40%	5.00%	0.00%	678	2.9	3.2	6.1
WH Kings C2	80%	96%	95%	95%	17.10%	14.30%	3.10%	2.60%	8.60%	0.00%	544	3.6	3.1	6.7
WH Kings D	98%	105%	97%	140%	17.20%	13.00%	2.80%	2.40%	0.00%	0.00%	612	6.3	5.7	12.1
QE Quex Ward	84%	164%	99%	93%	15.90%	8.80%	9.20%	12.40%	0.00%	4.10%	460	4.0	2.0	5.9
QE Trauma Floor Bishopstone	79%	122%	92%	126%	13.00%	11.70%	1.80%	6.20%	0.00%	0.00%	548	3.2	4.6	7.8
QE Trauma Floor Seabathing	74%	109%	96%	92%	19.90%	14.40%	14.30%	5.80%	0.00%	0.00%	646	2.8	2.9	5.7
WH Critical Care	135%	132%	133%	95%	10.80%	5.80%	1.90%	8.60%	6.20%	0.00%	325	27.0	4.2	31.2
KC Critical Care	85%	42%	92%	N/A	8.40%	18.10%	3.90%	21.30%	7.00%	0.00%	174	24.1	0.6	24.8
QE Critical Care	85%	99%	99%	N/A	11.90%	8.00%	4.40%	0.00%	2.00%	0.00%	163	31.1	2.3	33.4
Specialist Services														
KC Marlowe Ward	96%	94%	91%	105%	14.30%	8.60%	2.60%	3.00%	0.00%	5.00%	595	6.7	3.6	10.3
WH NICU	96%	91%	104%	43%	4.20%	8.60%	1.70%	0.00%	0.60%	0.00%	588	12.0	1.6	13.6
WH Padua Ward	94%	81%	105%	50%	12.70%	7.30%	1.20%	14.50%	6.50%	5.50%	464	8.5	2.3	10.8
QE Rainbow Ward	91%	100%	104%	55%	11.40%	9.00%	2.80%	1.00%	3.10%	0.00%	303	9.7	3.7	13.4
QE Birchington Ward	82%	108%	102%	93%	7.70%	9.20%	2.20%	10.40%	0.00%	0.00%	453	4.0	2.2	6.3
WH Kennington Ward	87%	62%	97%	N/A	13.70%	20.40%	0.00%	1.80%	0.00%	0.00%	241	6.4	2.6	9.0
KC Brabourne Haematology Ward	77%	56%	100%	N/A	12.00%	41.10%	4.20%	0.00%	0.00%	0.00%	162	10.3	1.4	11.7
WH Maternity Labour and Folkestone	105%	34%	73%	36%	10.10%	19.30%	11.00%	16.40%	3.20%	4.50%	489	11.8	2.3	14.1
QE Maternity Wards	111%	63%	85%	71%	9.20%	21.50%	4.90%	7.80%	5.60%	4.80%	370	16.1	6.2	22.2
QE MLU	79%	57%	98%	70%	4.50%	5.30%	0.20%	11.50%	4.10%	10.00%	43	29.0	10.5	39.5
QE SCBU	90%	83%	103%	N/A	5.00%	12.20%	1.90%	0.00%	3.30%	0.00%	255	9.0	2.3	11.4

Low fill rates are seen:
- In registered nurse shifts on Minster, Harvey and Bishopstone wards due to vacancies, on Invicta, Kingston, Harbeldown and Seabathing due to high sickness and Treble, Fordwich and Cheerful Sparrows Male due to maternity leave. Care Hours Per Patient Day was maintained above 6.0 on all these wards using temporary staff except on Minster (5.8) and Seabathing (5.7);
- Other wards (Critical care units, coronary care, Padua, Kennington, NICU and Maternity areas) show low fill rates for support worker shifts demonstrating the impact of sickness and parenting leave on % fill where small WTE exist within the ward establishment.
- The urgent care centre and Taylor ward at K&C are showing erroneous underfill due to staff moves on 19th June.
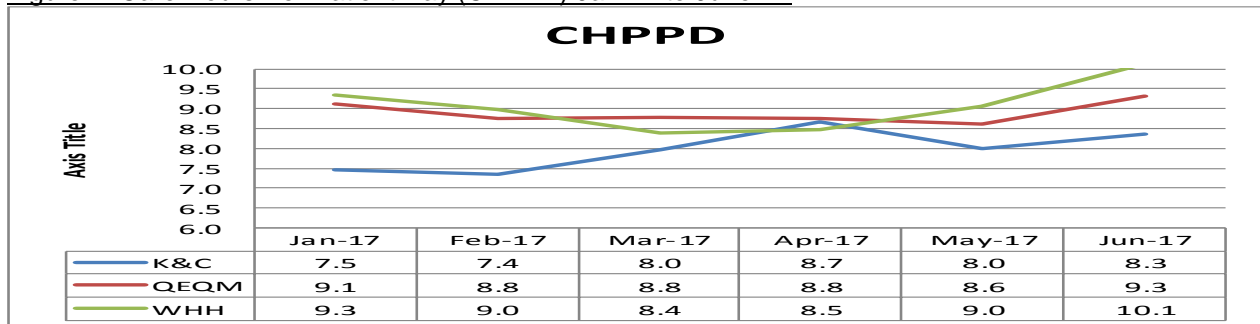
Actions in place include:
- Matrons and non ward-based staff often cover the shifts that are short of staff. This is not reflected in the filled hours as it is not captured on the E-Roster currently;
- The roll out of Safecare has commenced at WHH which will allow the live capture of patient acuity dependency and improved matching of staffing to demand;
- Skill-mix changes are made, such as using a healthcare assistant if a registered nurse is not available. This explains why some fill rates are high for 'Care Staff';
- Recruitment campaigns continue both locally and overseas;
- Retention is being addressed with wards and teams with support from the HR Business Partners.

Care Hours Per Patient Day (CHPPD)
CHPPD have also been reported since May-16, to relate actual staffing to patient numbers which are shown in figure 1 and 4 by site, and in figure 3 by ward. CHPPD include registered nurse and care staff hours against the cumulative total of patients on the ward at 23.59 each day during the month. The range is from around 5 hours of care per patient on medical wards to over 25 within critical care areas where one to one care is required. The trend in figure 4 shows some consistency by site and slightly higher CHPPD at QEQM and WHH reflecting the specialty of provision on those sites. CHPPD has been included in the Quality Heatmap, by ward, since Feb-17.

Figure 4. Care Hours Per Patient Day (CHPPD) Jan-17 to June-17

CHPPD	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17
K&C	7.5	7.4	8.0	8.7	8.0	8.3
QEQM	9.1	8.8	8.8	8.8	8.6	9.3
WHH	9.3	9.0	8.4	8.5	9.0	10.1

Comparative data within the Model Hospital dashboard for Jan-17 shows EKHUFT average of 8.8 against a peer median (based on both spend and clinical output) of 8.2 and a national median of 7.6 (all Acute Trusts, Mental Health Trusts and Community Trusts). Reasons for the variance against the peer value may be linked to the high numbers of patients requiring Specialling within our wards. The EKHUFT overall average CHPPD in June-17 is 9.3 (8.4 in May).

CHPPD has increase slightly against a slight decrease in activity and use of contingency beds shown in figure 5 and this is reflected in the continued rate of over 100% seen this month in %fill against budgeted establishments.

Figure 5. Cumulative count over the month of patients at 23.59 each day Jan-17 to June-17