

The Publication of Nurse staffing Data - April 2019

In accordance with National Quality Board and NHSI 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 as part of the Integrated Performance Report. The data is reported externally via Unify2 and is also published on a dedicated area of the Trust website and to the relevant hospital profile on NHS Choices. Reported data is derived from the Healthroster system which shows an average overall fill rate of 102.9% compared to 99.7% in Mar-19.

Care Hours per patient day (CHPPD) relates actual staffing to patient numbers and includes registered staff and care staff hours against the cumulative total of patients on the ward at 23.59hrs each day during the month. CHPPD is similar to Mar-19 and within the control limits. The range is from around 5.0 hours of care per patient on medical wards to over 25 within critical care areas where one to one care is required.

Figure 1 shows % hours filled against planned by ward. Some wards achieve higher than 100% due to additional shifts worked through NHS-P during times of increased demand and contingency bed use. All agency hours worked have been included in this report along with the majority of all Managed Service agency shifts and retrospective shifts.

Figure 1. % hours filled against planned and CHPPD by ward during Apr-19

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	DAY NIGHT			Care Hours Per Patient Day (CHPPD)			Unavailability % A/L Sickness Parenting						
Cancer	Average fill rate - registered nurses/ midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/ midwives (%)	Average fill rate - care staff (%)	Registered midwives/ nurses	Care Staff	Overall	Registered	Unregistered	Registered	Unregistered	Registered	Unregistered
KC Brabourne Haematology Ward	86%	64%	100%	N/A	9.98	1.58	11.56	17.90%	14.00%	0.60%	23.30%	8.10%	0.00%
GSM WH Cambridge J2 Ward	115%	201%	197%	128%	5.52	3.14	8.65	12.80%	7.20%	8.70%	2.90%	0.00%	0.00%
WH Cambridge I2 Ward WH Cambridge K Ward	88%	104%	98%	97%	3.46	2.96	6.42	10.60%	7.50%	0.40%	9.50%	0.00%	0.00%
Cambridge M1	107%	99%	92%	103%	3.71	2.35	6.06	14.10%	20.10%	0.00%	6.30%	0.04%	0.00%
WH Cambridge M2 Ward	107%	99%	92%	103%	3.53	2.24	5.77	14.10%	20.10%	0.00%	6.30%	0.04%	0.00%
QE Coronary Care Unit	83%	96%	100%	97%	4.48	2.38	6.86	15.60%	15.70%	16.30%	1.70%	0.00%	0.00%
WH Oxford Ward	97%	94%	104%	155%	4.83	3.16	7.99	11.10%	16.00%	6.60%	3.20%	12.10%	0.00%
QE Sandwich Bay Ward QE St Margarets Ward	108% 77%	184% 147%	120% 93%	231% 154%	3.55 2.09	3.62 3.75	7.16 5.85	7.30%	16.40% 7.30%	1.20% 7.60%	0.00%	0.00%	0.00% 5.10%
QE Deal Ward	86%	175%	102%	163%	2.34	3.42	5.76	17.50%	7.00%	2.10%	7.90%	9.90%	8.60%
KC Harvey Neurorehab	75%	114%	78%	140%	2.39	2.96	5.35	16.60%	15.90%	13.50%	5.70%	8.80%	0.00%
KC Invicta Ward	74%	174%	97%	141%	2.24	3.07	5.30	9.40%	10.90%	12.50%	22.90%	8.00%	0.00%
WH Cambridge L Rehab Ward	117%	106%	189%	109%	4.24	3.14	7.38	13.60%	13.10%	3.70%	9.50%	0.00%	0.00%
KC Treble Ward	57%	117%	88%	125%	2.59	4.18	6.77	21.30%	14.50%	3.70%	2.70%	0.00%	0.00%
KC Mount McMaster QE Fordwich	53% 85%	226% 110%	106% 98%	115% 162%	1.90 3.41	2.70 3.71	4.60 7.12	9.60%	12.50% 14.70%	8.50% 7.70%	9.50% 14.60%	11.00% 0.00%	0.00%
KC Kingston	40%	140%	95%	111%	1.72	3.43	5.14	14.30%	13.10%	10.40%	3.20%	0.00%	0.00%
WH Richard Stevens Stroke Unit	80%	121%	95%	181%	3.66	4.24	7.90	11.30%	19.00%	4.90%	5.90%	6.10%	1.50%
KC Harbledown Ward	63%	132%	97%	139%	2.13	3.04	5.17	11.90%	14.20%	0.60%	0.00%	0.00%	0.00%
QE St Augustine Ward	49%	224%	100%	150%	1.74	3.64	5.39	21.80%	7.40%	11.40%	0.30%	3.00%	0.00%
WH Bartholomew	101%	117%	97%	100%	8.52	3.47	11.99	13.90%	7.50%	1.40%	0.50%	5.20%	0.00%
QE Quex Ward	67%	133%	78%	162%	2.20	3.21	5.41	9.10%	16.70%	1.30%	5.90% 9.60%	0.00%	0.00%
WH Kings C2 KC Marlowe Ward	94% 109%	108% 95%	85% 91%	73% 110%	3.37 4.11	2.28 2.29	5.66 6.39	10.50% 15.70%	4.50% 11.10%	0.90%	19.20%	33.90% 6.20%	8.60% 0.00%
No manone train	10370	3370	51/0	11070		2.23	0.55	15.7070	11.10%	3.1070	13.2070	0.2070	0.0070
S&A											_		
QE Cheerful Sparrow Female	109%	117%	98%	152%	2.59	3.67	6.26	18.00%	14.40%	0.00%	3.60%	0.00%	8.90%
KC Clarke Ward	79% 123%	116% 111%	103% 105%	119% 170%	2.89 2.43	3.07	5.96 6.37	13.60%	13.10% 10.90%	3.40% 2.30%	15.70% 17.90%	8.60% 0.00%	0.00%
QE Cheerful Sparrow Male KC Kent Ward	84%	148%	105%	99%	3.76	3.93 3.01	6.77	13.10%	11.40%	3.30%	11.90%	0.00%	8.50%
WH Kings B	104%	117%	99%	128%	2.98	3.15	6.12	17.10%	11.50%	0.50%	4.10%	0.00%	0.00%
WH Kings A2	97%	117%	98%	179%	3.22	3.09	6.31	20.10%	13.70%	0.70%	4.60%	8.00%	10.80%
WH Kings C	104%	121%	100%	98%	2.80	2.93	5.73	19.50%	18.20%	0.00%	0.00%	0.00%	0.00%
WH Kings D	97%	137%	82%	143%	3.16	3.38	6.54	16.70%	11.50%	5.30%	5.40%	0.40%	0.20%
QE Bishopstone - split KC St Lawrence Ward	66% 50%	65% 81%	94% 93%	90% 53%	3.71 5.48	3.80 4.63	7.51 10.11	13.30% 16.60%	12.50% 22.20%	0.80% 4.40%	3.00% 9.20%	7.00% 0.80%	0.00%
QE Seabathing	84%	124%	130%	112%	2.38	3.22	5.60	7.30%	13.10%	1.30%	10.40%	0.00%	4.10%
WH Critical Care	102%	225%	93%	N/A	27.26	2.11	29.37	11.00%	6.50%	3.70%	4.50%	1.60%	7.00%
KC Critical Care	83%	N/A	81%	N/A	21.00	0.67	21.67	10.20%	35.00%	3.10%	0.00%	0.00%	0.00%
QE Critical Care	88%	100%	102%	750%	21.03	2.56	23.59	8.10%	10.10%	5.30%	5.40%	7.20%	0.00%
SHN													
WH Rotary Suite	72%	116%	95%	121%	3.43	3.54	6.97	18.20%	11.50%	17.20%	8.10%	9.30%	7.50%
KC MIU	96%	104%	100%	N/A	1			3.30%	31.60%	21.00%	0.00%	0.00%	0.00%
WHH ACUTE MEDICAL UNIT B	72%	104%	89%	105%	6.32	4.41	10.73	14.00%	7.90%	11.40%	18.00%	2.40%	5.10%
QE Acute med unit	108%	129%	125%	122%	10.70	7.97	18.67	15.80%	20.20%	2.70%	22.50%	0.00%	4.10%
W&C	81%	83%	86%	3%	12.67	1.42	14.00	14 200/	20.909/	7.40%	0.000/	1.60%	0.00%
WH NICU WH Padua Ward	81%	83% 65%	106%	65%	7.04	0.93	14.09 7.97	14.20%	20.80%	5.40%	8.80% 0.60%	4.50%	11.50%
QE Rainbow Ward	100%	113%	103%	N/A	7.04	1.40	8.60	11.70%	10.00%	2.60%	19.40%	4.00%	7.20%
QE Birchington Ward	101%	116%	100%	193%	3.56	2.44	5.99	12.30%	13.10%	3.10%	1.80%	0.00%	4.70%
WH Kennington Ward	100%	96%	97%	N/A	4.29	2.14	6.44	12.40%	11.00%	2.40%	17.00%	5.60%	0.00%
WH Maternity Labour and Folkestone	102%	74%	99%	87%	29.62	8.93	38.55	13.90%	5.10%	7.90%	22.00%	1.20%	4.70%
MLU WHH	96%	93%	99%	97%	50.37	23.97	74.35	7.80%	12.00% 31.50%	25.70% 5.40%	25.40%	0.00%	5.70%
QE Maternity Wards QE MLU	98% 97%	80% 96%	97% 96%	53% 98%	16.27 68.90	3.89 34.09	20.16 102.98	13.90% 7.80%	31.50% 9.40%	5.40% 8.60%	9.20%	2.50% 0.00%	0.00%
QE SCBU	108%	92%	101%	550%	8.83	1.80	10.63	13.30%	3.30%	8.70%	0.00%	5.00%	0.00%
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Lower fill rates are largely linked to vacancies and sickness, as well as parenting leave. Annual leave spread is monitored to ensure consistent 11-17% rates and RAG rating for unavailability is provided below. Fill to vacant shifts is requested via the Healthroster interface with NHSP but poor shift fill by bank and agency in some wards requires mitigating actions to ensure quality and patient safety. 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%				

Low registered nurse day shift fill rates are seen on several wards (Seven wards at K&C, four wards at QEQM and three wards at WHH) which reflects high vacancy levels. CHPPD was maintained above 5.0 on all these wards, except MountMcMaster (4.5) and risks are currently mitigated through staff moves, increased use of support workers, temporary staff and Matron support:

- The low RN fill rate seen on St Lawrence (50%) is planned due to the ward not currently running at full capacity;
- The low RN fill rate seen on Kingston (40%) is planned due to the funded establishment exceeding requirement due to temporarily being a stroke ward rather than a hyper acute stroke unit.
- Analysis of our quality metrics and heatmap for April does not show any clear correlation between staffing levels and harm for the wards showing low fill rates with the exception of:
 - Kingston ward had only 86% patients recommending the service to friends and family;
 - St Augustines ward reported less than 100% harm free care (96.7%) through the safety thermometer.
- The key risk areas are:
 - At WHH three wards (Cambridge J & M1 and Kings C2) are re-established or reconfigured medical wards. This has led to the creation of around 40 band 5 vacancies. Whilst recruiting to the funded posts, a managed service is providing agency staff to ensure patient safety. Substantive ward managers are in place and Matrons ensure staff swaps, with other wards, to ensure that permanent staff are on each shift. An additional Matron has been recruited to support the additional wards and is prioritising recruitment to the managed service areas.
 - At K&C Matrons are focused on improving succession planning and have recruited two
 new matrons, three ward managers and several band 6 sisters two months ago. Ward
 staffing profiles are flexed according to patient need and over-recruitment to support worker
 posts is undertaken to ensure patient safety.
 - At QEQM Quex, Sandwich Bay and St Margarets have the highest vacancies. These are being managed with some over-recruitment of support workers due to reduced availability of registered nurses.

Actions in place include:

- The use of Safecare, which allows the live capture of patient acuity and dependency and improved
 matching of staffing to demand with staff moves to areas of highest need, although embedded, has
 further potential to be better utilised to optimise safe staffing. A masterclass is planned with senior
 nurses to support this;
- 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';
- The annual staffing review is underway and will be reported in July;
- Work continues to address current band 5 vacancy levels in Urgent and Emergency Care (18wte), General and Specialist Medicine (98wte) and Surgery and Anaesthetics (58wte). The vacancy level has increased in medicine due to the recent approval of several business cases to support wards currently staffed with a managed service.
- The Trust has a proactive nursing workforce recruitment programme with over 120 band 5 nurses recruited since April-18. Two dedicated Matrons are currently focusing solely on recruitment and retention;
- Senior matrons are reporting challenges with high acuity and high dependency being mixed on the same wards and have suggested some ward reconfiguration to support lower skill-mix in areas of high dependency (to focus on planning for discharge) to enable a richer skill mix focused on acutely unwell patients;
- There is a daily focus via safety huddles of the paediatric staffing in the wards and ED. The actions and mitigations are reported by noon each day to the Chief Nurse, Medical Director and Chief Operating Officer:
- The twice daily site reports make staffing risks and mitigations visible to managers, leaders and the Executive team.