The Publication of Nurse staffing Data – July 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 103.1% compared to 103.4% in June-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 June-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.

						valu uuli							
	DA	1	NIGI	ίΤ	Care H	ours Per Patient D	ay (CHPPD)	Unavailab A/L	ility %	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	81%	79%	98%	N/A	11.67	2.29	13.97	14.00%	8.50%	5.40%	26.50%	8.20%	0.00%
GSM													
WH Cambridge J2 Ward WH Cambridge K Ward	109% 96%	105% 135%	147% 98%	110% 120%	4.49	3.49 3.75	7.98 7.35	15.30% 15.70%	10.90% 14.20%	7.00%	9.80% 1.20%	0.00%	0.00%
Cambridge M1	96%	135%	98%	120%	3.60	2.62	6.38	15.70%	14.20%	0.50%	2.40%	0.07%	0.00%
WH Cambridge M2 Ward	101%	108%	106%	122%	3.62	2.52	6.14	16.50%	18.90%	0.50%	2.40%	0.05%	0.00%
QE Coronary Care Unit	81%	100%	98%	103%	4.46	2.80	7.26	17.30%	15.30%	3.00%	3.40%	0.00%	0.00%
WH Oxford Ward	96%	103%	100%	183%	4.56	3.50	8.06	14.50%	13.90%	11.70%	9.80%	7.20%	0.00%
QE Sandwich Bay Ward	86%	201%	108%	227%	2.99	4.02	7.01	18.60%	18.30%	3.20%	2.70%	7.50%	0.00%
QE St Margarets Ward	97%	127%	100%	146%	2.41	3.53	5.94	14.00%	12.50%	0.00%	27.20%	0.00%	6.00%
QE Deal Ward	90%	131%	104%	153%	2.41	2.93	5.34	8.10%	18.20%	5.10%	2.20%	15.50%	11.90%
KC Harvey Neurorehab	77%	96%	94%	126%	2.61	3.15	5.76	15.30%	15.80%	3.40%	10.50%	9.10%	0.00%
KC Invicta Ward	73%	186%	100%	145%	2.58	3.74	6.32	19.60%	13.40%	10.10%	24.60%	0.00%	0.30%
WH Cambridge L Rehab Ward	99%	131%	124%	167%	3.09	4.37	7.46	14.10%	11.90%	2.80%	2.50%	0.00%	0.00%
KC Treble Ward	59%	112%	92%	105%	2.94	4.20	7.14	23.20%	13.80%	16.00%	3.70%	0.00%	0.00%
KC Mount McMaster	69%	214% 152%	107%	125% 170%	2.65	3.61	6.26	14.10%	18.60% 15.90%	4.70%	0.50%	0.10%	5.40% 0.00%
QE Fordwich KC Kingston	69% 47%	152%	92% 102%	170%	3.15 1.95	4.78	7.93 5.95	20.20% 14.20%	9.50%	5.70% 1.80%	1.00% 3.30%	0.00%	0.00%
WH Richard Stevens Stroke Unit	92%	135%	102%	148%	4.16	4.00	8.38	14.20%	10.90%	8.40%	6.60%	5.60%	0.00%
KC Harbledown Ward	62%	136%	98%	146%	2.44	3.59	6.03	17.00%	14.80%	0.00%	14.20%	9.10%	0.00%
QE St Augustine Ward	56%	161%	100%	141%	1.88	3.30	5.18	13.20%	11.40%	0.00%	3.40%	8.90%	0.00%
WH Bartholomew	101%	118%	98%	96%	6.95	2.98	9.93	13.90%	9.90%	2.60%	10.00%	13.20%	0.00%
QE Quex Ward	59%	133%	94%	144%	1.97	3.25	5.22	12.00%	13.10%	0.60%	4.00%	8.40%	0.00%
WH Kings C2	94%	89%	97%	90%	3.50	2.18	5.68	7.30%	10.60%	1.10%	11.00%	16.70%	1.70%
KC Marlowe Ward	102%	109%	91%	107%	4.71	2.91	7.62	16.40%	17.00%	2.70%	15.50%	11.60%	0.00%
S&A													
QE Cheerful Sparrow Female	96%	124%	94%	160%	2.44	3.94	6.38	16.30%	17.10%	18.30%	3.60%	0.00%	5.40%
KC Clarke Ward	80%	133%	104%	126%	3.14	3.49	6.63	13.90%	16.00%	1.50%	3.10%	9.30%	8.50%
QE Cheerful Sparrow Male	134%	113%	99%	166%	2.48	3.97	6.45	16.50%	11.30%	1.20%	10.80%	0.00%	0.00%
KC Kent Ward	94%	127%	105%	115%	3.73	2.95	6.68	15.50%	17.70%	1.20%	4.80%	0.00%	8.60%
WH Kings B	95%	122%	98%	94%	2.79	2.85	5.63	17.50%	10.30%	2.20%	6.10%	0.00%	0.00%
WH Kings A2	107%	113%	106%	135%	3.39	2.70	6.08	11.20%	18.30%	2.30%	8.40%	6.40%	5.10%
WH Kings C	100%	138%	100%	132%	3.00	3.46	6.46	22.30%	19.90%	13.30%	2.00%	0.00%	0.00%
WH Kings D	100%	121%	93%	118%	3.38	3.28	6.67	18.50%	13.40%	0.30%	12.50%	0.00%	0.20%
QE Bishopstone - split KC St Lawrence Ward	70%	122% 91%	97% 92%	144% 56%	2.34	3.50 5.19	5.84 10.72	14.10% 16.60%	12.40% 16.60%	0.00%	1.40% 9.30%	7.20%	0.00%
QE Seabathing	67%	133%	92%	108%	2.46	4.67	7.14	21.40%	19.00%	2.50%	4.60%	0.00%	5.50%
WH Critical Care	100%	135%	94%	N/A	24.76	1.53	26.29	15.80%	14.00%	4.70%	3.70%	2.90%	0.00%
KC Critical Care	84%	N/A	90%	N/A	21.48	0.92	22.41	19.60%	1.90%	9.40%	0.00%	0.00%	0.00%
QE Critical Care	71%	97%	75%	126%	21.69	4.44	26.13	14.30%	12.10%	6.80%	1.90%	5.00%	0.00%
SHN WH Rotary Suite	105%	128%	105%	201%	4.71	4.71	9.41	11.30%	10.90%	1.60%	9.30%	8.10%	8.40%
UEC					,								
KC MIU	86%	90%	74%	N/A				16.80%	10.40%	11.10%	35.00%	0.00%	0.00%
WHH ACUTE MEDICAL UNIT B	80%	103%	90%	98%	7.23	4.69	11.92	14.30%	9.70%	10.10%	3.80%	4.60%	4.10%
QE Acute med unit	89%	117%	95%	115%	8.58	8.79	17.37	27.10%	27.60%	6.40%	10.30%	0.00%	6.90%
W&C													
WH NICU	88%	82%	93%	19%	13.82	1.54	15.36	14.20%	19.00%	8.50%	5.00%	3.60%	0.00%
WH Padua Ward	107%	N/A	110%	N/A	7.30	0.15	7.45	14.70%	13.50%	3.70%	1.00%	2.70%	0.00%
QE Rainbow Ward	102%	N/A	90%	N/A	7.35	0.12	7.47	14.70%	15.70%	2.10%	4.20%	4.20%	6.70%
QE Birchington Ward	94%	125%	96%	204%	3.48	2.89	6.37	11.30%	15.50%	1.20%	10.90%	0.00%	0.00%
WH Kennington Ward	102%	98%	100%	N/A	4.94	2.29	7.23	9.70%	24.70%	8.10%	0.00%	0.00%	0.00%
WH Maternity Labour and Folkestone	100%	66% 101%	99% 103%	69% 101%	24.07 24.62	6.85 11.87	30.92 36.49	15.90% 13.40%	9.60% 13.10%	9.00%	6.00%	2.20%	0.00%
MLU WHH	102%	101%	103%	101% 56%	24.62	4.15	36.49	13.40%	13.10% 41.00%	3.60%	0.00% 9.30%	2.50%	0.00%
QE Maternity Wards QE MLU	102%	87% 97%	94%	101%	15.35 41.97	4.15	62.01	14.70%	41.00%	3.80% 1.10%	9.30% 5.30%	0.00%	0.00%
		102%	103%	101%			14.84		16.50%				0.00%
QE SCBU	110%				12.49	2.35		15.20%		5.00%	0.00%	8.80%	

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

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 (Eight wards at K&C, five wards at QEQM) which reflects high vacancy levels, sickness and parenting leave. CHPPD was maintained above 5.0 on all these wards. 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 is planned due to the ward not currently running at full capacity;
- The low RN fill rate seen on Kingston 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 July do not show any clear correlation between staffing levels and harm for the wards showing low fill rates with the exception of:
 - Two wards show higher than expected numbers of patients not recommending our services to their Friends and Family (Bishopstone 6.5%, Quex 5.3%).
- The key risk areas are:
 - **At WHH** three wards (Cambridge J & M1 and Kings C2) are re-established or reconfigured medical wards. This 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 with recruitment of matrons, new ward managers and sisters. 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 was held with senior
 nurses in August to support this and improvement will be steered through a task and finish group;
- 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 will be reported in August to EMT;
- Work continues to address current band 5 vacancy levels particularly in Urgent and Emergency Care, General and Specialist Medicine and Surgery and Anaesthetics. 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 and an overseas campaign is planned to recruit 40 nurses by end 2019/20;
- 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.