East Kent Hospitals University **NHS**

NHS Foundation Trust

## The Publication of Nurse staffing Data – June 2016

Introduction

In accordance with National Quality Board requirements to provide assurance on safe staffing the Trust is now publishing staffing data in the following ways:

- Information about nurses, midwives and care staff deployed, by shift, against planned levels has been displayed at ward level since April 2014. The levels are displayed using a red, amber green status; green depicts staffing levels are as planned; amber depicts that the ward is slightly short staffed but not compromised; red rag rating depicts an acute shortage for that shift. The display allows staff to explain the reasons for any shortage and also what actions they have taken to mitigate the situation, thereby offering assurance to patients and visitors.
- Ward staffing reviews are repeated every 6 months and the next review will be reported to the Trust Board in August 2016.
- Monthly reports detailing planned and actual staffing on a shift by shift basis for the previous month have been presented monthly to the Board since May 2014. This report is also published on the Trust website and to the relevant hospital webpage on NHS choices.

Following the Carter review, Care Hours Per Patient Day (CHPPD) are also required to be reported from May-16, to relate actual staffing to patient numbers, shown in figure 1 by site and in figure 3 by ward. This enables the calculation of Cost per Care Hour (CPCH) and the reporting of the cost of care delivered by Registered Nurses, Midwives, and care workers on inpatient wards. Costs recorded for each staff group include pay costs, including the costs of unproductive time (e.g.training, annual leave, sickness, maternity leave and paternity leave).

Planned and actual staffing

Revised National Quality Board guidance published in May 2014 outlined the requirement for % fill of planned and actual hours 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 E-Rostering and NHS-Professionals systems and aggregated fill rates in June are over 100% at WHH, 99% at QEQM and over 97% at K&C, shown in Figure 1.

Figure 1. % hours filled planned against actual by site during June-16

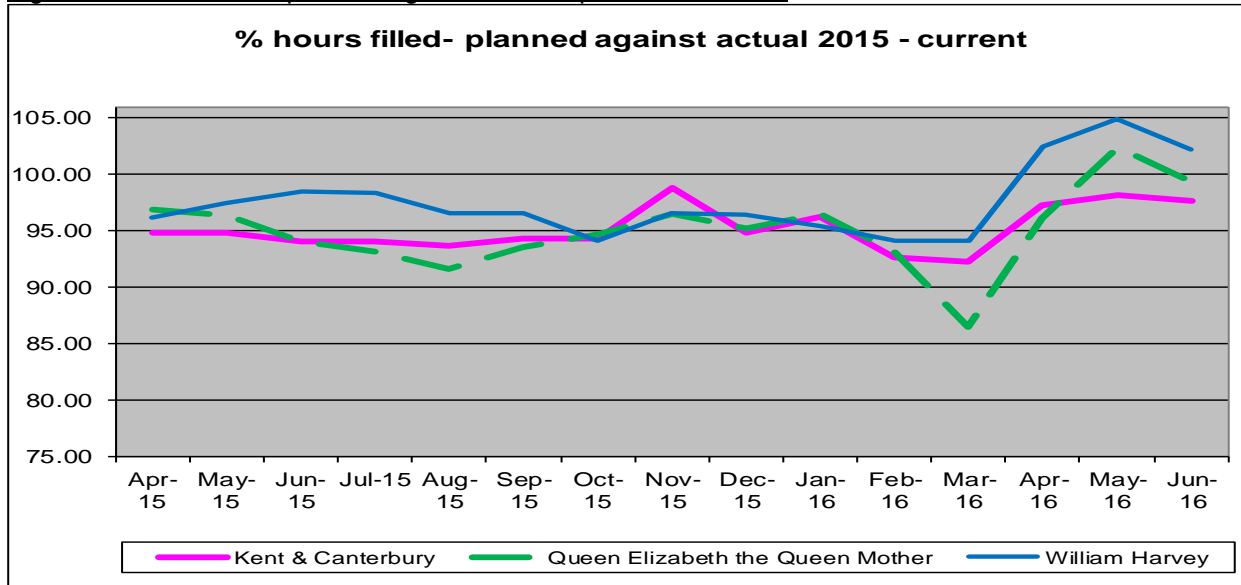| Hospital site | % Hours filled - planned against actual June-16 | | | | | Care Hours Per Patient Day (CHPPD) June-16 | | | |
| | DAY | | NIGHT | | | | | | |
| | Average fill rate - registered nurses/ midwives (%) | Average fill rate - care staff (%) | Average fill rate - registered nurses/ midwives (%) | Average fill rate - care staff (%) | Overall % hours filled | Cumulative count over the month of patients at 23:59 each day | Registered midwives/ nurses | Care Staff | Overall |
| Kent & Canterbury | 97.7% | 88.5% | 98.6% | 117.7% | **97.6%** | 5974 | 5.1 | 2.6 | **7.7** |
| Queen Elizabeth the Queen Mother | 97.0% | 95.0% | 103.7% | 107.7% | **99.2%** | 7578 | 5.8 | 3.2 | **9.0** |
| William Harvey | 102.7% | 102.7% | 100.4% | 103.4% | **102.2%** | 10328 | 5.7 | 2.9 | **8.6** |

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 22%.

Figure 2 shows the slight reductions seen in % shift hours filled in February and Mar-16 which reflects the requirement for additional shifts during winter pressures not always being filled by NHSP. The reduction in March and August also reflects periods of higher annual leave. Work to ensure that roster templates closely reflect the budgeted establishments and include shifts

necessary for additional beds has supported the increased fill rates seen over time. The improvement seen from Apr-16 reflects the inclusion of off framework agency in the NHSP data.

Figure 2. % hours filled planned against actual April-15 to June-16

**% hours filled- planned against actual 2015 - current**



— Kent & Canterbury    — Queen Elizabeth the Queen Mother    — William Harvey

Senior nursing leaders have reported that:
- It is not possible to say which organisations have concerning levels of staffing using this data;
- Some Trusts may achieve high % fill rates but have planned for what are already sub-optimal levels;
- Many Trusts reporting the lowest fill rates have invested in to nursing in the last year;
- There may be inconsistencies in the methodology as those Trusts using E-Rostering tend to report lower fill rates.

Figure 3 shows total monthly hours actual against planned and % fill during May 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 additional bed use.

Actions in place include:
- Matrons and Specialist Nurses 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;
- Skillmix 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.

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% |

Care hours per patient day are also included, by ward, and include registered nurse and care staff hours against the cumulative total of patients during the month. The range is from around 5 hours of care per patient on medical wards to over 30 within critical care areas where one to one care is required. National comparative data is expected to be available in the next month.

Data validation and sign-off steps have been implemented and the data will be reported externally via Unify/NHS Choices on 15th July. The national data will be published representing each hospital site on the NHS Choices website.

# Figure 3. Total monthly hours actual against planned and % fill by ward during June-16

| | 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 | 81% | 157% | 109% | 107% | 17.80% | 14.00% | 5.60% | 4.90% | 0.00% | 3.40% | | 990 | 2.9 | 3.0 | 5.9 |
| WH Cambridge K Ward | 98% | 126% | 108% | 100% | 9.50% | 9.90% | 6.00% | 2.00% | 6.80% | 0.00% | | 784 | 3.1 | 2.0 | 5.1 |
| WH Cambridge M2 Ward | 117% | 84% | 99% | 92% | 10.30% | 20.50% | 14.50% | 19.80% | 13.80% | 11.50% | | 571 | 4.0 | 1.9 | 5.9 |
| KC Taylor CCU | 76% | N/A | 100% | N/A | 17.20% | 0.00% | 0.70% | 0.00% | 0.00% | 0.00% | | 187 | 8.6 | 0.0 | 8.6 |
| QE Coronary Care Unit | 78% | 95% | 101% | 95% | 17.20% | 20.20% | 1.00% | 13.00% | 7.90% | 0.00% | | 308 | 5.5 | 2.7 | 8.2 |
| WH Coronary Care Unit | 94% | 67% | 97% | 74% | 18.30% | 5.50% | 1.70% | 37.50% | 3.00% | 0.00% | | 276 | 11.2 | 1.8 | 13.0 |
| QE Minster | 94% | 110% | 104% | 93% | 16.10% | 14.90% | 0.60% | 3.60% | 7.20% | 0.00% | | 659 | 3.2 | 3.1 | 6.3 |
| WH Oxford Ward | 104% | 95% | 99% | 104% | 11.40% | 17.20% | 1.90% | 0.00% | 2.40% | 0.00% | | 383 | 4.8 | 2.7 | 7.4 |
| QE Sandwich Bay Ward | 112% | 148% | 147% | 167% | 15.30% | 24.20% | 4.80% | 3.50% | 0.00% | 10.50% | | 566 | 4.1 | 3.2 | 7.3 |
| QE St Margarets Ward | 106% | 111% | 103% | 111% | 15.60% | 13.20% | 10.00% | 1.30% | 0.00% | 0.00% | | 666 | 2.9 | 3.3 | 6.1 |
| QE Deal Ward | 103% | 84% | 100% | 107% | 11.60% | 10.60% | 0.80% | 5.40% | 13.50% | 0.00% | | 751 | 3.0 | 2.3 | 5.4 |
| KC Harvey Neurorehab | 102% | 96% | 100% | 100% | 14.30% | 16.10% | 8.00% | 2.50% | 0.00% | 0.00% | | 573 | 3.1 | 2.6 | 5.7 |
| KC Invicta Ward | 95% | 99% | 97% | 119% | 13.40% | 13.50% | 5.00% | 14.10% | 0.00% | 0.00% | | 671 | 3.2 | 2.1 | 5.3 |
| WH Cambridge L Rehab Ward | 73% | 138% | 112% | 152% | 8.60% | 14.70% | 8.50% | 2.90% | 0.00% | 2.50% | | 777 | 3.1 | 3.2 | 6.3 |
| KC Treble Ward | 118% | 64% | 98% | 181% | 14.60% | 22.50% | 3.60% | 1.40% | 0.00% | 0.00% | | 495 | 4.3 | 3.0 | 7.3 |
| KC Mount McMaster | 117% | 90% | 100% | 181% | 17.30% | 12.70% | 1.10% | 3.80% | 0.00% | 0.00% | | 692 | 2.9 | 2.7 | 5.6 |
| QE Fordwich | 99% | 111% | 100% | 105% | 10.50% | 15.50% | 12.10% | 4.90% | 0.00% | 0.00% | | 600 | 4.7 | 2.8 | 7.5 |
| KC Kingston | 95% | 95% | 97% | 108% | 14.10% | 12.60% | 0.30% | 11.20% | 3.30% | 0.00% | | 650 | 4.6 | 2.7 | 7.3 |
| WH Richard Stevens Stroke Unit | 85% | 118% | 86% | 104% | 15.70% | 14.00% | 6.50% | 4.90% | 5.20% | 11.60% | | 648 | 4.0 | 3.0 | 7.0 |
| KC Harbledown Ward | 99% | 90% | 100% | 119% | 10.00% | 14.10% | 5.60% | 9.30% | 0.00% | 0.00% | | 698 | 3.1 | 2.8 | 5.9 |
| QE St Augustine Contingency Ward | 63% | 135% | 73% | 132% | 11.50% | 16.60% | 0.90% | 13.80% | 14.10% | 0.00% | | | | | |
| QE CDU | 117% | 107% | 131% | 162% | 15.20% | 11.60% | 4.70% | 2.00% | 0.60% | 7.30% | | | | | |
| WH CDU/Bethersden | 104% | 91% | 98% | 107% | 11.10% | 12.50% | 5.00% | 7.70% | 6.50% | 8.10% | | | | | |
| KC ECC | 105% | 64% | 98% | 95% | 14.00% | 13.60% | 6.00% | 5.80% | 0.00% | 0.00% | | | | | |
| | | | | | | | | | | | | | | | |
| **Surgical Services** | | | | | | | | | | | | | | | |
| WH Rotary Suite | 112% | 107% | 100% | 100% | 14.20% | 16.30% | 0.30% | 3.50% | 0.00% | 0.00% | | 372 | 6.4 | 3.6 | 10.0 |
| QE Cheerful Sparrow Female | 95% | 116% | 138% | 139% | 6.20% | 13.40% | 3.10% | 6.20% | 0.00% | 0.00% | | 674 | 4.0 | 3.6 | 7.7 |
| KC Clarke Ward | 81% | 85% | 94% | 106% | 13.60% | 15.70% | 2.40% | 11.70% | 5.20% | 0.00% | | 778 | 3.3 | 2.5 | 5.8 |
| QE Cheerful Sparrow Male | 108% | 136% | 134% | 147% | 19.80% | 6.90% | 1.80% | 7.30% | 0.00% | 0.00% | | 649 | 3.5 | 3.4 | 6.9 |
| KC Kent Ward | 102% | 101% | 98% | 92% | 17.30% | 17.70% | 4.20% | 6.10% | 5.70% | 0.00% | | 306 | 7.5 | 3.8 | 11.3 |
| WH Kings B | 100% | 99% | 103% | 215% | 16.60% | 11.70% | 1.00% | 2.60% | 0.00% | 0.00% | | 719 | 2.8 | 2.7 | 5.5 |
| WH Kings A2 | 111% | 101% | 95% | 110% | 13.40% | 10.10% | 2.90% | 14.10% | 11.90% | 0.00% | | 551 | 3.2 | 2.4 | 5.6 |
| WH Kings C | 85% | 138% | 100% | 104% | 17.40% | 8.70% | 0.00% | 4.10% | 0.00% | 6.90% | | 715 | 2.7 | 3.2 | 5.9 |
| WH Kings C2 | 96% | 94% | 107% | 92% | 12.20% | 13.90% | 0.50% | 2.20% | 7.30% | 0.00% | | 604 | 3.8 | 2.7 | 6.5 |
| WH Kings D | 105% | 103% | 95% | 116% | 15.30% | 16.00% | 0.90% | 4.40% | 4.80% | 4.50% | | 649 | 6.4 | 4.8 | 11.2 |
| QE Quex Ward | 96% | 63% | 98% | 97% | 15.70% | 18.30% | 2.30% | 9.80% | 2.50% | 0.00% | | 438 | 4.6 | 1.2 | 5.8 |
| QE Trauma Floor | 97% | 88% | 103% | 102% | 13.00% | 15.80% | 12.40% | 8.90% | 3.60% | 0.00% | | 608 | 7.2 | 6.0 | 13.2 |
| WH Critical Care | 125% | 103% | 109% | 92% | 14.80% | 9.10% | 4.40% | 0.90% | 0.30% | 0.00% | | 237 | 32.1 | 4.8 | 36.9 |
| KC Critical Care | 91% | 57% | 97% | N/A | 16.70% | 0.00% | 6.90% | 34.80% | 0.00% | 0.00% | | 148 | 29.8 | 0.6 | 30.5 |
| QE Critical Care | 82% | 68% | 93% | N/A | 15.60% | 16.30% | 5.80% | 11.70% | 2.40% | 0.00% | | 234 | 20.7 | 1.2 | 21.9 |
| | | | | | | | | | | | | | | | |
| **Specialist Services** | | | | | | | | | | | | | | | |
| KC Marlowe Ward | 116% | 93% | 100% | 94% | 12.10% | 16.10% | 3.90% | 3.40% | 1.60% | 6.40% | | 631 | 7.4 | 3.3 | 10.7 |
| WH NICU | 100% | 59% | 102% | N/A | 14.70% | 12.70% | 8.90% | 18.40% | 2.80% | 0.00% | | 542 | 6.7 | 0.5 | 7.2 |
| WH Padua Ward | 105% | 67% | 98% | 77% | 13.50% | 15.40% | 1.00% | 3.80% | 2.90% | 11.30% | | 523 | 8.1 | 1.9 | 10.0 |
| QE Rainbow Ward | 99% | 73% | 97% | N/A | 13.00% | 13.50% | 4.10% | 10.60% | 4.20% | 0.00% | | 298 | 10.2 | 3.0 | 13.2 |
| QE Birchington Ward | 120% | 104% | 101% | 94% | 14.50% | 10.70% | 0.00% | 0.00% | 3.00% | 13.60% | | 433 | 5.4 | 2.3 | 7.7 |
| WH Kennington Ward | 105% | 89% | 67% | N/A | 9.70% | 17.10% | 7.10% | 2.40% | 0.00% | 0.00% | | 248 | 6.2 | 3.3 | 9.5 |
| KC Brabourne Haematology Ward | 87% | 111% | 105% | N/A | 11.70% | 17.50% | 13.80% | 5.30% | 0.00% | 0.00% | | 145 | 12.5 | 2.5 | 15.0 |
| WH Maternity Labour and Folkestone | 122% | 78% | 102% | 73% | 15.40% | 8.00% | 9.60% | 11.60% | 4.10% | 7.90% | | 679 | 12.3 | 3.7 | 16.0 |
| MLU WHH | 110% | 81% | 99% | 73% | 13.20% | 16.70% | 1.40% | 0.00% | 0.00% | 0.00% | | 60 | 26.2 | 9.5 | 35.7 |
| QE Maternity Wards | 97% | 54% | 84% | 78% | 15.30% | 14.90% | 7.00% | 18.20% | 6.30% | 5.00% | | 454 | 12.4 | 4.4 | 16.7 |
| QE MLU | 93% | 95% | 160% | 83% | 15.10% | 10.00% | 7.00% | 8.70% | 0.00% | 0.00% | | 23 | 56.9 | 28.1 | 84.9 |
| QE SCBU | 92% | 103% | 100% | N/A | 16.80% | 9.70% | 6.10% | 0.00% | 0.00% | 0.00% | | 217 | 10.6 | 1.6 | 12.2 |