

The Publication of Nurse staffing Data – October 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 October are 115% at WHH, over 111% at QEQM and over 95% at K&C, shown in Figure 1.

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

Hospital site	% Hours filled - planned against actual Oct-17				Overall % hours filled	Care Hours Per Patient Day (CHPPD) Oct-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 (%)					
Kent & Canterbury	79.9%	110.5%	88.7%	137.0%	95.1%	5962	4.9	3.7	8.6
Queen Elizabeth the Queen Mother	92.2%	131.1%	113.3%	134.7%	111.2%	10120	5.1	3.7	8.8
William Harvey	107.6%	120.6%	122.1%	114.6%	115.0%	10829	6.4	3.5	9.9

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. An improvement in %fill rate at K&C is seen this month following roster template adjustments to reflect current establishments, particularly for the MIU which previously included full EAU staffing requirement, due to the temporary changes. All agency hours worked have been included in this report since Apr-16.

Figure 2. % hours filled against planned Aug-16 to Oct-17

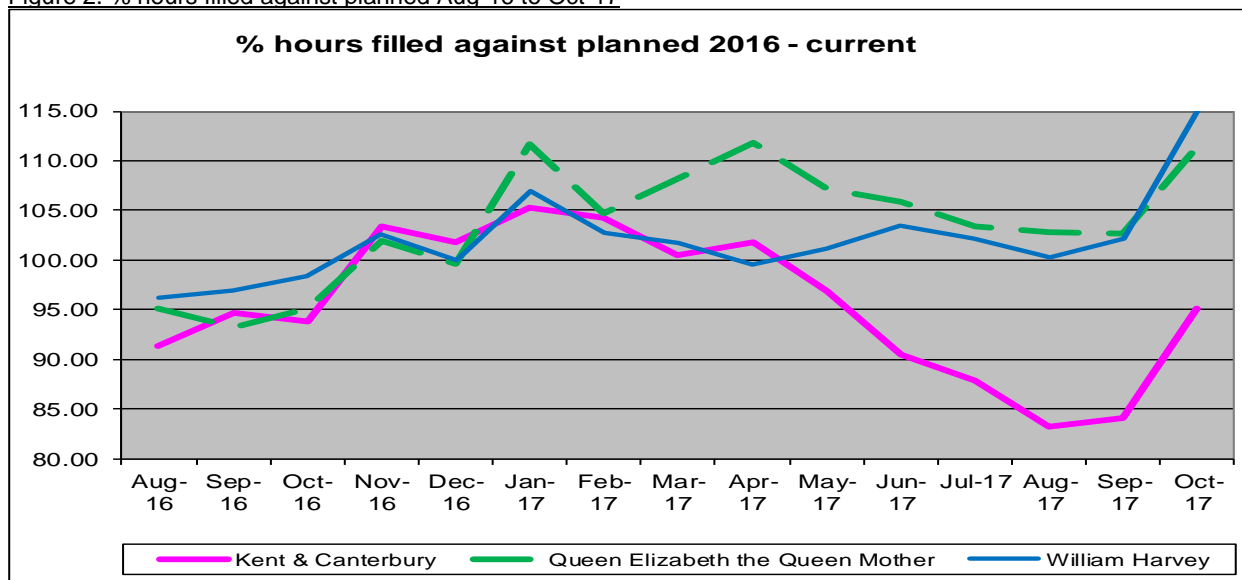


Figure 3 shows % hours filled against planned, during October, by ward. Work has been undertaken to explore the reasons for the gap, the impact and the actions being taken to address the gap. Some wards achieve higher than 100% due to additional shifts worked through NHS-P during times of increased demand 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. % hours filled against planned and CHPPD by ward during Oct-17

Non Effec Ref	DAY		NIGHT		Unavailability %						Care Hours Per Patient Day (CHPPD)			
	Average fill rate - registered nurses/ midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/ midwives (%)	Average fill rate - care staff (%)	A/L		Sickness		Parenting		Cumulative count over the month of patients at 23:59 each day	Registered midwives /nurses	Care Staff	Overall
					Registered	Unregistered	Registered	Unregistered	Registered	Unregistered				
WH Cambridge J2 Ward	90%	188%	132%	143%	15.20%	15.50%	0.50%	9.40%	0.00%	0.00%	774	3.6	3.0	6.6
WH Cambridge K Ward	109%	131%	122%	93%	20.20%	17.80%	4.00%	13.80%	0.00%	0.00%	804	4.4	3.9	8.3
WH Cambridge M ward	102%	101%	128%	111%	15.40%	18.90%	4.90%	5.80%	6.40%	0.00%	579	3.9	2.3	6.2
QE Coronary Care Unit	87%	68%	87%	71%	19.10%	10.40%	2.20%	0.00%	0.00%	0.00%	360	4.9	1.7	6.6
QE Minster	80%	129%	106%	123%	13.80%	17.30%	5.50%	1.90%	0.00%	0.00%	678	2.9	3.8	6.6
WH Oxford Ward	117%	122%	126%	159%	17.70%	11.70%	10.50%	4.90%	2.70%	0.00%	396	5.6	3.6	9.2
QE Sandwich Bay Ward	105%	172%	105%	262%	12.00%	9.40%	0.00%	5.70%	6.90%	0.00%	617	3.3	3.9	7.1
QE St Margarets Ward	120%	140%	138%	154%	18.20%	20.10%	6.60%	9.00%	9.70%	0.00%	738	3.3	3.8	7.1
QE Deal Ward	121%	121%	120%	173%	8.20%	22.80%	0.20%	3.10%	6.30%	0.00%	838	3.3	3.2	6.5
KC Harvey Neurorehab	76%	101%	94%	162%	16.30%	10.80%	0.00%	6.20%	0.00%	0.00%	573	2.7	3.1	5.8
KC Invicta Ward	100%	111%	115%	255%	18.00%	12.30%	11.30%	12.00%	0.00%	0.00%	658	3.4	3.6	7.0
WH Cambridge L Rehab Ward	101%	109%	118%	153%	13.10%	8.20%	10.30%	8.60%	0.00%	0.00%	776	3.4	3.3	6.7
KC Treble Ward	91%	121%	122%	148%	21.60%	10.30%	6.30%	15.00%	8.90%	0.00%	448	4.8	4.7	9.6
KC Mount McMaster	94%	115%	145%	222%	14.60%	14.30%	11.90%	10.40%	11.00%	0.70%	720	3.3	3.1	6.5
QE Fordwich	75%	238%	87%	223%	13.50%	11.40%	6.00%	14.70%	4.60%	4.30%	687	4.1	5.4	9.4
KC Kingston	63%	143%	120%	162%	21.70%	12%	1.30%	2.00%	0.00%	0.00%	793	2.7	3.4	6.2
WH Richard Stevens Stroke Unit	86%	180%	99%	102%	14.50%	16.30%	9.50%	2.60%	6.70%	6.30%	649	4.5	4.0	8.4
KC Harbledown Ward	98%	145%	100%	184%	13.20%	14.90%	1.30%	4.50%	0.00%	0.00%	765	3.1	3.9	7.0
QE St Augustine Contingency Ward	83%	152%	139%	162%	12%	10%	10.50%	6.90%	0.00%	0.00%	877	2.5	3.1	5.5
QE CDU	125%	154%	194%	166%	12.30%	16.90%	0.30%	2.70%	13.50%	4.10%	704	8.4	4.3	12.7
WH CDU/Bethersden	94%	107%	96%	97%	13.40%	13.90%	6.20%	7.20%	2.90%	0.00%	710	8.0	4.3	12.3
Surgical Services														
WH Rotary Suite	88%	134%	123%	142%	8.70%	14.30%	0.90%	1.10%	5.70%	0.00%	429	5.3	3.9	9.2
QE Cheerful Sparrow Female	76%	185%	149%	131%	14.30%	13%	16.00%	12.80%	10.30%	0.00%	586	3.8	4.5	8.4
KC Clarke Ward	94%	103%	117%	97%	13.40%	14.40%	6.70%	3.90%	0.00%	0.00%	727	4.2	3.2	7.4
QE Cheerful Sparrow Male	85%	111%	140%	104%	9.10%	21.70%	11.50%	9.80%	6.10%	0.00%	565	3.3	4.1	7.4
KC Kent Ward	90%	117%	99%	83%	16.10%	16.80%	6.10%	6.50%	0.00%	0.00%	387	5.5	3.4	9.0
WH Kings B	97%	132%	107%	152%	14.50%	17.20%	0.40%	7.40%	0.00%	7.50%	752	2.9	3.3	6.2
WH Kings A2	104%	146%	116%	279%	20.60%	16.10%	7.30%	3.30%	0.00%	0.00%	540	3.7	4.4	8.1
WH Kings C	101%	150%	105%	105%	18.70%	14.80%	0.00%	4.30%	8.00%	0.00%	792	2.8	3.6	6.4
WH Kings C2	94%	103%	149%	117%	18.00%	17.70%	1.50%	3.40%	7.20%	1.00%	606	4.3	3.2	7.5
Kings D Male and Female	98%	113%	106%	131%	16.20%	12.30%	2.60%	3.10%	3.40%	2.60%	688	6.4	5.5	11.9
QE Quex Ward	83%	209%	105%	127%	19.10%	15.40%	2.00%	13.10%	0.00%	16.30%	509	3.6	2.1	5.8
Bishopstone	87%	137%	144%	106%	9.40%	16.40%	7.20%	12.50%	0.00%	0.00%	601	3.7	4.0	7.7
Seabathing	64%	120%	98%	102%	13.00%	14.50%	6.60%	0.50%	0.00%	0.80%	721	2.4	2.9	5.4
WH Critical Care	150%	109%	176%	56%	16.30%	9.90%	2.10%	7.80%	6.60%	0.00%	351	31.1	3.2	34.3
KC Critical Care	82%	151%	83%	N/A	19.50%	9.80%	2.50%	0.00%	5.40%	0.00%	134	30.4	2.3	32.7
QE Critical Care	94%	101%	107%	N/A	14.70%	7.40%	1.80%	0.00%	0.00%	0.00%	223	25.7	1.8	27.5
Specialist Services														
KC Marlowe Ward	109%	115%	100%	104%	12.20%	14.70%	1.20%	8.30%	2.30%	6.90%	594	7.7	4.1	11.8
WH NICU	124%	N/A	113%	N/A	15.90%	0.00%	8.70%	0.00%	2.90%	0.00%	592	8.8	0.0	8.8
WH Padua Ward	103%	98%	107%	58%	15.90%	14.20%	4.00%	1.10%	6.20%	18.30%	479	8.2	1.2	9.4
QE Rainbow Ward	100%	91%	101%	223%	11.20%	15.40%	4.60%	0.60%	0.00%	0.00%	352	9.5	3.6	13.1
QE Birchington Ward	81%	146%	101%	124%	16.20%	12.40%	1.30%	0.80%	0.00%	0.00%	501	3.7	2.7	6.4
WH Kennington Ward	96%	84%	95%	N/A	14.20%	8.00%	9.30%	4.10%	8.40%	0.00%	301	4.9	2.0	7.0
KC Brabourne Haematology Ward	83%	75%	100%	N/A	15.20%	7.50%	1.50%	3.80%	0.00%	0.00%	136	12.7	2.2	15.0
WH Maternity Labour and Folkestone	112%	57%	98%	62%	11.80%	13.70%	13.30%	1.10%	3.10%	7.50%	535	13.2	3.7	16.9
MLU WHH	182%	334%	252%	195%	16.90%	15.60%	9.50%	0.00%	0.00%	0.00%	76	41.7	25.4	67.1
QE Maternity Wards	89%	83%	87%	79%	12.10%	32.90%	6.20%	1.90%	7.30%	3.90%	380	14.6	6.6	21.1
QE MLU	90%	86%	93%	81%	7.40%	9.70%	4.00%	3.00%	10.10%	18.10%	44	30.2	13.7	43.9
QE SCBU	88%	70%	100%	N/A	11.40%	11.60%	8.70%	0.00%	4.10%	0.00%	139	16.6	3.7	20.3

Low fill rates are seen:

- In registered nurse shifts on Seabathing, Cheerful Sparrows female, Fordwich, Harvey and Kingston. This is due to a combination of factors including vacancies, high sickness and maternity leave. An example is Seabathing with a current 75% registered nurse vacancy level which achieved only 64% filled day shifts. Risks are currently mitigated through staff moves and Matron support. Care Hours Per Patient Day was maintained near or above 6.0 on all these wards using temporary staff except on Seabathing (5.4) and Harvey (5.8);
- Other wards (WHH critical care, QE CCU, Braeborne, Paediatric 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.

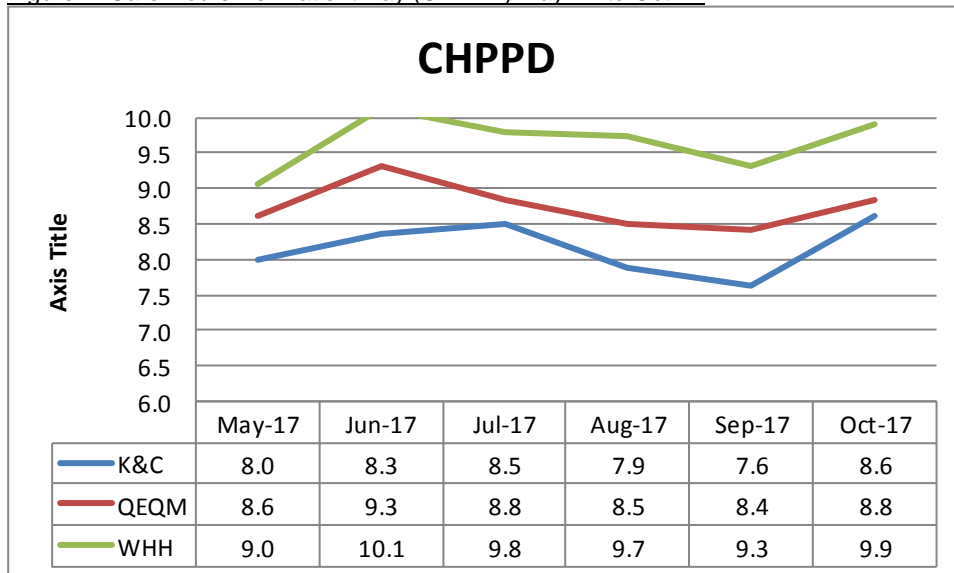
Actions in place include:

- 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 is progressing 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;
- Addressing retention 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 5.5 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.

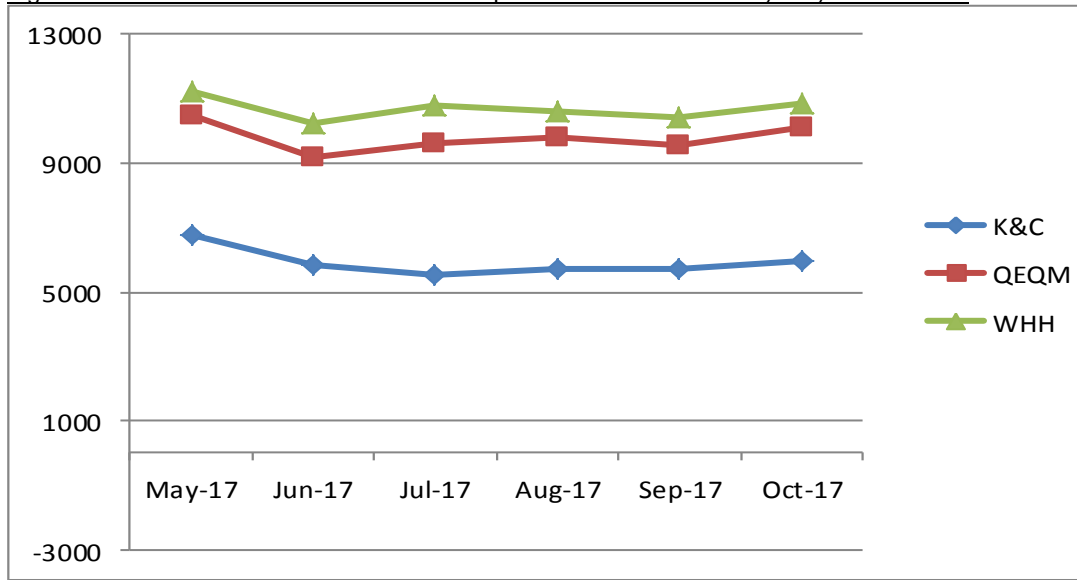
Figure 4. Care Hours Per Patient Day (CHPPD) May-17 to Oct-17



Comparative data within the Model Hospital dashboard for Aug-17, the most recent available, shows EKHUFT average of 8.9 CHPPD against a peer median (based on both spend and clinical output) of 7.9 and a national median of 7.8 (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 Specialising within our wards. Overall CHPPD in Sept-17 is 8.4.

CHPPD has increased slightly on all three sites against a rise in activity, shown in figure 5, and this is reflected in the rise seen this month in %fill against budgeted establishments.

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



	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17
K&C	6289	6758	5846	5539	5706	5724	5962
QEQM	9185	10480	9156	9612	9770	9526	10120
WHH	10937	11222	10241	10809	10626	10421	10829