

The Publication of Nurse staffing Data – December 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 December are over 106% at QEQM, over 101% at WHH and over 92% at K&C, shown in Figure 1.

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

Hospital site	% Hours filled - planned against actual Dec-17				Overall % hours filled	Care Hours Per Patient Day (CHPPD) Dec-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	77.6%	104.7%	90.6%	128.1%	92.9%	5997	4.4	3.3	7.7
Queen Elizabeth the Queen Mother	91.5%	125.4%	106.2%	123.0%	106.6%	10105	4.8	3.4	8.2
William Harvey	94.7%	107.8%	104.4%	107.2%	101.5%	11449	5.7	3.1	8.8

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 changes 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. All agency hours worked have been included in this report since Apr-16.

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

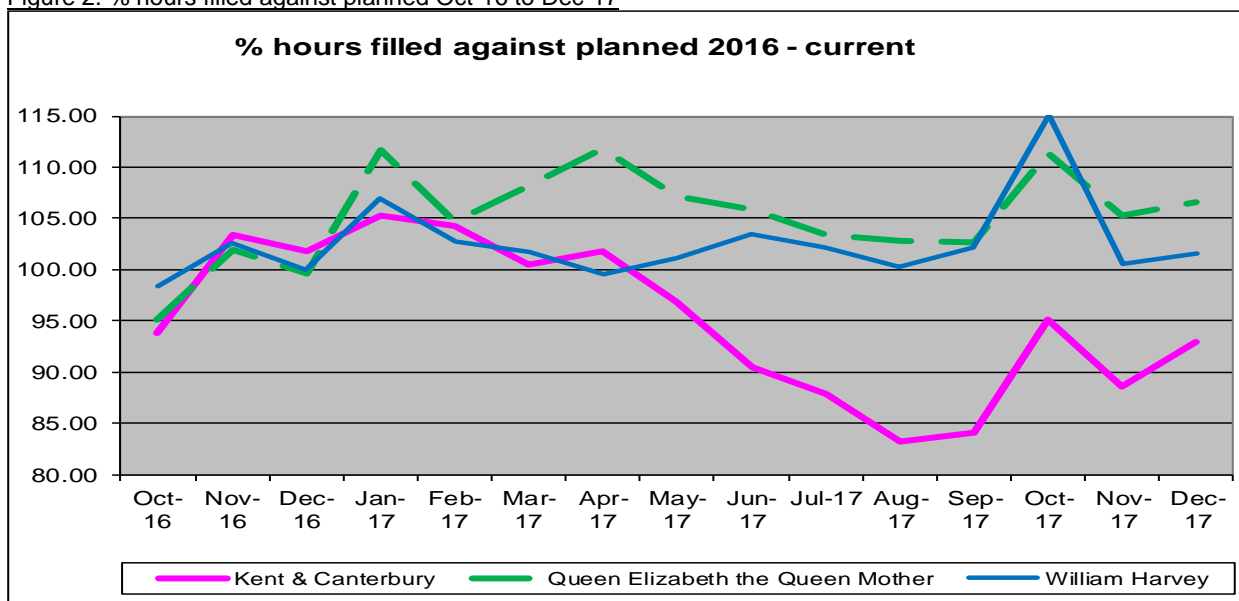


Figure 3 shows % hours filled against planned, during December, by ward. Work has been undertaken to explore the reasons for the gap, the impact and the actions being taken to address the gap. Some wards achieve higher than 100% due to additional shifts worked through NHS-P during times of increased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

	DAY				NIGHT				Care Hours Per Patient Day (CHPPD)			Unavailability %					
	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	A/L Registered	A/L Unregistered	Sickness Registered	Sickness Unregistered	Parenting Registered	Parenting Unregistered				
UCLTC																	
WH Cambridge J2 Ward	79%	162%	111%	113%	3.0	2.5	5.5	11.10%	13.70%	6.00%	9.80%	0.00%	0.00%				
WH Cambridge K Ward - CCU	96%	107%	104%	107%	3.7	3.3	7.0	13.60%	9.50%	3.70%	20.20%	0.00%	0.00%				
WH Cambridge K Ward - Ward	122%	100%	133%	101%	4.4	2.3	6.6	13.50%	10.00%	13.40%	13.20%	10.10%	0.00%				
WH Cambridge M2 Ward	122%	100%	133%	101%	4.4	2.3	6.6	13.50%	10.00%	13.40%	13.20%	10.10%	0.00%				
QE Coronary Care Unit	87%	86%	92%	74%	5.1	2.0	7.1	10.70%	6.10%	5.50%	6.60%	0.00%	0.00%				
QE Minster	79%	145%	94%	130%	2.7	4.2	7.0	4.10%	7.90%	1.00%	0.70%	5.80%	0.00%				
WH Oxford Ward	104%	119%	117%	192%	4.8	3.6	8.3	9.70%	3.60%	7.10%	5.50%	2.20%	0.00%				
QE Sandwich Bay Ward	130%	134%	117%	193%	3.6	2.8	6.5	12.30%	8.80%	0.90%	6.20%	6.60%	0.00%				
QE St Margarets Ward	133%	169%	157%	219%	3.6	4.8	8.4	5.80%	7.30%	1.40%	20.90%	9.10%	8.20%				
QE Deal Ward	91%	98%	100%	134%	2.5	2.5	5.0	10.90%	12.50%	2.10%	3.90%	6.50%	0.00%				
KC Harvey Neurorehab	92%	107%	98%	197%	3.1	3.4	6.4	10.70%	15.10%	4.10%	0.60%	0.00%	0.00%				
KC Invicta Ward	83%	109%	105%	205%	2.8	3.2	6.0	13.60%	11.40%	0.40%	6.00%	0.00%	0.00%				
WH Cambridge L Rehab Ward	83%	108%	125%	126%	3.0	2.9	5.9	14.50%	10.80%	13.30%	8.40%	0.40%	0.00%				
KC Treble Ward	70%	113%	98%	93%	3.4	4.1	7.4	12.80%	14.20%	10.10%	3.70%	7.70%	0.00%				
KC Mount McMaster	80%	97%	95%	205%	2.5	2.7	5.2	12.60%	12.80%	9.20%	13.30%	8.20%	0.30%				
QE Fordwich	83%	141%	106%	152%	4.2	3.6	7.8	9.90%	9.70%	1.70%	14.10%	0.00%	0.00%				
KC Kingston	67%	152%	105%	165%	2.7	3.6	6.3	16.80%	13%	5.40%	12.60%	0.00%	3.90%				
WH Richard Stevens Stroke Unit	80%	194%	110%	165%	4.3	4.7	9.0	10.90%	8.70%	8.40%	2.50%	5.30%	5.80%				
KC Harbledown Ward	75%	106%	99%	125%	2.7	2.9	5.6	13.50%	9.80%	8.50%	7.90%	5.90%	0.00%				
QE St Augustine Contingency Ward	79%	228%	98%	144%	2.1	3.4	5.5	10%	10%	6.20%	9.30%	0.00%	0.00%				
QE CDU	120%	115%	158%	167%	7.0	3.5	10.6	9.40%	12.40%	5.50%	4.90%	11.50%	3.30%				
WH CDU/Bethersden	89%	118%	91%	95%	7.4	4.5	11.8	12.90%	13.10%	12.00%	7.80%	2.60%	0.00%				
Surgical Services																	
WH Rotary Suite	86%	99%	92%	111%	4.3	4.0	8.3	18.60%	17.60%	1.80%	5.80%	5.10%	0.70%				
QE Cheerful Sparrow Female	57%	154%	97%	102%	2.8	3.9	6.7	6.20%	8%	19.70%	10.80%	8.30%	0.00%				
KC Clarke Ward	75%	109%	103%	93%	3.1	2.9	6.1	8.90%	7.50%	15.40%	1.20%	0.00%	0.00%				
QE Cheerful Sparrow Male	88%	112%	97%	115%	3.0	4.5	7.5	18.30%	10.90%	3.30%	5.30%	1.40%	5.60%				
KC Kent Ward	83%	131%	100%	73%	5.8	4.1	9.9	15.10%	11.60%	14.30%	5.10%	1.30%	0.00%				
WH Kings B	99%	111%	111%	99%	3.0	2.5	5.5	13.70%	12.00%	1.10%	1.90%	0.00%	0.00%				
WH Kings A2	94%	108%	102%	165%	3.2	2.9	6.1	11.80%	13.40%	4.60%	9.20%	0.00%	0.00%				
WH Kings C	86%	126%	102%	98%	2.5	3.1	5.6	21.70%	11.30%	0.00%	0.00%	7.00%	0.30%				
WH Kings C2	71%	104%	94%	98%	2.9	2.8	5.7	12.80%	9.30%	2.60%	2.90%	7.10%	0.00%				
WH Kings D	100%	110%	91%	131%	3.5	3.2	6.7	14.30%	9.20%	4.90%	5.70%	3.10%	2.90%				
QE Quex Ward	58%	133%	68%	79%	2.4	1.5	4.0	21.60%	12.00%	15.20%	7.20%	0.00%	9.00%				
QE Bishopstone	86%	102%	112%	87%	3.1	3.2	6.3	15.00%	11.80%	2.30%	6.90%	5.70%	4.80%				
QE Seabathing	80%	158%	95%	121%	2.9	3.8	6.8	13.50%	5.50%	5.20%	2.50%	2.60%	0.30%				
WH Critical Care	129%	97%	139%	55%	27.5	3.1	30.5	13.00%	11.50%	4.00%	3.00%	3.20%	0.00%				
KC Critical Care	89%	128%	95%	N/A	27.6	1.9	29.6	13.40%	11.30%	3.90%	0.00%	1.90%	0.00%				
QE Critical Care	98%	87%	115%	N/A	23.6	1.3	24.9	13.20%	12.40%	1.20%	7.50%	0.00%	0.00%				
Specialist Services																	
KC Marlowe Ward	107%	77%	96%	96%	5.5	2.6	8.1	10.20%	9.00%	3.80%	20.80%	2.20%	6.30%				
WH NICU	78%	69%	93%	32%	14.7	1.4	16.1	11.60%	18.30%	6.00%	8.00%	4.30%	0.00%				
WH Padua Ward	103%	98%	103%	68%	7.1	1.1	8.3	13.10%	12.10%	1.70%	2.20%	6.30%	9.10%				
QE Rainbow Ward	103%	103%	112%	131%	7.9	1.4	9.4	12.60%	13.90%	1.50%	3.80%	0.00%	0.00%				
QE Birchington Ward	73%	128%	100%	103%	3.7	2.7	6.4	14.90%	15.10%	7.20%	1.50%	0.00%	0.00%				
WH Kennington Ward	88%	94%	97%	N/A	4.8	2.9	7.7	15.40%	9.20%	2.40%	11.10%	8.00%	0.00%				
KC Brabourne Haematology Ward	88%	64%	100%	N/A	13.0	2.2	15.1	12.50%	10.20%	6.40%	30.50%	0.00%	0.00%				
WH Maternity Labour and Folkestone	105%	47%	93%	64%	13.2	3.5	16.7	13.90%	10.30%	14.90%	11.70%	2.00%	4.90%				
MLU WHH	113%	147%	107%	94%	27.5	15.2	42.7	19.00%	21.80%	3.50%	10.00%	0.00%	0.00%				
QE Maternity Wards	97%	85%	91%	76%	16.8	7.0	23.8	14.80%	19.40%	2.80%	2.40%	7.80%	3.60%				
QE MLU	78%	77%	79%	68%	28.3	13.1	41.4	15.50%	19.80%	11.20%	19.10%	4.90%	16.10%				
QE SCBU	89%	62%	99%	N/A	11.9	1.6	13.5	15.50%	25.50%	8.90%	4.80%	3.50%	0.00%				

Low fill rates are seen:

- In registered nurse shifts on Treble, Kingston, Harbeldown, St Augustines, Cheerful Sparrows female, Clarke, Kings C2, Quex and Birchington. This is due to a combination of factors including vacancies, high sickness and maternity leave. Risks are currently mitigated through staff moves and Matron support. CHPPD was maintained above 5.5 on all these wards using temporary staff. Quex is shown as 4.0 CHPPD due to the full staffing support not reflected due to the additional shifts undertaken by an agency providing a managed service. Work to incorporate this data is underway;
- Other wards (critical care, coronary care, 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.

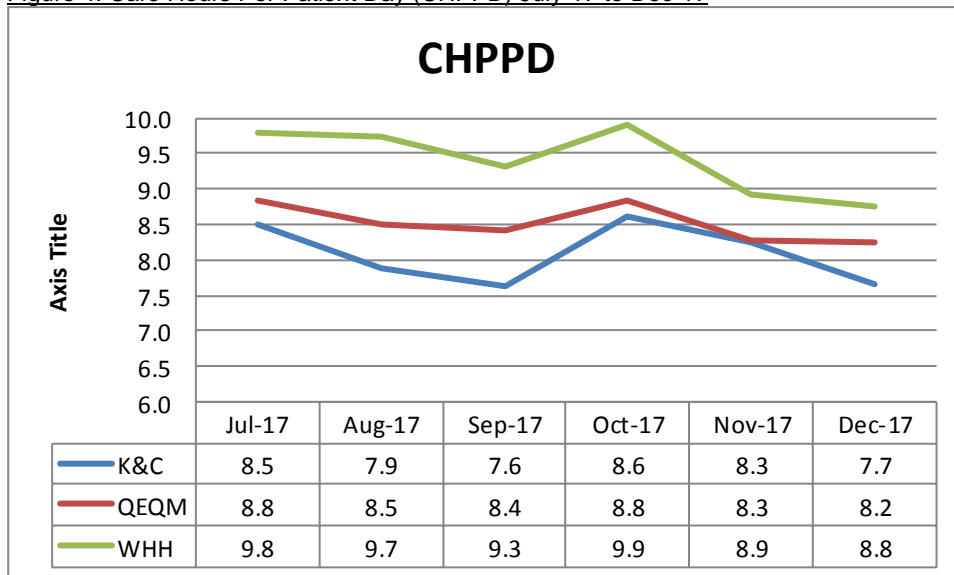
Actions in place include:

- 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 almost complete on all sites 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) July-17 to Dec-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 Dec-17 is 8.2.

Exploratory work to review reporting against the national criteria is underway to ensure consistency as ward profiles change and roster template adjustment takes place.