

The Publication of Nurse staffing Data – August 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 August are over 102% at QEQM, over 100% at WHH and over 83% at K&C, shown in Figure 1.

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

Hospital site	% Hours filled - planned against actual Aug-17					Care Hours Per Patient Day (CHPPD) Aug-17			
	DAY		NIGHT		Overall % hours filled	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	71.9%	89.9%	81.2%	119.4%	83.2%	5706	4.7	3.2	7.9
Queen Elizabeth the Queen Mother	85.4%	123.8%	100.5%	127.6%	102.8%	9770	4.9	3.6	8.5
William Harvey	95.5%	103.9%	103.9%	101.9%	100.2%	10626	6.4	3.3	9.7

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. The marked fall in fill rate at K&C is partly due to staff moves to other sites from June-17 but also reflects the very low % fill within the MIU due to the roster template still reflecting the full EAU staffing. All agency hours worked have been included in this report since Apr-16.

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

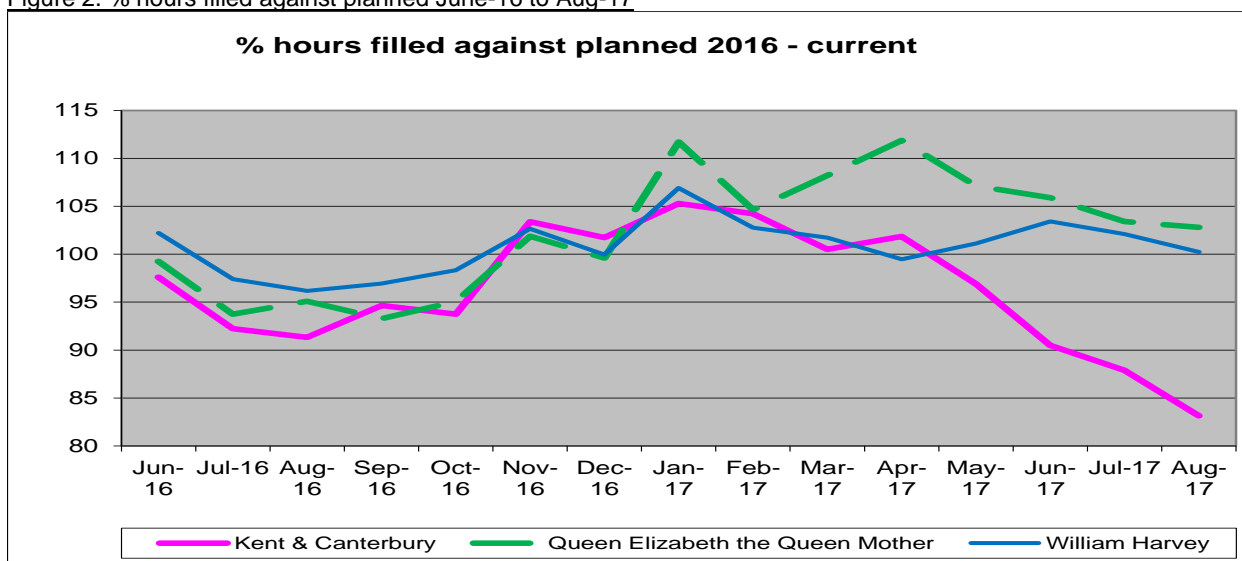


Figure 3 shows % hours filled against planned, during August, by ward. Work has been undertaken to explore the reasons for the gap, the impact and the actions being taken to address the gap. Some wards achieve higher than 100% due to additional shifts worked through NHS-P during times of increased demand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

UCLTC	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	75%	96%	94%	91%	17.20%	20.90%	4.00%	7.50%	0.00%	0.00%	788	6.9	3.2	10.1
WH Cambridge K Ward	104%	95%	103%	106%	18.40%	16.60%	5.20%	11.10%	0.00%	0.00%	711	4.6	3.5	8.1
WH Cambridge M2 Ward	98%	105%	97%	112%	19.70%	19.40%	7.10%	12.30%	3.10%	5.80%	554	3.5	2.5	6.0
QE Coronary Care Unit	86%	102%	101%	105%	15.60%	16.90%	3.70%	0.70%	0.00%	0.00%	363	5.1	2.5	7.7
QE Minster	92%	102%	112%	118%	13.70%	9.80%	1.40%	8.30%	0.00%	0.00%	681	3.2	3.2	6.4
WH Oxford Ward	98%	139%	101%	174%	17.40%	14.40%	0.90%	0.00%	2.10%	0.00%	401	4.6	4.0	8.7
QE Sandwich Bay Ward	117%	194%	123%	213%	20.30%	19.90%	1.30%	2.50%	6.10%	0.00%	576	4.0	4.3	8.4
QE St Margarets Ward	149%	160%	138%	160%	15.50%	16.80%	0.40%	17.00%	9.90%	0.00%	751	3.7	4.2	7.9
QE Deal Ward	74%	122%	124%	146%	15.20%	16.00%	1.50%	4.10%	23.30%	0.00%	850	2.6	3.0	5.6
KC Harvey Neurorehab	78%	101%	97%	198%	12.20%	17.00%	0.90%	2.80%	0.00%	0.00%	586	2.7	3.3	6.0
KC Invicta Ward	90%	81%	98%	172%	12.20%	14.50%	3.60%	4.80%	0.00%	0.00%	637	3.0	2.6	5.6
WH Cambridge L Rehab Ward	96%	95%	113%	122%	15.30%	15.40%	6.20%	9.90%	0.00%	0.80%	780	3.3	2.8	6.0
KC Treble Ward	64%	88%	87%	183%	18.00%	19.10%	5.30%	7.70%	6.10%	0.00%	550	2.7	3.2	5.9
KC Mount McMaster	77%	104%	101%	208%	16.60%	18.10%	12.60%	10.30%	0.00%	0.00%	543	3.2	3.7	6.9
QE Fordwich	68%	211%	83%	204%	22.40%	10.80%	12.60%	7.10%	4.70%	3.50%	657	4.1	5.1	9.2
KC Kingston	72%	108%	104%	139%	13.80%	20%	9.00%	9.40%	0.00%	0.00%	600	3.6	3.6	7.3
WH Richard Stevens Stroke Unit	77%	167%	96%	135%	20.80%	11.50%	1.90%	4.90%	8.50%	5.60%	664	4.1	4.0	8.1
KC Harbledown Ward	96%	90%	99%	100%	19.90%	27.00%	1.90%	5.30%	0.00%	0.00%	681	3.4	2.6	6.0
QE St Augustine Contingency Ward	86%	160%	102%	156%	15%	15%	0.00%	3.30%	0.00%	0.00%	873	2.3	3.1	5.3
QE CDU	76%	99%	82%	154%	16.40%	15.70%	2.60%	6.60%	8.60%	5.10%	685	4.6	3.3	7.9
WH CDU/Bethersden	94%	111%	105%	102%	18.80%	14.60%	6.70%	7.80%	2.60%	0.00%	684	8.7	4.8	13.5
KC ECC	20%	34%	17%	51%	11.60%	13.00%	9.10%	1.20%	0.00%	0.00%	29	36.2	26.2	62.4
Surgical Services														
WH Rotary Suite	81%	154%	94%	110%	15.60%	13.30%	3.20%	1.70%	4.20%	0.00%	418	4.7	4.2	8.9
QE Cheerful Sparrow Female	58%	152%	98%	100%	26.00%	16%	5.20%	0.80%	11.40%	0.00%	585	2.7	3.4	6.2
KC Clarke Ward	63%	101%	96%	84%	17.50%	16.00%	14.70%	2.60%	0.00%	0.00%	803	2.8	2.7	5.6
QE Cheerful Sparrow Male	84%	112%	104%	119%	17.80%	20.10%	12.60%	6.40%	6.10%	0.00%	517	3.2	4.9	8.1
KC Kent Ward	83%	128%	101%	82%	18.20%	10.80%	6.60%	7.10%	0.00%	7.60%	433	4.9	3.1	8.0
WH Kings B	92%	103%	97%	110%	16.10%	16.00%	0.40%	2.00%	0.00%	7.60%	752	2.7	2.5	5.2
WH Kings A2	101%	102%	95%	124%	20.80%	20.60%	4.10%	8.90%	0.00%	0.00%	589	3.2	2.4	5.5
WH Kings C	82%	118%	100%	99%	21.80%	20.50%	0.60%	3.70%	8.10%	0.00%	743	2.6	3.0	5.6
WH Kings C2	79%	93%	98%	101%	10.90%	16.80%	1.10%	2.20%	5.70%	0.00%	610	3.3	2.8	6.1
WH Kings D	90%	115%	86%	113%	16.70%	13.80%	0.00%	1.20%	4.00%	0.00%	695	5.6	5.2	10.8
QE Quex Ward	76%	164%	97%	95%	13.40%	6.50%	15.50%	2.50%	0.00%	13.30%	466	3.8	2.0	5.8
QE Trauma Floor	76%	143%	91%	152%	14.40%	13.70%	6.70%	5.00%	0.00%	0.00%	583	2.9	3.8	6.8
WH Critical Care	130%	121%	133%	100%	12.80%	13.00%	3.20%	13.20%	5.50%	0.00%	311	28.6	4.3	33.0
KC Critical Care	77%	42%	86%	N/A	16.20%	14.50%	2.30%	20.70%	8.70%	0.00%	143	28.0	1.1	29.2
QE Critical Care	85%	106%	108%	N/A	15.80%	28.70%	4.80%	0.00%	1.90%	0.00%	237	23.3	1.8	25.1
Specialist Services														
KC Marlowe Ward	101%	89%	97%	100%	18.10%	16.00%	1.30%	6.10%	1.80%	5.20%	586	7.4	3.6	11.0
WH NICU	109%	84%	111%	52%	6.40%	14.50%	3.20%	0.60%	0.60%	0.00%	681	11.8	1.4	13.1
WH Padua Ward	89%	80%	101%	45%	12.90%	15.80%	3.50%	2.80%	3.60%	12.70%	405	9.7	2.5	12.2
QE Rainbow Ward	103%	81%	126%	115%	16.40%	15.50%	1.30%	0.60%	0.00%	0.00%	257	13.8	4.0	17.8
QE Birchington Ward	74%	128%	101%	97%	14.00%	14.80%	5.00%	0.50%	0.00%	0.00%	445	3.9	2.6	6.6
WH Kennington Ward	92%	76%	94%	N/A	13.50%	19.50%	3.60%	10.70%	6.40%	0.00%	289	4.9	2.0	6.9
KC Brabourne Haematology Ward	83%	62%	100%	N/A	15.00%	9.30%	1.30%	11.30%	0.00%	0.00%	115	15.7	2.2	17.9
WH Maternity Labour and Folkestone	102%	55%	86%	68%	14.40%	15.50%	12.80%	10.30%	3.20%	9.50%	500	12.5	4.0	16.5
MLU WHH	126%	119%	148%	87%	7.40%	9.50%	3.10%	14.30%	0.00%	0.00%	51	39.4	14.8	54.2
QE Maternity Wards	93%	75%	85%	76%	11.60%	34.60%	4.70%	5.10%	8.00%	3.00%	356	15.8	6.6	22.3
QE MLU	87%	69%	93%	85%	4.80%	10.50%	0.90%	2.80%	4.10%	12.00%	35	37.7	16.4	54.1
QE SCBU	94%	81%	100%	N/A	13.30%	11.00%	2.40%	0.00%	3.50%	0.00%	179	13.3	3.4	16.8

Low fill rates are seen:

- In registered nurse shifts on Harvey due to vacancies, on Mount McMaster, Kingston, Quex and the Trauma floor due to high sickness and Deal, QEQM CDU, Kings C2 and K&C critical care due to maternity leave. On Cambridge J, Treble, Fordwich, Cheerful Sparrows Female and Richard Stevens low fill rates are due to a combination of high sickness and maternity leave during a month where annual leave is at the upper tolerance level for most wards. Care Hours Per Patient Day was maintained near or above 6.0 on all these wards using temporary staff except on Deal (5.6) where the low fill rate was due to extremely high maternity leave;
- Other wards (K&C critical care, Kennington, Braeborne, NICU, Padua 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.

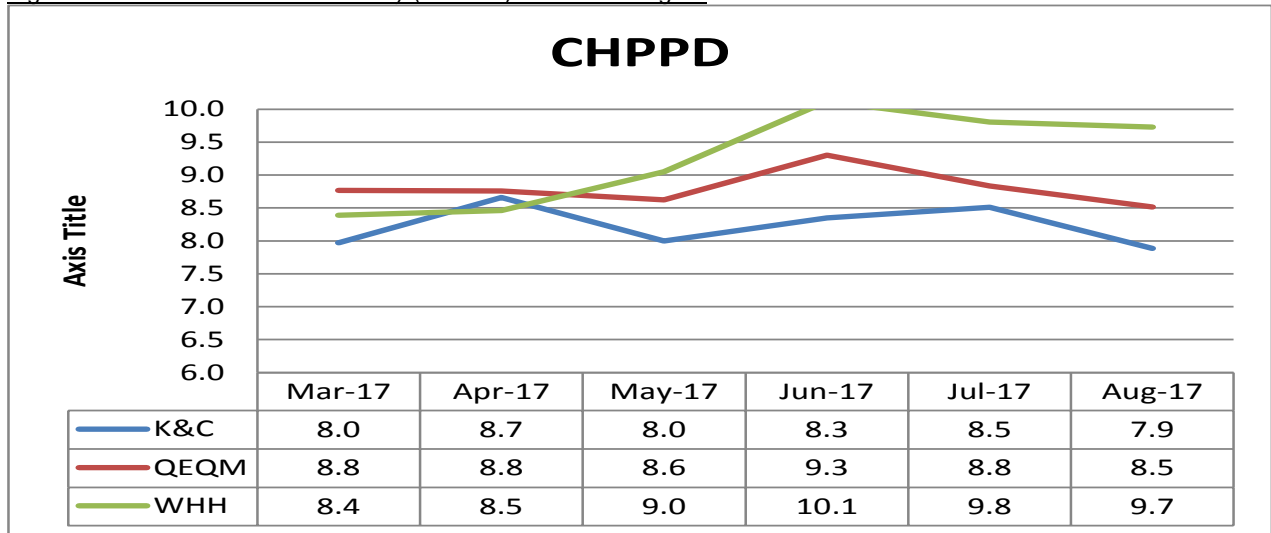
Actions in place include:

- 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 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) Mar-17 to Aug-17



Comparative data within the Model Hospital dashboard for May-17, the most recent available, shows EKHUFT average of 8.6 CHPPD against a peer median (based on both spend and clinical output) of 7.8 and a national median of 7.9 (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.

CHPPD has fallen slightly at QEQM and WHH but more markedly at K&C against little change in activity and use of contingency beds, shown in figure 5, and this is reflected in the reduction seen this month in %fill against budgeted establishments.

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

