

The Publication of Nurse staffing Data – August 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 99.6% compared to 103.1% in July-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 July-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.

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

	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	Sickness		Parenting		
								Registered	Unregistered	Registered	Unregistered	Registered	Unregistered
Cancer													
KC Brabourne Haematology Ward	90%	83%	100%	N/A	9.40	1.84	11.24	11.20%	8.50%	4.80%	27.10%	7.90%	0.00%
GSM													
WH Cambridge J2	95%	96%	102%	139%	3.32	3.84	7.16	16.70%	7.00%	10.50%	6.90%	0.00%	0.00%
WH Cambridge K	96%	116%	95%	109%	3.53	3.33	6.86	14.50%	15.80%	0.00%	9.30%	0.04%	0.00%
WH Cambridge M1	101%	113%	89%	132%	3.46	2.77	6.24	17.20%	19.00%	0.50%	9.20%	0.09%	0.00%
WH Cambridge M2	101%	113%	89%	132%	3.27	2.61	5.88	17.20%	19.00%	0.50%	9.20%	0.09%	0.00%
QE Coronary Care Unit	84%	120%	97%	104%	4.34	2.76	7.10	17.20%	13.60%	6.30%	0.00%	0.00%	0.00%
WH Oxford	95%	111%	101%	242%	4.39	4.02	8.40	8.80%	14.60%	15.80%	7.70%	7.90%	0.00%
QE Sandwich Bay	97%	195%	120%	252%	3.36	4.02	7.39	16.90%	14.50%	0.00%	0.00%	7.10%	7.20%
QE St Margarets	90%	121%	100%	135%	2.36	3.36	5.72	14.50%	17.90%	0.00%	23.50%	0.00%	6.10%
QE Deal	88%	123%	102%	155%	2.35	2.83	5.18	18.40%	19.90%	10.00%	1.50%	15.90%	11.90%
KC Harvey Neurorehab	74%	90%	92%	113%	2.49	2.89	5.38	15.40%	8.90%	9.90%	25.30%	7.50%	0.00%
KC Invicta	55%	171%	106%	139%	2.43	3.75	6.18	15.10%	11.80%	19.30%	22.50%	0.00%	0.00%
WH Cambridge L Rehab	90%	106%	94%	124%	2.69	3.39	6.08	15.70%	14.90%	2.20%	1.00%	0.00%	0.00%
KC Treble	51%	98%	94%	100%	2.88	3.94	6.82	10.40%	16.30%	25.40%	15.40%	0.80%	0.00%
KC Mount McMaster	73%	232%	108%	127%	3.17	4.41	7.58	12.50%	12.80%	0.70%	2.10%	0.00%	7.10%
QE Fordwich	79%	155%	84%	144%	3.04	4.86	7.91	12.60%	20.20%	13.70%	2.20%	0.00%	0.00%
KC Kingston	39%	142%	102%	149%	2.45	5.20	7.64	15.60%	11.40%	7.50%	4.50%	0.00%	0.00%
WH Richard Stevens Stroke Unit	90%	123%	99%	192%	3.87	4.28	8.15	15.40%	15.60%	8.40%	1.30%	4.70%	0.00%
KC Harbledown	59%	125%	100%	145%	2.75	3.98	6.74	13.70%	11.10%	0.00%	15.20%	14.50%	0.00%
QE St Augustine	59%	156%	100%	148%	1.87	3.34	5.21	8.30%	16.40%	1.20%	3.80%	8.30%	0.00%
WH Bartholomew	92%	108%	92%	100%	3.66	2.20	5.86	12.20%	11.30%	3.80%	11.90%	10.40%	0.00%
QE Quex	56%	124%	98%	141%	1.94	3.05	4.99	16.80%	20.10%	9.20%	8.10%	8.10%	0.00%
WH Kings C2	89%	86%	90%	87%	3.26	2.11	5.37	25.40%	14.80%	2.40%	9.20%	17.90%	1.30%
KC Marlowe	87%	95%	89%	100%	4.31	2.70	7.01	22.10%	17.80%	1.90%	13.40%	11.10%	0.00%
S&A													
QE Cheerful Sparrow Female	102%	121%	93%	142%	2.45	3.74	6.19	14.30%	17.10%	13.10%	11.50%	0.00%	0.00%
KC Clarke	71%	134%	100%	107%	3.28	3.84	7.12	21.40%	18.70%	0.80%	0.50%	8.90%	6.70%
QE Cheerful Sparrow Male	126%	109%	96%	136%	2.52	3.83	6.35	21.90%	18.90%	2.00%	10.10%	0.00%	0.00%
KC Kent	94%	127%	102%	101%	4.29	3.35	7.64	17.40%	14.60%	3.00%	2.50%	0.00%	8.20%
WH Kings B	101%	91%	106%	93%	3.04	2.47	5.51	18.40%	22.90%	5.60%	4.50%	0.00%	6.50%
WH Kings A2	107%	114%	100%	171%	3.30	2.94	6.23	19.70%	15.00%	2.50%	14.70%	5.70%	3.20%
WH Kings C	99%	131%	100%	126%	2.86	3.16	6.01	18.20%	20.20%	7.50%	6.80%	0.00%	0.00%
WH Kings D	100%	116%	103%	102%	3.29	3.00	6.29	13.50%	14.90%	0.90%	8.80%	0.00%	0.00%
QE Bishopstone	74%	119%	90%	141%	2.44	3.53	5.98	12.70%	15.90%	2.10%	3.90%	6.90%	0.00%
KC St Lawrence	47%	74%	98%	48%	5.91	5.09	11.00	22.80%	17.20%	0.00%	12.70%	4.60%	0.00%
QE Seabathing	59%	126%	102%	105%	2.47	4.23	6.69	22.80%	15.60%	1.80%	9.10%	0.00%	4.70%
WH Critical Care	94%	101%	87%	N/A	25.62	1.52	27.14	17.40%	19.50%	2.70%	0.80%	2.70%	0.00%
KC Critical Care	88%	N/A	85%	N/A	29.24	1.12	30.36	18.40%	12.50%	5.00%	2.30%	1.30%	0.00%
QE Critical Care	73%	84%	75%	126%	20.56	3.66	24.22	16.40%	22.50%	4.80%	0.40%	4.70%	0.00%
SHN													
WH Rotary Suite	91%	128%	97%	203%	4.25	4.69	8.94	21.10%	24.10%	0.60%	1.90%	8.00%	6.20%
UEC													
KC MIU	82%	97%	97%	N/A				14.90%	8.70%	2.60%	42.20%	0.00%	0.00%
WH CDU/Bethersden AMU	79%	99%	93%	108%	8.39	5.99	14.39	17.50%	14.20%	10.60%	7.10%	2.50%	3.30%
QE Minster+QE CDU AMU	81%	127%	93%	119%	8.50	10.42	18.92	40.40%	23.80%	8.80%	14.90%	0.00%	5.10%
W&C													
WH NICU	86%	86%	91%	32%	12.23	1.53	13.76	16.30%	15.50%	7.90%	8.60%	4.80%	0.00%
WH Padua	101%	N/A	108%	N/A	8.16	0.05	8.20	18.50%	17.00%	3.60%	8.40%	2.10%	0.00%
QE Rainbow	106%	N/A	106%	N/A	11.37	0.40	11.77	16.70%	20.10%	3.90%	0.00%	4.00%	6.50%
QE Birchington	83%	141%	97%	211%	3.22	3.12	6.34	16.40%	12.00%	3.60%	9.50%	0.00%	0.00%
WH Kennington	99%	100%	103%	N/A	4.78	2.84	7.62	17.00%	18.30%	5.40%	1.80%	0.00%	0.00%
WH Maternity Labour and Folkestone	103%	70%	99%	79%	25.84	7.08	32.92	17.20%	17.60%	6.60%	1.60%	1.70%	0.00%
MLU WHH	108%	97%	102%	97%	37.37	16.52	53.88	16.60%	6.60%	4.40%	2.00%	0.00%	19.30%
QE Maternity	100%	70%	96%	48%	13.43	3.11	16.53	14.20%	62.40%	1.00%	12.70%	1.90%	0.00%
QE MLU	106%	83%	97%	87%	57.32	24.36	81.67	21.00%	20.90%	0.00%	4.80%	0.00%	0.00%
QE SCBU	100%	88%	98%	23%	15.45	2.84	18.29	15.90%	14.20%	4.40%	2.60%	6.90%	0.00%

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 analysed 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 (Seven wards at K&C, six wards at QEQM, 2 wards at WHH) which reflects high vacancy levels, sickness and parenting leave. CHPPD was maintained above 5.0 on all these wards except Quex (4.99). 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. This ward will amalgamate with Treble in September.
- Analysis of our quality metrics and heatmap for July (August not yet available) does 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 (Quex 5.3%, St Augustines 2%).
 - Two wards show <100% Harm Free Care-New Harms (Kingston 88.9%, St As 96.6%).
- 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 (25 band 5 still being recruited to), 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** there are high vacancies across most wards and Matrons are focused on improving succession planning and flexing of ward staffing profiles according to patient need with over-recruitment to support worker posts undertaken to ensure patient safety. MountMcMaster and Invicta are the main wards causing concern. Opening of previously closed beds on MountMcMaster and the ward manager post vacancy on Invicta are key challenges.
 - **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 has been reported to the Chief Nurse;
- Work continues to address current band 5 vacancy levels particularly in Urgent and Emergency Care (22 wte), General and Specialist Medicine (77wte) and Surgery and Anaesthetics (62wte). The vacancy level has increased in medicine due to approval of several business cases to support wards currently staffed with a managed service;
- The Trust has a proactive nursing workforce recruitment programme. 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. 35 overseas nurses have been supported to achieve their NMC PIN so far this year and 45 newly qualified nurses have joined the Trust in September;
- Pharmacy Assistants have been recruited to support some medical wards with medicines management, releasing nursing time to lead care interventions and to mitigate against high vacancy levels. A plan is underway to recruit 40 mental health support workers to further support wards with patients who require enhanced observation due to challenging behaviour;
- 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.