

| Board of Directors | |
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| Agenda Item | 20-21/226 |
| Title of Report | Monthly Safe Staffing Report |
| Date of Meeting | 27 January 2021 |
| Author | Tracy Fennell - Deputy Chief Nurse Johanna Ashworth-Jones- Senior Analyst, Corporate Nursing Team |
| Accountable Executive | Hazel Richards - Chief Nurse and Director of Infection Prevention and Control (DIPC) |
| BAF References <ul style="list-style-type: none"> • Strategic Objective • Key Measure • Principal Risk | 1,2,4,6. Nurse Staffing is scored as 16 within Medicine and Acute |
| Level of Assurance <ul style="list-style-type: none"> • Positive • Gap(s) | Positives. <ul style="list-style-type: none"> • The Trust has robust systems and processes in place to monitor and flex staffing to meet the changing demands of the organisation and patient requirements. • The Trust has approved a time limited incentive scheme to encourage uptake of additional duties • The Trust is currently recruiting an additional 100 international nurses that are expected to be in the Trust in April 2021 Gaps. <ul style="list-style-type: none"> • The Trust has seen an increase in ward based registered nurse vacancies to 26% • The Trust has seen an increase in RN sickness rates to above 8 % (M9). |
| Purpose of the Paper <ul style="list-style-type: none"> • Discussion • Approval • To Note | For Discussion |
| Data Quality Rating | Silver - quantitative data that has not been externally validated |
| FOI status | Document may be disclosed in full |
| Equality Analysis completed Yes/No | No |

1. Executive summary

The dashboard provides an oversight of areas related to the provision of nurse staffing, both RN and CSW. In M8, the Trust saw the benefit of the nursing incentive payment scheme and a number of indicators improved. However, M9 and beyond has seen a deterioration, largely due to increasing prevalence of COVID-19 and staff self-isolating; thereby reducing staffing levels, often to the minimum and at times below that.

The Trust has implemented a number of measures to improve the position through use of the nurse staffing incentive scheme, block bookings from a wide range of nursing agencies to support gaps, redeployment of senior nursing staff to work clinically and redeployment of non-ward based nursing staff in line with the Winter Staffing Escalation Plan.

Additional funding has been secured from NHSE to support the recruitment of up to 100 international nurses before April 2021. This will impact positively on the number of vacancies.

2 Current position: areas to note

2.1 Vacancies

The Trust has seen further increases in RN vacancy rates to 26% M9.

2.2 Sickness

RN sickness rates in M9 6.49% and CSW rates at 8.18% (month absence rate). RN sickness rates were seen to spike at the end of M8 early M9 to 8.96% with a COVID sickness rate of 2.8% (Bronze Dashboard 4 Dec 2020). This was compounded further with a number of staff self-isolating due to being high risk contacts.

2.3 Safe Staffing Oversight Tracker (SSOT) review

During M8 the SSOT recorded 243 shifts that fell below minimum staffing levels for RNs; this is a significant reduction on M7 of 454. However this increased significantly again in M9 to 499. Senior Nurses are required to make a professional judgement and apply a RAG rating ahead of the shift, on whether wards are safely staffed, and to take action to improve the situation as required; eg move staff. A retrospective review is then undertaken to identify any potential or actual harms that may have occurred. These will be recorded on the SSOT and compared to incident data.

The RAG descriptors are:

- “red” if wards are at high risk of care standards diminishing;
- “amber” signifying medium/low risk or;
- “green” no risk.

There were no shifts with a professional judgment rating of red during M8 and 9.

2.4 Impact on Care

| | |
|-----------------------|--|
| Late Medications: | 582 patients - 46 shifts - 9 wards / clinical areas |
| Delayed News: | 239 patients - 29 shifts - 9 wards / clinical areas |
| Delayed Observations: | 287 patients - 32 shifts - 10 wards / clinical areas |

Incident reports will be reviewed for triangulation to identify any potential harm as a result of staffing levels.

2.5 Staff moves

There were 164 staff moves during M8 compared with 140 in M7. This was due to the number of closed beds and wards during this period, due to infection control reasons. Moves were considered essential to ensure wards with higher patient acuity had appropriate staffing.

Data is not currently available for M9, however will be updated in the dashboard for M10 report. It is anticipated that the number of moves for M9 will be high due to sickness and vacancies.

2.6 Safe staffing incidents

In M8, 25 incidents were reported for nursing and midwifery staffing which is a significant reduction on the previous month (75) with all these incidents recorded as low or no harm.

There was just one area with a high frequency of staffing incidents reported which was also highlighted in M7. This was for the Delivery Suite where safe staffing escalation processes were used appropriately. This area did not feature as a high frequency reported area during M9.

There was an increase in reported incidents during M9 with a total of 90. These are currently under review.

3. Actions to mitigate risks

In response to reduced staffing, a review of nursing processes has been undertaken to support frontline teams to release time to care for patients. Following a meeting with Ward Managers the following has been proposed and agreed by the Executive Team on 19 January 21:

- A number of medication processes have already been streamlined (approved at Clinical Advisory Group 11 January 2021 and enacted during Surge One).
- Incidents and complaints management will be led by the Divisional Governance Support Teams, to release Ward Manager time to provide clinical care and leadership.
- Some nurse records (eg fluid balance, intentional rounding) will convert to paper for a time limited period. Processes have been agreed for inputting into Cerner.
- Reduction in the Perfect Ward Audit schedule.

To ensure oversight is maintained, the Corporate Nursing Team will continue to monitor standards of safety and quality using the mini WISE/ spot check programme.

Nurse staffing meetings are now twice daily and a Matron is on a late duty every day to oversee safe staffing. Staffing concerns are reported in Bronze Command each day.

4. Conclusion

Whilst improvements were seen in M8, these have been compromised in M9 due to increased pressure from COVID-19 and vacancies. Twice daily nurse staffing meetings support the safe deployment of staff in a timely way. The high vacancy rate should reduce into the new financial year when the 100 plus international nurses come into the Trust.

5. Recommendations

The Board of Directors are requested to note the contents of report and controls in place to minimise the impact of reduced nurse staffing levels.

Appendix 1 Safe Staffing Assurance Dashboard July to December 2020.

| Safe Staffing Board Assurance Dashboard 2020 | | | | | | | | |
|--|--|--------|--------|--------|--------|--------|--------|------------|
| Data Source | Indicator | Jul | Aug | Sept | Oct | Nov | Dec | Spark line |
| Corporate Nursing | Care Hours Per Patient Day - Total | | 9.6 | 8 | 8.5 | 10.1 | 9.5 | |
| Corporate Nursing | Care Hours Per Patient Day - Registered Nurses | | 4.8 | 3.8 | 4.1 | 5.2 | 4.8 | |
| Corporate Nursing | Care Hours Per Patient Day - CSW's | | 4.2 | 3.5 | 3.7 | 4.1 | 3.8 | |
| Corporate Nursing | National Fill rates RN Day | | 79% | 76% | 83% | 84% | 85% | |
| Corporate Nursing | National Fill rates CSW Day | | 76% | 86% | 89% | 94% | 88% | |
| Corporate Nursing | National Fill rates RN Nights | | 94% | 72% | 79% | 81% | 82% | |
| Corporate Nursing | National Fill rates CSW Nights | | 97% | 90% | 104% | 100% | 99% | |
| Corporate Nursing | Trust Occupancy Rate | 57.20% | 66.90% | 79.50% | 79.50% | 76.10% | 79.30% | |
| Corporate Nursing | Occupancy Rate - APH | 63.10% | 72.10% | 81.50% | 79.10% | 76.00% | 79.90% | |
| Corporate Nursing | Occupancy Rate - CBH | 16.00% | 24.90% | 51.90% | 46.10% | 39.00% | 37.90% | |
| Workforce | Vacancy Rate (Band 5 RN's) | 18.46% | 18.05% | 16.94% | 16.61% | 24.38% | 25.00% | |
| Workforce | Vacancy rate (Band 5 inpatient wards) | 20.57% | 20.16% | 18.73% | 17.11% | 25.99% | 26.80% | |
| Workforce | Vacancy Rate - All RN (All grades) | 9.81% | 9.90% | 9.40% | 8.67% | 14.10% | 14.57% | |
| Workforce | Vacancy Rate (CSW's) | 5.89% | 5.86% | 7.86% | 7.77% | 12.76% | 12.19% | |
| Workforce | Sickness Rate - RN | 5.69% | 6.12% | 6.38% | 6.80% | 6.95% | 6.49% | |
| Workforce | Sickness Rate - CSW | 10.46% | 9.58% | 10.09% | 8.82% | 7.59% | 8.18% | |
| Workforce | Absences Rate - RN | 4.84% | 2.36% | 2.60% | 1.55% | 1.76% | 1.50% | |
| Workforce | Absences Rate- CSW | 4.96% | 3.33% | 3.17% | 1.55% | 2.17% | 1.56% | |
| Corporate Nursing | Number of Professional Judgment Red Shifts | | 1 | 0 | 0 | 0 | 0 | |
| Corporate Nursing | Number of RN Red Shifts | | 359 | 445 | 454 | 243 | 499 | |
| Corporate Nursing | RN Red Shift Impact : Number of Falls | | 7 | 9 | 17 | 4 | 19 | |
| Corporate Nursing | RN Red Shift Impact : Number of Falls with Harm | | 0 | 1 | 1 | 0 | 0 | |
| Corporate Nursing | RN Red Impact : Meds Errors / Misses | | 3 | 0 | 7 | 1 | 27 | |
| Corporate Nursing | RN Red Impact : Patient relative complaints | | 2 | 0 | 3 | 0 | 0 | |
| Corporate Nursing | RN Red Impact : Staffing incident submitted | | 6 | 16 | 18 | 7 | 23 | |
| Corporate Nursing | RN Red Impact : Special 1:1 (uncovered) | | 3 | 7 | 9 | 0 | 26 | |
| Corporate Nursing | RN Red Impact: Missed Breaks | | 14 | 26 | 26 | 10 | 107 | |
| Corporate Nursing | RN Red Impact: Delayed / Missed Obs | | 10 | 19 | 122 | 1 | 287 | |
| Corporate Nursing | RN Red Impact: Delayed / Missed nMEWS | | 12 | 33 | 12 | 31 | 239 | |
| Corporate Nursing | RN Red Impact: Delayed / Missed Pressure Care | | 3 | 14 | 24 | 23 | 145 | |
| Corporate Nursing | RN Red Impact : Delayed Meds | | 8 | 20 | 127 | 6 | 582 | |
| Governance support | Number of SI's where staffing has been a contributing factor | 0 | 0 | 0 | 0 | 0 | TBC | |
| Corporate Nursing | Total Number of staffing incidents | 30 | 53 | 80 | 75 | 25 | 90 | |
| Complaints team | Formal complaints in relation to staffing issues | 0 | 0 | 0 | 0 | 1 | 0 | |
| Complaints team | Informal Concerns raising staffing levels as an issue | 0 | 0 | 0 | 1 | 0 | 0 | |
| Complaints team | Patient Experience feedback raising staffing levels as a concern | 0 | 0 | 0 | 0 | 0 | 0 | |
| Corporate Nursing | Staff Moves | | 232 | 329 | 140 | 164 | TBC | |
| NHS Professional | Number of RN hours requested | 19909 | 22878 | 24734 | 28432 | 31103 | 28638 | |
| NHS Professional | Number of CSW hours requested | 20155 | 25196 | 25007 | 32505 | 28386 | 30651 | |
| NHS Professionals | % of requested filled RN's | 67.80% | 62.80% | 61.70% | 60.20% | 72.70% | 58.90% | |
| NHS Professionals | % of requested CSW filled | 86.30% | 80.20% | 76.50% | 71.10% | 85.30% | 68.10% | |
| NHS Professionals | % of Agency staff used RN | 3% | 3% | 3% | 2% | 6% | 1% | |
| NHS Professionals | % of Agency staff used CSW | 0 | 0 | 0 | 0 | 0% | 0% | |